

## HCFA 2014 Patient and Family Advisory Council Annual Report

**Hospital Name:** Cambridge Health Alliance

**Date of Report:** September 2014

**Year Covered by Report:** 2014

**Year PFAC Established:** 2009

**Staff PFAC Contact (name and title):** Doris B. Gentley, RT, BS, CRA, Sr. Director Radiology

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### PFAC Organization

**1. Does your PFAC have by-laws and/or policies and procedures? If so, please attach them with your report or send a link to access them on-line.**

See CHA PFAC Charter.

**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 the council is co-chaired by a patient and staff members 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. If there is a hospital staff chair or co-chair, what hospital position does that person hold?**

There are 2 hospital co-chairs, the Sr. Director from Radiology and the Nurse Practitioner from the Breast Center.

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

Yes

**6. What hospital department supports the PFAC? What is the hospital position of the PFAC staff liaison?**

CHA administration through the Chief of Staff provides administrative support for the PFAC.

**7. Does the hospital reimburse PFAC members for any costs associated with attending meetings and/or provide any other assistance (eg. free parking, child or elder care, translation or interpretation services, conference calls, meals, mileage reimbursement or other travel stipends, etc.)?**

CHA does reimburse PFAC members for planned conferences. We provide free parking for our PFAC members. We also provide a light meal at the meeting. Translation/interpreter services are available.

**8. The PFAC regulations require every PFAC to represent the community served by the hospital. What is your PFAC/hospital doing to comply with this requirement?**

When recruiting we make every effort to assure representation across our patient population. We recruit from all our geographical locations. We also try to recruit from various services such as our psychiatry, ambulatory care and inpatient populations.

**9. 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.

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

Subcommittees are in the process of being developed as we move toward initiating projects.

**11. How does the PFAC interact with the Board of Directors (Check or circle all that apply)**

- a. PFAC submits annual report to Board
- b.  PFAC submits meeting minutes to Board
- c. PFAC member(s) attends Board meetings
- d. Board member(s) attends PFAC meetings
- e. PFAC member(s) are on board-level committee(s)
- f. None of the above
- g. Other

**12. Is there a PFAC section on the hospital website?**

The CHA website has information about our council listed under our volunteer services section. Our URL is [www.cambridgehealthalliance.org](http://www.cambridgehealthalliance.org).

**13. Does your PFAC use social media and if so, how?**

Not at this point.

## Orientation and Continuing Education

**14. Describe the PFAC orientation for new members. Include in description how often it is given, by whom, and the content covered. Please include any requirements for PFAC members as hospital volunteers (eg. hospital volunteer trainings, immunizations, CORI checks, TB checks, etc.).**

On boarding a new member requires completion of an application as well the standard requirements for a CHA volunteer. This includes CORI checks and formal volunteer orientation. Immunizations and TB checks are not required unless members will be participating in projects that bring them into the care areas. 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.

## PFAC Impact and Accomplishments

**15. The law allows a hospital to engage its PFAC in a broad consulting role. Did the PFAC provide advice or recommendations to the hospital on any of the following areas specifically mentioned in the law (Check or circle all that apply):**

- a.  Patient and provider relationships
- b. Institutional review boards
- c.  Quality improvement initiatives
- d.  Patient education on safety and quality matters

**16. Did PFAC members engage in any of the following activities mentioned in the law? (Check/circle all that apply):**

- a.  Members of task forces
- b.  Members of standing hospital committees that address quality (list committees and how many PFAC members serve on each)
- c. Members of awards committees
- d. Members of advisory boards
- e. Participants on search committees and in the hiring of new staff
- f. Co-trainers for clinical and nonclinical staff, in-service programs, and health professional trainees
- g. Participants in reward and recognition programs

**17. Was any of the following public hospital performance information shared with the PFAC? (Check/circle all that apply.)**

- a. Serious Reportable Events
- b. Healthcare-Associated Infections
- c. Department of Public Health (DPH) information on complaints and investigations
- d. Staff influenza immunization rate
- e. Other hospital performance information shared: please describe \_\_\_\_\_

**18. Did PFAC quality of care initiatives relate to any of the following state or national quality of care initiatives: (Check/circle all that apply.)**

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

**19. Describe the PFAC's specific accomplishments in relation to quality of care initiatives during the past year. Please note for each initiative undertaken,**

- a. did the idea arise directly from the PFAC

**Or**

- in all cases b. did a department, committee or unit request PFAC input on the initiatives?

**PFAC Annual Report**

**20. Does the hospital share the PFAC annual reports with PFAC members?**

Yes

**21. How do you make the PFAC report accessible to the public?**

The annual report is available on our website.

**Goals**

**22. Does your PFAC set goals? If yes, what are they? (Please list.)**

We are working to increase our membership. Current members have reached their terms of service.

We are planning to review all our family rooms with the goal of recommending improvements that will allow the rooms to better meet the needs of patients and their families.

We are in the process of selecting choosing one of 2 major projects – discharge education with a focus on assuring the patient understands or assisting with the establishment of a patient care problem solving process.

(Note: As your PFAC sets goals, you should keep in mind the requirements and recommendations in the Massachusetts PFAC law and regulations.)