



BOSTON MEDICAL CENTER ACCESSIBILITY REPORT 2017



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1. INTRODUCTION

Boston Medical Center (BMC) is a private, not-for-profit, 487-bed, academic medical center located in Boston's historic South End. The hospital is the primary teaching affiliate for Boston University School of Medicine. BMC emphasizes community-based care, with its mission to provide consistently accessible health services to all. The largest safety net hospital in New England, BMC provides a full range of pediatric and adult care services, from primary care and family medicine to advanced specialty care.

This is the third report prepared under the requirement of Section VIII of the Memorandum of Understanding, entered into on October 1, 2013, between BMC and the Boston Center for Independent Living (BCIL). BCIL is a non-profit advocacy organization that was created by people with disabilities seeking full integration into society and has provided services to people with disabilities living in the greater Boston area since 1974. BMC and BCIL entered into the Memorandum of Understanding to address complaints received by the hospital from some patients with disabilities who felt they were not consistently able to access medical care and services. From the discussions that followed, BMC's CEO and the senior management team renewed their commitment to addressing concerns the patients with disabilities raised and to improving the healthcare experience for these patients. As a result, BMC's Accessibility Committee was assembled, to be the steward of this commitment.

BMC's Accessibility Committee is a voluntary multi-disciplinary group composed of members from various departments: Nursing, Patient Experience, Interpreter Services, Human Resources, Behavioral Development, Rehabilitation, Facilities, Pathology, Biomedical Engineering, Respiratory Therapy, the Legal Department and a community advocate who is a member of BCIL. The Accessibility Committee meets monthly, and more often as needed, to proactively

work on issues that will improve the delivery of care to BMC's patients with disabilities.

This report details many of the significant efforts taken by BMC and its Accessibility Committee to improve the quality of care for patients with disabilities during 2017. A few of the highlights of these efforts include: (1) the addition of patient lifts in all of the new intensive care units and ten percent of the inpatient rooms, (2) the addition of several ADA accessible public and private restrooms as part of the hospital's on-going multi-year campus redesign renovation; (3) the purchase of new wheelchair scales in various departments, the completion of two extensive rosters of medical diagnostic equipment and the continued integration of accessibility considerations into the equipment purchasing process; (4) the development of a robust communication assistance policy that provides guidance for interactions with disabled individuals in various situations; and (5) the commencement of efforts at BMC to become designated as an Autism Friendly Hospital. The hospital's Teaching Kitchen, which is wheelchair accessible and has adaptive equipment that facilitates the cooking process for patients with disabilities, continues to offer numerous community cooking classes, including a regular class on its schedule for individuals with disabilities.

Over the last few years, the availability of accessibility related training for staff has increased extensively. Training is provided to new employees at orientation, to existing staff on competency days and through various modalities including live training and video modules. Various BMC intranet sites, such as the Accessibility Committee and Nursing Department sites, serve as repositories for the training videos and other information pertinent to the healthcare needs of disabled patients. This year also saw the formal completion of BMC and BCIL's collaboration under the Commonwealth Corporation Health Care Workforce Transformation Training Fund Grant to create a series of accessibility focused training videos that have been and will continue to be used with BMC staff.

2. ASSESSMENT OF ACCESS BARRIERS AND CORRECTIVE ACTIONS

The 1996 merger of Boston City Hospital and University Hospital that created BMC, integrated services of each hospital, but resulted in a “split” campus configuration with costly operational inefficiencies. The BMC campus is undergoing a multi-phased campus redesign that is consolidating all inpatient services onto a single campus. The campus redesign began in early 2014 and is projected to be completed around the end of 2018. BMC is transforming its campus and is committed to doing it in a way that best meets the needs of our patients with disabilities. BMC has conducted surveys of its entire campus to identify barriers to care encountered by BMC’s patients with disabilities. Many of the identified barriers have been removed to ensure the campus complies with the Americans with Disabilities Act (ADA).

Campus redesign work completed during 2017 includes:

- The construction of a new patient family viewing room with private ADA accessible bathroom in the hospital’s morgue;
- The construction of Menino’s new Radiology facilities, which include ADA accessible bathrooms and one bariatric bathroom;
- The construction (and partial opening) of a new PACU area, which contains new patient seating and new check in areas that are ADA accessible;
- Renovations to the Intensive Care Units on Menino 3 (28 bed unit) that has private enhanced capacity rooms, all with patient lifts.

The following work was completed in earlier phases of campus redesign:

- The BirthPlace/Well Baby Unit (Maternity wing), located in the Yawkey Building, is a state-of-the-art facility providing medical care for newborns and their mothers in a family-centered, maternity-care environment. The new wing, which incorporates

patient lifts and includes a bariatric table, resolved approximately 400 barriers that were identified in earlier campus surveys.

- The Yawkey Lobby construction was completed and is fully operational.
- The new Yawkey Cafeteria, located on the second floor, can be reached by elevator and is accessible to patients with disabilities.
- The barrier review of the parking garage was completed.
- The renovation of the restrooms in the Menino Pavilion, including 8 new ADA compliant public restrooms and 24 ADA compliant patient restrooms was completed.
- There are new sidewalks that minimize joints between the paving materials at the Moakley and Menino additions.
- The streetscape alongside the Moakley Building on East Concord Street was reworked to create a fully accessible bus shelter.
- Linea 5 Architects, an established Boston-based firm with a health care focus, completed the ADA peer review for the campus redesign.
- Architectural barrier surveys of the Menino Pavilion, Yawkey Ambulatory Care Center, and 610 Albany Street and 710 Albany Street garages, including outside perimeters were completed.
- Accessibility peer reviews were conducted of the first five floors of the Menino Pavilion.
- All public and private toilet door hardware on the Menino Pavilion project complies with the ADA (standard hospital style loop pull and push plate or a standard lever handle; closers are adjustable and have no more than a 5-lb operating force).
- Renovation of public restrooms in the Yawkey Center includes an accessible bathroom in the Basement, 1st, 2nd and 4th floors.
- The BMC Campus map has been updated with clearer icons, pathway designations and a cleaner overall design. The new map shows Wheelchair return locations.

- Renovations to the Family Waiting Room located on the 1st Floor of the Menino Pavilion were completed.
- The Architectural barrier survey of the Preston Family Building was completed.
- The Architectural barrier survey of the Shapiro Ambulatory Center was completed.
- There is on-going training for Facilities staff to improve their understanding of the needs of patients with disabilities.
- 5% of all new lockers, according to project specifications requirement, are ADA accessible.
- A new accessible conference center was created on the Yawkey Building basement level and the newly constructed public bathrooms in Yawkey meet current accessibility standards.

3. ACCESSIBLE MEDICAL EQUIPMENT

The Equipment Subcommittee of the Accessibility Committee is charged with reviewing BMC's existing equipment, putting in place processes and policies to ensure BMC has the equipment it needs to provide accessible care, and providing an ongoing venue to address equipment accessibility.

In 2016, the Subcommittee completed an inventory of exam tables, chairs, patient lifts and wheelchair scales throughout the outpatient areas of the hospital. As a result of that inventory, in 2017 four new wheelchair scales were purchased for ambulatory spaces. One additional wheelchair scale was purchased for the emergency department. Also in 2017, BMC promulgated a new policy on weight measurement for patients with disabilities. It is now BMC's explicit policy to obtain and document an accurate weight measurement for all patients as medically appropriate, including patients with disabilities. The policy provides guidance on how to weigh patients using accessible equipment and also lists the locations of all accessible scales in BMC's ambulatory spaces.

Building on the 2016 inventories, in 2017 the hospital completed two extensive rosters of medical diagnostic equipment, in connection with a new MassHealth incentive program. This was an opportunity for the subcommittee to survey new categories of equipment beyond exam tables, chairs, lifts and scales. These categories included specialty equipment (such as phlebotomy chairs and optometric chairs), 14 types of imaging equipment, and a wide variety of miscellaneous items such as transfer aids and videophones. MassHealth will be requiring at least annual updates to these rosters, and they are a useful tool for BMC to identify opportunities for additional accessibility investments.

BMC's inpatient spaces already have fully accessible beds with built-in scales, but as part of BMC's campus redesign project - slated to be complete in 2018 - there will be patient lifts in all of the new intensive

care units (some of which opened this year) and in ten percent of the inpatient rooms.

The Subcommittee's process for pre-purchase review of all medical equipment at BMC, launched in 2016, continues to work well. Before a piece of medical equipment can be approved through BMC's capital purchasing system, the Subcommittee reviews the item for compliance with ADA standards. If an accessible option does not exist in the marketplace, the Subcommittee will work with the purchaser to develop policies and procedures to ensure accessible care for all patients. The Subcommittee has reviewed over 100 items thus far. Below is an image of BMC's Capital Purchasing System, including the questions that trigger a review by the Equipment Subcommittee.

(1) Are you purchasing medical equipment?

(2) Will this equipment be used with patients?

Image: BMC's Capital Purchasing System - Modified for Accessibility Review

The screenshot displays a web browser window titled "9659990 - 10026736-0-C - Clinical Operations - Surgical Pool - Windows Internet Explorer". The browser's address bar and menu bar are visible. The main content area shows a "Workflow" tab with a "Header Information" section. This section contains several input fields and labels:

- Name:** 9659990 - 10026736-0-C - Clinical Operations - Surgical Pool
- Author:** [Input field]
- Project:** 9659990 - Not Specified - Clinical Operations - Surgical Pool
- Name Comments:** Clinical Operations - Surgical Pool
- Requisition Number:** 10026736-0-C
- Vendor Contact:** [Input field]
- Vendor Fax #:** [Input field]
- Change Order:** [Dropdown menu]
- Are you purchasing Medical Equipment?:** Yes [Input field]
- Requisitioner Phone Number:** [Input field]
- Minor Capital ID:** [Input field]
- Vendor:** [Input field]
- Do you want inspection release?:** [Dropdown menu]
- Vendor Phone #:** [Input field]
- Vendor Email:** [Input field]
- Requisition ID:** JAZZID_2403

Below the form, there are two questions with "Yes" selected in the input fields:

- Will this equipment be used with patients?:** Yes [Input field]
- Yes or No (If Yes, next)**

At the bottom of the form, a message states: "Your request will be forwarded to the Accessibility Committee, a member will contact you directly."

The goal has been to “hard-wire” accessibility into the purchasing process at BMC. We are pleased to be “catching” opportunities to adjust purchases before they go through, and also to be receiving questions about which products will meet accessibility standards while end-users are still deciding on their preferred product. This is a positive sign that accessibility awareness is increasing at BMC.

The Equipment Subcommittee is also committed to educational efforts. Based on discussions at the Subcommittee, the Accessibility Committee is developing an outpatient-focused training video series about basic mobility skills for providers. The topics of the three videos are: (1) Assistance with Ambulation using a Cane or Walker (2) Stand Step Transfer from Wheelchair to Exam Table (3) How to Measure the Weight of a Patient in a Wheelchair.

4. POLICY and PROCEDURE REVIEW

BMC's Policy and Procedure Committee actively reviews the hospital's existing policies on a three (3) year cycle and reviews new hospital-wide policies that are developed. There are members of BMC's Accessibility Committee who are members of the hospital's Policy and Procedure Committee; these dual committee members are able to raise accessibility considerations during general policy discussions. The Accessibility Committee routinely considers when existing policies relating to disabled patients should be revised and whether new policies are needed to meet the needs of the hospital's disabled patients.

BMC currently has the following accessibility related policies in place:

- **Interpreter Services Policy (# 03.12.000)**
- **Patient Advocacy Program Policy (# 03.08.000)**
- **Animal Policy (# 05.02.120)**
- **Wheelchair Policy (# 03.00.400)**
- **Privately-Owned Medical Equipment Policy (#03.00.300)**
- **Personal Care Attendant Policy (# 10.03.050)**
- **Patients with Disabilities: Weight Measurement Policy (#03.00.310)**

(NEW) Communications Assistance Policy (#03.12.010)

BMC is committed to providing communication assistance, auxiliary aids and services, and alternative formats for print materials, where necessary for effective communication. This includes, but is not limited to, communication concerning patient care, privacy rights, confidential information and health education/training sessions.

BMC recently finalized a detailed Communication Assistance policy, the purpose of which is to enhance accessibility by facilitating effective communication between BMC staff members, patients, and the patient's representatives. This policy includes sections that address:

- Simple communication methods
- Complicated and/or intensive communications
- Communication assistance methods for Deaf and hard of hearing patients
- Auxiliary aids and equipment for Deaf and hard of hearing patients
- Communication assistance methods for blind patients or those with visual impairments
- Auxiliary aids and equipment for blind patients or those with visual impairments
- Additional communication assistance devices
- Speech impairment communication assistance methods
- Use of family members, companions or minors

This policy is the result of an extensive collaboration between BMC, BCIL and Greater Boston Legal Services.

Future Policy Activity

Members of the Accessibility Committee will discuss additional policy development that may be needed with members of BCIL and GBLS.

5. TRAINING and PROGRAMS

The Accessibility Committee strongly supports the education and training of staff at BMC on accessibility issues, disability awareness, and the care of patients with disabilities. To meet these objectives, BMC implements a multimodal training model involving live presentations, videos, e-learning courses and one-on-one training. Thousands of staff members have been trained through these efforts, some of which are noted below.

New Employee Orientation

New Employee Orientation includes discussion of BMC's commitment to improving the patient experience for patients with disabilities.

Nursing Orientation and Competencies

The Nursing Department consistently works towards its goals of promoting disability awareness and enhancing accessibility by offering different programs on several related topics. New registered nurse, licensed practical nurse and nursing assistant (inpatient and outpatient) staff continue to receive interactive trainings about patient safety, transfers, ambulation, and guarding techniques for patients with mobility issues, the use of slide boards, mobile lifts and information about care for patients with spinal cord injuries.

The Nursing Department presents accessibility videos, coordinated with discussions, in nurse residency training programs that are offered twice a year for new to practice graduate nurses in all clinical areas, including the intensive care unit, emergency department and the medical surgical nursing unit. The Nursing Assistant Competency Day in 2017, at which approximately 225 nursing assistants received training, focused on patients with special needs, and included training that addresses the bariatric population. Care for bariatric patients is also addressed in e-learning modules assigned to new staff, including non-professional unlicensed assistive personnel.

The ambulatory nursing department has introduced clinic specific videos and training focusing on patient transfers, lifts and patient safety for patients with limited function requiring accommodations. A safe patient handling video was created by Nursing and Physical Therapy and is currently being used to train medical assistants and nursing staff on safe transfers. These trainings are being implemented in demonstrations with a train-the-trainer model, as well as videos embedded in e-learning courses for staff in the clinics.

AIDET Training

AIDET training is a model that promotes a message of respect for all patients regardless of limitations. It is a patient experience initiative and communication framework aimed at decreasing levels of anxiety for all patients. This training is offered hospital-wide for all patient-facing staff and managers. The general tenets of AIDET, which was developed by an external consulting group, are listed in the chart below.

A	Acknowledge:	Greet the patient by name. Make eye contact, smile, and acknowledge family or friends in the room.
I	Introduce:	Introduce yourself with your name, skill set, professional certification, and experience.
D	Duration:	Give an accurate time expectation for tests, physician arrival, and identify next steps. When this is not possible, give a time in which you will update the patient on progress.
E	Explanation:	Explain step-by-step what to expect next, answer questions, and let the patient know how to contact you, such as a nurse call button.
T	Thank You:	Thank the patient and/or family. You might express gratitude to them for choosing your hospital or for their communication and cooperation. Thank family members for being there to support the patient.

Disability Overview Training (E-Learning Video)

The Commonwealth Corporation grant, which is discussed in the section below, afforded BMC the opportunity to update its e-learning training. BMC now has new videos for the inpatient staff and for the ambulatory staff with similar content, but tailored to the specific staff members for whom they are intended. The video training shows vignettes, then pauses to ask questions which the learner must answer before continuing. Video trainings can be viewed individually or in group settings with guided discussion prompted by the questions.

6. Commonwealth Corporation Health Care Workforce Transformation Fund Training Grant

During 2015 BCIL and BMC applied for and were awarded a Commonwealth Corporation Health Care Workforce Transformation Fund Training Grant, through which they were able to collaborate and create a usable series of training videos focused on improving the care and communication between BMC staff and disabled patients in both the inpatient and outpatient setting. Through this grant BCIL and BMC were able to foster a better relationship by ensuring that best practices were showcased in the videos. BCIL acted as a consultant on the grant and provided valuable insights into ideal communication strategies when working with a vulnerable population. The goal of this collaboration was to impact quality of care provided to patients with disabilities by improving communication with patients and caregivers.

The videos for the training series were completed and the grant cycle has ended; nonetheless, BCIL will continue to work with BMC to leverage the video series in order to continue to improve the care provided to patients. BMC will continue to monitor both the use of the video series and patient outcomes related to experience and quality of care. For example, the Orientation video in this series has been shown at each orientation session, which generally occur on a weekly basis, since March 2016 to a group of approximately 35 new hires per session. BMC continues to use the training videos during both staff/clinical orientation to the hospital and also with all staff/clinicians in the ambulatory and inpatient settings. A focused effort was also made to use the ambulatory training videos in the outpatient clinical setting.

Throughout this process, the BMC team has realized that, in order to be successful and reach a large number of staff, the video series needs to be available on an accessible platform. The VideoNitch platform was initially used to host the series, however, BMC is working on a long-term structure to enable sharing of the video with stakeholders across the

organization. The videos are currently posted on the BMC Intranet's Accessibility Committee and Nursing websites. BMC is working to pursue a long-term video hosting strategy with HealthStream.

The impacts of this training series are already felt throughout BMC. So far over 2,679 staff members have watched the first introduction/orientation access video, and then watched the additional targeted content that was also part of the series leading to increased competency by the staff in their interactions with disabled patients. An example of another kind of tangible result is the purchase of four additional wheelchair scales that were made available to staff in ambulatory clinic spaces, including Orthopedic Surgery, OBGYN, Gastroenterology, and Psychiatry. The development of this series already has and will continue to have positive impacts throughout BMC in the years ahead.

7. COMMUNICATIONS and AUXILIARY AIDS and SERVICES

BMC Accessibility Website - BMC has an Accessibility Information webpage that appears under the “Patients and Family Services” link on the hospital’s main page and can be found at <http://www.bmc.org/patients/accessibility-disabilities.htm> The Accessibility webpage contains information for patients who want to use their own medical equipment while on campus. It also includes quick-links to the BMC Campus Map, directions to the hospital and to the BMC Patient Advocacy Department, which can also be reached at (617) 414-4970 (voice). If a visitor has any questions or needs assistance, s/he should contact accessibility@bmc.org. Interpreter Services can be reached at 617.414.5549 (voice) and can coordinate assistance for patients who are Deaf or hard-of-hearing.

Auxiliary Aids and Services - BMC has Volume Amplifiers, Pocket Talkers, TTY Phones, Video Interpreting Units, and its Patient Rights policy is available in braille. Hands-free Patient Call Lights are available for all in-patients and are stored centrally. Interpreter phones are located at each bedside and in clinics for Over-the-Phone-Interpretation when an immediate interpreter is vital. Video interpreter iPads that brings interpreter services to the bedside with video interpreting-technology are available 24 hours a day in the clinical areas.

BMC’s Interpreter Services Department is one of the most extensive in New England. In addition to providing face-to-face interpreters on-site in 13 spoken languages, American Sign Language, and Certified Deaf Interpreting, the department utilizes the latest advances in technology such as telephonic and video-interpreting technology, in order to provide 24 hours a day/365 days a year interpreting services.

Screening System and Quality Measurement System – In the ambulatory setting, BMC would like to be better prepared to accommodate the needs of patients with disabilities. BMC’s

Accessibility Committee continues its efforts to work with members of the hospital's Information Technology Department to identify opportunities to use current technology to document this information. This work is geared toward incorporating a "flag" for specific patient needs in the new electronic medical record system. Further analysis of current workflow continues in order to determine how and when to best record this information.

8. The Autism Friendly Initiative

The Autism Friendly Initiative at BMC aims to improve the hospital experience for patients with autism spectrum disorders (ASD). Patients with ASD have various sensory and communication needs, which, when combined with the fast-paced and often over-stimulating hospital environment, can present obstacles to quality healthcare experiences.

The goal of the Autism Friendly Initiative is to develop and then implement best practices that would ultimately define BMC as an Autism Friendly Hospital. This initiative is led by a Steering Committee that is composed of stakeholders from across the hospital. The efforts of the Steering Committee focus on addressing the unique needs of patients with ASD through staff training, environmental adaptation, and protocol adjustment throughout the hospital. We believe this will lead to better hospital experiences, and ideally, better outcomes for patients with ASD.

More information about this initiative is available at:

<https://www.bmc.org/pediatrics-autism-program/autism-friendly-initiative>.

9. COMMUNITY OUTREACH and PARTICIPATION

BMC Teaching Kitchen and Cooking Classes

(Located on the 2nd floor of the Yawkey Building outside the cafeteria)



Image: Teaching Kitchen model image

The BMC Teaching Kitchen (formerly known as the Demonstration Kitchen) is a place where BMC patients, including patients with disabilities, can visit to take various classes related to healthy eating or cooking with dietary restrictions. Tracey Burg, RD, LDN, BMC’s Culinary Nutrition Manager, manages the kitchen and teaches numerous community cooking classes. Of note, is the class “Healthy Cooking for People with Disabilities” that meets on the last Wednesday of each month and usually includes six or seven patients, including patients that are wheelchair bound.

The Teaching Kitchen has enhanced accessibility features, including a wheelchair accessible sink and stove. There are adaptive

kitchen tools to help with the cooking process such as specialty knives, wide grip vegetable peelers, hand-held food choppers, palm veggie peelers, utensil holders, and non-slip dycem mats to keep bowls from sliding when mixing.



Image: Adaptive kitchen tools available at the Teaching Kitchen



Image: Stove and sink wheelchair accessibility features

To find out more about the classes and activities at the BMC Teaching Kitchen contact Tracey Burg by phone at 617-414-3840 (voice) or e-mail tracey.burg@bmc.org or CCC Social Worker Rosalyn Flores at rflores@commonwealthcare.org

To share Accessibility related community events please contact a member of BMC's Accessibility Committee or email accessibility@bmc.org.

10. RESOURCES

- The **BMC Accessibility Information webpage** that appears under the “Patients & Family Services” link on the hospital’s Home page can be found at <https://www.bmc.org/visiting-us/accessibility-information>
- The **BMC Patient Advocacy Department** is available to provide information or support for patients with disabilities. Patient Advocacy is also available to take complaints about services rendered at BMC with an aim to resolve any identified deficiencies. BMC’s Patient Advocacy Department is located on the BMC campus within the Yawkey Building. Patient Advocacy’s mailing address is Office of Patient Advocacy, Boston Medical Center, One Boston Medical Center Place, Dowling Building, Boston, MA 02118-2393. The Patient Advocacy hotline is (617) 414-4970 (voice). The hotline is staffed during business hours and has voice-mail. Voicemails are addressed by staff members. Patient Advocacy can also be reached by email at: accessibility@bmc.org.

Commonwealth Community Care is a non-profit primary care practice serving individuals 21 years of age and older with complex physical, developmental, intellectual, and mental health disabilities that are enrolled in public insurance programs. Commonwealth Community Care’s Boston Care Center is located near the Boston Medical Center campus at 30 Northampton Street, Boston, MA 02118 and can be reached generally at (800) 442-0520 (toll-free), (617) 638-7062 (Voice), and (617) 433-9601 (TTY 771) Fax (617) 445-6538; **Member Services:** [866-610-2273](tel:866-610-2273) (TTY 711) (available 8 a.m. to 8 p.m., 7 days a week); **Nurse and Clinician Advise:** [866-610-2273](tel:866-610-2273) (TTY 711) (available 24 hours a day, 7 days a week).

- **Interpreter Services Department** - BMC’s full-time medical interpreter staff provides coverage for 13 spoken languages, American Sign Language (ASL) and Certified Deaf Interpreting (CDI). All staff medical interpreters abide by the International Medical Interpreters

Association's Code of Ethics and Standards of Practice. Additional assistance for over 220 languages and dialects is carried out through telephonic and video interpreting through its vendors. The Interpreter Services Department operates 24 hours/day.

- **Patient Family Advisory Council** – Boston Medical Center’s Patient Family Advisory Council (PFAC) is committed to listening to the experiences of our patients, their families, and loved ones to improve hospital operations and to further the hospital’s mission. The PFAC is made up of current and former BMC patients, their family members, and hospital volunteers as well as BMC staff members. Our members work together to help Boston Medical Center provide “Exceptional Care Without Exception.” They offer insights and recommendations for improving patient care, safety, and satisfaction. PFAC members also share ideas about how BMC can best serve its diverse patient population and reach out to patients in their communities.

More information about the PFAC can be found at

<https://www.bmc.org/services/patient-family-advisory-council>

If you would like to join the PFAC or to request a copy of PFAC’s annual report, contact Katharine Seim, Council co-chair, at Katharine.Seim@bmc.org.

BMC Campus Map and Directions –

Directions to BMC and the hospitals campus map are found on the last pages of this report. Copies of the directions and campus map can also be found on the BMC website. Hard copies of the campus map are available throughout the hospital, in lobbies and departmental reception/front desk areas, and are included in mailed appointment reminders. Large stationary versions of the campus map can be found on the campus outside the Boston University Medical School Campus and outside of the 710 Albany Parking Garage.

DIRECTIONS

FROM THE NORTH:

1. Follow Route 1 (Via Mystic/Tobin Bridge) to Route 93 South.
2. Take Exit 18 (Mass Ave.)
3. At traffic light, take right onto access road; stay in right lane.
4. At end of access road, turn right onto Massachusetts Ave.

For directions to your BUMC/BMC destination, please follow signs.

FROM THE SOUTH:

1. Take Expressway North Route 93/3
2. Take Exit 18 (Mass Ave.)
3. At the third traffic light, take left onto access road stay in right lane.
4. At end of access road, turn right onto Massachusetts Ave.

For directions to your BUMC/BMC destination, please follow signs.

FROM LOGAN AIRPORT:

1. Go through the Summer Tunnel (Route 1A South) to Expressway South.
2. Take Exit 18 (Mass Ave.)
3. At traffic light, take right onto access road; stay in right lane.
4. At end of access road, turn right onto Massachusetts Ave.

For directions to your BUMC/BMC destination, please follow signs

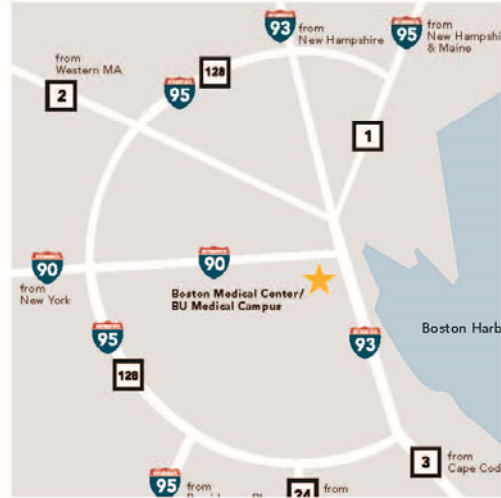
FROM THE WEST:

1. Take the Massachusetts Turnpike (Route 90) East to end.
2. Take Expressway South (Route 93).
3. Take Exit 18 (Mass Ave.)
4. At traffic light, turn right onto Massachusetts Ave.

For directions to your BUMC/BMC destination, please follow signs.

PARKING

For all destinations, paid parking is available in the parking garages located at 710 Albany Street and 720 Harrison Avenue. Validation coupons are available for patients and their family/visitors.



BUS ROUTES

Visit mbta.com for schedules

- 1** DROP OFF AT: Mass Ave. & Harrison Ave.
- 8** DROP OFF AT: Mass. Ave. & Albany St.
- 10** DROP OFF AT: Mass. Ave. & Albany St.
- 47** DROP OFF AT: Albany St. opposite Northampton St.
- SILVER LINE** DROP OFF AT: Washington St. & Mass. Ave.
DROP OFF AT: Washington St. & Mass. Ave.
- CT1 EXPRESS*** DROP OFF AT: Mass Ave. & Harrison Ave.
- CT3 EXPRESS*** DROP OFF AT: Harrison Ave opposite East Springfield St.

*The CT1 and CT3 Express Buses do not run on weekends.

For additional information regarding directions and public transportation please visit our website at BMC.org/directions

