



SPAULDING HOSPITAL™
FOR CONTINUING MEDICAL CARE

CAMBRIDGE

Patient and Family Advisory Council (PFAC)

2018 Annual Report

Established June 2010

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In compliance with Massachusetts regulations (105 CMR 130.1800 and 130.1801) related to Patient and Family Advisory Councils (PFAC), Spaulding Hospital for Continuing Medical Care, Cambridge (SHC) is submitting this 2018 Annual Report.

Facility Description:

Spaulding Hospital Cambridge (SHC) is a 180-bed long-term acute care hospital which draws patients from the greater Boston area as well as New Hampshire, Vermont, Maine, Rhode Island, Connecticut, New York and abroad. Although we are located in Cambridge, Massachusetts, Cambridge residents account for just a small percentage of our total patient population. 83% of our patient population is white. African Americans account for 7% of our population, patients of Hispanic/Latino/Spanish origin account for 3%, Asians 5% and “Other” 2%.

Purpose and Goals:

The purpose of our PFAC is to foster communication between the communities we serve and SHC to identify needs and priorities of patients and families, share the strategic goals and plans of SHC and to provide feedback to SHC on these goals and plans. This feedback positively impacts the policies, procedures, programs, evaluations and general operations of the hospital to enable SHC to better meet the needs and priorities of patients and families.

Recruitment:

PFAC members are recruited by asking SHC staff members and current PFAC members to identify patients and/or family members/caregivers who would engage in meaningful discussion and provide valuable feedback to the hospital. These patients, family members or caregivers may have had varying experiences with the hospital. Once identified, a council member will

contact him/her to discuss the purpose and goals of the council and the time commitment required to participate.

Council Membership:

Over the past year, the council membership remained consistent. We have been and continue to work on recruiting new patient/family members, and recruitment remains a topic of discussion as well as an ongoing goal for our PFAC. Our council is currently composed of four former patients, one community member and four staff members (Joanne Fucile, Director of Nursing and V.P. of Operations for SHC; Mary O'Quinn, Senior Director of Quality and Compliance; Michael Gregory, M.D.; Nancy Stiles, P.T.)

Meetings:

Our PFAC meets on a bi-monthly basis from 5:30-7:00 p.m. PFAC members are provided with free parking and a light meal for these meetings and assistance is available for those members with disabilities. We also have the capability for web-based or phone-based conferencing to allow members who live at a great distance or who have significant mobility challenges to "attend" the meetings. The meeting agenda is established through feedback from staff and patient/family PFAC members or outside groups that may interact with the hospital, and includes updates on current/future hospital initiatives, staff development and hospital facilities.

Agenda topics this year have included:

1. Discussion regarding the Quality Board Report
2. Budget challenges and areas where we can promote our facility to increase volume
3. Partners 2.0 project and the potential implications for SHC
4. Joint Commission Survey
5. LTRAX Patient Satisfaction Survey
6. Patient Safety Awareness Week
7. Benefits and challenges of EPIC documentation system and implications for patient care
8. Ongoing telehealth collaborations with BWH and MGH and how these have expanded
9. New member recruitment and orientation
10. Increasing patient/family member involvement in the "mechanics" of developing meeting agendas and goals for the upcoming year, etc.
11. Massachusetts CARE Act
12. Update on Avasys Patient Monitoring System
13. Massachusetts Nursing Association ballot information and mandated staffing ratios

Accomplishments:

1. Provided feedback on new patient satisfaction survey to be given to long-term (>60 day LOS) patients
2. Provided feedback on Patient Satisfaction Survey for patients being discharged to home to help increase response rate

3. Provided feedback on the budget challenges faced by SHC that were presented by senior management
4. Provided feedback on activities planned for Patient Safety Awareness Week

Challenges:

1. Member recruitment remains our biggest challenge and may be related to our large geographic catchment area and the medical complexity of our patient population
2. Increasing patient/community member participation with development of the agenda and setting priorities for the PFAC
3. Consistent meeting attendance

Goals and Objectives for 2018:

1. Recruit new members
2. Increase patient/family/community member participation with developing meeting agendas, setting priorities for the PFAC and supporting the bi-monthly meeting process

Goals for the upcoming year:

1. Expand membership
2. Increase patient/family/community member participation with developing meeting agendas, setting priorities for the PFAC and supporting the bi-monthly meeting process.
3. Provide orientation for new members

