

Patient and Family Advisory Council (PFAC) Annual Report Form



Patient and Family Advisory Councils (PFACs) are an integral part of health care organizations. All licensed hospitals, as well as accountable care organizations devoted to MassHealth members, are required to convene a PFAC on a regular basis and tap its members' expertise and lived experience to help the health care organization better meet the needs of its patients.

The Betsy Lehman Center for Patient Safety oversees PFAC work in Massachusetts. Read more [on the Center's website](#).

Use this form to capture the essential activities of your PFAC during the past fiscal year (July 1 – June 30) and submit to the Betsy Lehman Center by October 1. If your hospital has multiple PFACs, please fill it out for the work of your hospital-wide PFAC, and use the last section to describe the work of any additional PFAC groups. The Center will generate a report from the information submitted and return it to you to distribute throughout the organization and post to your organization's website. The Center will also aggregate information and share an annual report of all PFAC activities in the state.

SECTION I: GENERAL INFORMATION

1. Hospital name: **Beverly Hospital & Addison Gilbert Hospital**
2. How many PFACs does your hospital have in total? **1**
3. The information on this form reflects the work of a PFAC that serves as:
 The sole PFAC at our hospital, ACO, or organization
 A hospital-wide PFAC, but there are additional department, unit, population-specific or specialty PFACs as well
 A hospital department, unit, or specialty PFAC
 A hospital-based PFAC that also serves an ACO
 A system-wide PFAC
4. Patient/family co-chair:
 - a. Name: **Sheila Linehan**
 - b. Email address: **slinehan1949@gmail.com**
5. Hospital co-chair:
 - a. Name: **Donna Wheeler**
 - b. Title: **Quality Analyst**
 - c. Email address: **donna.wheeler@lahey.org**
 - d. Phone number: **978-816-2353**
6. PFAC membership [as of June 30]:
 - a. Total number of members: **11 to 15**
 - b. Total number of patient/family advisers: **6 to 10**
 - c. Total number of staff advisers: **6 to 10**

7. Preferred PFAC membership:

- a. Total number of members: **21 to 25**
- b. Total number of patient/family advisers: **11 to 15**
- c. Total number of staff advisers: **6 to 10**

8. If patient/family members of the PFAC are subject to term limits, please select the length of terms: **2 years**

9. Which recruiting efforts does your hospital use to identify and attract new PFAC members from the community? (select all that apply)

<input type="checkbox"/> After visit summary or survey messages	<input checked="" type="checkbox"/> Patient/family feedback
<input type="checkbox"/> Clinicians' recommendations	<input type="checkbox"/> Social media
<input type="checkbox"/> Discussions with people in the clinic	<input type="checkbox"/> Tables at hospital entrances
<input checked="" type="checkbox"/> Hospital website	<input type="checkbox"/> Visits to the units
<input checked="" type="checkbox"/> Grievances	<input checked="" type="checkbox"/> Word of mouth
<input type="checkbox"/> Pamphlets	Other: <input type="text"/>

10. How often does your PFAC meet? **Monthly**

If other, please specify: **Combine Nov/Dec, Off Jul or Aug**

11. How do you typically convene your PFAC? **Virtually**

If a mix, please describe: **one in-person meeting annually**

12. How often do PFAC members engage in these ways with initiatives presented to them? (Please respond to each.)

- a. Approval: The department asks for approval from the PFAC on a completed initiative **Sometimes**
- b. Feedback: The department asks the PFAC for input on a project in progress **Sometimes**
- c. Codesign: The PFAC is involved at the inception of the project **Sometimes**
- d. Other, please specify:

SECTION II: ABOUT THE COMMUNITY

13. State regulations call for hospital PFAC membership to be reflective of the community it serves. Two sets of data can help better understand the racial/ethnic makeup of the community and primary languages spoken.

a. Race/Ethnicity: Use the links in the table below to find data about the race and ethnicity of the community served by your hospital. If your hospital gathers this information differently, please enter it here.

	Percentage of population	
	<u>Catchment area</u>	<u>Patients served</u>
White	58.18	81
Black	4.65	4
Hispanic	16.28	12
Asian	3.10	1
Native Hawaiian and Pacific Islander (NHPI)	0.03	0.05
American Indian or Alaska Native (AIAN)	0.47	0.05
Other	7.54	9
Multi	9.74	2

b. Languages spoken: The best source will be within your hospital. You may need to ask colleagues in community relations, patient experience, informatics or other record-keepers for this information.

	Percentage of patient population
Spanish	4%
Portuguese	2%
Chinese	0.1%
Haitian Creole	0.3%
Vietnamese	0.0%
Russian	0.0%
French	0.0%
Mon-Khmer/Cambodian	0.0%
Italian	0.1%
Arabic	0.1%
Albanian	0.2%
Cape Verdean	0.0%
Limited English proficiency (LEP)	0.4%

c. How well do the demographics of your PFAC match the demographics of your hospital's patient population? **Poor**

14. There are many ways to describe the array of perspectives in a community, including age, income, gender, sexual orientation, gender identity, disability, veteran status, career, chronic or rare disease status, religion, etc. How would you describe your PFAC membership's representation of the community it serves more broadly?

We do not ask candidates/members for the above information.

15. Describe any strategies and activities during the last year to align PFAC membership with the diversity of the community served by your organization.

We have revised our webpage to reflect the current membership and to include our accomplishments and work in progress. We hope that we will create interest in a broader range of patients/families.

SECTION III: KEY ACCOMPLISHMENTS AND IMPACT

16. How often do you measure the impact of the PFAC on initiatives? Sometimes

17. How often do you track outcome metrics related to PFAC advice? (e.g., improvement in patient experience scores, reduction in falls, etc.) Sometimes

18. How often do you track process metrics? (e.g., number of meetings, number of initiatives, etc.) Sometimes

19. Describe key work accomplished by the PFAC last year. For example, in what ways did the PFAC provide feedback/perspective, lead or co-lead programs and initiatives, or influence the institution's financial and programmatic decisions? Include at least three accomplishments.

- 1. Quietness Taskforce - Increased our "quietness" scores on Press Ganey
- 2. Avasure - virtual patient safety attendant - Initial data shows a reduction in the number of falls
- 3. Patient Experience Steering Committee - Recently restarted after a period of inactivity due to COVID and staffing challenges
- 4. Health Equity Committee - We received certification by the Joint Commission on Health Equity
- 5. Website completely updated to promote PFAC
- 6. My Chart presentation (patient portal) - Provided input to the My Chart team on suggested changes/updates to the patient portal

20. How do you promote the accomplishments of your PFAC? (Select all that apply)

- Newsletter
- Presentation
- Report
- Word of mouth
- We currently do not promote

Other: **Website**

21. Did the hospital/organization leadership share its goals for the year with the PFAC membership? **Yes**

22. Did the work accomplished by your PFAC help advance the organization's goals? **Somewhat**

Please describe:

1. Readmission reduction committee formed, will have impact on reimbursements
2. Patient Experience - improvement in Press Ganey scores impact reimbursements

23. What were the greatest challenges your PFAC faced?

1. Recruiting new and diverse members
2. Some committee work at a standstill due to staffing challenges
3. Some committee members felt work was hampered by buy-in by staff
4. Communication - sometimes members felt they were working in a vacuum

SECTION IV: SAFETY

Patient safety is the prevention of harm to patients while receiving health care. It's a fundamental principle of health care, and it's considered the foundation of high-quality care. Patient and family input and insight about safety considerations and risks is an essential component of safety improvement work.

24. For each of the following items, indicate your PFAC's level of involvement.

- a. Patient/family advisers were represented at board meetings: **Regularly**
- b. Patient/family advisers were consulted on safety goal-setting and metrics: **Regularly**
- c. Patient/family advisers participated in safety improvement initiatives: **Regularly**

25. Summarize your PFAC's contributions to patient safety work at your organization.

1. We have two council members who serve on the Performance Improvement and Patient Safety Committee.
2. To reduce falls and falls with injuries among patient, the hospital introduced a program for virtual patient safety attendants called Avasure. Before the program was piloted, PFAC was asked to provide input on ways to help the program be successful including communication with families.
3. New Patient Safety Structural Measures by CMS presented to PFAC. The goals include educating staff about PFAC. The council were asked for ideas of how to include PFAC members in the training that is being developed by the hospital.

SECTION V: ADDITIONAL INFORMATION

26. Indicate the committees within your organization on which a PFAC member serves:

<input checked="" type="checkbox"/> Behavioral Health/ Substance Use	<input checked="" type="checkbox"/> Diversity and Inclusion	<input checked="" type="checkbox"/> Patient Education
<input type="checkbox"/> Bereavement	<input type="checkbox"/> Drug Shortage	<input checked="" type="checkbox"/> Patient and Family Experience Improvement
<input type="checkbox"/> Board of Directors	<input checked="" type="checkbox"/> Eliminating Preventable Harm	<input type="checkbox"/> Pharmacy Discharge Script Program
<input checked="" type="checkbox"/> Care Transitions	<input type="checkbox"/> Emergency Department Patient/ Family Experience Improvement	<input checked="" type="checkbox"/> Quality and Safety
<input type="checkbox"/> Code of Conduct	<input type="checkbox"/> Ethics	<input checked="" type="checkbox"/> Quality/Performance Improvement
<input type="checkbox"/> Community Benefits	<input type="checkbox"/> Institutional Review Board (IRB)	<input type="checkbox"/> Surgical Home
<input type="checkbox"/> Critical Care	<input type="checkbox"/> Lesbian, Gay, Bisexual, Transgender and Queer (LGBTQ+)	Other: Geriatric Steering Committee
<input checked="" type="checkbox"/> Culturally Competent Care	<input type="checkbox"/> Patient Care Assessment	
<input checked="" type="checkbox"/> Discharge Delays		

27. Are there any PFAC-led workgroups or projects you would like to highlight?

1. A small group of Advisors totally updated the PFAC webpage on the hospital's website.
2. The bylaws for the council were revised.

SECTION VI: LOOKING AHEAD

28. Does your PFAC have goals for the current year? **Yes**



a. If yes, what are your PFAC's goals for the year?

1. Develop a strategic plan to improve our PFAC
2. Strengthen our connection with the Betsy Lehman Center
3. Complete our recruitment goal
4. Improve feedback from the hospital on the status of goals

29. Do these goals support the organization's goals and priorities for the year? **Not sure**

a. If yes, in what ways do these goals support the organization's goals and priorities?

[Redacted area]

30. Is there anything else your hospital would like to highlight that has not been captured above?

At our recent meeting, we let the senior leaders know that we want to better align our goals with those of the organization. In order to do that, we need to learn what those goals are. Our president has stated he will be coming to an upcoming PFAC meeting to review the goals for the hospital and the system we are a part of.

[Redacted area]

31. This report was prepared and reviewed by:

a. Name: **Donna Wheeler**

b. Title: **Quality Analyst**

c. List additional people's names and titles as needed below:

Amy Katz
Corey Green McLaughlin
Kathy Skrabut
Liz Loomis
Paul Lengieza
Rosemary Fournier
Sheila Linehan
Zoe Larsen
The above are all PFAC Advisors (community members)
The above are all

[Redacted area]

32. This report is for the state's fiscal year ending June 30, **2025**.