



Queensway Carleton
Hospital

Patient & Family Advisory Council (PFAC) *Terms of Reference*

Purpose

Queensway Carleton Hospital (QCH) has embraced the need for a patient and family-centred approach to health care and has prioritized the development of support systems that will allow us to enhance the delivery of health care services around the needs of our patients and their families.

The purpose of the Patient and Family Advisory Council (“the Council”) is to provide advice to the hospital leadership team and to the Board of Directors (“the Board”) to improve the hospital experience for patients and users of the QCH facilities. The Council acts in an advisory capacity to ensure the patient and family voice is integrated in the planning, delivery and evaluation of services at QCH. The Council works in collaboration with the leadership team to provide this advice and to bring patient and family-centred care awareness to the attention of the Board of Directors.

Function

The Council will:

1. Provide advice to the hospital leadership team on practices and initiatives related to patient and family-centred care.
2. Provide feedback and advice on items referred to the Council, including policies, procedures, care practices, materials and communication strategies.
3. Participate in the annual development and review of the hospital’s Quality Improvement Plan.
4. Respond to requests to partner on committees, project teams, task forces, and working groups related to enhancing the patient experience.
5. Provide input and feedback into education, policy, and program development relevant to the Council at the corporate, program/department or unit level.
6. Provide the hospital leadership team and the Board with an annual report outlining the Council’s work.

Structure and Operations

The Council is an advisory committee and reports to the QCH Chief Executive Officer (CEO).

Membership

The Council will consist of

- 15 volunteer members
- up to 7 staff representatives, including the Patient Relations Ombudsman, from Senior Management, Nursing, Allied Health and Physicians
- 1 representative of the QCH Board.

Volunteer members will be selected from patients, family members and caregivers who have received service from QCH. Members will be selected by a panel including the Chair, the CEO, and the Patient Relations Ombudsman, through a formal application and interview process.

QCH staff members should represent a cross-section of the hospital and should include:

- Patient Relations Ombudsman
- Patient Care Manager or member of the hospital leadership team
- Physician
- Nurse
- CEO (ex officio).

Additional QCH staff may be invited to participate on the Council as non-voting subject-matter experts when required, typically for the duration of a project.

The representative of the Board of Directors will be appointed to the Council by the Chair of the Board, with consideration given to experience and expertise relevant to patient and family-centred care. The Board representative will present a summary of the Council's meetings to the full Board of Directors and as necessary will raise with the Board relevant patient and family-centred care matters. The Board representative will ensure effective two-way communication between the Council and the Board of Directors.

Chair

The Council is chaired by a volunteer member, appointed by the CEO. In collaboration with the Patient Relations Ombudsman, the Chair shall:

- Call and chair meetings
- Develop the agenda
- Review and revise meeting minutes
- Communicate with PFAC members
- Confer with senior management and directors on matters related to PFAC matters

- Represent and speak on behalf of PFAC at special events and functions related to PFAC.

Term

The term length is normally two years but may be extended by additional two-year terms, up to a maximum of six years. Renewal is subject to determination of the member's continuing ability to attend regular meetings and to provide input that is based on recent experiences with the services at QCH, as well as consideration of the need to maintain a balance between new and experienced members. Renewal will be reviewed by the Chair, the CEO, and the Patient Relations Ombudsman.

Meetings

There are a minimum of nine Council meetings per year. As well, members of the Council are expected to participate on hospital committees and project work groups. Standing committees of the hospital on which Council members are expected to participate include:

Committee	PFAC Representative
Medical Advisory Council	PFAC Chair
Quality Council	PFAC volunteer member
Ethics Committee	PFAC volunteer member

Other committees will be added as deemed appropriate.

Communication

Council activities will be reported to the CEO and to Quality Council through regular reports by the Chair and the Patient Relations Ombudsman on an agreed upon basis. Communication and reporting between the Council and the Board of Directors will be the responsibility of the Board representative.

Voting

As a rule, the Council will work on a consensus basis; however, in those circumstances where a vote is required, 50% plus one of council members is required to pass a motion.

Quorum

50% of volunteer members.

Cost Reimbursement

Members will be reimbursed for parking and approved travel expenses that are incurred to attend Council meetings. Similar reimbursement will also be provided for participation in Council-related activities such as orientation, training, etc., subject to pre-approval by the Patient Relations Ombudsman.

Confidentiality/Security

It is expected that strict confidence be maintained, and members are required to sign a standard confidentiality agreement prior to attending Council meetings. In addition, new members must obtain a criminal reference check for the vulnerable sector.

Health and Safety

All members must complete the Volunteer Tuberculin (TB) Testing and Immunization Guide and provide it to the Patient Relations Ombudsman.

At times, members may be requested not to attend events or areas of the hospital based on the results of the information (eg. outbreak). This will be done to ensure the safety of the volunteer.

Review of Terms of Reference

This is a dynamic document and will be reviewed on an ongoing basis and revised as required.

Approval

To be approved by the Patient & Family Advisory Council.