

Brigham and Women's Faulkner Hospital

Patient /Family Advisory Council Bylaws

RATIONALE

Recognizing the benefits of patient –family centered care and partnering with patients and their families (as defined by the patient) supports collaboration by redefining the relationships. As essential allies for quality and safety, patient and family engagement assures that health care is delivered in a manner that is responsive to patient s' individual priorities, preferences and values.

The experience of care, as perceived by the patient and family, is a key factor in improving health care quality and safety. Including the perspectives of patients and families directly into the planning, delivery, and evaluation of health care is the cornerstone for patient- and family-centered care.

PURPOSE

By establishing The Patient Family Advisory Council, (hereafter known as "PFAC") , Brigham and Women's Faulkner Hospital demonstrates its goal of continuous improvement in quality, access, safety and the experience of care by engaging patient and family stakeholders in organizational efforts to promote the health and well-being of individuals and families.

This Council meets Massachusetts Department of Public Health regulations requiring hospitals to establish a Patient & Family Advisory Council (Proposed Amendment to 105CMR 130.000 Hospital Licensure March 30, 2009).

PHILOSOPHY

The philosophies that will govern the work of the PFAC will be guided by the Brigham and Women's Faulkner Hospital's **Mission Statement**:

"Excellence in patient care services delivered in a learning environment with dignity, compassion and respect."

And the **Core concepts of Patient and Family Centered Care**:

Dignity and Respect Health care practitioners listen to and honor patient and family perspectives and choices. Patient and family knowledge, values, beliefs and cultural backgrounds are incorporated into the planning and delivery of care.

Information Sharing Health care practitioners communicate and share complete and unbiased information with patients and families in ways that are affirming and useful. Patients and families receive timely, complete and accurate information in order to effectively participate in care and decision making.

Participation Patients and families are encouraged and supported in participating in care and decision-making at the level they choose.

Collaboration Patients, families, health care practitioners and health care leaders collaborate in policy and program development, implementation, and evaluation; in facility design, and in professional education, as well as in the delivery of care.

In support of the commitments listed above, the PFAC at Brigham and Women's Faulkner Hospital has instituted the following Charter:

- Brigham and Women's Faulkner Hospital commits to working with patients and families and considers them to be partners and active participants with the members of the health care team.
- We resolve to treat all patients and families with dignity, compassion and respect. We commit to recognize and respect differences and preferences of patients and families with respect to culture, ethnicity and abilities when determining levels of care.
- To maintain the vitality of our commitments to patients and families, we recognize the importance of partnering with them in developing, evaluating and improving hospital operations, policies and care delivery.

FUNCTION

The PFAC provides a forum for hospital patients, family members, community members and staff to "facilitate family and patient participation in hospital care and decision making, information sharing and policy and program development" (Mass DPH Proposed Amendment to 105CMR 130.000 Hospital Licensure March 30, 2009).

The PFAC proactively offers suggestions, information and recommendations on planning, policies, and procedures. Information from this group will provide BWFH leadership with an enhanced understanding of how to improve quality, program development, service excellence, communications, patient safety, facility design, patient and family education, staff orientation and education and patient/family satisfaction and customer loyalty.

The work of the Brigham and Women's Faulkner Hospital's PFAC includes the following:

- The PFAC will work in partnership with members of the interdisciplinary health care teams to provide a forum to maintain, create and enhance an environment of patient, and family- centered care.

- PFAC members are encouraged to participate in the on-going process improvement work of Hospital- wide committees, either as standing members of the committee or by providing consultative feedback when committee members attend PFAC meetings to collaborate on quality and safety improvement work.
- The PFAC will participate in hospital decision making, information sharing and policy and program development by providing feedback regarding patient and family centered activities across all areas at Brigham and Women's Faulkner Hospital.
- This partnership will promote discussions and decisions, and will drive activities developed to improve and enhance the quality of the patient and family experience at Brigham and Women's Faulkner Hospital.

SCOPE

The scope for the PFAC work is open to issues concerning any aspect of care, quality, program development, service excellence, communications, patient safety, facility design, patient and family education, staff orientation and education and patient/family satisfaction and customer loyalty

GOALS

Brigham and Women's Faulkner Hospital's PFAC will work in partnership with members of leadership and the interdisciplinary team to establish the Council's annual goals in alignment with BWFH's Strategic Goals as they relate to an environment of patient family- centered care activities across all areas at BWFH.

OBJECTIVES

The objective of the PFAC is to support continuous quality improvement, communication and planning by:

1. Helping senior leadership to identify issues and opportunities which have the potential to improve health care and service in relation to one or more of the stated goals and strategic plan;
2. Recommending solutions (or refinements to existing) services, programs, policies, communications, and/or business strategies that are more effective in meeting the needs of patients and families;
3. Developing creative, cost-effective solutions to problems and challenges faced by the organization;
4. Promoting respectful, effective partnerships between patients and families and health care providers and administrators;
5. Providing consultation on matters referred to them by the Hospital Quality Councils/Senior Management/Process Improvement Teams.

ORGANIZATIONAL STRUCTURE

The PFAC serves in a partnership capacity and reports to the BWFH Quality Steering Committee. At least annually, the PFAC facilitator will report the progress of the PFAC to this committee which includes members of the Board of Directors.

ROLES AND RESPONSIBILITIES OF THE PFAC:

The role of the PFAC is consultative. Members will be expected to serve as the voice of the customer—our patients and families. In this role, members help to facilitate family and patient participation in hospital care and decision making, information sharing and policy and program development.

Members proactively offer advice, information and recommendations on planning, policies, and procedures. Information from this group will provide leadership with an enhanced understanding of how to improve quality, program development, service excellence, communications, patient safety, facility design, patient and family education, staff orientation and education and patient/family satisfaction and customer loyalty.

MEMBERSHIP OF THE PFAC

Members will be solicited through regular communications to patients, families and the community. Potential members will complete an application, which will be processed by the Director of Patient Family Relations. Members will be screened, interviewed and are selected by PFAC Co-Chairs. New members are oriented by the Director of Patient Family Relations and the patient Co-Chair. They receive a PFAC Member Handbook, and a copy of the By Laws. Members sign the BWFH Confidentiality Agreement and Code of Professional Conduct.

The PFAC consists of patients, families and community members and represents a cross-section of the families served by the hospital. At least 50% of the PFAC members must be current or former patients or family members (Proposed Amendment to 105CMR 130.000 Hospital Licensure March 30, 2009).

SELECTION CRITERIA

Members will be selected based on the following criteria and abilities:

- Able to listen to differing opinions and share different points of view;
- Support the mission of the hospital;
- Share insights and information about their experiences in ways that others can learn from them;
- See beyond their personal experiences;
- Show concern for more than one issue or agenda;
- Respect diversity and the perspectives of others;

- Adhere to the operating principles of respect, trust, collaboration, communication and integrity;
- Speak comfortably in a group with candor;
- Interact well with a many different kinds of people;
- Work in partnership with others;
- Diagnosis: Represent experiences from key service lines; Medicine, Surgery and Behavioral Health.
- Diversity: every effort will be made to represent the ethnic, racial, geographic diversity reflective of our patient population..

COMMITTEE CHAIR AND PARTICIPATION OF BWFH STAFF

The Council is co-chaired by members of hospital administration with a patient or family member

(Proposed Amendment to 105CMR 130.000 Hospital Licensure March 30, 2009). In this role, they:

- Communicate the purpose of the Committee;
- Communicate what the Committee is empowered to do;
- Present adequate introduction of topic for discussion;
- Keep meetings focused to prevent meetings from centering on personal agendas;
- Avoid unproductive discussions of issues the organization cannot do anything about;
- Provide insight into the challenges facing the health care system and hospitals;
- Provide education and support.

Brigham and Women's Faulkner Hospital staff members will also serve on the PFAC. Other physicians and staff will attend as appropriate. Staff support may be provided by (not be limited to) the following:

- Chief Nursing Officer
- Chief Medical Officer
- Associate Chief Nurse
- Director of Risk Management and Clinical Compliance
- Director, Social Work and Interpreter Services
- Nurse Directors
- Director, Patient Family Relations, (will act as Facilitator)
- Director of Marketing and Public Affairs

TERMS

PFAC members are expected to make a commitment to a term of two years. Brigham and Women's Faulkner Hospital may, in its sole discretion, extend the maximum term of a committee member/s to insure rotating terms. Attendance at 75% of meetings is expected to remain an active member of the PFAC.

MEETING FREQUENCY

The Committee will meet at least four times per year. Meetings will be held on the first Tuesday of the month, from 4:00pm to 5:30pm. Light refreshments will be provided. Additional accommodations will be made available if needed.

MINUTES

Written minutes of meetings are maintained in the Division of Patient Care Services. They are forwarded to PFAC members by email with correspondence on upcoming meeting Agenda and details.

ANNUAL EVALUATION

An annual report of PFAC work with examples of measures of success will be prepared and presented annually to the Quality Steering Committee. This Annual PFAC report will be available on the hospital website and will be filed with DPH (Proposed Amendment to 105CMR 130.000 Hospital Licensure March 30, 2009).

RESIGNATION

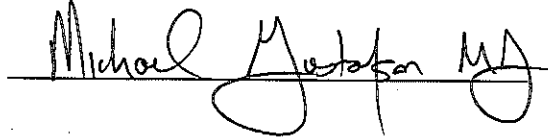
A PFAC member may resign at any time by providing written notice of resignation to the co-chairs. Any such resignation shall take effect at the time specified by the member.

SIGNATURE/APPROVAL PAGE

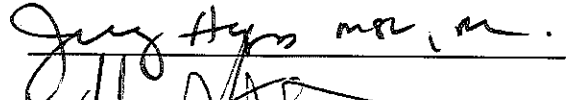
The 2015 Patient Family Advisory Council Bylaws have been reviewed and approved:

Reviewed and Revised: October, 2015 Approved by:

Michael Gustafson, MD, MBA
President



Judy Hayes, RN, MSN
VP Patient Care Services
Chief Nursing Officer



Margaret Duggan, MD
Chief Medical Officer



John Downes
Patient Co-Chair



List of Works Cited

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