

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: **Mercy Medical Center**
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: **Kimberly Schoolcraft**
 - b. Email address: **kimberly.schoolcraft@gmail.com**
5. Hospital co-chair:
 - a. Name: **Susan Pettorini-D'Amico & Dahivsa Mercado**
 - b. Title: **Chief Nursing Officer and Patient Experience Regional Director**
 - c. Email address: **SPettori@TrinityHealthOfNE.org/dahivsa.mercadosantiago@trinityhealthofne.or**
 - d. Phone number: **860-714-1300**
6. PFAC membership [as of June 30]:
 - a. Total number of members: **1 to 5**
 - 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: **6 to 10**
 - 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 type="checkbox"/> After visit summary or survey messages | <input checked="" type="checkbox"/> Patient/family feedback |
| <input checked="" type="checkbox"/> Clinicians' recommendations | <input checked="" type="checkbox"/> Social media |
| <input checked="" 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 type="checkbox"/> Word of mouth |
| <input checked="" type="checkbox"/> Pamphlets | Other: Outreach to churches in area |
10. How often does your PFAC meet? **Quarterly**
- If other, please specify: **As needed for special projects eg. for this rpt.**
11. How do you typically convene your PFAC? **A mix of both in-person and virtually**
- If a mix, please describe: **changed to virtual only as of June 2025.**
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 **Never**
 - 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 **Rarely**
 - Other, please specify:
The PFAC receives updates on various initiatives that are undertaken by the hospital.

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	49.46%	59.1%
Black	12.02%	12%
Hispanic	31.31%	
Asian	3.22%	1.55%
Native Hawaiian and Pacific Islander (NHPI)	.048%	
American Indian or Alaska Native (AIAN)	.142%	.076%
Other	3.77%	20.1%
Multi	7.19	

- 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	11.2%
Portuguese	.29%
Chinese	
Haitian Creole	.312%
Vietnamese	.714%
Russian	1.2%
French	.067%
Mon-Khmer/Cambodian	
Italian	
Arabic	.29%
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? **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?

Mercy Medical Center's Patient and Family Advisory Council has an opportunity to improve its representation as it relates to the community it serves.

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

The Patient and Family Advisory Council has a multifaceted initiative to attempt to increase membership. In the coming year, it will need to review its strategy to be more aligned with the community it serves.

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.) **Sometimes**
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.

- Input on What Matters Most magnet for Communication Board
- 90-90 campaign and RN retention
- Patient Satisfaction Discharge and transition from ED
- PFAC member in Quality of Care
- CNO and CMO welcome video
- Comfort Care Cart
- The Big Close Initiative from ED Team
- PFAC recruitment

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? Don't know

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

Please describe:

The Mission of Mercy Medical Center's PFAC is aligned with the broader Mission, Vision and Core values of Trinity Health of New England. We review patient satisfaction, patient/employee safety metrics as well as provide input regarding hospital initiatives, quality of care, nursing retention and patient relationships.

23. What were the greatest challenges your PFAC faced?

The PFAC's greatest challenge has been recruiting new members as well as retention of current 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: Occasionally

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

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

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

A PFAC member joins the Safety and Quality Committee meetings once a month and reports back to the full PFAC. The PFAC member feels comfortable asking questions regarding the work at hand and feels heard from colleagues at the meeting. PFAC member feels engaged in elevating the voice of the patients and family. Additionally, a few times a year, the CNO provides updates on patient safety to the full PFAC.

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 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 checked="" type="checkbox"/> Quality and Safety |
| <input type="checkbox"/> Code of Conduct | <input type="checkbox"/> Ethics | <input 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"/> Discharge Delays | <input type="checkbox"/> Patient Care Assessment | |

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

N/A

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?

The PFAC will:

1. Review this report to identify areas of opportunities.
2. Increase membership.
3. Review Charter and Bylaws and update as needed.

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?

The PFAC will continue to align with the hospital's goals and priorities to ensure that the voice of the patients and families is heard and included.

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

N/A

31. This report was prepared and reviewed by:

a. Name: **Kimberly Schoolcraft**

b. Title: **PFAC member co-chair**

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

Lenora Johnson, PFAC member, and Quality of Care PFAC Representative
Dahivsa Mercado, THOfNE's Patient Experience Regional Director
Susan Pettorini-D'Amico, Mercy Medical Center Chief Nursing Officer

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