

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: **Boston Medical Center- South**
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: **N/A**
 - b. Email address: **[REDACTED]**
5. Hospital co-chair:
 - a. Name: **Ludvina Vicente**
 - b. Title: **Patient Advocate**
 - c. Email address: **Ludvina.Vicente@bmc.org**
 - d. Phone number: **508-427-2532**
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: **11 to 15**
- b. Total number of patient/family advisers: **6 to 10**
- 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 checked="" type="checkbox"/> Pamphlets	Other: <input type="text"/>

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

If other, please specify:

11. How do you typically convene your PFAC? **A mix of both in-person and virtually**

If a mix, please describe: **TEAMS option is offered to members**

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 **Rarely**
- 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	46.7%	49,062
Black	24.4%	22,887
Hispanic	9.1%	5,444
Asian	2.9%	1,106
Native Hawaiian and Pacific Islander (NHPI)	.022%	37
American Indian or Alaska Native (AIAN)	.18%	160
Other	16.7%	4,797
Multi	19.8%	361

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	78%
Portuguese	71%
Chinese	46%
Haitian Creole	72%
Vietnamese	74%
Russian	66%
French	44%
Mon-Khmer/Cambodian	50%
Italian	60%
Arabic	60%
Albanian	71%
Cape Verdean	68.5%
Limited English proficiency (LEP)	33%

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

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?

Our PFAC membership reflects a broad spectrum of the community we serve, including diverse representation across age, gender, race, ethnicity, income levels, disability status, chronic and rare disease experiences, and caregiving roles. We strive to ensure that voices from historically underrepresented groups are included, allowing us to better understand and address the needs of all patients and families. This is one of our main focus points during recruitment to ensure that we create an inclusive platform where the representatives unique qualities align with the population we serve.

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

Over the past year, we have prioritized aligning PFAC membership with the diversity of our community by reviewing patient complaints and grievances to identify common themes, particularly those related to cultural and ethical concerns in care delivery. We actively recruited members from underrepresented ethnic backgrounds and individuals with lived experiences relevant to these issues. This approach has helped ensure that PFAC discussions reflect the varied perspectives of our patient population and guide more equitable and culturally sensitive care practices.

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.) **Always**

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.) Collaborated on the implementation of Laura's Law signage in the Emergency Department to support patient rights and transparency.
- 2.) Provided input during the installation of new equipment in the Women's Imaging department to enhance patient experience and safety.
- 3.) Served as Patient Guides throughout the hospital for several hours a day, multiple days a week, assisting patients and visitors in navigating the facility efficiently.

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: **Huddles/ Hospital Meetings**

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? **Yes**

Please describe:

We regularly bring forward diverse ideas, patient feedback, and hospital-wide updates to PFAC meetings, where we collaboratively examine concerns and gain valuable insights from members varied perspectives. These discussions inform our actions as staff and leaders to drive meaningful change. For example, after receiving multiple complaints about patients in the Emergency Department waiting area not hearing their names called, I raised the issue with PFAC. Together, we proposed a redesign of the ED waiting area layout, which was implemented promptly. As a result, complaints related to this issue ceased entirely, demonstrating the impact of patient-centered collaboration."

23. What were the greatest challenges your PFAC faced?

In-person participation. Members prefer Teams option verus driving to the hospital.

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: **Never**
- b. Patient/family advisers were consulted on safety goal-setting and metrics: **Occasionally**
- c. Patient/family advisers participated in safety improvement initiatives: **Regularly**

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

PFAC has actively contributed to enhancing organizational safety by providing valuable feedback on incidents of workplace violence involving both staff and patients. Members shared insights and de-escalation strategies based on lived experiences and community perspectives, which were then communicated to broader teams across the organization. This collaborative approach has helped inform staff training, improve response protocols, and foster a safer, more respectful care environment for everyone.

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 type="checkbox"/> Diversity and Inclusion	<input type="checkbox"/> Patient Education
<input type="checkbox"/> Bereavement	<input type="checkbox"/> Drug Shortage	<input type="checkbox"/> Patient and Family Experience Improvement
<input type="checkbox"/> Board of Directors	<input type="checkbox"/> Eliminating Preventable Harm	<input type="checkbox"/> Pharmacy Discharge Script Program
<input type="checkbox"/> Care Transitions	<input type="checkbox"/> Emergency Department Patient/ Family Experience Improvement	<input type="checkbox"/> Quality and Safety
<input checked="" type="checkbox"/> Code of Conduct	<input type="checkbox"/> Ethics	<input type="checkbox"/> Quality/Performance Improvement
<input checked="" 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: <input type="text"/>
<input checked="" type="checkbox"/> Culturally Competent Care	<input type="checkbox"/> Patient Care Assessment	
<input type="checkbox"/> Discharge Delays		

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

We have PFAC members who come onsite to be Patient Guides to ensure everyone gets to where they need to be promptly and efficiently.

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?

- Run blood pressure drives in the main lobby.
- Provide feedback on new equipment in diagnostic imaging
- More recruitment especially from patient side
- Walk around the hospital to see new BMC marketing strategies throughout the hospital and get feedback.

29. Do these goals support the organization's goals and priorities for the year? Yes, the goals directly relate

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

Community engagement is a top priority at BMC-South as we enter the new FY.

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

NA

31. This report was prepared and reviewed by:

a. Name: Ludvina Vicente

b. Title: Patient Advocate

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

Kandace Vieira MSN, RN Senior Director Quality

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