Hospital Name: Cambridge Health Alliance

Date of Report: September 24, 2013

Year Covered by Report: 2013

Year PFAC Established: 2009

Staff PFAC Contact: Deborah Murphy, RN, MHA, ACNO, Hospital Administrator

PFAC Organization

1. Does your PFAC have a mission statement? What is it?

The Mission of the CHA PFAC is to create positive changes in our healthcare delivery system, by fostering an environment whereby patients and family members feel respected and empowered to be partners in their care.

2. How do you recruit PFAC members?

Advisory Council members may be CHA patients, present or former family members of CHA patients, or interested community members who live or work in our primary service area. Patients are recruited in varying ways. Referrals are made by PCPs, Social Workers, physicians, Interpreters and other providers. Some members may even be identified through a formal complaint process. When recruiting we look for people who are: supportive of CHA’s mission, comfortable speaking openly in a group, interested in more than one issue, able to work collaboratively with people whose background and style may be different than their own, and able to maintain confidentiality. Our goal has been to create a Council that reflects the broad diversity of the communities that CHA serves and is considered when recruiting for new PFAC members. If our members need the assistance of an interpreter, we can provide that service with simultaneous interpreting equipment, so that they are able to participate fully. Potential members are contacted by the PFAC Co-Chair, and an initial screening session/orientation is conducted at a convenient location for the prospective member. Once it has been determined that the candidate will join the committee, the on boarding process begins with volunteer services.
3. Is the PFAC chair or co-chair a patient or family member?

At the present time this council is co-chaired by a patient and a staff member from the leadership team. The co-chair’s role as an officer of the Advisory Council will include working with Council leaders to plan agendas, co-lead meetings, consider the group's ongoing development needs, and act as a Council spokesperson when requested.

4. Is there a staff liaison(s) for the PFAC? In what department is the PFAC situated?

Presently there are 5 members from the CHA staff that attend our meetings. The departments that they represent are: Medicine, Quality, Pharmacy, Multi-lingual services and Psychiatry.

5. What is the size of the PFAC?

The PFAC currently consists of 15 members, representing the diversity of the Cambridge Health Alliance community.

6. Are at least 50% of PFAC members current or former patients or family members?

Yes they are.

7. How many patient and family members and how many staff members are on the PFAC?

We currently have 10 patient/family members and 5 CHA staff members.

8. How often does the PFAC meet?

Our PFAC meets monthly on the fourth Wednesday of the month (we do not meet in August and December).

9. Do you reimburse PFAC members for any costs associated with attending meetings and/or provide any other related assistance (eg. free parking, babysitting, etc.).

We provide free parking for our PFAC members. We also provide a light meal at the meeting.
Explain how the PFAC membership is representative of the community served by the hospital (demographically and in terms of services utilized at hospital).
Our membership reflects the diverse patient population that we serve. Our patient members have utilized our in-patient med/surg services, our psychiatry services, outpatient services, and surgical services.

11. Who sets agendas for PFAC meetings?

Meeting agendas are set by the co-chairs in consultation with PFAC membership and are distributed to the PFAC membership prior to each meeting.

12. Does the PFAC have subcommittees? If yes, please list and describe them.

Not at the present time

13. To what extent does the PFAC have access to the hospital Board of Directors?

Annual report to the board

14. Are PFAC meeting minutes submitted to the hospital board?

The PFAC minutes are available upon request by the hospital board.

15. Is there a PFAC section on the hospital website? What is the URL?

The CHA website has information about our council listed under our volunteer services section. Our URL is www.cambridgehealthalliance.org.

16. To what extent has the PFAC communicated with PFACs at other hospitals?

CHA has collaborated with BIDMC’s PFAC, with Southcoast Hospital System, and also presented at IHI webinars

Orientation and Continuing Education

17. Describe the PFAC orientation for new members. Include in description how often it is given, by whom, and the content covered.
As new members join the Advisory Council they meet with one of the Council’s leaders for an orientation session. The council notebook is reviewed, which includes discussion of CHA’s mission, vision and values, an overview of CHA’s structure and services, the purpose and goals of the Advisory Council, a brief history of the Council and description of typical meetings, Sounding Board examples, general information about the group and meeting logistics. We also discuss the new member’s areas of greatest interest, while keeping in mind more opportunities to engage patients in the healthcare delivery process.

18. What continuing education was provided to PFAC members this reporting year?
Members were participants and panel members in the Schwartz Center Symposium

PFAC Impact and Accomplishments
(Questions 21-24 below can inform your responses to questions 18 and 19.)

19. On what hospital committees or boards have you placed PFAC members? Was their participation suggested by the committee or by the PFAC?
Members joined the following committees this year:
Patient Experience of Care Steering Committee
Patient Care Improvement Committee
Care Transition Committee

Participation on these committees was actually suggested by the PFAC membership

20. In what ways did the PFAC influence quality of care at this hospital? Describe the PFAC’s accomplishments over the past year. Also note for each initiative undertaken, did the idea arise directly from the PFAC or did a department, committee or unit request PFAC input on the initiatives? (Questions 23-26 below can inform your responses.)
Members of the PFAC worked on a Schwartz grant to make Patient Experience of Care videos. These members shared their experiences, good and bad, of care received across various service lines of CHA. These videos are now being used in New Employee Orientation and also in staff meetings across the Alliance. This project was the idea of the Senior Leader Co-Chair

Members were asked to help design a whiteboard for inpatient rooms. With their input, custom boards were created and are now hanging in the inpatient units. The new design was intended
to improve our patients’ experience of care and keep them informed of their daily activities. This project was the idea of the Co-chairs.

Another accomplishment was the work done on the Pre-Op Instructions with CHG. Their diligent efforts were greatly appreciated and helped to create the final version of the handout to be used by our patients prior to surgery. This project was initiated by the Infection Prevention task force.

21. The law allows a hospital to engage its PFAC in a broad consulting role. Did the PFAC advise the hospital on any of the following areas specifically mentioned in the law (Check or underline all that apply):

   a. patient and provider relationships
   b. institutional review boards
   c. quality improvement initiatives √
   d. patient education on safety and quality matters √

22. Did the PFAC engage in any of the following (mentioned in the law) (Check/underline all that apply):

   a. reviewers of publicly reported quality information (see #25 for more specifics) √
   b. members of task forces
   c. members of standing hospital committees that address quality (list committees and how many PFAC members serve on each) √ (see above) 1 member on each committee
   d. members of awards committees
   e. members of advisory boards
   f. participants on search committees and in the hiring of new staff
   g. co-trainers for clinical and nonclinical staff, in-service programs, and health professional trainees or as participants in reward and recognition programs

23. Was any of the following public information on hospital performance shared with the PFAC? (Check/underline all that apply.)

   a. Serious Reportable Events
   b. Healthcare-Associated Infections
   c. DPH information on complaints and investigations
d. Staff influenza immunization rate
e. Other hospital performance information shared: please describe
   ___HCHAPS______________

24. Did PFAC quality of care initiatives relate to any of the following state and/or national quality of care initiatives: (Check/underline all that apply.)

   a. Healthcare-associated infections √
   b. Public reporting of hospital performance √
   c. Rapid response teams
   d. Hand-washing initiatives √
   e. Checklists for surgical procedures
   f. Checklists for nonsurgical procedures
   g. Disclosure of harm and Apology √
   h. Fall prevention √
   i. Informed decision making/informed consent
   j. Improving information for patients and families √
   k. Health care proxies/substituted decision making
   l. End of life planning (e.g., hospice, palliative, advanced directives) √
   m. Care transitions (e.g., discharge planning, passports, care coordination & follow up between care settings) √
   n. Other-please describe

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<th>Pre-Op Instructions for Bathing</th>
<th>Development of Community Resource Tool for Diabetes/Obesity Program</th>
<th>Whiteboards for Patient Rooms</th>
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<td>Discharge Appointment Process</td>
<td>New Nurse Call Light System</td>
<td>Patient Experience of Care Videos</td>
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PFAC Annual Report

25. Do PFAC members participate in the development of the PFAC annual report?

The members are not included in the writing of the report but are actively involved in the content material.

26. Does the hospital share the PFAC annual reports with PFAC members?
The annual report is shared with the members every year after it is submitted.

27. Did the hospital share the PFAC annual report with the Board of Directors/Trustees? How?
   It was presented to the Board.

28. Do you make the PFAC report accessible to the public? How?
   The annual report is available on our website.

29. Is the annual PFAC report posted to the hospital’s website for public access?
   Yes

Goals

30. What goals or quality improvement strategies, if any, has the PFAC set for the coming year? (Please list.)
   As current members have reached their terms of service, one of the priority goals in the upcoming year is to increase or recruiting efforts. Our patient members will be instrumental in planning the outreach.
   Another priority goal is to have 2 patients on our committees as our membership grows to allow this.
   Our patient videos are such a success, our goal would be to refresh them on an annual basis.