

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: Spaulding Rehabilitation Hospital Boston
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: Jennifer Hurley
 - b. Email address: hurley5mj@aol.com
5. Hospital co-chair:
 - a. Name: Sharon McLean
 - b. Title: Quality and Compliance Manager
 - c. Email address: smclean2@mgb.org
 - d. Phone number: 617-952-5312
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:

- 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**

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 type="checkbox"/> After visit summary or survey messages | <input 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? **Other**

If other, please specify: **8x/year**

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

If a mix, please describe: **In-person meeting with virtual option**

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 **Never**
- b. Feedback: The department asks the PFAC for input on a project in progress **Always**
- 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	47.08	N/A
Black	14.18	N/A
Hispanic	21.60	N/A
Asian	11.35	N/A
Native Hawaiian and Pacific Islander (NHPI)	0.03	N/A
American Indian or Alaska Native (AIAN)	0.12	N/A
Other	5.61	N/A
Multi	17.13	N/A

- 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	3.53
Portuguese	0.57
Chinese	0.31
Haitian Creole	0.3
Vietnamese	0.11
Russian	
French	0.05
Mon-Khmer/Cambodian	0.07
Italian	0.09
Arabic	
Albanian	
Cape Verdean	0.06
Limited English proficiency (LEP)	N/A

- 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?

Our PFAC membership is thoughtfully composed to reflect different backgrounds, experiences, and perspectives within the broader community it serves. Members span a wide range of ages, and represent various income brackets and educational backgrounds. We include individuals of diverse gender identities, sexual orientations, as well as people living with chronic or rare diseases, disabilities, and caregivers. In addition, our council brings together voices from different cultural heritages and religious traditions, ensuring that spiritual needs and cultural sensitivities are recognized. Career diversity is also notable: members work across healthcare, education, business, social services, and beyond, contributing unique insights shaped by their professional experiences. By striving for such comprehensive representation, our PFAC is better equipped to understand, advocate for, and address the multifaceted needs of our entire community. This inclusive approach enriches our discussions, strengthens our recommendations, and fosters a sense of trust and belonging that benefits everyone 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.

Evaluation and Continuous Improvement. We review metrics and routinely assessed the demographic composition of our PFAC. By embracing these proactive strategies and activities, our PFAC continues to strengthened its capacity to represent the full spectrum of our community and address the unique challenges faced by each group. This commitment to diversity ensures that our advisory work remains relevant, responsive, and truly inclusive.

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.) **Rarely**
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.

Nighttime Noise: Council members provided feedback on how noise affects rest and recovery, recommending targeted questions for volunteers such as whether noise disrupts sleep and identifying its sources.

Improving Health Questionnaires: The PFAC contributed to making health questionnaires more practical and accessible for patients utilizing Spaulding's services, ensuring forms met varied needs.

Functional Living Apartment (FLA) Experience: PFAC suggestions led to enhancements for patients preparing to use the FLA, including the creation of comprehensive binders with clear directions, lists of goals and required activities, specific expectations, and guidance on what items to bring. Their input also clarified when patients should seek assistance from nurses.

Code of Conduct Improvements: The council engaged in robust discussions around the Code of Conduct for both inpatient and outpatient settings, offering input on how and when information should be shared, who should receive it, and its enforcement for front line staff. They also advocated for enhanced training and resources for new staff and graduates.

Virtual Nurse Program: PFAC members contributed insights to further develop and refine the Virtual Nurse Program, with a focus on patient-centered care and accessibility.

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? **No**

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

Please describe:

MGB System wide goal of Quiet at night. Council members provided feedback on how noise affects rest and recovery, recommending targeted questions for volunteers such as whether noise disrupts sleep and identifying its sources.

23. What were the greatest challenges your PFAC faced?

Recruitment of members from a variety of cultural/ethnic backgrounds.

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: **Regularly**
- 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.

Our PFAC has played a vital role in advancing patient safety within our organization by integrating the authentic voices and experiences of our diverse community into aspects of our safety initiatives. By providing a forum for members to share their stories, concerns, and observations, the PFAC has helped highlight safety risks that might otherwise go unnoticed. These firsthand accounts have led to actionable recommendations.

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 checked="" 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 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"/> 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? 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?

By seeking opportunities for PFAC input on hospital initiatives and patient-related data, the council ensures that organizational efforts in care, safety, quality, and experience are guided by real-world perspectives. This partnership drives improvement by elevating the voices of patients and families, making institutional policies more responsive and effective. Actively recruiting diverse PFAC members further strengthens this alignment, ensuring the organization's commitments to equity and inclusion are reflected in every decision. Through these objectives, the PFAC acts as a bridge—connecting leadership with the lived experiences of those served—thereby fostering a culture of transparency, collaboration, and continuous learning. Ultimately, these goals reinforce the organization's priority of delivering patient-centered care, enhancing safety, and supporting positive health outcomes for all.

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: **Sharon McLean**

b. Title: **Quality Manager**

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

Kayla Butler, Quality Coordinator/PFR Staff Role

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