## Patient and Family Advisory Council (PFAC) Annual Report Form



Patient and Family Advisory Councils (PFACs) are an integral part of health care organizations. All licensed hospitals, as well as accountable care organizations devoted to MassHealth members, are required to convene a PFAC on a regular basis and tap its members' expertise and lived experience to help the health care organization better meet the needs of its patients.

The Betsy Lehman Center for Patient Safety oversees PFAC work in Massachusetts. Read more on the Center's website.

Use this form to capture the essential activities of your PFAC during the past fiscal year (July 1 – June 30) and submit to the Betsy Lehman Center by October 1. If your hospital has multiple PFACs, please fill it out for the work of your hospital-wide PFAC, and use the last section to describe the work of any additional PFAC groups. The Center will generate a report from the information submitted and return it to you to distribute throughout the organization and post to your organization's website. The Center will also aggregate information and share an annual report of all PFAC activities in the state.

## **SECTION I: GENERAL INFORMATION**

1.	Hospital name: UMass Memorial Health at Milford Regional Medical Center	
2.	How many PFACs does your hospital have in total? 1	
3.	The information on this form reflects the work of a PFAC that serves as: <ul> <li>● The sole PFAC at our hospital, ACO, or organization</li> <li>○ A hospital-wide PFAC, but there are additional department, unit, population-specific or specialty</li> <li>○ A hospital department, unit, or specialty PFAC</li> <li>○ A hospital-based PFAC that also serves an ACO</li> <li>○ A system-wide PFAC</li> </ul>	y PFACs as wel
4.	Patient/family co-chair:	
	a. Name: David Frost	
	b. Email address: dmfro3535@yahoo.com	
5.	Hospital co-chair:	
	a. Name: Maureen Harris	
	b. Title: Infection Control Manager	
	c. Email address: MAUREEN.HARRIS2@umassmemorial.org	
	d. Phone number: 508-422-2304	
6.	PFAC membership [as of June 30]:	
	a. Total number of members: 16 to 20	
	b. Total number of patient/family advisers: 6 to 10	
	c. Total number of staff advisers: 6 to 10	

7.	Prefer	erred PFAC membership:			
	a.	Total number of members: 21 to 25			
	b.	Total number of patient/family advisers: 11 to 15			
	c.	Total number of staff advisers: 11 to 15			
8.	If pati	atient/family members of the PFAC are subject to term limits, please select the length of terms: 2 years			
9. Which recruiting efforts does your hospital use to identify and attract new PFAC members from the (select all that apply)				y?	
	☐ Clin☐ Dis☐ Ho☐ Gri	fter visit summary or survey messages inicians' recommendations iscussions with people in the clinic ospital website rievances amphlets	<ul> <li>✓ Patient/family feedback</li> <li>✓ Social media</li> <li>☐ Tables at hospital entrances</li> <li>☐ Visits to the units</li> <li>✓ Word of mouth</li> <li>Other:</li> </ul>		
10	How c	often does your PFAC meet? <b>Monthly</b>			
10.		ner, please specify: We did not meet in July, August, o	or January		
	11 00110	vio did not mode in daily, ragust, c	our during the second of the s		
11.	11. How do you typically convene your PFAC? A mix of both in-person and virtually				
	If a mix, please describe: We offer zoom for anyone who cannot make it in				
12. How often do PFAC members engage in these ways with initiatives presented to them? (Please response				h.)	
	a.	Approval: The department asks for approval from t	he PFAC on a completed initiative Rarely		
	b.	Feedback: The department asks the PFAC for input	on a project in progress Rarely		
	C.	Codesign: The PFAC is involved at the inception of	the project Rarely		
	d.	Other, please specify:			
		We are starting to engage with departments to invo	olve PFAC feedback more in the		

## **SECTION II: ABOUT THE COMMUNITY**

- 13. State regulations call for hospital PFAC membership to be reflective of the community it serves. Two sets of data can help better understand the racial/ethnic makeup of the community and primary languages spoken.
  - a. Race/Ethnicity: Use the links in the table below to find data about the race and ethnicity of the community served by your hospital. If your hospital gathers this information differently, please enter it here.

	Percentage of population		
	Catchment area	Patients served	
White	85.9%	82.99%	
Black	2.0%	2.22%	
Hispanic	4.9%	4.62%	
Asian	4.1%	3.14%	
Native Hawaiian and Pacific Islander (NHPI)	0%	.06%	
American Indian or Alaska Native (AIAN)	.2%	.11%	
Other	2.2%	6.86%	
Multi			

b. Languages spoken: The best source will be within your hospital. You may need to ask colleagues in community relations, patient experience, informatics or other record-keepers for this information.

	Percentage of patient population	
Spanish	2.10	
Portuguese	3.57	
Chinese	.15	
Haitian Creole	.30	
Vietnamese	.03	
Russian	.07	
French	.02	
Mon-Khmer/Cambodian	0	
Italian	.04	
Arabic	.30	
Albanian	.02	
Cape Verdean	0	
Limited English proficiency (LEP)		

c. How well do the demographics of your PFAC match the demographics of your hospital's patient population? Fair

14. There are many ways to describe the array of perspectives in a community, including age, income, gender, sexual orientation, gender identity, disability, veteran status, career, chronic or rare disease status, religion, etc. How would you describe your PFAC membership's representation of the community it serves more broadly?

Milford Regional's PFAC is committed to continuing its efforts of incorporating different perspectives that will enhance our patient-centered care.

Currently our membership represents a number of different perspectives, however, the Council recognizes the need to recruit additional members that represent more of our service area and are currently working on a recruitment campaign to do so.

15. Describe any strategies and activities during the last year to align PFAC membership with the diversity of the community served by your organization.

We are working to get an online application posted to our website.

We have submitted an article on PFAC to a local newspaper that distributes to thousands of homes.

We use grievances that have been filed when appropriate.

## SECTION III: KEY ACCOMPLISHMENTS AND IMPACT

- 16. How often do you measure the impact of the PFAC on initiatives? Never
- 17. How often do you track outcome metrics related to PFAC advice? (e.g., improvement in patient experience scores, reduction in falls, etc.) **Never**
- 18. How often do you track process metrics? (e.g., number of meetings, number of initiatives, etc.) Sometimes
- 19. Describe key work accomplished by the PFAC last year. For example, in what ways did the PFAC provide feedback/ perspective, lead or co-lead programs and initiatives, or influence the institution's financial and programmatic decisions? Include at least three accomplishments.

The PFAC held an elder wellness fair to share resources for our community that may be of assistance to our elder population. We are holding our second one in 2026. We updated our by-laws

We shared the joint venture of Shields joining our imaging department and feedback from the PFAC Provided feedback on interpreter services and organizational documents. Feedback was provided and prompted the organization to translate our documents into Haitian Creole as a new language that entered the market secondary to the migrant/refugee population that were housed in Milford and Franklin

20.	☐ New☐ Pres☐ Rep☐ Wor	rd of mouth currently do not promote	
21	Did +b a	becauted for a principal and exchine characite goods for the year with the DEAC manufactoring	No
21.	Did the	hospital/organization leadership share its goals for the year with the PFAC membership?	NO
22.	Did the	work accomplished by your PFAC help advance the organization's goals? No	
	Please	describe:	
23.	What w	vere the greatest challenges your PFAC faced?	
		Membership/Enrollment	
		Financial assistance with projects	
		Not knowing the hospital goals is challenging for PFAC to decide what areas to focus on.	
СТІО	N IV: S	AFETY	
d it's d	consider	the prevention of harm to patients while receiving health care. It's a fundamental principle ed the foundation of high-quality care. Patient and family input and insight about safety cossential component of safety improvement work.	

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- 24. For each of the following items, indicate your PFAC's level of involvement.
  - Patient/family advisers were represented at board meetings: Never a.
  - Patient/family advisers were consulted on safety goal-setting and metrics: Occasionally b.
  - Patient/family advisers participated in safety improvement initiatives: Occasionally c.

	Feedback		
SECTION V: A	DDITIONAL INFORMAT	TION	
☐ Beł Sub ☐ Ber ☐ Car ☐ Cor ☐ Cor ☐ Crit ☐ Cul ☐ Dis	navioral Health/ estance Use reavement and of Directors re Transitions de of Conduct mmunity Benefits tical Care turally Competent Care charge Delays	our organization on which a PFAC membe  ☐ Diversity and Inclusion ☐ Drug Shortage ☐ Eliminating Preventable Harm ☐ Emergency Department Patient/ Family Experience Improvement ☐ Ethics ☐ Institutional Review Board (IRB) ☐ Lesbian, Gay, Bisexual,     Transgender and Queer     (LGBTQ+) ☐ Patient Care Assessment	<ul> <li>□ Patient Education</li> <li>☑ Patient and Family Experience Improvement</li> <li>□ Pharmacy Discharge Script Program</li> <li>☑ Quality and Safety</li> <li>☑ Quality/Performance Improvement</li> <li>□ Surgical Home</li> <li>Other:</li> </ul>
27. Are th	Elder Wellness Fair 2025. initiative. There were over	os or projects you would like to highlight? We had a workgroup of 6-8 people who 20 vendors that attended such as our sti gencies, a physician who talked about ad	worked on this roke coordinator, elder
SECTION VI:	LOOKING AHEAD		
28. Does y	our PFAC have goals for the	current year? Yes	
a.	If yes, what are your PFAC's Creating a map for visitors Recruitment Elder Wellness Fair 2026	·	

25. Summarize your PFAC's contributions to patient safety work at your organization.

29.	Do these goals support the organization's goals and priorities for the year? Yes, the goals directly rel	а
	a. If yes, in what ways do these goals support the organization's goals and priorities?	
	It will benefit the patient experience. It can be frustrating for patients to come and not be able to find their way through the hospital. Having a map will help keep our patients and their loved ones from being lost and feeling frustrated which will impact their experience as a whole.	
30.	Is there anything else your hospital would like to highlight that has not been captured above?	
31.	This report was prepared and reviewed by:	

- a. Name: Kellie Karpouzis
- b. Title: Patient Relations/Service Excellence Specialist
- c. List additional people's names and titles as needed below:

David Frost- community co-chair Bert Thurlo-Walsh facilitator

32. This report is for the state's fiscal year ending June 30, 2025

