



Board of Registration
in Medicine

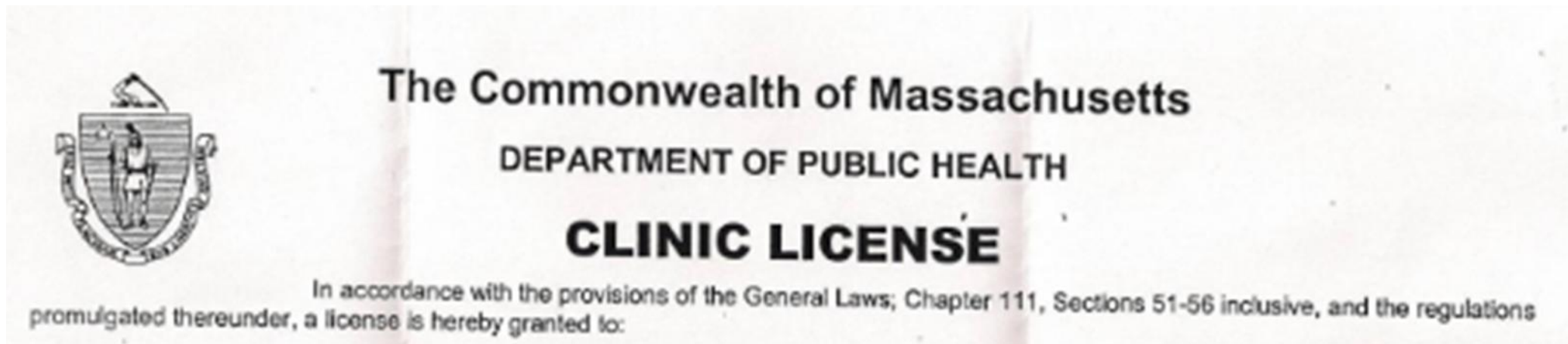
Patient Care Assessment Quality Assurance (PCA QA) Report

February 6, 2026

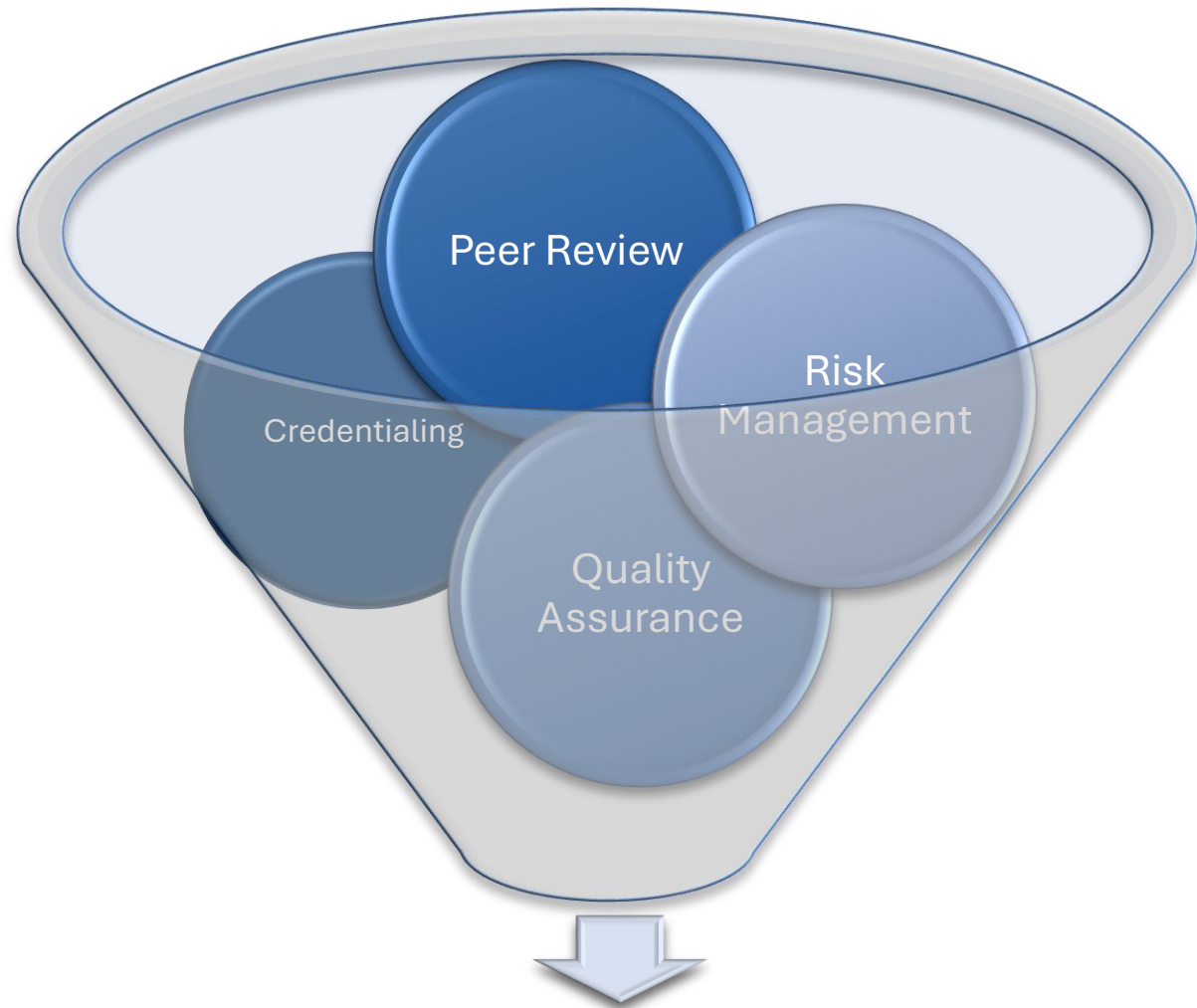
Who is required to participate in Patient Care Assessment Programs?

If your health care facility is licensed by the DPH under
M.G.L. Chapter 111, Section 51;
it is required to comply with the Patient Care Assessment (PCA) regulations
(243 CMR 3.0).

This information may be found at the top of the license certificate.



Patient Care Assessment (PCA)



Patient Care Assessment Program

As established by Massachusetts legislature (M.G.L. c. 111 § 203(d), § 204 & § 205), the BORIM Quality & Patient Safety Division (QPSD) oversees institutional PCA programs (243 CMR 3.01-3.14)

- **Risk Management-** Ability to identify and respond to patient safety events.
- **Quality Assurance-** Ability to create strong actions plans to mitigate risk of occurrence or recurrence of patient safety events and near misses.
- **Peer Review-** Implementation of ongoing processes to assess provider performance, skill, and judgement.
- **Credentialing-** Compliance with biannual requirements.

PCA Regulations 243 CMR 3.01-3.14

Require the submission of two types of reports:

1. **Quality Assurance Reports**
2. **Safety & Quality Review (SQR) Reports**
 - Reports of unexpected patient outcomes (patient safety events)

These reports provide a window into PCA Programs.

- ✓ Quality Assurance
- ✓ Risk Management
- ✓ Peer Review
- ✓ Credentialing





Login.mass.gov is now

MyMassGov

BUSINESS ACCOUNT

PatientCareAssessment.mass.gov is using MyMassGov to allow you to sign in to your account safely and securely.

Board of Registration in Medicine - Quality and Patient Safety Division. This system is ONLY for users previously authorized and all access is monitored.

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Quality Assurance Reports



Online Reporting Portal (RLDatix)

RLDATIX

Dashboards Bookmarks Help Logged in as Daniela Brow...

Icon Wall

Find a form

Please use the search above to narrow down your event results by using keywords to describe the event that you're looking for.

27 results are available.

QPSD Data Center	PCA-QA Report	PCA Coordinator Change Request	QPSD Online Portal User change	Other Communication to/from QPSD	Airway Management	Blood Product
Diagnosis/Treatment	Equipment/Medical Device	Fall - FOR CLINICS ONLY	Infection	IV/Vascular Access Device	Lab/Specimen	Maternal / Childbirth/ Neonatal
Medication/Fluid	Patient ID/Documentation/Consent	Patient Protection/Self-injurious behavior	Professional Conduct	Provision of Care	Radiation Treatment	Radiology/Imaging

PCA QA Report Due Dates



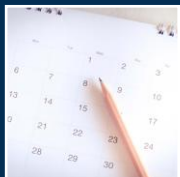
The PCA-QA Report must be submitted annually on or before the following due dates:

March 30th for ambulatory sites

April 30th for hospitals

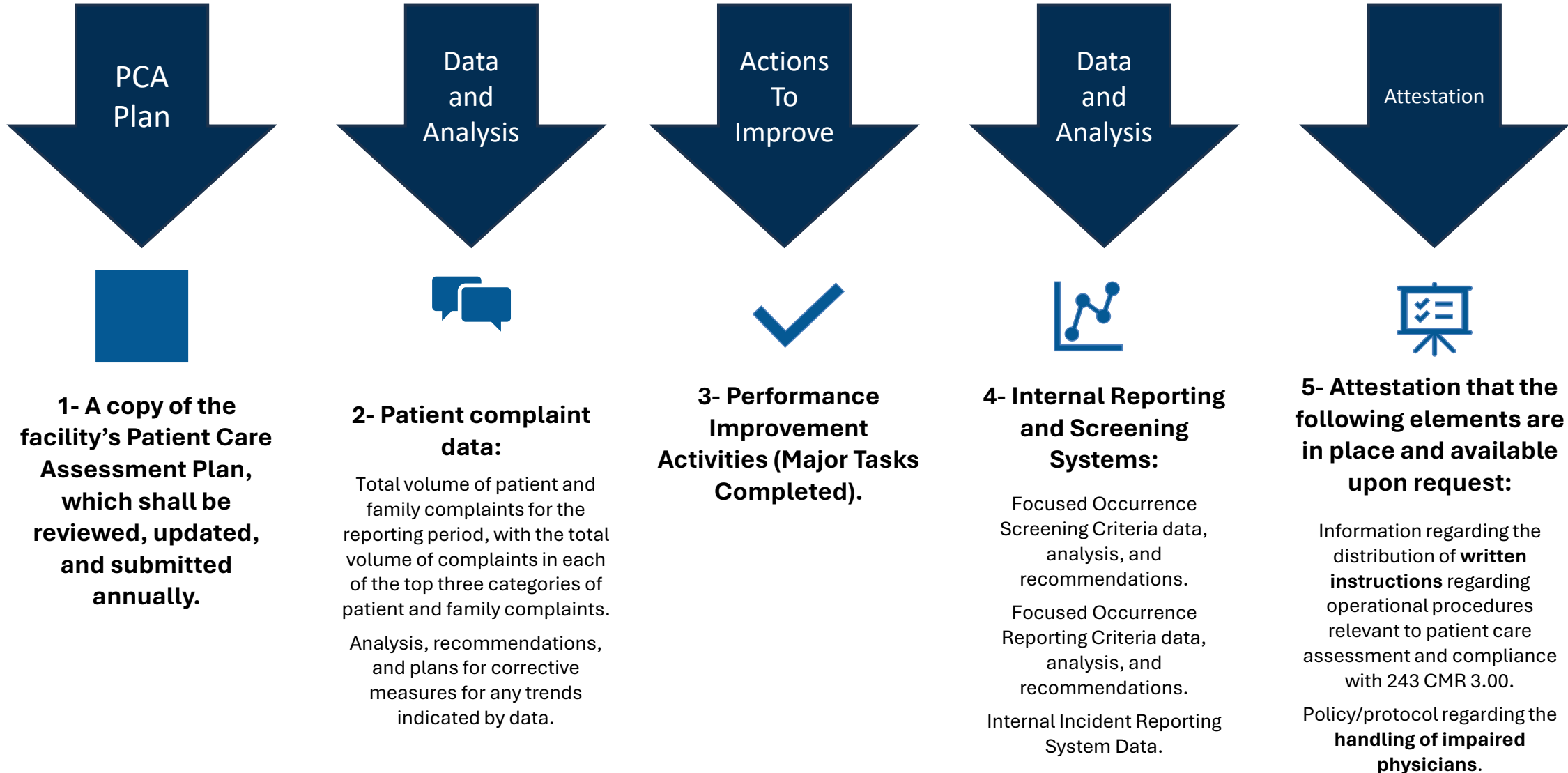


The reporting period is the calendar year prior to the report due date.



Example: Report due March 30, 2026. The reporting period is CY 2025 (12 months).

Elements of the PCA-QA Report



Patient Care Assessment (PCA) Plan Elements

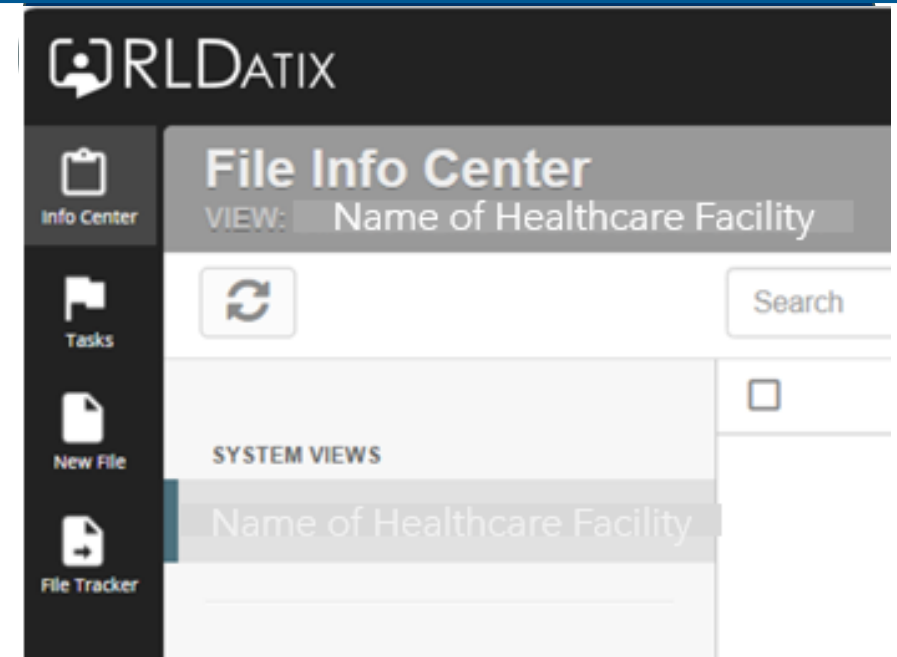
(Element 1 of the PCA QA Report)

1. Facility and medical staff bylaws authorize elements of PCA Plan
2. Governing body responsibilities
3. PCA Committee
4. PCA Coordinator
5. Policies governing responsibilities of PCA Committee/Coordinator
6. Credentialing
7. Internal incident reporting
8. Major incident reporting system
9. Focused Occurrence Reporting & Screening Criteria
10. Maintenance of reports
11. Patient complaint system
12. Informed consent policy
13. Impaired healthcare provider provision
14. Prescription practice and medication errors
15. Medical records
16. Guidelines in specialties (Anesthesiology)
17. Facility equipment committee
18. Summary suspension
19. M.G.L. c. 112, sec. 5F
20. Documentation of disciplinary action
21. Comprehensive evaluation
22. Audit authority
23. Patient rights written notice

Before you begin your 2026 report submission...

Please review your 2025 PCA QA Report PCA Plan Feedback

- ✓ Go to Info Center (top left corner of the file)
- ✓ File files or submitted files
- ✓ Find (**PCA QA Report 2025 Event**)



Patient Care Assessment (PCA) Plan Feedback from 2025 Report

If your 2025 PCA Plan feedback was **Met-All requirements are present in the plan**, you may select “Plan accepted in 2025” in your 2026 PCA QA report submission. You do not need to resubmit the plan unless there were changes made

PCA Plan Assessment

Will the PCA Plan be submitted at a later date? Yes No

PCA Plan Determination

PCA Plan Missing Elements N/A All elements present [Add/Edit](#)

Patient Care Assessment (PCA) Plan

If your 2025 PCA Plan feedback included any of the comments below...
You DO need to submit your updated PCA Plan.

Please go to the website or the bookmark section of the portal and use the resources provided to ensure all elements of the required plan are included in your submission.

The screenshot shows a web portal interface. At the top, there are navigation tabs for 'Dashboards', 'Bookmarks', and 'Help', along with a user profile 'Logged in as Daniela ...'. A 'Bookmarks' dropdown menu is open, listing several items: 'PCA Plan for Hospitals', 'PCA Plan for ASCs a...', 'PCA-QA Report Vide...', 'RLDatix Video Tutorial', 'PCA Overview', 'PCA Policy 9/23', and '2025 PCA Plan Work...'. Below the bookmarks, a search result is displayed: '(1 to 39 of 39 files found in Risk module)' followed by a table with one row: 'Age (Text)' with the value '32 years'.

The screenshot shows the 'Patient Care Assessment Program' page. The header includes the text 'OFFERED BY Board of Registration in Medicine'. Below the header, there is a blue banner with the title 'Patient Care Assessment Program' and a sub-header: 'Here you find information on the Board's role in monitoring Quality and Patient Safety in healthcare facilities in the Commonwealth of Massachusetts'. An image of a stethoscope is visible on the right. The main content area contains a paragraph: 'Chapter 243 of the Code of Massachusetts Regulations, sections 3.01-3.14 requires all hospitals and Licensed Ambulatory Surgical Centers & Clinics to establish and maintain a qualified Patient Care Assessment Program that complies with the requirements of 243 CMR 3.00 et seq. and that has been approved by the Massachusetts Board of Registration in Medicine. The services shown below provide guidance regarding the creation, maintenance, and requirements of a Patient Care Assessment Program.'

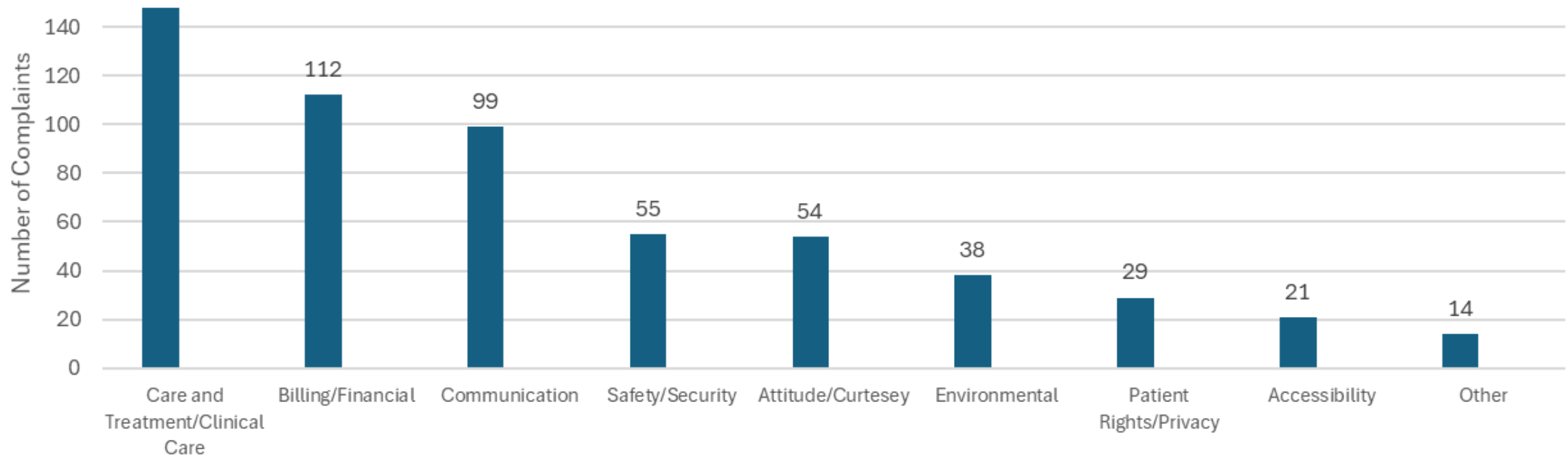
The screenshot shows the 'What would you like to do?' section. It features two main categories: 'Submit Patient Care Assessment Reports' and 'Submit Patient Care Assessment Plans'. Under 'Submit Patient Care Assessment Reports', there are three buttons: 'Submit Online Patient Care Assessment Reports +', 'Guidance for Hospitals that have an approved exemption from online reporting +', and 'Guidance for Licensed Ambulatory Surgical Centers & Clinics that have an approved exemption from online reporting +'. Under 'Submit Patient Care Assessment Plans', there are three buttons: 'BORIM Required Elements of Hospital Patient Care Assessment Plans (PDF 173.87 KB)', 'BORIM Required Elements of Clinic Patient Care Assessment Plans (PDF 177.57 KB)', and 'Patient Care Assessment Plan Worksheet - 2025 (PDF 229.58 KB)'.

Met- Please see comments for additional information that should be included for next year

Partially Met- Some of required elements are present in the plan

Not Met- Majority of required elements are not present in the plan

PCA Plan not submitted



PCA-QA Report: Patient Complaint Data

(Element 2 of the PCA QA Report)

Total number of patient and family complaints for the reporting period.

- *In the example above, the total number of patient complaints in CY 2023 was 571.*

Total number of complaints in each of the top three categories of patient and family complaints by volume.

- *Usually submitted in the form of a graph or table*
- *Provide an analysis of the data included any noted trends and a summary of any plans of correction.*
- *You do not need to include a listing of individual complaints.*
- *Trends noted from all submitted complaints should be included even if not in the top three categories of complaints.*

- *If no complaints have been noted, please review your complaint process and how you educate patients and family regarding the process and their rights as patients. Please also refer to your patient satisfaction survey feedback. On occasion, patient and/or family complaints are embedded in the comments.*

PCA-QA Report: Performance Improvement Activities (Previously Referred to as “Major Tasks”)

(Element 3 of the PCA QA Report)

- This is where you can share some of the good work that you are doing to improve patient care.
- You may share the actions and performance improvement activities that you are proud of!
- May include accomplishments that are small and local or extensive and organization wide. May be related to a study or any improvement work that benefits patients and/or employees.
- Performance improvements ideally will be data-driven. Look at the data that you are collecting to determine what initiatives your facility would like to prioritize:
 - Patient/Family Complaints/comments
 - Event reporting
 - Near miss reporting
 - Occurrence reporting/screening criteria
- Performance improvement may also be driven by identified staff concerns. These concerns and ideas are often shared during leadership rounding.
- This section should focus on **ACTIONS** taken to improve patient safety and quality assurance.
- Awards, certifications, and accreditation are fine to include; however, the report needs to include **ACTIONS and PI activities**.



PCA-QA Report: Internal Incident Reporting and Screening Systems:

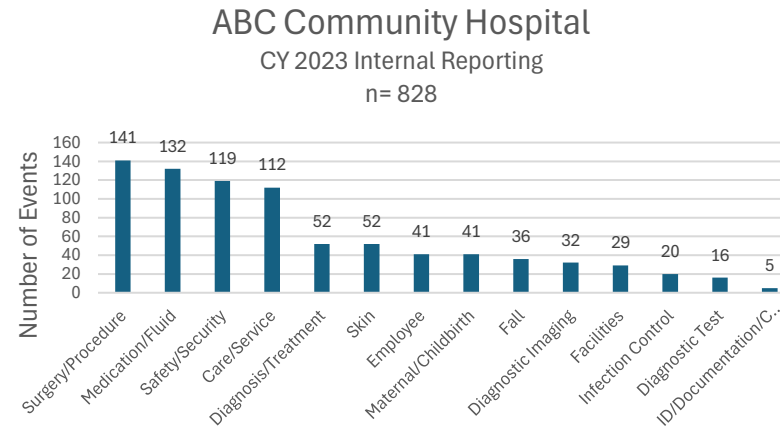
Three parts to this section:

A. Internal Incident Reporting Data

B. Focused Occurrence Screening
Criteria data, analysis, and
recommendations.

C. Focused Occurrence Reporting
Criteria data, analysis, and
recommendations

(Element 4 of the PCA QA Report)



ABC Ambulatory Clinic Internal Incidents CY 2023 N= 17

Medication/Fluid	4
Safety/Security	4
Diagnosis/Treatment	3
Care/Service	3
Employee	2
Facilities	1
ID/Documentation/Consent	0


Part A. Internal Incident Reporting System Data

- Total number of internal incident reports for the reporting period.
- Total number of internal incident reports in each of the top three categories of internal incident reports by volume. Usually submitted in the form of a graph or table. Examples are on next slide.
- Analysis, recommendations, and plans for corrective measures for any trends or concerns indicated by data.
- Trends noted from all submitted reports should be included even if not in the top three categories of reports.

Focused Occurrence Reporting & Screening Criteria

List the criteria (indicators) in
your PCA Plan
(Element 1 of PCA QA Report)

Provide the related data in your
PCA QA Report in the Internal
Incident Reporting and Screening
Systems
(Element 4 of PCA QA Report)

1. Facility and medical staff bylaws authorize elements of PCA Plan
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23. Patient rights written notice

Focused Occurrence Reporting & Screening Criteria

(Element 4 of the PCA QA Report)

Part B. Focused Occurrence Reporting Criteria

- Incidents (events) that need to be reported to the PCA Coordinator within 24 hours of occurrence.
- Higher level events that need to be reported asap to ensure patient and/or employee is taken care of, and an investigation is started
 - Severe adverse reaction to medication
 - wrong surgical procedure
 - transfer/admission to hospital from clinic
 - medication error with serious harm
 - patient suicide/self-harm/elopement
 - assault of patient/employee
 - Any event that you feel is appropriate for your facility

Include data, analysis, and recommendations

**Provide the related data in your
PCA QA Report in the Internal
Incident Reporting and
Screening Systems Section**

Part C. Focused Occurrence Screening Criteria

- Criteria or indicators used to screen medical records.
- Enables you to track and monitor the indicators that you feel are most important for your facility
- Often part of retrospective chart review
 - Compliance with medication reconciliation
 - Compliance with admission assessment
 - transfer to ED
 - return to OR
 - healthcare-associated infections
 - Falls with serious harm
 - canceling of same-day procedure
 - medication errors with serious harm
 - surgical related-complications
 - anesthesia-related complications
 - patient burns
 - IV infiltrates
 - Any indicator that you feel is appropriate for your facility

Include data, analysis, and recommendations



(Element 5 of the PCA QA Report)



Please provide an attestation that the following elements are in place and available upon request:

- Written instructions for the Patient Care Assessment Plan.
 - ✓ 243 CMR 3.06(3) The Patient Care Assessment Coordinator shall prepare and distribute detailed written instructions regarding operational procedures relevant to patient care assessment and compliance with 243 CMR 3.00.
 - ✓ The Patient Care Assessment Coordinator shall distribute such written instructions as are relevant to each health care provider at the health care facility.

- Policy/protocol regarding the handling of impaired physicians.

Questions

Please contact the QPSD if there are any questions

- Call Center: 781 876 8230
- General information: borim.info@mass.gov

Request to be referred to the Quality & Patient Safety Division



Board of Registration
in Medicine

Questions

February 4, 2026

Thank you!