



**South Shore  
Hospital**

**South Shore Hospital, S. Weymouth, MA**

**2017 Patient and Family Advisory Council Annual Report Form**

The survey questions concern PFAC activities in fiscal year 2017 only: (July 1, 2016 – June 30, 2017).

**Section 1: General Information**

1. Hospital Name: ***South Shore 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.

2a. Which best describes your PFAC?

- We are the only PFAC at a single hospital – skip to #3 below
- We are a PFAC for a system with several hospitals – skip to #2C below
- We are one of multiple PFACs at a single hospital
- We are one of several PFACs for a system with several hospitals – skip to #2C below
- Other (Please describe: \_\_\_\_\_)

2b. Will another PFAC at your hospital also submit a report?

- Yes
- No
- Don't know

2c. Will another hospital within your system also submit a report?

- Yes
- No
- Don't know

3. Staff PFAC Co-Chair Contact:

- 2a. Name and Title: **Rose Di Pietro RN, Chief Transformation Officer**
- 2b. Email: **[rose\\_dipietro@sshosp.org](mailto:rose_dipietro@sshosp.org)**
- 2c. Phone: **781-624-8456**
- Not applicable

4. Patient/Family PFAC Co-Chair Contact:

- 3a. Name and Title: **Julie Kembel**
- 3b. Email: **[jakembel@NLAbooks.com](mailto:jakembel@NLAbooks.com)**
- 3c. Phone: **781-749-5315**
- Not applicable

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

- Yes – skip to #7 (Section 2) below  
 No – describe below in #6

### Section 2: PFAC Organization

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

- Case managers/care coordinators  
 Community based organizations  
 Community events  
 Facebook, Twitter, and other social media  
 Hospital banners and posters  
 Hospital publications  
 Houses of worship/religious organizations  
 Patient satisfaction surveys  
 Promotional efforts within institution to patients or families  
 Promotional efforts within institution to providers or staff  
 Recruitment brochures  
 Word of mouth/through existing members  
 Other (Please describe: \_\_\_\_\_)  
 N/A – we did not recruit new members in FY 2017

8. Total number of staff members on the PFAC: **6**

9. Total number of patient or family member advisors on the PFAC: **18**

10. The name of the hospital department supporting the PFAC is: ***Patient Relations & Service Excellence***

11. The hospital position of the PFAC Staff Liaison/Coordinator is ***Chief Transformation Officer***

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

- Annual gifts of appreciation  
 Assistive services for those with disabilities  
 Conference call phone numbers or “virtual meeting” options  
 Meetings outside 9am-5pm office hours  
 Parking, mileage, or meals  
 Payment for attendance at annual PFAC conference  
 Payment for attendance at other conferences or trainings  
 Provision/reimbursement for child care or elder care

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- Stipends
- Translator or interpreter services
- Other (Please describe: \_\_\_\_\_)

**Section 3: Community Representation**

The PFAC regulations require that patient and family members in your PFAC be “representative of the community served by the hospital.” If you are not sure how to answer the following questions, contact your community relations office or check “don’t know.”

13. Our hospital’s catchment area is geographically defined as: ***South Shore, South of Boston to Cape Cod***

14. Tell us about racial and ethnic groups in these areas (please provide percentages; if you are unsure of the percentages check “don’t know”):

	RACE						ETHNICITY	
	%	%	%	%	%	%	%	
	American Indian or Alaska Native	Asian	Black or African American	Native Hawaiian or other Pacific Islander	White	Other	Hispanic, Latino, or Spanish origin	
14a. Our defined catchment area	<b>&lt;1%</b>	<b>7%</b>	<b>3%</b>	<b>&lt;1%</b>	<b>87%</b>	<b>1%</b>	<b>2%</b>	<input type="checkbox"/> Don't know
14b. Patients the hospital provided care to in FY 2017	<b>&lt;1%</b>	<b>2%</b>	<b>3%</b>	<b>&lt;1%</b>	<b>92%</b>	<b>1%</b>	<b>1%</b>	<input type="checkbox"/> Don't know
14c. The PFAC patient and family advisors in FY 2017					<b>99%</b>		<b>1%</b>	<input type="checkbox"/> Don't know

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15. Tell us about languages spoken in these areas (please provide percentages; if you are unsure of the percentages select “don’t know”):

	Limited English Proficiency (LEP)	
	%	
15a. Patients the hospital provided care to in FY 2017	<b>6%</b>	<input type="checkbox"/> Don't know
15b. PFAC patient and family advisors in FY2017	<b>&lt;1%</b>	<input type="checkbox"/> Don't know

15c. What percentages of patients that the hospital provided care to in FY 2017 spoke the following as their primary language?

	%
Spanish	<b>.28%</b>
Portuguese	<b>.65%</b>
Chinese	<b>.08%</b>
Haitian Creole	<b>.11%</b>
Vietnamese	<b>.13%</b>
Russian	<b>.03%</b>
French	<b>.05%</b>
Mon-Khmer/Cambodian	<b>.01%</b>
Italian	<b>.01%</b>
Arabic	<b>.24%</b>
Albanian	<b>.08%</b>
Cape Verdean	<b>.04%</b>

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15d. In FY 2017, what percentage of PFAC patient and family advisors spoke the following as their primary language?

	%
Spanish	
Portuguese/ Brazilian	1%
Chinese	
Haitian Creole	
Vietnamese	
Russian	
French	
Mon-Khmer/Cambodian	
Italian	
Arabic	
Albanian	
Cape Verdean	

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

- 1. Investigating ways we can increase diversity of members in our current recruitment efforts.**
- 2. Alignment of PFAC efforts with health system strategic plan to move to population health.**
- 3. Recruiting from our local community Brazilian church group to collaborate on health care needs of this population and promote wellness programs.**

*Continued...*

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**Section 4: PFAC Operations**

17. Our process for developing and distributing agendas for the PFAC meetings (choose):

- Staff develops the agenda and sends it out prior to the meeting
- Staff develops the agenda and distributes it at the meeting
- PFAC members develop the agenda and send it out prior to the meeting
- PFAC members develop the agenda and distribute it at the meeting
- PFAC members and staff develop agenda together and send it out prior to the meeting. (Please describe below in #17a)
- PFAC members and staff develop agenda together and distribute it at the meeting. (Please describe below in #17a)
- Other process (Please describe below in #17b)
- N/A – the PFAC does not use agendas

17a. If staff and PFAC members develop the agenda together, please describe the process:

***PFAC Advisor Leadership/Staff Liaison meet for a monthly pre-planning meeting***

18. The PFAC goals and objectives for 2017 were: (check 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 for FY 2017 – Skip to #20

19. The PFAC had the following goals and objectives for 2017:

- 1. Continue the work to advance to a council that supports a system of care.***
- 2. Advance the principles of patient and family centered care throughout the system.***
- 3. Strengthen the legacy of the council and its advisors.***

20. Please list any subcommittees that your PFAC has established:

***Education, Recruitment, HR Interviews, By-laws, Nominations, Strategic planning, PFCC Days, Councils for Home Care, and Cancer Care***

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

- PFAC submits annual report to Board
- PFAC submits meeting minutes to Board
- Action items or concerns are part of an ongoing “Feedback Loop” to the Board
- PFAC member(s) attend(s) Board meetings

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- Board member(s) attend(s) PFAC meetings
- PFAC member(s) are on board-level committee(s)
- Other (Please describe: \_\_\_ PFAC Leaders attend designated board meetings \_\_\_)
- N/A – the PFAC does not interact with the Hospital Board of Directors

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

***PFAC uses email/ specific public distribution lists (PDLs) for agendas, minutes, education, committee work, information updates and progress reports***

### **Section 5: Orientation and Continuing Education**

23. Number of new PFAC members this year: **6**

24. Orientation content included (check all that apply):

- "Buddy program" with experienced members
- Check-in or follow-up after the orientation
- Concepts of patient- and family-centered care (PFCC)
- General hospital orientation
- Health care quality and safety
- History of the PFAC
- Hospital performance information
- Immediate "assignments" to participate in PFAC work
- Information on how PFAC fits within the organization's structure
- In-person training
- Massachusetts law and PFACs
- Meeting with hospital staff
- Patient engagement in research
- PFAC policies, member roles and responsibilities
- Skills training on communication, technology, and meeting preparation
- Other (Please describe below in #24a)
- N/A – the PFAC members do not go through a formal orientation process

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25. The PFAC received training on the following topics:

- Concepts of patient- and family-centered care (PFCC)
- Health care quality and safety measurement
- Health literacy
- A high-profile quality issue in the news in relation to the hospital (e.g. simultaneous surgeries, treatment of VIP patients, mental/behavioral health patient discharge, etc.)
- Hospital performance information
- Patient engagement in research
- Types of research conducted in the hospital
- Other (Please describe below in #25a)
- N/A – the PFAC did not receive training

25a. If other, describe:

***On the job training/mentoring from senior PFAC members during various advisory assignments; more informational than formal training.***



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**Section 6: FY 2017 PFAC Impact and Accomplishments**

The following information only concerns PFAC activities in the fiscal year 2017.

26. The five greatest accomplishments of the PFAC were:

Accomplishment	Idea came from (choose one)	PFAC role can be best described as (choose one)
26a. Accomplishment 1:  <b>Development of a system council</b>	<input checked="" type="checkbox"/> Patient/family advisors of the PFAC <input type="checkbox"/> Department, committee, or unit that requested PFAC input <input checked="" type="checkbox"/> CEO- SSHS	<input type="checkbox"/> Being informed about topic <input type="checkbox"/> Providing feedback or perspective <input checked="" type="checkbox"/> Discussing and influencing decisions/agenda <input type="checkbox"/> Leading/co leading
26b. Accomplishment 2:  <b>System wide-education programs:</b>  -HR interviewing skills  -Mentoring skills	<input checked="" type="checkbox"/> Patient/family advisors of the PFAC <input type="checkbox"/> Department, committee, or unit that requested PFAC input	<input type="checkbox"/> Being informed about topic <input type="checkbox"/> Providing feedback or perspective <input checked="" type="checkbox"/> Discussing and influencing decisions/agenda <input type="checkbox"/> Leading/co leading
26c. Accomplishment 3:  <b>Developed/Scheduled PFCC Days: PFCC Awareness/ Education system wide events</b>	<input checked="" type="checkbox"/> Patient/family advisors of the PFAC <input type="checkbox"/> Department, committee, or unit that requested PFAC input	<input type="checkbox"/> Being informed about topic <input type="checkbox"/> Providing feedback or perspective <input type="checkbox"/> Discussing and influencing decisions/agenda <input checked="" type="checkbox"/> Leading/co leading
26d. Accomplishment 4: <b>Developed sustainable governance infrastructure, examples:</b> <ul style="list-style-type: none"> <li>• Committees</li> <li>• Processes                             <ul style="list-style-type: none"> <li>• Mentoring</li> <li>• Leadership</li> </ul> </li> </ul>	<input checked="" type="checkbox"/> Patient/family advisors of the PFAC <input type="checkbox"/> Department, committee, or unit that requested PFAC input	<input type="checkbox"/> Being informed about topic <input type="checkbox"/> Providing feedback or perspective <input type="checkbox"/> Discussing and influencing decisions/agenda <input checked="" type="checkbox"/> Leading/co leading
26e. Accomplishment 5:  <b>Developed comprehensive advisor &amp; staff liaison handbook</b>	<input checked="" type="checkbox"/> Patient/family advisors of the PFAC <input type="checkbox"/> Department, committee, or unit that requested PFAC input	<input type="checkbox"/> Being informed about topic <input type="checkbox"/> Providing feedback or perspective <input type="checkbox"/> Discussing and influencing decisions/agenda <input checked="" type="checkbox"/> Leading/co leading
26f. Accomplishment 6:  <b>Initiated advisement initiatives</b>	<input checked="" type="checkbox"/> Patient/family advisors of the PFAC	<input type="checkbox"/> Being informed about topic <input checked="" type="checkbox"/> Providing feedback or

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<p><b>with multiple MD groups: Hospitalists, ACO and Specialists/surgeons.</b></p>	<p><input type="checkbox"/> Department, committee, or unit that requested PFAC input</p>	<p>perspective  <input type="checkbox"/> Discussing and influencing decisions/agenda  <input type="checkbox"/> Leading/co leading</p>
<p>26g. Accomplishment 7:  <b>SSH representation at the 7th International Conference on Patient- and Family-Centered Care, July 25-27, 2016 in New York City.</b></p> <ul style="list-style-type: none"> <li>• Oral Presentation by Home Care Patient Advisors</li> <li>• Poster Presentation by Cancer Care Patient Advisors</li> </ul>	<p><input checked="" type="checkbox"/> Patient/family advisors of the PFAC  <input type="checkbox"/> Department, committee, or unit that requested PFAC input</p>	<p><input type="checkbox"/> Being informed about topic  <input type="checkbox"/> Providing feedback or perspective  <input type="checkbox"/> Discussing and influencing decisions/agenda  <input checked="" type="checkbox"/> Leading/co leading</p>

27. The five greatest challenges the PFAC had in FY 2017:

27a. Challenge 1: **PFAC Engagement with Medical Colleagues**

27b. Challenge 2: **Advisement assignments with patient-facing colleagues**

27c. Challenge 3: **Meaningful orientation and continuing education of colleagues about PFCC and our various advisory councils**

27d. Challenge 4: **PFAC Leadership Succession**

27e. Challenge 5:

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28. The PFAC members serve on the following hospital-wide committees, projects, task forces, work groups, or Board committees:

- Behavioral Health/Substance Use
- Bereavement
- Board of Directors
- Care Transitions
- Code of Conduct
- Community Benefits
- Critical Care
- Culturally Competent Care
- Discharge Delays
- Diversity & Inclusion
- Drug Shortage
- Eliminating Preventable Harm
- Emergency Department Patient/Family Experience Improvement
- Ethics
- Institutional Review Board (IRB)
- Lesbian, Gay, Bisexual, and Transgender (LGBT) – Sensitive Care
- Patient Care Assessment
- Patient Education
- Patient and Family Experience Improvement
- Pharmacy Discharge Script Program
- Quality and Safety
- Quality/Performance Improvement
- Surgical Home
- Other - **Facilities/Wayfinding Committee (New Units, Building Task force)**
- N/A – the PFAC members do not serve on these – Skip to #30

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

***Members participating in the hospital wide committees or projects report on their progress to PFAC during the monthly meetings (advisement updates). There is also continuous communication by members (community and staff) / co-chairs and coordinator on these and other topics.***

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

- Institutional Review Boards
- Patient and provider relationships
- Patient education on safety and quality matters
- Quality improvement initiatives

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

- Advisory boards/groups or panels
- Award committees
- Co-trainers for clinical and nonclinical staff, in-service programs, and health professional trainees
- Search committees and in the hiring of new staff
- Selection of reward and recognition programs
- Standing hospital committees that address quality
- Task forces

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

32a. Complaints and serious events

- Complaints and investigations reported to Department of Public Health (DPH)
- Healthcare-Associated Infections (National Healthcare Safety Network)
- Patient complaints to hospital
- Serious Reportable Events reported to Department of Public Health (DPH)

32b. Quality of care

- High-risk surgeries (such as aortic valve replacement, pancreatic resection)
- Joint Commission Accreditation Quality Report (such as asthma care, immunization, stroke care)
- Medicare Hospital Compare (such as complications, readmissions, medical imaging)
- Maternity care (such as C-sections, high risk deliveries)

32c. Resource use, patient satisfaction, and other

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

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

Resource use (such as length of stay, readmissions)

Other (Please describe: \_\_\_\_\_)

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33. Please explain why the hospital shared only the data you checked in Q 32 above:

**Available data is shared openly with our PFAC; specifically information that supports the current advisement and improvement initiatives. Meeting time was shared equally with education, advisement and information distribution. Time constraints only allow us to do so much.**

34. Please describe how the PFAC was engaged in discussions around these data in #32 above and any resulting quality improvement initiatives:

**As in previous years, subject matter experts lead discussions and take PFAC feedback to hospital leaders working on performance improvement in those areas. PFAC members also sit on the Quality Council and Board Level Patient Care Assessment Committee where data and feedback is exchanged with full transparency.**

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

35a. National Patient Safety Hospital Goals

- Identifying patient safety risks
- Identifying patients correctly
- Preventing infection
- Preventing mistakes in surgery
- Using medicines safely
- Using alarms safely

35b. Prevention and errors

- Care transitions (e.g., discharge planning, passports, care coordination, and follow up between care settings)
- Checklists
- Electronic Health Records –related errors
- Hand-washing initiatives
- Human Factors Engineering
- Fall prevention
- Team training
- Safety

35c. Decision-making and advanced planning

- End of life planning (e.g., hospice, palliative, advanced directives)
- Health care proxies
- Improving information for patients and families
- Informed decision making/informed consent

35d. Other quality initiatives

- Disclosure of harm and apology
- Integration of behavioral health care
- Rapid response teams
- Other (Please describe \_\_\_\_\_)

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

Yes

No – Skip to #40 (Section 7)

### Section 7: PFAC Annual Report

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

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

***Julie Kembel & Richard Elliott- Patient and Family Advisors and PFAC Co-Chairs***

41. 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 (Please describe: \_\_\_\_\_)

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:

42. We post the report online.

Yes, link:

[http://www.southshorehospital.org/workfiles/Patients\\_and\\_Visitors/PFAC%20Annual%20Report.pdf](http://www.southshorehospital.org/workfiles/Patients_and_Visitors/PFAC%20Annual%20Report.pdf)

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

Yes, phone number/e-mail address:

**781-624-4047, email [advocacy@sshosp.org](mailto:advocacy@sshosp.org)**

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

Yes, link: <http://www.southshorehospital.org/patient-and-family-advisory-council>

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