

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: UMass Memorial Medical Center
2. How many PFACs does your hospital have in total? 5 to 8
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: Donna Boulay
 - b. Email address: dmboulay23@gmail.com
5. Hospital co-chair:
 - a. Name: Billie Adler
 - b. Title: PFAC Program Manager
 - c. Email address: billie.adler@umassmemorial.org
 - d. Phone number: 508.414.6001
6. PFAC membership [as of June 30]:
 - a. Total number of members: 16 to 20
 - b. Total number of patient/family advisers: 11 to 15
 - c. Total number of staff advisers: 6 to 10

7. Preferred PFAC membership:

- a. Total number of members: **21 to 25**
- b. Total number of patient/family advisers: **16 to 20**
- 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: **2 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 checked="" 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 checked="" type="checkbox"/> Word of mouth
<input checked="" type="checkbox"/> Pamphlets	Other: Annual recruitment campaign (PFAC raffle)

10. How often does your PFAC meet? **Monthly**

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: **In-person vs. virtual every other month**

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 **Sometimes**
- 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:

PFAC members engage on various hospital Patient/Family Experience (PFX) improvement committees, including: Food Services PFX Committee, Ambulatory Surgery PFX Committee, Endoscopy PFX Committee, ED PFX Committee, Environmental Services (EVS) PFX Committee. PFAC member participation on other committees/initiatives include: Cancer Committee, Medicare ACO Committee, Readmissions Committee, Schwartz Rounds, UMass Chan Medical School Doctor/Provider Panel

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	71.8%	68.3%
Black	5.1%	7.6%
Hispanic	13.3%	16.9%
Asian	5.2%	2.9%
Native Hawaiian and Pacific Islander (NHPI)	0.0%	0.0%
American Indian or Alaska Native (AIAN)	0.3%	0.3%
Other	3.2%	15.3%
Multi	9.7&	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	6.1%
Portuguese	2.2%
Chinese	0.1% Mandarin
Haitian Creole	1.2%
Vietnamese	0.5%
Russian	0.1%
French	0.1%
Mon-Khmer/Cambodian	n/a
Italian	0.0%
Arabic	0.4%
Albanian	0.3%
Cape Verdean	0.0%
Limited English proficiency (LEP)	n/a

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?

The Medical Center PFAC demographics are largely white, female, and 65+ years old. SOGI stats are unavailable/undisclosed. We have three BIPOC females, one who is a third year medical student. The majority of the group is college educated or higher. We currently do not have any veterans. Several members are cancer survivors, one of whom is an amputee. We also have one individual with a hearing impairment. Religious perspectives have not been discussed/disclosed. On the whole, the group is primarily homogeneous and not wholly representative of the diverse patient population the Medical Center 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.

Recruitment strategies targeted at casting/capturing a wider net to diversify the membership.

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.

Accomplishment #1

Feedback and support for the facilities/site design of UMass Memorial Medical Center's new inpatient building (North Pavilion): The Medical Center PFAC was instrumental in providing feedback for patient rooms. The group toured the mock patient rooms, evaluated furniture comfort, location of accouterments, and the overall facilities design and suggested changes for improvement which was taken under advisement by the design/build team.

Accomplishment #2

Launched a patient/family rounding program similar to the Nurse Leader Digital Rounding Program to provide support to patients/families and gather patient/family experience feedback.

Accomplishment #3

ED Waiting Room Patient Experience Project: collaborated with nursing leadership on improving the patient/family experience in the ED waiting room. The PFAC evaluated and provided feedback for the launch of a self-service rounding program in the ED, ED signage, and web pages related to supporting the program and interactive tools related to it.

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: Internal communication channels (intranet) and

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:

PFAC participation on Patient/Family Experience Committees and process improvement projects supported the organization's goals to enhance Patient- and Family-Centered Care and, overall, improve the patient/family experience through community engagement.

23. What were the greatest challenges your PFAC faced?

Challenge #1

Lack of diversity

Challenge #2

Lack of awareness about PFAC and the work we do amongst staff/caregivers

Challenge #3

Embedding PFAC in the organization - there needs to be more structured/standardized processes in place for Quality and Safety teams to engage with the various different PFACs within the organization in quality improvement work in general.

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

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

Falls Prevention
Mobility Initiative (UMove to Improve)
EHS Signage - Caregiver Injury
Pathway to Excellence Initiative
Endorsement of Determination of Need for New Proton Therapy
QI Project to Identify Hospital Providers
Oral Care in Acute Care
Diabetes Education
Home Infusion Policy

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 checked="" 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 checked="" type="checkbox"/> Board of Directors	<input type="checkbox"/> Eliminating Preventable Harm	<input checked="" 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 type="checkbox"/> Quality/Performance Improvement
<input type="checkbox"/> Community Benefits	<input type="checkbox"/> Institutional Review Board (IRB)	<input checked="" 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 checked="" type="checkbox"/> Patient Care Assessment	

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

Patient/Family Rounding program with ICU Nurse Leader

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?

Our goals are aligned with the organizations Fiscal Year: 10/01 - 9/30, which bridges this report.

Our primary goals in FY25 were:

- #1 Develop/launch an internal PFAC project (Patient/Family-Centered Rounding)
- #2 Broaden/elevate awareness about our Patient and Family Advisory Council across the organization (PFAC Week)
- #3 Engage on committee work to amplify patient/family voices

Our FY26 goals will be established in 1Q of FY26 (October, November, December 2025)

29. Do these goals support the organization's goals and priorities for the year? No, the goals do not specifically relate

a. If yes, in what ways do these goals support the organization's goals and priorities?

[Redacted area]

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

The Patient/Family Experience Department is in the process of developing/launching an e-advisory (digital community). We are working with our Press Ganey partners to launch Community Advisor this fiscal year. This digital community will cast a wider net with respect to capturing the 'voice' of the diverse patient population we serve, target/align community feedback to specific quality and safety and process improvement initiatives, and advance health equity goals organization wide.

Additional information about projects/initiatives supported by other PFACs at UMass Memorial Medical Center:

1. Children's Medical Center PFAC: Created specialized notebook and gift bag for long stay patients/families
2. Maternity PFAC: Maternity Center Re-Design Committee participation, Lactation Support Group - launch and experience design
3. Cancer Center PFAC: Mentorship Program development and design
4. NICU PFAC: Post- Covid relaunch
5. Cystic Fibrosis PFAC: Relaunch
6. Psych PFAC: Mindfulness Event

31. This report was prepared and reviewed by:

a. Name: Billie Adler

b. Title: PFAC Program Manager

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

Donna Boulay, Medical Center PFAC Volunteer Co-Chair

Shmulik Fogelman, Medical Center PFAC Volunteer Co-Chair

Stacy Keddy, Medical Center PFAC Staff Co-Chair

The PFAC is under the direction of the Patient/Family Experience Department

David Cohen, Manager, Patient/Family Experience

Cristin Zannella, Director, Patient/Family Experience

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