

***Braintree Rehabilitation Hospital Patient and Family Advisory Council (PFAC)  
Annual Report 2011***

<b><i>COMMITTEE ITEMS</i></b>	<b><i>RESPONSE TO COMMITTEE ITEMS</i></b>	<b><i>TIMELINE</i></b>
<b>Hospital Council Policies and Procedures</b> - MA 130.1800 and 130.1801 required policies and procedures		
<p>A hospital shall develop and implement written policies and procedures for the Council, which shall address, at a minimum, the following:</p> <p><b>Purpose and goals:</b> What is the Council's purpose and goals?</p>	<p><b>Purpose:</b> To provide a forum that enables patients and families to have direct input and influence on services, programs and policies of Braintree Rehabilitation Hospital (BRH).</p> <p><b>Goals:</b></p> <ul style="list-style-type: none"> <li>• To ensure the care at BRH is patient and family centered.</li> <li>• To search for continued ways to improve patient safety.</li> <li>• To collaborate with patients/families so that concerns raised regarding quality of care can be responded to promptly and effectively.</li> <li>• To improve patient and family satisfaction.</li> <li>• To help guide BRH's priorities and planning.</li> <li>• To further build a positive relationship between BRH and members of the community</li> </ul>	<b><i>Established May 24, 2010 and ongoing</i></b>
<p><b>What qualifications does a prospective Council Member need to meet?</b></p>	<p><b>The following qualifications are considered during the application process:</b></p> <ul style="list-style-type: none"> <li>• Ability to share insights/experience</li> <li>• Listen well</li> <li>• See beyond his/her own personal needs/experiences</li> <li>• Respectful of others</li> <li>• Interact well with others</li> <li>• Interact with many different types of people</li> <li>• Be empathetic</li> </ul> <p>BRH staff (inpatient and outpatient) are also asked to nominate current or former patients and family members for consideration to be council members. Potential candidates were also nominated from the</p>	<b><i>Ongoing</i></b>

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	2009 and 2010 Patient Recognition Nominees. Consideration was also given to active peer visitors. All new applications are reviewed by the BRH PFAC Committee members. In May 2011 2 new members were selected to participate in the Council. The Council gave delegated authority to the 2 co-chairs to conduct the initial interviews and final possible candidates were submitted to the Council for approval. All but 1 member of 2010 Council agreed to remain on the Council for a second year term. A vacant seat was also filled to account for the two new members added to the committee. 1 new member is a former patient and 1 is a family member of a former patient.	
<b>Has the hospital established selection and retention criteria for Council Members?</b>	The original selection criteria remain in use.	<b><i>Ongoing</i></b>
<b>Are the selection criteria in use?</b>		
<b>Did the hospital develop a Council Member application form(s)?</b>	The attached document was used as the application for consideration for the committee.	<b><i>Ongoing</i></b>
<b>Briefly describe the hospital's Council member recruitment plan(s)?</b>	The hospital will continue to recruit new members via the same process as the recruitment described above.	<b><i>Ongoing</i></b>
<b>Where and how is the list of potential Council members and staff advisors kept and updated – name, role, contact info?</b>	The list of active Council members and their contact information is maintained by the Case Management Department.	<b><i>Ongoing</i></b>
<b>What is the makeup of the Council?</b>	The current Council consists of 8 members and 1 staff member. Six of the members are serving a second year term, including a chair-person, and two are new members to the committee.	<b><i>Ongoing</i></b>
<b>What is the hospital's established number of patient and family members?</b>	The Council shall consist of 8-10 members comprised of patients, family and staff. Currently there are 8 Council members and 1 staff member.	<b><i>Ongoing</i></b>
<b>What is the hospital's established number of staff members?</b>	BRH does have 1 staff person who serves on the Council, The Director of Case Management.	<b><i>Ongoing</i></b>

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<b>How do the hospital's Council members represent the population served at the hospital?</b>	The Council is comprised of former patients and 2 family members and is a cross section of ages and diagnosis groups, both inpatient and outpatient are represented.	<b><i>Ongoing</i></b>
<b>What is the established process for the election of officers?</b>  <b>Describe the process for the election of Council officers.</b>	The Council voted to elect the patient/family co-chair officer to lead with the 1 staff representative on the committee.	<b><i>Ongoing</i></b>
<b>What is the hospital's structure of the Council?</b>  <b>Is a patient or family member the co-chair?</b>	A patient/ family member will be the Co-chair along with 1 staff member.	<b><i>Ongoing</i></b>
<b>Is there a Staff Liaison, co-liaison, Co-Leaders?</b>	The Director of Case Management is the current staff co-chair.	<b><i>Ongoing</i></b>
<b>Which department(s) is responsible for organizing the Council?</b>	The Case Management Department in conjunction with the Patient Advocate does organize the Council's activities at this time. The goal is that after a Council member co-chair is elected, that the duties will be more equally shared.	<b><i>Ongoing</i></b>
<b>What are the Council members' terms of service?</b>  <b>What is the hospital's established number of years of commitment as a Council member?</b>	The hospital has established 1 and 2 year terms with a preference for 2 year terms.	<b><i>Ongoing</i></b>
<b>What are the hospital's attendance expectations?</b>	The hospital's bylaws for the Council reference a Council member becoming in-active if they miss more than 50% of the meetings or two consecutive meetings. At the 9/20/10 meeting the Council did vote to adopt an "excused" category for some absences (unexpected and short in duration) that will not be counted against your attendance. All others will be viewed as "absent" and will be counted toward the attendance policy. The Council members will need to vote regarding the difference for each situation. The majority vote will be the final decision.	<b><i>Ongoing</i></b>

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<b>What are the Council members' duties?</b>	The Council members are charged with identifying topics of interest and then identifying the priority area(s) for improvement. This has required such things as meetings with key hospital personnel, and conducting an in-service with staff.	<b><i>Ongoing</i></b>
<b>Is the Council identifying work that could be done by a subgroup of the Council?</b>	Currently there are no sub-groups that have formed outside of this council.	<b><i>Ongoing</i></b>
<b>What are the existing activities in the hospital that may be incorporated into the Council agendas?</b>	The two identified initiatives decided upon by the Council does represent what BRH's everyday focus is on achieving for the population we serve.	<b><i>Ongoing</i></b>
<b>What topics/issues has the Council decided to work on?</b>	<p>The Council has achieved the following since September 2010:</p> <ul style="list-style-type: none"> <li>• The Council members have participated in an in-service to the staff in April 2011 in which they explained the value of patient choice when arranging discharge follow-up services and care. This event was well attended by staff and extremely well received as well.</li> <li>• The Council has reviewed the discharge paperwork that patient's received and provided input regarding this.</li> <li>• The Council has had several meetings with BRH's Director of Business development around marketing efforts regarding BRH. The Council has also met with the new BRH ad agency so that their input could impact BRH's marketing strategy plan. This goal will continue into the 2011-2012 focus plan for the committee.</li> <li>• The council has spent time garnishing feedback from 2 council members who have had recent inpatient stays at BRH this year. The council has also been learning about the</li> </ul>	<b><i>September 2010- Septemeber 2011</i></b>

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	STAAR initiative and the role the council may play regarding this.	
<b>Describe the hospital's policies on Council member orientation, training and continuing education.</b>	Each Council member is introduced to the regulation and policy during the candidacy selection process. All future candidates will be oriented in the same manner.	<b><i>May 24, 2010 and Ongoing</i></b>
<b>Have orientation, training, and continuing education plans for members of the Council been developed and implemented?</b>		
<b>How often is orientation available to patient/family and staff Council members?</b>	As per BRH's volunteer policy, orientation will be repeated annually for all members serving a second year term.	<b><i>Ongoing</i></b>
<b>What are the hospital's objectives for the orientation?</b>	To ensure that each Council member is certified as a volunteer in case interaction is needed with current inpatients/outpatients and/or family members.	<b><i>Ongoing</i></b>
<b>What are the components of hospital's orientation program?</b>	The BRH orientation consists of a TB test, a successful CORI check, 2 favorable reference checks, a picture ID badge, signing of a Volunteer Job Description and the BRH volunteer orientation packet.	<b><i>Ongoing</i></b>
<b>Who will be conducting the orientation?</b>	The orientation will be facilitated by the staff Council member and may/will include staff from ancillary departments such as Occupational Health and Human Resources.	<b><i>Ongoing</i></b>
<b>What training is available for Council members?</b>	The orientation process serves as the training for members.	<b><i>Ongoing</i></b>
<b>What continuing education is available for Council members?</b>	As of this time the Council has not identified any continuing education needs.	<b><i>Ongoing</i></b>
<b>Describe the general roles of members of the Council, which may include the following:</b>	The Council members are aware of the option to potentially serve ad hoc on other current hospital committees and have not indicated a preference to do so at this time.	<b><i>Ongoing</i></b>
<b>Do Council members participate on hospital committees, task forces and/or advisory boards?</b>		
<b>Do Council members participate in the review of publicly-reported quality information?</b>	At this time the Council has identified their areas of interest, however, review of publicly reported hospital data can be discussed as a future initiative.	<b><i>Ongoing</i></b>
<b>Do Council members participate on committees addressing patient safety issues?</b>	At this time the Council members do not participate on any patient safety committee.	<b><i>Ongoing</i></b>

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<b>Do Council members participate on search committees and in the hiring of new hospital staff?</b>	No	<b><i>Ongoing</i></b>
<b>Do Council members participate in reward and recognition programs?</b>	Yes, the council members are invited to reward ceremonies and 2 members were present at a Patient Recognition Award ceremony that occurred at BRH on 9/20/11. This ceremony recognizes former BRH patients who staff has nominated as being positive achievers in their rehabilitation course.	<b><i>Ongoing</i></b>
<b>Do Council members participate as co-trainers for clinical and non-clinical staff, in-service programs, and health professional trainees?</b>	No	<b><i>Ongoing</i></b>
<b>Do Council members participate in any other role in accordance with the hospital's policies and procedures?</b>	No	<b><i>Ongoing</i></b>
<b>Describe the responsibilities of members of the Council, including policies that address confidentiality of patient information.</b>  <b>What are the responsibilities and policies that address confidentiality of patient information for Council Members?</b>	All council members are oriented to Confidentiality expectations during the orientation process and on an annual basis for those council members serving more than a 1 year term.	<b><i>Ongoing</i></b>
<b>Required policies and procedures :</b>	<b>The BRH PFAC does adhere to the following regulatory guidelines:</b> (1) The Council shall meet at least quarterly. (2) Minutes of Council meetings shall be maintained for a minimum of five years. (3) Minutes of Council meetings including Council accomplishments shall be transmitted to the hospital's governing body. (4) At least 50% of the Council members shall be current or former patients or family members and should be representative of the community served by the hospital.	<b><i>Ongoing</i></b>
<b>How often does the Council meet?</b>	The Council will meet at a minimum quarterly. This past year the council has voted to meet every month, thus has convened 12 times over this past year.	<b><i>Ongoing</i></b>

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<b>Acknowledgement and confirmation that the hospital will maintain minutes for a minimum of five years.</b>	BRH will maintain meeting minutes for each meeting and retain these for a minimum of 5 years as is required per regulatory standards.	<b><i>Ongoing</i></b>
<b>How are the Council minutes transmitted to the hospital's governing body?</b>	The minutes will be forwarded by the staff co-chair to the Governing Body for review on a quarterly basis.	<b><i>Ongoing</i></b>
<b>Confirmation that at least 50% of the Council members are current or former patients or family members and are representative of the community served by the hospital.</b>	The Council does meet this requirement.	<b><i>Ongoing</i></b>
<b>Determine the support your Council will need. How many staff will be needed as co-liason/co-leads?</b>	The hospital has identified 1 standing staff Council member (The Director of Case Management) however, other members of the Leadership team are available on an Adhoc basis. The CEO of BRH has sat in on several meetings.	<b><i>Ongoing</i></b>
<b>How much administrative support time and resources are needed to support the Council?</b>	BRH leadership has allotted the CM Assistant for administrative support in terms of transportation assistance, meals, scheduling, meeting minutes, and correspondence with the council members.	<b><i>Ongoing</i></b>
<b>What costs associated with Parking/Transportation coverage or reimbursement is available for Council members?</b>	BRH is willing to provide (and has provided) some assistance with travel that is agreed upon by the hospital and the Council member.	<b><i>Ongoing</i></b>
<b>What is the budget associated with the Council?</b>	BRH leadership has allotted expenses related to the committee to include postage, printing, food, transportation, etc. This is coordinated through the Case Management Department.	<b><i>Ongoing</i></b>
<b>Achieving and Maintaining Success with Council. What accomplishment(s) has the Council achieved this year?</b>	The Council's first meeting was May 24, 2010. Since then the council has met every month at their request, even though they are only required by bylaws to meet quarterly. In May 2011 there was a celebration to honor the members service on the council. This was well attended by BRH leadership as well as guest of council members. The Council has achieved the following since September 2010: <ul style="list-style-type: none"> <li>• The Council members have participated in an in-</li> </ul>	<b><i>Ongoing Ongoing</i></b>

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	<p>service to the staff in April 2011 in which they explained the value of patient choice when arranging discharge follow-up services and care. This event was well attended by staff and extremely well received as well.</p> <ul style="list-style-type: none"> <li>• The Council has reviewed the discharge paperwork that patient's received and provided input regarding this.</li> <li>• The Council has had several meetings with BRH's Director of Business development around marketing efforts regarding BRH. The Council has also met with the new BRH ad agency so that their input could impact BRH's marketing strategy plan. This goal will continue into the 2011-2012 focus plan for the committee.</li> <li>• The council has spent time garnishing feedback from 2 council members who have had recent inpatient stays at BRH this year.</li> <li>• The council has also been learning about the STAAR initiative and the role the council may play regarding this.</li> </ul>	
<b>How will the hospital track accomplishments?</b>	The Council will track accomplishments via meeting minutes and/or any other mechanism the Council deems appropriate to measure the effectiveness of an action plan.	<b><i>Ongoing</i></b>
<b>Who will track accomplishments?</b>	Meeting minutes are maintained by staff representation on the Council.	<b><i>Ongoing</i></b>
<p><b>PFAC Agendas</b></p> <p><b>What were the Council's agenda items for the first Council meeting(s)?</b></p>	The Initial Meeting served to further review the Council objectives and served as the mechanism for the orientation process of becoming a Council member. The next meeting voted in the Bylaws and started to identify potential initiatives.	<b><i>Ongoing</i></b>

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<p><b>What are the Council's proposed agenda items for the next Council meeting(s) (September 2011-September 2012)?</b></p>	<p>The Council has agreed to the following 3 initiatives to begin working on over the next few meetings:</p> <ul style="list-style-type: none"> <li>• <b>Continued participation in marketing feedback and treatment plans</b></li> <li>• <b>Focus on active participation surrounding the STAAR initiative</b></li> <li>• <b>Focus on establishing an active volunteer program for the hospital</b></li> </ul>	<p><b><i>October 1, 2011 onward</i></b></p>
<p><b><i>PFAC ANNUAL REPORT</i></b></p> <ul style="list-style-type: none"> <li>• <b><i>Finalize and Approve PFAC Annual Report</i></b></li> </ul>	<p>The Governing Board is set to approve this annual report for 2011.</p>	<p><b><i>September 30,2011</i></b></p>
<p><b><i>HOSPITAL PFAC OPERATIONAL</i></b></p>	<p>The PFAC became operational on 5/24/10.</p>	<p><b><i>October 1, 2010</i></b></p>
<p><b><i>PFAC ANNUAL REPORT PUBLICLY AVAILABLE (to patients, staff, general public, and MA DPH upon request)</i></b> The hospital shall make the reports required in 105 CMR 130.1800 and 130.1801 publicly available through electronic or other means, and to the Department upon request.</p>		<p><b><i>October 1, 2010 and ongoing</i></b></p>

**Submitted by:** \_\_\_\_\_

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