

2014-2015 Patient and Family Advisory Council Annual Report

Please list

1. Hospital Name: Good Samaritan Medical Center, Inc.
2. Year PFAC Established: September 1, 2009
3. Staff PFAC Contact (name and title): Jerilyn Thomas, Chief Nursing Office/PFAC Co-Chair
4. Staff PFAC Contact E-mail and Phone: Jerilyn.Thomas@Steward.org (O)508-427-2217

Note: The following questions only concern PFAC activities in fiscal year 2015.

Section 1: PFAC Organization

5. Our PFAC has (check the best choice)

- By-laws
 Agreed-upon policies and procedures
 Neither

6. (If neither) Our PFAC manages itself through (describe in 1500 characters or fewer): _____

7. Our PFAC recruits new members using the following approaches (check all that apply):

- | | |
|---|---|
| <input checked="" type="checkbox"/> Word of mouth | <input type="checkbox"/> Hospital banners and posters |
| <input type="checkbox"/> Promotional efforts within institution to patients | <input type="checkbox"/> Through care coordinators |
| <input checked="" type="checkbox"/> Promotional efforts within hospital to providers or staff | <input checked="" type="checkbox"/> Through patient satisfaction surveys |
| <input checked="" type="checkbox"/> Through existing members | <input checked="" type="checkbox"/> Through community based organizations |
| <input type="checkbox"/> Facebook and Twitter | <input type="checkbox"/> Through houses of worship |
| <input type="checkbox"/> Recruitment brochure | <input checked="" type="checkbox"/> At community events |
| <input type="checkbox"/> Hospital publications | <input type="checkbox"/> Other |
| | <input type="checkbox"/> None |

8. If other, describe (in 1500 characters or fewer): _____

9. Our PFAC chair or co-chair is a patient or family member.

- Yes
 No

10. Our PFAC chair or co-chair is a hospital staff member.

- Yes
 No

11. This person's position title: Chief Nursing Officer

12. This person is the official PFAC staff liaison

- Yes
 No

13. Our PFAC has a total of 6 staff members.

14. Our PFAC has 7 current or former patients or family members.

15. The name of the hospital department supporting the PFAC is: Administration

16. If not mentioned above, the hospital position of the PFAC staff liaison is N/A

17. The hospital reimburses PFAC members for the following costs associated with attending or participating in meetings (check all that apply)

- | | |
|--|--|
| <input checked="" type="checkbox"/> Provide free parking | <input type="checkbox"/> Provide on-site child or elder care |
| <input checked="" type="checkbox"/> Provide meals | <input checked="" type="checkbox"/> Provide reimbursement for attendance at annual PFAC conference |
| <input checked="" type="checkbox"/> Provide translator or interpreter services | <input checked="" type="checkbox"/> Provide reimbursement for attendance at other conferences or trainings |
| <input checked="" type="checkbox"/> Provide assistive services for those with disabilities | <input type="checkbox"/> Provide gifts of appreciation to PFAC members annually |
| <input checked="" type="checkbox"/> Provide meeting conference call or webinar options | <input checked="" type="checkbox"/> Cover travel expenses to attend conferences |
| <input type="checkbox"/> Provide mileage or travel stipends | <input type="checkbox"/> Provide other supports |
| <input type="checkbox"/> Provide financial support for child care or elder care | <input type="checkbox"/> None |
| <input type="checkbox"/> Provide stipends for participation | |

18. If other, describe (in 1500 characters or fewer): _____

Section 2: Community Representation

The PFAC regulations require every PFAC to represent the community served by the hospital.

19. Our catchment area is geographically defined as: Our catchment area is defined as our primary service area. This area consists of the following towns and communities: Brockton, Bridgewater, Easton, Middleborough, Randolph, Stoughton, and Taunton.

20-25. Our catchment area is made up of the following demographic percentages:

	RACE					ETHNICITY	
	%	%	%	%	%	%	%
	American Indian or Alaska Native	Asian	Black or African American	Native Hawaiian or other Pacific Islander	White	Latino	Not Latino
Our catchment area is made up of the following ethnic and racial groups	0%	3%	21%	0%	70%	6%	94%
In FY 2015, the our institution provided care to patients from the following ethnic and racial groups	0%	1%	17%	0%	78%	3%	97%
In FY 2015, our PFAC <u>patients and family members</u> came from the following ethnic and racial groups	0%	0%	0%	0%	100%	0%	100%

26. Our PFAC is undertaking the following activities to ensure appropriate representation of our membership in comparison to our patient or catchment area (describe):

The PFAC Committee has always tried to recruit members to reflect the diversity and uniqueness of the surrounding catchment area. However, this has been challenging in the past. For 2015-2016, there is going to be an increased effort put forth to increase the diversity and uniqueness of the committee membership both in the hospital staff contingent as well as the patient/family contingent. We have identified various new members who will hopefully bring this perspective and new breadth to the committee in exciting new ways.

n/a

Section 3: PFAC Operations

27. Our process for developing and distributing agendas for our PFAC meetings (choose one):

- | | |
|---|---|
| <input type="checkbox"/> The staff develops the agenda and sends it out prior to the meeting | <input type="checkbox"/> PFAC members develop the agenda and distribute it at the meeting |
| <input type="checkbox"/> The staff develops the agenda and distributes it at the meeting | <input checked="" type="checkbox"/> The PFAC has a collaborative process between staff and patients/family members to develop and distribute the agenda |
| <input type="checkbox"/> PFAC members develop the agenda and send it out prior to the meeting | <input type="checkbox"/> None |
| | <input type="checkbox"/> Other process |

28. If collaborative process, describe: Hospital staff provides information that is timely and pertinent to the family/patient membership (i.e. service line changes, facility changes, external forces/issues impacting the operations of the hospital. The Patient/Family membership also suggests agenda items and topics of interest to them that are incorporated into the agendas.

29. If other process, describe: _____

30. The PFAC goals set for FY 2014-2015 were:

- 1) Continued monitoring of the Patient Portal implemented during the 2013-2014 PFAC calendar year.
 - 2) Increase participation of PFAC membership in the Patient Flow and Access initiatives.
 - 3) Increase PFAC membership on hospital committees to include Quality and Safety, Employee Engagement, and Strategic Growth.
 - 4) Continue strong PFAC participation in the Hospital Acquired Infection committee.
 - 5) Increase PFAC membership to 15 community/patient members.
-

31. The PFAC goals for FY 2014-2015 were (check the best choice):

- Developed by staff and reviewed by PFAC members
- Developed by PFAC members and staff

32. Our PFAC has the following subcommittees (check all that apply):

- | | |
|--|--|
| <input type="checkbox"/> Government relations | <input type="checkbox"/> Publications |
| <input type="checkbox"/> Recruitment | <input type="checkbox"/> Nominations |
| <input type="checkbox"/> Emergency Department | <input type="checkbox"/> Marketing |
| <input type="checkbox"/> Education and Communication | <input type="checkbox"/> Behavioral Health |
| <input type="checkbox"/> Family Support | <input type="checkbox"/> Medication Safety |
| <input type="checkbox"/> Policies and Procedures | <input type="checkbox"/> Hospital Safety |
| <input type="checkbox"/> Palliative Care | <input checked="" type="checkbox"/> None |
| <input type="checkbox"/> Annual Reports | <input type="checkbox"/> Other |

33. If other, describe (in 1500 characters or fewer): _____

34. Our PFAC interacts with the Hospital Board of Directors in the following ways (check all that apply):

- | | |
|---|--|
| <input checked="" type="checkbox"/> PFAC submits annual report to Board | <input type="checkbox"/> PFAC member(s) attends Board meetings |
| <input type="checkbox"/> PFAC submits meeting minutes to Board | <input type="checkbox"/> Board member(s) attends PFAC meetings |

- PFAC member(s) are on board-level committee(s)
- None of the above

Other

35. If other, describe (in 1500 characters or fewer): _____

36. This is the url/link to the PFAC section on our hospital's website:

<http://www.goodsamaritanmedical.org/Good-Samaritan/Patient-and-Visitor-Information/Patient-and-Visitor-Information>

We don't have such a section on our website

37. Describe the PFAC's use of email, listservs, or social media:

PFAC communication is done through use of hospital and personal email addresses.

We don't communicate through these approaches

Section 4: Orientation and Continuing Education

38. The PFAC had 3 new members this year

39. Our PFAC orientation program this year was provided by 1 staff and 1 PFAC members

40. The content included (check all that apply):

- Meeting with hospital staff
- A general hospital orientation
- Information on concepts of patient- and family-centered care (PFCC)
- Information on patient engagement in research
- PFAC policies, member roles and responsibilities
- Information on health care quality and safety
- History of the PFAC
- A “buddy program” with old members
- How PFAC fits within the organization’s structure
- Other

41. If other, describe (in 3000 characters or fewer): _____

42. PFAC members are considered hospital volunteers and therefore (check all that apply):

- Attend hospital volunteer trainings
- Require immunizations or TB checks
- Require CORI checks
- Not applicable
- Other

43. If other, describe: _____

44. Our PFAC provides education to our members on the topic patient-centered outcomes research

- Yes
- No

Section 5: FY 2014-2015 PFAC Impact and Accomplishments

45-50. The three greatest accomplishments of our PFAC were:

Accomplishment (describe each in 3000 characters or fewer)	Idea originated from PFAC	Idea originated from Department/Committee/Unit that requested PFAC input
<p>Accomplishment 1</p> <p>Achieved consistent and productive representation of the Patient and Family Advisory Council at the Patient Flow Committee. Her attendance, active participation, and insights have been profoundly helpful in framing the performance improvement approaches taken by the committee to reduce the overall length of stay in the hospital's emergency department and inpatient units while maintaining a focus on the overall patient experience.</p>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
<p>Accomplishment 2</p> <p>The PFAC membership has continued to monitor the accessibility, ease of use, and utilization of the Patient Portal. Over the past three years, the participation of the committee has resulted in the successful implementation of the Patient Portal. In 2014-2015, Good Samaritan Medical Center has exceeded the "Meaningful Use" goals of utilization thanks in part to the patient-centered focus of the portal driven by the PFAC members. The PFAC membership also assisted in the development of patient educational materials on how to access the patient portal.</p>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
<p>Accomplishment 3</p> <p>Based on the feedback of the PFAC membership, the Patient Access department was relocated to a geographic location much more accessible to our patients. The PFAC group toured possible locations during one of their evening meetings and provided vital insight and recommendations to hospital leadership specifically focused on potential patient impacts. The hospital leadership embraced this feedback and relocated the department accordingly.</p>	<input type="checkbox"/>	<input checked="" type="checkbox"/>

51-56. (If not already listed above) Our PFAC’s three greatest accomplishments in relation to quality of care initiatives in FY 2014-2015 include

Quality of Care Accomplishment (describe each in 3000 characters or fewer)	Idea originated from PFAC	Idea originated from Department/Committee/Unit that requested PFAC input
<p>Accomplishment 1</p> <p>A member of the PFAC has provided an important patient insight to the Patient Falls Committee. Good Samaritan Medical Center recently was selected to participate in the Agency for Healthcare Quality and Research’s (AHRQ) Falls Prevention Program. As part of the selection process, AHRQ took into consideration our Fall’s team patient/family involvement and our member’s insight has been profound in terms of developing new strategies for educating patients and their families to prevent falls.</p>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
<p>Accomplishment 2</p> <p>Based on the aforementioned relocation of Patient Access, there has been a significant improvement in patient privacy. Having these private areas has reaped several benefits including patients and their families being more inclined to be honest about their issues and needs which has allowed our staff to provide more comprehensive services to them. Additionally, this move, driven by the PFAC membership, has driven a reevaluation of all public areas by Senior Leadership to identify areas of opportunity where more privacy could potentially be provided and make patients feel more comfortable.</p>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
<p>Accomplishment 3</p> <p>The PFAC has driven the formation of educational materials on what to expect in an Emergency Department visit. Through shared patient survey comments and PFAC membership’s own experiences, it was clear that patients awaiting care in the Emergency Room waiting area did not know what to expect about wait times, the care process, and the overall experience. The committee drafted a pamphlet outlining the experience and what to expect.</p>	<input checked="" type="checkbox"/>	<input type="checkbox"/>

57-59. The greatest three challenges our PFAC had (describe each in 3000 characters or fewer):

57. Challenge 1

We have found it challenging to increase the membership of the Patient and Family Advisory Council while being cognizant of the diversity and varying insights of the community that we serve. While simply adding members to the committee would not be challenging, it is important to ensure that the right members are brought onto the committee.

58. Challenge 2

We had some reluctance from the members of the committee to join some of the already established Quality Improvement committees at the hospital. Analysis showed that some of this was due to timing and availability issues but also a level of anxiety in joining technically advanced clinical committees. However, given the success that our three committees have had with PFAC participation, we are hopeful that the 2015-2016 year will bring increased interest and participation. This is also one of our considering factors when looking at potential new committee members.

59. Challenge 3

During the 2014-2015 year, we found it challenging to actually hold all of our scheduled meetings. During the Winter of 2015, we had numerous storms and blizzards causing us to cancel our originally scheduled meetings. The make-up meetings were not well attended. Additionally, having evening, dinner meetings has been challenging from an attendance perspective. In 2015-2016, the committee will focus on having earlier meetings in the day in addition to ensuring that all members are aware of the call-in options so that each meeting is well attended and productive.

60. Our PFAC provided advice or recommendations to the hospital on the following areas mentioned in the law (check all that apply):

- Quality improvement initiatives
- Patient education on safety and quality matters
- Patient and provider relationships
- Institutional Review Boards
- Other
- None

61. If other, describe (in 1500 characters or fewer): _____

62-63. PFAC members participated in the following activities mentioned in the law (check all that apply):

- Serve as members of task forces; number of people serving 2
- Serve as members of awards committees; number serving _____
- Serve as members of advisory boards/groups or panels
- List names of each group _____ and number serving on each _____
- Serve on search committees and in the hiring of new staff; number serving _____
- Serve as co-trainers for clinical and nonclinical staff, in-service programs, and health professional trainees; number serving _____
- Serve on selection of reward and recognition programs; Number serving _____
- Serve as members of standing hospital committees that address quality
(List) names of each group 3 and number serving on each 3
Patient Flow and Access- 1
Quality and Patient Safety- 1
Patient Falls Review Committee- 1
- Other areas of service not listed above;
(List) names of each group _____ and number serving on each _____
- None

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

- Serious Reportable Events
- Healthcare-Associated Infections
- Department of Public Health (DPH) information on complaints and investigations
- Staff influenza immunization rate

- Patient experience/satisfaction scores
- Patient complaints
- Patient Care Link
- Joint Commission surveys,
- Hospital Compare
- Family satisfaction surveys
- Quality of life data
- Rapid response data
- None
- Other

65. If other, describe (in 1500 characters or fewer): Core Measures

66. The process by which this public hospital performance information was shared (describe in 1500 characters or fewer):
Scorecards were presented at PFAC meetings.

67. Our PFAC activities related to the following state or national quality of care initiatives (check all that apply):

- | | |
|---|---|
| <input checked="" type="checkbox"/> Healthcare-associated infections | <input type="checkbox"/> Health care proxies/substituted decision making |
| <input type="checkbox"/> Rapid response teams | <input type="checkbox"/> End of life planning (e.g., hospice, palliative, advanced directives) |
| <input checked="" type="checkbox"/> Hand-washing initiatives | <input checked="" type="checkbox"/> Care transitions (e.g., discharge planning, passports, care coordination & follow up between care settings) |
| <input type="checkbox"/> Checklists | <input type="checkbox"/> Observation status for Medicare patients |
| <input type="checkbox"/> Disclosure of harm and apology | <input type="checkbox"/> Mental health care |
| <input checked="" type="checkbox"/> Fall prevention | <input type="checkbox"/> None |
| <input type="checkbox"/> Informed decision making/informed consent | <input type="checkbox"/> Other |
| <input checked="" type="checkbox"/> Improving information for patients and families | |

68. If other, describe (in 1500 characters or fewer): _____

Section 6: PFAC Annual Report

69. The hospital shares the PFAC annual reports with PFAC members:

Yes

No

70. Massachusetts law requires that the PFAC report be available to the public. Our hospital:

Posts the report online

Provides a phone number or e-mail to use for accessing the report

Other

71. If other, describe (in 1500 characters or fewer): _____