

# 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: **Brigham and Women's Faulkner 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: **Vacant**
  - b. Email address: **N/a**
5. Hospital co-chair:
  - a. Name: **Jennifer Capone**
  - b. Title: **Nurse Director**
  - c. Email address: **jcapone4@mgb.org**
  - d. Phone number: **617-983-4761**
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: **11 to 15**
  - Total number of patient/family advisers: **6 to 10**
  - 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: **3 years** ☒
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: <input type="text"/>                                 |
10. How often does your PFAC meet? **Every other month**
- 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: **Hybrid option once a quarter**
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 **Often**
  - Feedback: The department asks the PFAC for input on a project in progress **Rarely**
  - Codesign: The PFAC is involved at the inception of the project **Rarely**
  - 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	
	<a href="#">Catchment area</a>	<a href="#">Patients served</a>
White	47.0847	63.7308
Black	14.1801	17.1978
Hispanic	21.6021	14.4170
Asian	11.3538	1.7783
Native Hawaiian and Pacific Islander (NHPI)	0.034293	0.02387
American Indian or Alaska Native (AIAN)	0.12928	0.14322
Other	5.6156	2.268
Multi	5.6156	4.213

- 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	6.44
Portuguese	0.23
Chinese	0.23
Haitian Creole	0.78
Vietnamese	0.08
Russian	
French	0.08
Mon-Khmer/Cambodian	0.01
Italian	0.03
Arabic	
Albanian	
Cape Verdean	
Limited English proficiency (LEP)	

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

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?

Providing additional demographic information is completely optional for our advisers. We learn more about their background and experience through conversations but it's not formally collected. Our patient advisers actively utilize the hospital and its services and some live in the nearby area.

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

Advisers provided feedback on patient education materials to ensure they are accessible and culturally sensitive, including reviewing language translations and readability.

### SECTION III: KEY ACCOMPLISHMENTS AND IMPACT

16. How often do you measure the impact of the PFAC on initiatives? **Not sure**
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.) **Rarely**
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.

Highlights over the past year:

- Falls signage on inpatient units, presented by hospital co-chair
- Emergency Department comfort closet advertisement language
- Black Box technology updates, presented by the Chief of Surgery
- New building opening and personal tour
- Visitor hours and policies
- Equity certification presentation for the Joint Commission
- Physician Assistant presented ideas for her capstone project focused on fostering the relationship and communication with providers and Patient and Family Relations (PFR)

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? Yes

Please describe:

By discussing important topics, PFAC strengthened the hospital's commitment to fostering an inclusive culture, reducing barriers to care, and ensuring that all patients and families feel respected, supported, and represented—directly aligning with the organization's strategic priorities. Specifically, the PFAC was engaged in the process for obtaining the health equity certification from the Joint Commission.

23. What were the greatest challenges your PFAC faced?

-Patient adviser retention

-Attendance

-Identifying topics for discussion

## 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: Occasionally



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

The PFAC partnered with clinical leaders to review and provide feedback on the patient falls education pamphlet, which explains why a patient may be placed on fall precautions and the steps they can take to stay safe during hospitalization. Council members helped ensure that the language was clear, patient-friendly, and respectful, and that the content emphasized both safety and partnership in care. By reviewing the pamphlet from the patient and family perspective, the PFAC supported the organization's goal of improving health literacy, enhancing patient engagement, and promoting a culture of safety.

## SECTION V: ADDITIONAL INFORMATION

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

- |  |  |   |
|--|--|---|
| <input type="checkbox"/> Behavioral Health/<br>Substance Use | <input checked="" 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<br>Improvement |
| <input type="checkbox"/> Board of Directors                  | <input type="checkbox"/> Eliminating Preventable Harm  | <input type="checkbox"/> Pharmacy Discharge Script<br>Program         |
| <input type="checkbox"/> Care Transitions                    | <input checked="" type="checkbox"/> Emergency Department Patient/<br>Family Experience Improvement | <input type="checkbox"/> Quality and Safety                           |
| <input type="checkbox"/> Code of Conduct                     | <input type="checkbox"/> Ethics  | <input type="checkbox"/> Quality/Performance<br>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,<br>Transgender and Queer<br>(LGBTQ+)              | Other: <b>Comm. members on Ethics</b>                                 |
| <input type="checkbox"/> Culturally Competent Care           |  |   |
| <input type="checkbox"/> Discharge Delays                    | <input type="checkbox"/> Patient Care Assessment   |   |

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

As our hospital underwent major construction projects, the PFAC provided input on way finding, signage and overall ease of navigating the hospital. The PFAC's input was shared with leadership responsible for managing these areas. We will strive to identify projects within this year that can be led and organized by the PFAC.

## 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?

-Generate new opportunities for the PFAC to review and provide input on hospital initiatives or data related to patient care, safety, quality, and experience.  
-Use new resources and strategies for PFAC recruitment, with a focus on recruiting diverse and representative patients and family members to the PFAC.

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?

Our hospital system embarked on pursuing a system-wide quality strategy through the Office of the Chief Medical Officer. With this our "For Every Patient" initiative focuses on a unified vision for improved patient care and experience, pursuing effective care, safe care, equitable care and personalized experience. PFAC input on hospital initiatives or data related to patient care, safety, quality and experience will allow us to move toward meeting our system-wide goals.

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

Over the past year, our organization has experienced transitions and shifts, which have created some uncertainty as priorities and structures evolved. Despite this, the PFAC has remained committed to supporting patients and families through these changes. Looking ahead, we are excited to welcome new members, establish clearer goals, and continue aligning our work with the hospital's mission to ensure that the patient and family voice remains central in shaping care.

31. This report was prepared and reviewed by:

a. Name: **Meredith McEvoy & Erin Sturgeon**

b. Title: **PFAC Support Roles**

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

**Jennifer Capone**  
**Nancy Azar**

32. This report is for the state's fiscal year ending June 30, **25**.