

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: **Hebrew SeniorLife**
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: **N/A**
5. Hospital co-chair:
 - a. Name: **Sarah Sjostrom**
 - b. Title: **Chief Nursing Officer and VP of Patient Care Services**
 - c. Email address: **sarahsjostrom@hsl.harvard.edu**
 - d. Phone number: **(781)234-9662**
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:
- 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: **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 type="checkbox"/> After visit summary or survey messages | <input checked="" type="checkbox"/> Patient/family feedback |
| <input checked="" 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? **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	57	91
Black	13	4
Hispanic	15	3
Asian	11	2
Native Hawaiian and Pacific Islander (NHPI)	0	0
American Indian or Alaska Native (AIAN)	0	0
Other	4	
Multi		

- 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	3.5
Portuguese	
Chinese	1
Haitian Creole	1
Vietnamese	
Russian	20
French	
Mon-Khmer/Cambodian	
Italian	0.5
Arabic	
Albanian	
Cape Verdean	
Limited English proficiency (LEP)	25.5

- 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 is not as representative of our larger catchment area demographics, however it is very representative of our current patient population demographics. Efforts are made to ensure that we have PFAC members that represent specific patient demographics, such as our Russian speaking population and representation of those receiving care in our memory care area providing care to those with dementia.

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

As we are conducting new member recruitment annually, we are ensuring spaces are available to represent significant internal demographics that are also present in our catchment area, as noted above. Additionally, we are attempting to include additional demographics by assessing staff member participation that can also reflect catchment area demographics despite patient and family demographics not being as diverse or reflective of that found externally. Finally, we are making efforts to strengthen membership through more broadly advertising our application cycle through our family and community newsletter.

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.) **Often**
18. How often do you track process metrics? (e.g., number of meetings, number of initiatives, etc.) **Often**
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) Feedback provided at a council meeting indicating need for increased recreation therapy and programming to be provided during weekend hours. This led to a review and collaboration by Life Enhancement, Volunteer Services and Spiritual Care and resulted in a revision of staff schedules and program hours to add programming accordingly.

2) Provided support to a pilot project and feedback on the restructuring of family and patient care plan meetings to align with provision of age-friendly care. The pilot feedback served as a foundation for rolling out the process across all patient care areas.

3) Gave input to quality working group for Age-Friendly care structure, the "What Matters" group incorporated that information into the creation of a patient-centered play experience which included patients, families and staff.

4) Contributed to formation of content shared in all family newsletters.

5) Families participated in a conversation with team members regarding facility emergency preparedness training and patient safety during activities. This contributed to the formation of a staff member working group that will convene in the coming year to enhance practices.

6) Participated in a research initiative with a partner organization and academic research institution as a focus group to provide insight that aims to enhance dental care for patients.

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:

1) One of our organizational goals is to ensure quality care with a specific commitment to Age-friendly care initiatives. The PFAC contributed to two such projects related to care plan structure and our What Matters initiative that are noted above.

2) Another goal of HSL is to advance research. Our focus group work contributed directly to this goal.

3) We also have a goal to commit to person-centered care and our engagement with the council on increasing weekend programming spoke to that goal.

23. What were the greatest challenges your PFAC faced?

We had some administrative challenges with coordination this year that contributed to some challenges with robust and consistent attendance and participation. We still felt that we were able to make significant progress towards organizational goals, but have considered this as we seek to coordinate for the coming year's council sessions.

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: Occasionally

b. Patient/family advisers were consulted on safety goal-setting and metrics: Occasionally

c. Patient/family advisers participated in safety improvement initiatives: Occasionally

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

Work contributed to emergency preparedness as noted above. Concern related to safety at patient programming has led to a staff working group that is exploring enhanced safety procedures for staff to follow during programs.

SECTION V: ADDITIONAL INFORMATION

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

- | | | |
|---|--|--|
| <input 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 checked="" 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 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?

PFAC did not lead specific workgroups or have unique PFAC led projects this year.

SECTION VI: LOOKING AHEAD

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

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?

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

31. This report was prepared and reviewed by:

a. Name: **Sarah Sjöström**

b. Title: **Chief Nursing Officer & VP of Patient Care Services**

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

Susan Graff Tolman, Associate Chief Nursing Officer
Heather Dexter, Lead Social Worker - Roslindale
Gayle Henry, Lead Social Worker - Dedham

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