
Under Massachusetts law, all PFACs are required to write annual reports each year and to make them available to members of the public upon request. To assist you in collecting information, Health Care For All (HCFA) has developed this revised report template, with the hope that you will use it to complete your report for fiscal year 2015 (October 1, 2014 – September 30, 2015).

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. HCFA recognizes the importance of supporting the work of the PFACs and facilitating cross-PFAC learning and sharing. Your PFAC report should be made publicly available and sent back to us (using your online survey report or the word document) no later than October 1, 2015.

IMPORTANT NOTE: 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 a week on the same internet browser and computer. However, once you hit submit, the results are sent to HCFA and cannot be edited or retrieved.

Hospital Name

Nashoba Valley Medical Center ▾

Year PFAC Established

Prior to 2008 ▾

Staff PFAC Contact Name and Title

Gail Clayton, RN, Dire

Staff PFAC Contact Email and Phone

gail.clayton@steward.

The following information only concerns PFAC activities in the fiscal year 2015.

Our PFAC has (click the best choice):

by-laws

agreed-upon policies and procedures

neither

Our PFAC recruits new members using the following approaches (click all that apply):

Word of mouth

Through care coordinators

Promotional efforts within institution to patients

Through patient satisfaction surveys

Promotional efforts within institution to providers or staff

Through community-based organizations

Through existing members

Through houses of worship

Facebook and Twitter

At community events

Recruitment brochures

Other

Hospital publications

None

Hospital banners and posters

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

Yes

No

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

Yes

No

Chair/Co-Chair hospital position title:

Director, Quality and S

This person is the official PFAC staff liason

Yes

No

Total number of staff members on the PFAC:

7

Total number of current or former patients or family members on the PFAC:

5

The name of the hospital department supporting the PFAC is:

Quality and Safety De

If not mentioned above, the hospital position of the PFAC staff liason is:

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

Provide free parking

Provide on-site child or elder care

Provide meals

Provide reimbursement for attendance at annual PFAC conference

Provide translator or interpreter services

Provide reimbursement for attendance at other conferences or trainings

Provide assistive services for those with disabilities

Provide gifts of appreciation to PFAC members annually

Provide meeting conference call or webinar options

Cover travel expenses to attend conferences

<input type="checkbox"/>	<input type="checkbox"/>
<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	

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:

Our catchment area is made up of the following ethnic and racial groups (please provide percentages):

Race:

American Indian or Alaska Native	<input type="text" value="0%"/>
Asian	<input type="text" value="5%"/>
Black or African American	<input type="text" value="3%"/>
Native Hawaiian or Other Pacific Islander	<input type="text" value="0%"/>
White	<input type="text" value="86%"/>

Ethnicity:

Hispanic or Latino

6%

Not Hispanic or Latino

0%

In FY 2015, the our institution provided care to patients from the following ethnic and racial groups (please provide percentages):

Race:

American Indian or Alaska Native

0%

Asian

1%

Black or African American

2%

Native Hawaiian or Other Pacific Islander

0%

White

92%

Ethnicity:

Hispanic or Latino

5%

Not Hispanic or Latino

0%

In FY 2015, our PFAC patients and family members came from the following ethnic and racial groups (please provide percentages):

Race:

American Indian or Alaska Native

0%

Asian

0%

Black or African American

0%

Native Hawaiian or Other Pacific Islander

0%

White

100%

Ethnicity:

Hispanic or Latino

0%

Not Hispanic or Latino

0%

Our PFAC is undertaking the following activities to ensure appropriate representation of our membership in comparison to our patient or catchment area (describe in 3000 characters or fewer):

1. Continued marketing opportunities at community events.
 2. Continued work with PFAC members to educate members of the community.
 3. Continued work within the hospital patient base to recruit new members.
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Our process for developing and distributing agendas for our PFAC meetings (click the best choice):

The staff develops the agenda and sends it out prior to the meeting

The 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

The PFAC has a collaborative process between staff and patients/family members to develop and distribute the agenda

Other process

None

The PFAC goals set for FY 2015 were (describe in 1500 characters or fewer):

1. Elicit feedback from the PFAC community members regarding new hospital services and community involvement.
2. Review by Committee of patient education programs and materials being utilized at the hospital.
3. Participation in a newly established patient greeter program and use of maps as a tool for guiding patients to services and departments within the hospitals.
4. Participation in the formulation and implementation of an annual community health

The FY 2015 goals were (click the best choice):

Developed by staff and reviewed by PFAC members

Developed by PFAC members and staff

Neither

Our PFAC has the following subcommittees (click all that apply):

Government Relations

Nominations

Emergency Department

Marketing

Education and Communication

Behavioral Health

Family Support

Medication Safety

Policies and Procedures

Hospital Safety

Palliative Care

Other

Annual Report

None

Publications

How does the PFAC interact with the Hospital Board of Directors? (click all that apply)

PFAC submits annual report to Board

PFAC submits meeting minutes to Board

PFAC member(s) attends Board meetings

Board member(s) attends PFAC meetings

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

None of the above

Other

URL/link to the PFAC section of the hospital website:

: www.nashobamed.com

Describe the PFAC's use of email, listservs, or social media (in 3000 characters or fewer):

NVMC only maintains a distribution list of all PFAC members for purposes of meeting announcements, distribution of materials and any other PFAC related business to and from members.

Number of new PFAC members this year:

Our PFAC orientation program this year:

The orientation was provided by:

Number of Staff Members

Number of PFAC Members

The content included (click all that apply):

Meeting with hospital staff

Information on health care quality and safety

A general hospital orientation

History of the PFAC

Information on concepts of patient- and family-centered care (PFCC)

A "buddy program" with old members

Information on patient engagement in research

How PFAC fits within the organization's structure

PFAC policies, member roles and responsibilities

Other

Describe other content (in 3000 characters or fewer):

PFAC goals for the year and necessity for patient confidentiality.

PFAC members are considered hospital volunteers and therefore (click all that apply):

Attend hospital volunteer trainings

Require immunizations or TB checks

Require CORI checks

Other

Not Applicable

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

Yes

No

The following information only concerns PFAC activities in the fiscal year 2015.

The three greatest accomplishments of our PFAC were:

Accomplishment 1 (describe in 3000 characters or fewer):

Participation in the development of an annual community health needs assessment survey that when administered to our community population will be able to guide goal development for new and existing services and better utilize our hospital resources.

The idea for Accomplishment 1 came:

Directly from the PFAC

From a department, committee, or unit that requested PFAC input

Accomplishment 2 (describe in 3000 characters or fewer):

Discussion and participation into the development of a volunteer greeter program within the hospital that will direct patients and visitors to the services and departments they seek. In addition a map system was discussed and being developed that will aid patients and visitors when greeters are not available.

The idea for Accomplishment 2 came:

Directly from the PFAC

From a department, committee, or unit that requested PFAC input

Accomplishment 3 (describe in 3000 characters or fewer):

Continued development and feedback from the group on varied patient education materials such as the patient handbook and materials specific to disease entities that affect the greatest number of our populations at the hospital.

The idea for Accomplishment 3 came:

Directly from the PFAC

From a department, committee, or unit that requested PFAC input

(If not already listed above) Our PFAC's greatest accomplishments in relation to quality of care initiatives include:

Accomplishment 1 (describe in 3000 characters or fewer):

The idea for Accomplishment 1 came:

Directly from the PFAC

From a department, committee, or unit that requested PFAC input

Accomplishment 2 (describe in 3000 characters or fewer):

The idea for Accomplishment 2 came:

Directly from the PFAC

From a department, committee, or unit that requested PFAC input

Accomplishment 3 (describe in 3000 characters or fewer):

The idea for Accomplishment 3 came:

Directly from the PFAC

From a department, committee, or unit that requested PFAC input

The greatest three challenges our PFAC had in FY 2015:

Challenge 1 (describe in 3000 characters or fewer):

Recruitment of new members.

Challenge 2 (describe in 3000 characters or fewer):

Finding times and days convenient for all members. We have some very community minded PFAC members who have other responsibilities during the day and have found the evenings to be better for meetings.

Challenge 3 (describe in 3000 characters or fewer):

Getting materials to all committee members in a timely manner so that preliminary work can be done outside meetings, thus giving the committee more informed discussion time.

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

Quality improvement initiatives

Patient education on safety and quality matters

Patient and provider relationships

Institutional Review Boards

Other

None

Describe other advice/recommendations (in 1500 characters or fewer):

New programs and services

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

Served as members of task forces

Served as members of awards committees

Served as members of advisory boards/groups or panels

Served on search committees and in the hiring of new staff

Served as co-trainers for clinical and nonclinical staff, in-service programs, and health professional trainees

Serve on selection of reward and recognition programs

Serve as members of standing hospital committees that address quality

Other areas of service not listed above

None

More details about PFAC member activities:

Number of members serving on task forces	<input type="text"/>
Number of members serving on awards committees	<input type="text"/>
Number of members serving on advisory boards/groups or panels	<input type="text"/>
List names of above groups and number of members serving on each	<input type="text"/>
Number of members serving on search committees	<input type="text"/>
Number of members serving as co-trainers	<input type="text"/>
Number of members serving as members of hospital quality committees	<input type="text"/>
List names of above groups and number of members serving on each	<input type="text"/>
List names and number of members participating in other areas of service	<input type="text"/>

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

<input checked="" type="checkbox"/> Serious Reportable Events	<input checked="" type="checkbox"/> Joint Commission surveys
<input checked="" type="checkbox"/> Healthcare-Associated Infections	<input checked="" type="checkbox"/> Hospital Compare
<input type="checkbox"/> Department of Public Health (DPH) information on complaints and investigations	<input type="checkbox"/> Family satisfaction surveys
<input type="checkbox"/> Staff influenza immunization rate	<input checked="" type="checkbox"/> Quality of life data
<input checked="" type="checkbox"/>	<input type="checkbox"/>

Patient experience/satisfaction scores	Rapid response data
Patient complaints	Other
Patient Care Link	None

Describe the process by which public hospital performance information was shared (describe in 1500 characters or fewer):

Shared at committee meetings through departmental and standing hospital reports.

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

Healthcare-Associated Infections	Health care proxies/substituted decision making
Rapid response teams	End-of-life planning (e.g. hospice, palliative, advanced directives)
Hand-washing initiatives	Care transitions (e.g. discharge planning, passports, care coordination, and follow-up between care settings)

Checklists

Observation status for Medicare patients

Disclosure of harm and apology

Mental health care

Fall prevention

Other program

Informed decision making/informed consent

None

Improving information for patients and families

The hospital shares the PFAC annual reports with PFAC members:

Yes

No

Massachusetts law requires that the PFAC report be available to the public. We (click the best choice):

Post the report online

Provide a phone number or email to use for accessing the report

Other

Thank you for helping HCFA collect this information from your hospital PFAC. If you have any questions or concerns, please contact Margo Michaels at mmichaels@hcfama.org

After viewing a summary of your responses, you will be provided with an option to save them for your hospital records.

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