

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: **EnCompass Rehabilitation Hospital of New England**
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: **Heather Paradis**
 - b. Email address: **csredd@yahoo.com**
5. Hospital co-chair:
 - a. Name: **Rebecca McCabe**
 - b. Title: **Senior Case Manager**
 - c. Email address: **rebecca.mccabe@encompasshealth.com**
 - d. Phone number: **781-994-3454**
6. PFAC membership [as of June 30]:
 - a. Total number of members: **6 to 10**
 - b. Total number of patient/family advisers: **1 to 5**
 - c. Total number of staff advisers: **1 to 5**

7. Preferred PFAC membership:
- Total number of members: 1 to 5
 - Total number of patient/family advisers: 1 to 5
 - Total number of staff advisers: 1 to 5
8. If patient/family members of the PFAC are subject to term limits, please select the length of terms: n/a
9. Which recruiting efforts does your hospital use to identify and attract new PFAC members from the community? (select all that apply)
- | | |
|--|---|
| <input checked="" 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 type="checkbox"/> Hospital website | <input type="checkbox"/> Visits to the units |
| <input type="checkbox"/> Grievances | <input checked="" type="checkbox"/> Word of mouth |
| <input type="checkbox"/> Pamphlets | Other: follow-up calls on discharged patients |
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:
12. How often do PFAC members engage in these ways with initiatives presented to them? (Please respond to each.)
- Approval: The department asks for approval from the PFAC on a completed initiative Sometimes
 - Feedback: The department asks the PFAC for input on a project in progress Often
 - Codesign: The PFAC is involved at the inception of the project Sometimes
 - 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 | |
|---|--------------------------------|---------------------------------|
| | Catchment area | Patients served |
| White | 74% | 88.58% |
| Black | 4.65% | 6.36% |
| Hispanic | 6.69% | 11.38% |
| Asian | 8.314% | 5.49% |
| Native Hawaiian and Pacific Islander (NHPI) | .116% | .04% |
| American Indian or Alaska Native (AIAN) | .077% | .19% |
| Other | 2.77% | 10.92% |
| Multi | 7.415% | 14.45% |

- 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 | .015% |
| Portuguese | 16 |
| Chinese | 24 |
| Haitian Creole | 0 |
| Vietnamese | 8 |
| Russian | 7 |
| French | 3 |
| Mon-Khmer/Cambodian | 0 |
| Italian | 2 |
| Arabic | 3 |
| Albanian | 0 |
| Cape Verdean | 0 |
| Limited English proficiency (LEP) | 0 |

- c. How well do the demographics of your PFAC match the demographics of your hospital's patient population? **Very 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 is currently comprised of previous patients, both male and female, who are primarily older adults and bring the perspective of individuals who have recovered from injury. In addition, PFAC includes employees of various ages, genders, and backgrounds, which allows for a broader representation of lived experiences and perspectives. While our membership does not yet reflect the full diversity of our community across all categories, it does provide meaningful insights from both patient and staff viewpoints.

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 last year, we have focused on rebuilding the PFAC with the goal of expanding and diversifying membership. Our efforts include outreach to potential members from different backgrounds, ages, and life experiences to better reflect the community we serve. We are working to create inclusive opportunities for participation and engagement so that the PFAC can represent a wide range of voices and perspectives moving forward.

SECTION III: KEY ACCOMPLISHMENTS AND IMPACT

16. How often do you measure the impact of the PFAC on initiatives? Rarely ☐
17. How often do you track outcome metrics related to PFAC advice? (e.g., improvement in patient experience scores, reduction in falls, etc.) Never ☐
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.

- PFAC provided feedback to enhance the weekend experience for patients and families. We have reached out and are working to have a pianoist once a month.

- Member recruitment continues to be a challenge. The PFAC has worked to enhance our recruitment materials including the application and flyer.

- Our hospital is adding an additional 14 bed unit. The PFAC has discussed having patient involvement in the design process.

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:

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:

The PFAC has provided feedback based on their experiences. Our organization strives itself on working to improve patient satisfaction and experience, which the PFAC has assisted in.

23. What were the greatest challenges your PFAC faced?

The greatest challenge we face is membership and recruitment of new members.

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: Never ☐
- c. Patient/family advisers participated in safety improvement initiatives: Never ☐

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

The PFAC has provided feedback from their experiences. We are working to utilize this feedback to move improvements towards patient safety as necessary.

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 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 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 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: <input type="text"/> |
| <input 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?

SECTION VI: LOOKING AHEAD

28. Does your PFAC have goals for the current year? **We don't set formal goals** ☒

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

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?

We do not set formal goals.

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

This is a rebuilding year for our PFAC as we work to grow our members both from previous patients and families as well as current staff. Our leadership has also switched, with a new chair taking over at the beginning of the year.

31. This report was prepared and reviewed by:

a. Name: **Rebecca McCabe**

b. Title: **Senior Case Manager**

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

Joan Jackson - Patient Experience Program Manager

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