



HEALTH CARE FOR ALL

Thank you for using this web-based template that Health Care for All (HCFA) has developed to assist you in collecting information about your PFAC. HCFA recognizes the importance of supporting the work of the PFACs and facilitating cross-PFAC learning and sharing. We encourage you to submit this form by October 1, 2016.

Once the survey is completed, you will be directed to a summary of your responses, which you will be able to save as a PDF or copy and paste into another document for your own reporting.

IMPORTANT NOTES:

- **Do NOT click the "back" button in your browser to navigate the survey.** Instead, use the arrows at the bottom of each page.
- You may save and return to the survey as needed before you submit your responses. All you need to do is close the window, and then return to the survey within four weeks on the same internet browser and computer. However, once you hit submit, the results are sent to HCFA and cannot be edited or retrieved.
- Before you begin, we recommend that you read through the entire template by accessing a copy in Microsoft word [here on our website](#).

The survey questions concern PFAC activities in fiscal year 2016 only.

Hospital Name

Heywood Hospital

NOTE: Massachusetts law requires every hospital to make a report about its PFAC publicly available. HCFA strongly encourages you to fill out a separate template for the hospital-wide PFAC at each individual hospital.

Which best describes your PFAC?

We are the only PFAC at a single hospital

We are a PFAC for a system with several hospitals

We are one of multiple PFACs at a single hospital

We are one of several PFACs for a system with several hospitals

Other (please describe):

Staff PFAC Co-Chair Contact:

Name and Title: Tina Santos

Email: Tina.Santos@Heywood.org

Phone: 978-630-6220

Is the Staff PFAC Co-Chair also the Staff PFAC Liaison/Coordinator?

Yes

No

N/A

Patient/Family PFAC Co-Chair Contact:

Name and Title: Sally Hartshorn
Email: sally.hartshorn@comcast.net
Phone: 978-632-3420

Staff PFAC Liaison/Coordinator Contact (if applicable):

Name and Title: Barbara Nealon
Email: Barbara.Nealon@Heywood.org
Phone: 978-630-6386

Section 1: PFAC Organization

This year, the PFAC recruited new members through the following approaches (check all that apply):

Case managers / care coordinators

Patient satisfaction surveys

Community-based organizations

Promotional efforts within institution to patients or families

Community events

Promotional efforts within

Community events	institution to providers or staff
Facebook and Twitter	Recruitment brochures
Hospital banners and posters	Word of mouth / through existing members
Hospital publications	Other
Houses of worship	N/A - we did not recruit new members in FY 2016

Total number of staff members on the PFAC:

2

Total number of patient or family member advisors on the PFAC:

16

The name of the hospital department supporting the PFAC is:

Administration, Nursing, Patient Care Services

The hospital position of the PFAC Staff Liaison/ Coordinator is:

Director of Social and Multi Cultural Services

The hospital provides the following for PFAC members to encourage their participation in meetings (click all that apply):

Annual gifts of appreciation	Payment for attendance at other conferences or trainings
Assistive services for those with disabilities	Provision / reimbursement for child care or elder care
Conference call phone numbers or "virtual meeting" options	Stipends
Meetings outside 9am-5pm office hours	Translator or interpreter services
Parking, mileage, or meals	Other
Payment for attendance at annual PFAC conference	N/A - the hospital does not reimburse PFAC members

Section 2: Community Representation

The PFAC regulations require every PFAC to represent the community served by the hospital, which is described below.

Our catchment area is geographically defined as (if you are unsure select "don't know"):

Gardner, Templeton, Baldwinville, Hubbardston, Ashburnham, Westminster and Winchenden

Don't know catchment area

Tell us about racial and ethnic groups in your area (please provide percentages; if you are unsure of the percentages select "don't know").

Our defined catchment area is made up of the following racial groups (please provide percentages; if you are unsure of percentages please select "don't know"):

American Indian or Alaska Native	0%
Asian	1%
Black or African American	1%
Native Hawaiian or other Pacific Islander	0%
White	94%
Other	4% Hispanic

Don't know racial groups

What percentage of people in the defined catchment area are of Hispanic, Latino, or Spanish origin?

4%

Don't know origins

In FY 2016, the hospital provided care to patients from the following racial groups (please provide percentages):

American Indian or Alaska Native	0.002%
Asian	0.50%
Black or African American	1.2%
Native Hawaiian or other Pacific Islander	0.005%
White	98.113%
Other	0.18% Hispanic

Don't know racial groups

What percentage of patients that the hospital provided care to in FY 2016 are of Hispanic, Latino, or Spanish origin?

0.18%

Don't know origins

In FY 2016, the PFAC **patient and family advisors** came from the following racial groups (please provide percentages):

American Indian or Alaska Native	0%
Asian	6%
Black or African American	6%
Native Hawaiian or other Pacific Islander	0%
White	75%
Other	13% Hispanic

Don't know racial groups

What percentage of **PFAC patient and family advisors** in FY 2016 were of Hispanic, Latino, or Spanish origin?

13%

Don't know origins

Tell us about languages spoken in your area (please provide

percentages; if you are unsure of the percentages select “don’t know”).

What percentage of patients that the hospital provided care to in FY 2016 have limited English proficiency (LEP)?

1%

Don't know percentage that have limited English proficiency (LEP)

What percentage of patients that the hospital provided care to in FY 2016 spoke the following as their primary language?

Spanish	0.48%
Portuguese	0%
Chinese	0%
Haitian Creole	0%
Vietnamese	0%
Russian	0%
French	0%
Mon-Khmer/Cambodian	0%
Italian	0%
Arabic	0.05%
Albanian	0%
Cape Verdean	0%

Don't know primary languages

What percentage of PFAC patient and family advisors in FY 2016 have limited English proficiency (LEP)?

14%

Don't know percentage that have limited English proficiency (LEP)

In FY 2016, what percentage of PFAC **patient and family advisors** spoke the following as their primary language?

Spanish	2
Portuguese	0
Chinese	0
Haitian Creole	0
Vietnamese	0
Russian	0
French	0
Mon-Khmer/Cambodian	0
Italian	0
Arabic	0
Albanian	0
Cape Verdean	0

Don't know primary languages

The PFAC is undertaking the following activities to ensure appropriate representation of our membership in comparison to our patient or catchment area:

Outreach initiative via the Minority Coalition in our catchment area. Review annual LEP assessment and soliciting consumer identified in that group.

Section 3: PFAC Operations

Our process for developing and distributing agendas for the PFAC meetings (click the best choice):

Staff develops the agenda and sends it out prior to the meeting

PFAC members and staff develop agenda together and send it out prior to the meeting

Staff develops the agenda and distributes it **at the meeting**

PFAC members and staff develop agenda together and distribute it **at the meeting**

PFAC members develop the agenda and send it out prior to the meeting

Other

PFAC members develop the

PFAC members develop the agenda and distribute it **at the meeting**

N/A – the PFAC does not use agendas

If staff and PFAC members develop the agenda together, please describe the process:

At the beginning of each fiscal year, we conduct a needs assessment. Based on patient feedback, patient and employee satisfaction, quality and safety reports and the issues identified by the PFAC membership, we create a tentative agenda for the upcoming year. At the end of each meeting, if additional items are identified, we add them to the

The PFAC goals and objectives for 2016 were: (select the best choice):

Developed by staff alone

Developed by staff and reviewed by PFAC members

Developed by PFAC members and staff

N/A – we did not have goals and objectives for FY 2016

The PFAC had the following goals and objectives for 2016:

*Increase the number of participant to include membership from all of our primary catchment areas, increase racial diversity, age, education, employment status and gender.
*Increase PFAC member participation on other committees and task forces.
*Identify opportunities to further engage PFAC on key matters such as : quality, safety, operations/care logistics, expansion of services, etc

Please list any subcommittees that your PFAC has established:

PFAC members became members of standing organizational committees: Patient care Portal Project, Patient Satisfaction, Perinatal and Pediatric Advisory Committee, Diabetes Excellence program, Workforce Violence Task Force, Medical Ethics, Montachusets Suicide Prevention task Force and Multicultural Task force.

How does the PFAC interact with the hospital Board of Directors (click all that apply):

PFAC submits annual report to Board

Board member(s) attend(s) PFAC meetings

PFAC submits meeting minutes to Board

PFAC member(s) are on board-level committee(s)

Action items or concerns are part of an ongoing "Feedback Loop" to the Board

Other

PFAC member(s) attend(s) Board meetings

N/A – the PFAC does not interact with the Hospital Board of Directors

Describe the PFAC's use of email, listservs, or social media for communication:

PFAC members have an email group where they communication between meeting.

Section 4: Orientation and Continuing Education

Number of new PFAC members this year:

1

Orientation content included (click all that apply):

"Buddy program" with experienced members

In-person training

Check-in or follow-up after the orientation

Massachusetts law and PFACs

Concepts of patient- and family-centered care (PFCC)

Meeting with hospital staff

General hospital orientation	Patient engagement in research
Health care quality and safety	PFAC policies, member roles and responsibilities
History of the PFAC	Skills training on communication, technology, and meeting preparation
Hospital performance information	Other
Immediate “assignments” to participate in PFAC work	N/A – the PFAC members do not go through a formal orientation process
Information on how PFAC fits within the organization's structure	

The PFAC received training on the following topics (click all that apply):

Concepts of patient- and family-centered care (PFCC)	Patient engagement in research

Health care quality and safety measurement	Types of research conducted in the hospital
Health literacy	Other
A high-profile quality issue in the news in relation to the hospital (e.g. simultaneous surgeries, treatment of VIP patients, mental patient discharge, etc)	Not Applicable
Hospital performance information	

Section 5: FY 2016 PFAC Impact and Accomplishments

The following information only concerns PFAC activities in the fiscal year 2016.

The five greatest accomplishments of the PFAC were:

Accomplishment 1:

Hospice Foundation of America (HFA) has coordinated a nationwide public awareness campaign on the importance of talking about end-of-life preferences and goals with loved ones and medical professionals.

Heywood Hospital PFAC, in partnership with the Gardner Visiting Nurses' Association, were the first in the State of MA to sponsor and attend the program and have opportunity to posit feedback prior to expanding showings in the community. Athol Hospital's PFAC was invited to attend as well.

Underwritten by the John and Wauna Harman Foundation, the project uses PBS's FRONTLINE film "Being Mortal," based on the book of the same name by Atul Gawande, MD, to educate audiences and encourage people to take concrete steps to identify and communicate their wishes for end-of-life care.

The idea for Accomplishment 1 came from:

Patient/family advisors of the PFAC

Department, committee, or unit that requested PFAC input

Accomplishment 2:

A PFAC member who is an expert on police and emergency matters, serves as a member on the Workplace Violence Task Force. He was a key member in the two organization wide "Code Silver" , active shooter, drills held this past year. This included the hospital staff, visitors, local EMS and police departments as well as a police K-9.

The idea for Accomplishment 2 came from:

Patient/family advisors of the PFAC

Department, committee, or unit that requested PFAC input

Accomplishment 3:

Based on feedback and suggestion from PFAC members regarding the Patient Portal, we expanded In Patient education and portal set up facilitation at the bedside for patients and families by our administrative team.

The idea for Accomplishment 3 came from:

Patient/family advisors of the PFAC

Department, committee, or unit that requested PFAC input

Accomplishment 4:

PFAC members are now active members of 9 organizational committees and provide the PFAC committee with updates and opportunity to raise questions.

The idea for Accomplishment 4 came from:

Patient/family advisors of the PFAC

Department, committee, or unit that requested PFAC input

Accomplishment 5:

Two PFAC members attended the Massachusetts Hospital Association (MHA) program "Meeting your Patients' Diverse Needs" which was an excellent validation of the work we are doing at Heywood Hospital.

The idea for Accomplishment 5 came from:

Patient/family advisors of the PFAC

Department, committee, or unit that requested PFAC input

The five greatest challenges the PFAC had in FY 2016:

N/A – we did not encounter any challenges in FY 2016

Challenge 1:

Consistent attendance by all members. Although the group is committed, at certain times of the year attendance is less robust.

Challenge 2:

The ability for members to attend conferences outside of Gardner.

Challenge 3:

Identification and successful recruitment of members across age and ethnic groups.

Challenge 4:

Challenge 5:

The PFAC members serve on the following hospital-wide committees, projects, task forces, work groups, or Board committees (click all that apply):

Behavioral Health/substance use	Ethics
Bereavement	Institutional Review Board (IRB)
Board of Directors	Lesbian, gay, bisexual, and transgender (LGBT) – sensitive care
Care Transitions	Patient Care Assessment
Code of Conduct	Patient Education

Community Benefits	Patient and Family Experience Improvement
Critical Care	Pharmacy Discharge Script Program
Culturally competent care	Quality and Safety
Discharge Delays	Quality/Performance Improvement
Drug Shortage	Surgical Home
Eliminating Preventable Harm	Other
Emergency Department Patient/Family Experience Improvement	N/A – the PFAC members do not serve on these

H

How do members on these hospital-wide committees or projects report back to the PFAC about their work?

Time is dedicated in each meeting to provide committee members opportunity to report back on the hospital wide committees on which they serve.

The PFAC provided advice or recommendations to the hospital on the following areas mentioned in the Massachusetts law (click all that apply):

Institutional Review Boards

Quality improvement initiatives

Patient and provider relationships

N/A – the PFAC did not provide advice or recommendations to the hospital on these areas in FY 2016

Patient education on safety and quality matters

PFAC members participated in the following activities mentioned in the Massachusetts law (click all that apply):

Advisory boards/groups or panels	Selection of reward and recognition programs
Award committees	Standing hospital committees that address quality
Co-trainers for clinical and nonclinical staff, in-service programs, and health professional trainees	Task forces
Search committees and in the hiring of new staff	N/A – the PFAC members did not participate in any of these activities

The hospital shared the following public hospital performance information with the PFAC (click all that apply):

Complaints and serious events

Complaints and investigations reported to Department of Public Health (DPH)	Patient complaints to hospital

Healthcare-Associated Infections
(National Healthcare Safety
Network)

Serious Reportable Events
reported to Department of Public
Health (DPH)

Quality of care

High-risk surgeries (such as aortic
valve replacement, pancreatic
resection)

Medicare Hospital Compare (such
as complications, readmissions,
medical imaging)

Joint Commission Accreditation
Quality Report (such as asthma
care, immunization, stroke care)

Maternity care (such as C-
sections, high risk deliveries)

Resource use and patient satisfaction

Inpatient care management (such
as electronically ordering
medicine, specially trained doctors
for ICU patients)

Resource use (such as length of
stay, readmissions)

Patient experience/satisfaction
scores (eg. HCAHPS - Hospital
Consumer Assessment of
Healthcare Providers and
Systems)

Other

Other

N/A – the hospital did not share performance information with the PFAC

Please explain why the hospital shared only the data you checked in the previous questions:

Please describe how the PFAC was engaged in discussions around these data above and any resulting quality improvement initiatives:

After learning about current practices in place, they offered ideas and suggestions around how to minimize problems from their perspectives.

The PFAC participated in activities related to the following state or national quality of care initiatives (click all that apply):

National Patient Safety Hospital Goals

Identifying patient safety risks

Preventing mistakes in surgery

Identifying patients correctly

Using alarms safely

Preventing infection

Using medicines safely

Prevention and errors

Care transitions (e.g., discharge planning, passports, care coordination, and follow up between care settings)

Human Factors Engineering

Checklists

Fall prevention

Electronic Health Records –related errors

Safety

Hand-washing initiatives

Team training

Decision-making and advanced planning



End of life planning (e.g., hospice, palliative, advanced directives)

Improving information for patients and families

Health care proxies

Informed decision making/informed consent

Additional quality initiatives

Disclosure of harm and apology

Rapid response teams

Integration of behavioral health care

Other

Other

N/A – the hospital did not share performance information with the PFAC

Were any members of your PFAC engaged in advising on research studies?

Yes

No

In what ways are members of your PFAC engaged in advising on research studies? Are they:

Educated about the types of research being conducted

Involved in study planning and design

Involved in conducting and implementing studies

Involved in advising on plans to disseminate study findings and to ensure that findings are communicated in understandable, usable ways

Involved in policy decisions about how hospital researchers engage with the PFAC (e.g. they work on a policy that says researchers have to include the PFAC in planning and design for every study)

How are members of your PFAC approached about advising on research studies?

Researchers contact the PFAC

Researchers contact individual members, who report back to the PFAC

Other

None of our members are involved in research studies

About how many studies have your PFAC members advised on?

1 or 2

3-5

More than 5

None of our members are involved in research studies

Section 6: PFAC Annual Report

We strongly suggest that all PFAC members approve reports prior to submission.

The following individuals approved this report prior to submission (list name and indicate whether staff or patient/family advisor):

This report was sent to all the members of our PFAC committee and they were offered opportunity to posit feedback.

Describe the process by which this PFAC report was completed and approved at your institution (choose the best option).

Collaborative process: staff and PFAC members both wrote and/or edited the report

Staff wrote report and PFAC members reviewed it

Staff wrote report

Other

Massachusetts law requires that each hospital's annual PFAC report be made available to the public upon request. Answer the following

questions about the report:

We post the report online.

Yes, link:

<http://www.heywood.org/about/patient-and-family-advisory-council/patient-and-family-advisory-council>

No

We provide a phone number or e-mail address on our website to use for requesting the report.

Yes, phone number/e-mail address:

Tina Santos, Vice President of Operations and Chief Nursing Officer. Tina.Santos@heywood.org or 978-630-6220.

No

Our hospital has a link on its website to a PFAC page.

Yes, link:

<http://www.heywood.org/about/patient-and-family-advisory-council/patient-and-family-advisory-council>

No, we don't have such a section on our website

Please provide an email address if you would like to receive a confirmation with a copy of this report after the report is submitted:

tina.santos@heywood.org



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