

## Patient and Family Advisory Council (PFAC) *Charter*

### Article I. Name

The name of the organization is the Patient and Family Advisory Council of Keck Medicine of USC. It is sometimes referred to as PFAC.

### Article II. Mission

The PFAC is dedicated to partnering patients and families with members of the healthcare team to provide guidance on how to improve the patient and family experience. As part of this process, patients and families are invited to serve on the PFAC hospital committee to ensure that the consumer's point of view, perspective, and experience are not only heard, but also integrated into the service and quality improvements that are engineered to ensure high quality, patient-centered care.

### Article III. Vision

As Patient Family Advisors, we represent the collective voice of all patients and their families, partnering with health care providers to improve the experience of patients and families at Keck Medicine of USC and the community we serve. This partnership is characterized by our core values of collegial collaboration, authentic communication, respect, and innovation to advocate and promote the practice of patient and family centered care, one patient and family at a time.

### Article IV. Membership

#### a. Terms and General:

##### Section i. Meetings:

- 1. Regular Meetings:** Regular meetings of the Patient Family Advisory Council will be held monthly unless otherwise ordered, presuming the presence of a quorum.
- 2. Annual Meeting:** The annual meeting will be held in January or July. At that meeting, new members and new officers will be elected.
- 3. Special Meetings:** Special meetings may be called by the Council Co-chairs as they deem necessary. Council members will be given at least 24 hours notice of the meeting schedule and agenda.
- 4. Quorum:** An official meeting will require the presence of a minimum of one-half of the members that were scheduled to attend.

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**Section ii. Council Makeup:** The Council will be made up of a broad base of 25 patients, caregivers and/or family members along with support staff from Keck Medicine of USC.

**Section iii. Meeting Support:** Parking fees will be covered for each member while attending meetings. Food will also be provided during each meeting.

**Section iv. Membership Term:** Initial term of services for PFAC members will be one year, with an automatic extension of two on-year terms based upon the collected discretion of the PFAC Leadership Board. Orientation of the PFAC members will include the purpose, membership guidelines, and mission of the PFAC.

**Section v. Vacancies/Leaves of Absence:** Council members may resign or request a Leave of Absence from the Council at any time during their term. A member may request a Leave of Absence when unusual or unavoidable circumstances require that the member be absent from meetings and activities from 3-6 months. The member will submit his/her request in writing to the Co-Chairs, stating the reason for the request and the length of time requested. The Co-Chairs will determine if the request will be accepted.

If a member cannot return at the end of the requested leave, he/she will resign from the Council. At any resignation, the Council may choose to add a replacement at that time or to leave the position open until the next rotation of members.

**Section VI. Recruitment:** Council members and the Institutions' staff will be utilized to recruit and recommend future members

**Section VII. Selection:** Interested parties will be contacted by a member of Keck Medicine of USC via telephone, or an informal meeting, to discuss the goals and expectations of PFAC. The interested party will be invited as a guest to a PFAC meeting.

## **b. Members:**

**Section i. Membership Eligibility:** Patients, family members and caregivers from the Keck Medical Center of USC, Norris Cancer Center, Verdugo Hills Hospital, and USC Care are eligible to be members of the Council. Members should be committed to building a partnership of advisors and staff working to understand the needs of the community they represent and to implement programs and policies to address health care challenges within the participating institutions.

## **Section ii. Expectations:**

- 1. Participation:** Members are expected to participate in monthly meetings consisting of 2-3 hours, at least 6 times per year, and in various committees or projects that will require a varied additional number of hours. Members may not exceed absences for 3 consecutive meetings.

2. **Hospital Volunteer Orientation Program:** Interested parties will be directed to fill out a volunteer application form and proceed with the volunteer orientation process. Volunteer orientation must be completed within 60 days to become a member. In addition to the orientation, the interested party will be required to receive health clearance and pass a background check. Upon completion of the 60-day consideration period, the program manager will notify the candidate of potential membership decision.

## Section iii. Governance:

1. **Co-Chairpersons:** The Co-Chairpersons of the PFAC will consist of one member from Keck Medicine of USC and one member of the community. The Keck Medicine of USC representative will have the responsibility to recruit the co-chair from the community based on representative capability, commitment, and interest.
2. **Duties**
  - A. Ensure minutes shall be kept of all PFAC meetings and will be distributed to appropriate personnel.
  - B. Organize meetings on a regular basis, including the assignment of the agenda for each meeting.
  - C. Ensure the activities of the PFAC are consistent with applicable rules, regulations, and laws of the health system and State.
  - D. Develop a PFAC Annual Report. This should include description of compliance and Council's accomplishments during preceding year. The PFAC Leadership Board will be responsible for completion and submission of the annual report in accordance with applicable health system and State rules, regulations, policies, and laws.
3. **Terms of Service:** The term of Service for the Keck Medicine of USC PFAC Co-Chairs is two years. The term of service will automatically extend for another two-year term as determined by a general vote at the October Meeting at the scheduled end of term.
4. **Nomination Procedures:** Candidates for the co-chair position will be nominated from Council members having at least one year of experience as a Council member. A nominating committee may be selected by the Council. Nominations will also be accepted from the floor prior to election.
5. **Election Procedures:** Officers will be elected by the affirmative vote of two thirds of the members present and voting.
6. **Vacancies:** A Co-chair may resign from office at any time. The Council may choose to elect a replacement to complete the term of the officer or to leave the position open until the next scheduled election.
7. **Removal of Committee Members for Cause from the PFAC Leadership Board:** The following are reasons for immediate removal of committee member from the PFAC Leadership Board:
  - A. Violation of the confidentiality of PFAC activities

- B. Undue influence in using PFAC for personal gain or advancement of a personal agenda.

#### **Section iv. Structure and Reporting Path:**

1. **Agenda Development:** The PFAC Co-Chairpersons will develop the agenda for each meeting. Members are able to request additional items to add to the agenda by contacting the Co-Chairpersons prior to the meeting.
2. **Reporting Items:** Items come to the PFAC by submitting an 'Agenda Request' form or via meeting discussion. An 'Agenda Request' form can be obtained from the PFAC Co-Chairpersons.

**Section v. Special Committees or Projects:** From time to time it may be necessary to create a special committee or task force in order to further the work of the Council. The initiation of such a committee may be requested by any Council member or Keck Medicine of USC support staff.



## Patient & Family Advisory Council Charter

### ARTICLE I Name & Purpose

The name of the committee shall be the Jupiter Medical Center Patient & Family Advisory Council (PFAC). The Council is an advisory resource to leadership and team members within the organization. The purpose of the Council is to promote a patient-and family-centered care (PFCC) culture. PFCC will emphasize collaboration of patients and families in the planning, delivery and evaluation of health care practices. This Council will provide a safe venue to review feedback as seen through the eyes of the hospital's "customers" and to make recommendations for change.

### ARTICLE II Goals & Objectives

The goals and objectives of the PFAC are:

- 1) To instill a culture that ensures health care is responsive to patient and family priorities, preferences and values.
- 2) To provide an effective mechanism for receiving and responding to patient and family input.
- 3) To offer a forum for developing creative, cost-effective solutions to resolve challenges of the hospital.
- 4) To foster respectful partnerships between patients, families, and healthcare professionals.
- 5) To improve patient and family satisfaction within our system of care.
- 6) To improve hospital quality and safety through collaboration and continuity in care services.
- 7) To connect the hospital with its surrounding community.

### ARTICLE III Membership

- 1) *Council Structure* – Individuals are selected for membership to the PFAC by recommendation of the Staff Liaison Team at JMC. The Council will consist of members in the following roles:
  - Executive Champion
  - Council Chairperson (Community)
  - Advisors (Community)
  - Staff Liaisons
- 2) *Advisor Qualifications* –Advisor must have been a patient or family member of a patient who utilized services at JMC within the last five years or is a JMC Volunteer in good standing. Advisor must be a full-time resident of the local area.
- 3) *Term* – Advisor is expected to remain in his/her role for a term of one year, with the option to serve a second consecutive one-year term as approved by the Staff Liaison team. To ensure the unity and success of this Council, all Advisors will complete a 90-day probationary period before final installment. Advisor may be removed if, in the judgment of the Executive Champion, such removal is in the best interest of the PFAC.
- 4) *Responsibilities*
  - a. Attend one meeting each month (2-4 hours each meeting) throughout the year of their term.
  - b. Participate in a PFAC Orientation.
  - c. Share insight and information about experiences in a manner benefiting a learning environment.
  - d. Offer feedback in a constructive and professional manner.
  - e. Listen and respect the perspective of others.
  - f. Solicit and identify patient and family needs/concerns and work with other Advisors to address issues identified.
  - g. Respect the confidentiality of patient information.

## **ARTICLE IV Interviewing & Selection**

- 1) Qualified applicants for the PFAC will be interviewed by the Staff Liaison team.
- 2) All candidates will be assessed via JMC's PFCC Advisor Interview Assessment tool.
- 3) Advisor selection is at the discretion of the Staff Liaison team.

## **ARTICLE V Orientation**

- 1) Advisor will take part in an initial orientation provided by the Council Chairperson.
- 2) Orientation should include but not be limited to:
  - a. The vision and goals of the organization
  - b. The role of the Council, how it fits into the organization's structure, and how it can assist the organization in achieving its vision and goals.
  - c. Meeting attendance expectations.
  - d. The roles and responsibilities of Advisors.
  - e. How to present issues effectively.
  - f. Identifying potential PFCC improvement projects.
  - g. HIPAA training.

## **ARTICLE VI Meetings**

- 1) Meetings will be held monthly on the third Tuesday of each month.
- 2) The agenda for each meeting will be developed by the Council Chairperson with assistance of the Staff Liaison. Any Advisor may submit agenda recommendations to the Council Chairperson up to five business days prior to the scheduled meeting for inclusion in the meeting agenda.
- 3) All meetings will be facilitated by the Council Chairperson.
- 4) A quorum of 51% is required for all decision-making.

## **ARTICLE VII Confidentiality**

- 1) To maintain appropriate and confidential handling of personal information, patient and/or family names or identifying information shall not be discussed during PFAC meetings.
- 2) Strict compliance with all state and national laws regarding confidentiality, including HIPAA, shall be enforced.

## **ARTICLE VIII Amendment Procedures**

- 1) Amendments to the PFAC Charter will be presented during one of the Council's regular meetings and voted on at the following regularly scheduled meeting.
- 2) The Charter may be amended by a majority vote (51%) provided 50% of the Council's active members are in attendance.
- 3) All Charter amendments are subject to the approval of the PFCC Executive Champion.



## Patient and Family Advisory Council Charter

- I. Name: The organization is named the Patient and Family Advisory Council (PFAC) of Shasta Regional Medical Center.
- II. Scope: The Council shall work collaboratively with all Shasta Regional Medical Center departments, physicians, and administration.
- III. Vision: At Shasta Regional Medical Center, the goal of the Patient and Family Advisory Council is to support the highest standards of comprehensive and compassionate care. The Council serves as a formal tool for creating a collaborative partnership between patients and families and the healthcare team. Valuing the voice of patients and families is foundational to our system of healthcare delivery. Insight gained through this partnership will serve to prioritize and promote positive patient experience.
- IV. Membership
  - a. Terms and General:
    - i. Meetings are anticipated to be held on a monthly basis.
    - ii. The Council will strive to include a diverse group of patients and/or family members (medically, socio-economically, and ethnically), care providers, and SRMC support staff. The group will consist of no less than 5 members and no more than 11 members.
    - iii. Meeting support such as food, childcare, and transportation should be addressed as needs arise.
    - iv. Terms should be limited with optional discretionary extensions.
    - v. Members are required to routinely participate in scheduled meetings with a limited number of absences.
  - b. Members:
    - i. Define Members: Patients, family members and caregivers from Shasta Regional Medical Center are eligible to be members of the Council. Members should be committed to building a partnership of advisors and staff working to understand the needs of the community they represent and to implement programs and policies to address health care challenges within the participating institutions.
    - ii. Expectations
      1. Required Preparation Program: Council members shall be required to receive health clearance and pass a background check. **This is a pretty heavy burden to folks attending a monthly meeting, but if that is the requirement of your hospital, I'm glad you included it here so folks know what they are signing up for. Did you want to include a requirement for signing a Confidentiality statement?**

2. Hospital Volunteer Orientation Program: Council members shall be required to complete a volunteer application form and proceed with the volunteer orientation process.
- iii. Governance:
1. Chair: The Chairperson shall be responsible for leading the Council and guiding meetings. **This is the staff Lead for the GW program, correct? You might identify that this is a staff member.**
  2. Co-Chair: The Council may include a Co-Chair upon the discretion of the Chair and Council members.
  3. Organization Liaison: The Council shall include one representative to act as a liaison to routinely communicate with SRMC staff and administration.
  4. Officers: The Council shall elect Officers to serve the needs of the organization, including but not limited to Secretary and Treasurer.
- iv. Structure and Reporting Path:
1. The Chairperson and Co-Chair shall develop meeting agendas, as appropriate.
  2. Items come to the PFAC by submitting a written request to the Chair or by way of meeting discussion. The Council may further develop other means.
  3. Follow up to items identified by PFAC shall be the responsibility of the Organization Liaison.
  4. Follow up items brought back to PFAC by shall be the responsibility of the Organization Liaison. **GREAT PROCESS, clearly identified**
- i. Additional Projects Committee Work
1. From time to time, it may be necessary **there may be opportunity** for Council members to participate in special projects.