

# PATIENT AND FAMILY ADVISORY COUNCIL

# New Member Orientation Package



*Patients and families remain central to all that we do. As a patient- and family-centred hospital, our Patient and Family Advisory Council (PFAC) is essential to achieving our mission.*

*The insights and personal stories we hear from PFAC members inspire and inform how we respond to the complex needs of individuals and their families, both medically and emotionally.*

*Over the last few years, our PFAC Council has demonstrated an outstanding commitment and has had a positive impact on the development of hospital-led initiatives and the broader healthcare system as a whole, especially during the challenging COVID-19 pandemic.*




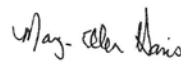
*We are grateful to all members of our Patient and Family Advisory Council for partnering with us to deliver an exceptional patient experience. Your time, talent, energy, passion and drive are greatly appreciated and invaluable to our community hospital.*

*We look forward to your ongoing participation.*

Julia Boudreau  
Chief Executive Officer of SFMH

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|  <br><b>Terms of Reference</b> |  | <b>Patient and Family Advisory Council Terms of Reference</b>                                  | <b>Manual Administration</b> |
|                                                                                                                                                                                                 |                                                                                  | Last Reviewed / Revised Date:<br>2018 09 03, 2019 09 17, 2021 06 10, 2022 04 14                | <b>Category:</b>             |
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|                                                                                                                                                                                                 |                                                                                  | Signature<br> | Committee/Dept Review:       |

## Patient and Family Advisory Council

### Preamble

As experts in Patient and Family experiences, patients, families and caregivers are in the best position to provide recommendations on improving the planning, delivery and evaluation of care services within the framework of Patient, Family and Caregiver Centred Care.

The healthcare partners in the Patient and Family Advisory Council are St. Francis Memorial Hospital (SFMH), Madawaska Valley Hospice Palliative Care (MVHPC) and Barry's Bay and Area Senior Citizens Home Support Services (BBAHS).

### Patient & Family Advisory Council Values:

Patient, Family and Caregiver Centred  
 Respect  
 Integrity  
 Pursuit of Excellence  
 Learning  
 Innovation

### Definitions

The term “patient” is used to describe an individual who receives care from St. Francis Memorial Hospital and/or its partner agencies. The term “family” includes any individuals, defined by the patient, as significant to their health and wellbeing. The term “caregiver” describes any individual who provides or has provided care to a patient or former patient. Caregiving is a role that can be filled by family, professionals and designated others. Patients and their identified family members are defined by their relationship, whereas caregiving is defined by the role.

### Mandate

The Patient and Family Advisory Council (PFAC), comprised of members of the public and staff of the partners, is dedicated to:

- improving quality, safety and the healthcare experience of patients, families and their caregivers.
- making sure programs and policies reflect patient, family and caregiver needs; and
- improving how patients, families and their caregivers access, understand and use information and services to make healthcare decisions;
- serving as the community advisor/engagement group for BBAHS, MVHPC and SFMH to ensure that the local system is responsive and engaged with patients, families and caregivers in ongoing service improvement and co-design efforts.

The Public Members provide the perspective of the patients, family members and caregivers who use the healthcare services, with the goal of helping to provide exemplary patient and family experiences.

### **Council Membership Composition**

The Patient and Family Advisory Council is composed of the following:

#### **Public Members:**

- A minimum of four and maximum of ten members of the public served by the partners. These members represent the patient demographics of those who receive care at from the partners. Public Members must be eighteen years of age or older.
- While participating as volunteers, the Public Members may be reimbursed for some approved expenses incurred while attending meetings.

#### **Staff Members:**

- The hospital Chief Executive Officer or designate.
- The hospital Director of Patient Care Services, who acts as Co-Chair with a Public Member Co-Chair, chosen from and by the Public Members annually at the first meeting of the calendar year. In the absence of one Co-Chair, the other would assume the full responsibilities
- 1 Continuous Quality Improvement (CQI) Board Member
- 1 senior administrator or designate from each of MVHCP and BBAHS.
- 1 secretarial support staff. Administrative support is available to both Co-Chairs, as necessary.

Staff members are ex-officio and are non-voting members of the Council.

Prospective members are interviewed by one of the administrators of the partner agencies. Following this, the interviewer reports to PFAC stating whether this candidate would bring an appropriate perspective to the activities of the Council and making a recommendation whether to invite the candidate to join the Council. All members must sign a confidentiality agreement. They will read and agree to the terms in the PFAC orientation package.

### **Quorum**

For a meeting to be held, a quorum must be present. A quorum consists of a minimum of one Staff Member and 51% of the Public Members.

### **Decision Making**

As a practice, decisions are made by consensus. In the event consensus cannot be achieved, decisions are made by making a motion and voting by a show of hands.

### **Terms of Office**

Public Members make a minimum commitment to a two-year term.

## **Ensuring Representation**

As vacancies occur, the Council reviews its membership to assess whether the Council is maintaining diversity and allowing for all views and perspectives.

### **Hospital Representatives**

Staff, physicians and hospital Board of Director members of SFMH and partners may participate and act in an advisory role to the Council, as appropriate to the issue.

### **Responsibilities of the Patient and Family Advisory Council**

Public Council members are consulted and involved in matters where the input of patients their families and caregivers is valued and invited. Members advise on behalf of all patients, families and caregivers. They work together to think through challenging issues and suggest potential resolutions. The range of matters includes, but is not limited to, the following activities:

1. Be prepared for meetings by reading all documents pertaining to the meeting.
2. Provide recommendations on the identification of health care needs and gaps.
3. Provide input on policy and program development which impact service delivery to patients and families.
4. Review and comment on new or revised materials developed by the partners, including educational and informational materials, forms, policies and procedures.
5. Contribute to the understanding and improvement of the patient, family and caregiver experience.
6. Assist in reviewing and providing feedback on patient, family and caregiver satisfaction.
7. Promote improved partnerships between patients, families, caregivers, staff and physicians.
8. Participate in education regarding patient, family and caregiver centred care.
9. Participate in partners' committee work.
10. Work on short-term projects.
11. Ensure that an Annual Report is developed that summarizes the PFAC's activities and achievements for the year.
12. Participate in at least 4 meetings per year; if unable to attend a meeting, advise one of the Co-Chairs of the planned absence.

### **Agendas and Minutes**

The SFMH Director of Patient Care Services or designate prepares the Agendas and Minutes of the meetings of the Council. The SFMH Director of Patient Care Services or designate distributes the meeting documents and follows-up on recommendations made by the Council.

As well as being circulated to the PFAC members, a summary of the Minutes are sent to the hospital's Continuous Quality Improvement Committee, the Medical Advisory Committee, the Management Committee, the Care Team meetings and at requested partner meetings.

### **Meeting Frequency and Duration**

Meetings are held bi-monthly, the dates and times decided by the consensus of the members.

Additional meetings may be scheduled at the request of any of the members. Members are notified of such meetings not less than five days before the meeting is scheduled to take place.

**Terms of Reference Review**

The Council will review these Terms of Reference every year at the first meeting of the calendar year and approve any revisions.

**Records Retention**

The PFAC's records are subject to the Freedom of Information and Protection of Privacy Act (FIPPA) and are governed by the Records and Retention Policies of the hospital and its partners.

## **PATIENT AND FAMILY ADVISORY COUNCIL PARTNERS**

### **1. ST. FRANCIS MEMORIAL HOSPITAL (SFMH) ([www.sfmhosp.com](http://www.sfmhosp.com))**

St. Francis Memorial Hospital is a 20-bed community hospital located in the village of Barry's Bay. It serves a catchment of approximately 10,000 population dispersed over a large geographic area that includes 1,800 sq. kilometres in Renfrew County, a portion of South Algonquin Township in the District of Nipissing and Algonquin Park and the Highway 60 main corridor. SFMH's mission is "To provide high quality, patient centred care in collaboration with our partners".

Distance to secondary facilities and lack of public transportation has always been the prime consideration in strategic planning for SFMH. The nearest secondary hospital facilities are in Pembroke and Renfrew which are 85 and 95 kilometres respectively. Tertiary services are available in Ottawa, which is 200 kilometres east, and Peterborough, which is 175 kilometres south of Barry's Bay. This distance and the low resident population has earned St. Francis Memorial Hospital the designation of both rural and isolated by the Rural and Northern Health Care Framework benchmark and parameter working group.

SFMH is built on foundation of Integration success: SFMH is continuously seeking strategic partnerships and solutions that will improve the organization's efficiency and patient care across the system. In 2012, SFMH received the Small, Rural and Northern Award of Excellence recognizing its innovative leadership in establishing partnerships to expand and improve health services in the Madawaska Valley.

### **ST. FRANCIS MEMORIAL HOSPITAL PARTNERSHIPS**

#### **1.1. Renfrew Victoria Hospital (RVH)**

SFMH Board established a voluntary partnership with RVH more than a decade ago. Trust, respect and effective governance as well as collaboration between the boards and the CEO are the basis for the tremendous and ongoing success of this partnership. We share such services as kidney dialysis, and physician specialty services.

#### **1.2. Rainbow Valley Community Health Centre (RVCHC)**

Integration with the SFMH is the first full integration of a CHC with a hospital in the Province of Ontario. This integration has provided sustainability and vital primary care services for the CHC through recruitment of family physicians and nurse practitioners. This has been an enormous success for our community. [www.rainbowvalleychc.on.ca/](http://www.rainbowvalleychc.on.ca/)

**1.3. Eastern Ontario Regional Laboratory Association (EORLA)** – SFMH is part of a partnership of 16 hospitals that creates the Champlain region-wide integrated and standardized laboratory services. Over 12 million tests are performed annually.

#### **1.4. The Ottawa Hospital (TOH)**

SFMH and RVH have entered into a partnership with the current 56 radiologists in the Department of Diagnostic Imaging at The Ottawa Hospital (Ottawa Hospital and Region Imaging Associates (OHRIA)). As a result of this partnership, patients are benefiting from enhanced quality care and response time for their Diagnostic Imaging test results.



**1.5. Private Physiotherapy Clinic** – Due to the lack and need of physiotherapy services locally, the SFMH created a partnership with a Physiotherapy company and renovated space in its Health Center for a new clinic. Outcome/Impact: Improved access to services, reduced travel for our clients and increased revenue stream for SFMH.

**1.6. Rural Healthcare Hub (St. Francis Health Centre)**

SFMH built the St. Francis Health Centre, connected to the hospital via a tunnel, to help promote integration and create the rural health care hub model. Clinical integration successes include: Primary care with General Practitioners, Nurse Practitioners, Laboratory Services, Dialysis, Ophthalmology & Optometry, Public Health, Orthopaedics, Geriatric Mental Health, Outpatient Clinics for Internal Medicine, Audiology and Addiction Treatment Services.

**1.7. Madawaska Communities Circle of Health (MCCH)**

SFMH was instrumental in the creation of the first full community integration working group in the Champlain Regional representing health and social service providers in Madawaska Valley and the County of Renfrew to implement integration opportunities. The MCCH definition of “health” is “a state of complete physical, mental, and social well-being and not merely the absence of disease or infirmity”. This definition includes the social determinants of health. SFMH Board Chair is the Co-Chair of MCCH. There are twenty-seven agency members in the MCCH. They include such agencies as SFMH, Valley Manor Long Term Care Home, Barry's Bay and Area Senior Citizens Home Support Services, Champlain Home and Community Care Services, County of Renfrew Paramedic Service, Madawaska Valley Hospice Palliative Care, Killaloe Resource Centre, Madawaska Valley Family Health Team, Moving on Mental Health, Renfrew County and District Health Unit, South Algonquin Family Health Team, Champlain Home and Community Services, and patient and family representatives.

**1.8. Epic Electronic Health Information System**

In 2019, SFMH joined six other healthcare agencies, called the Atlas Alliance in order to share patient information electronically. The Atlas Alliance is made up of Hawkesbury and District General Hospital, Renfrew Victoria Hospital, St. Francis Memorial Hospital, The Ottawa Hospital, The Ottawa Hospital Academic Family Health Team, and the University of Ottawa Heart Institute. As well as facilitating the exchange of needed patient information between the Alliance members, Epic has a My Chart feature that allows patients access to their own healthcare information.

**1.9. St. Francis Valley Healthcare Foundation ([www.sfvhfoundation.com](http://www.sfvhfoundation.com))**

This very active registered charity works in partnership with three local healthcare organizations in the Madawaska Valley to fundraise for medical equipment & services based on the long-term plans for the healthcare needs of the community.

The Foundation raises funds to ensure support for equipment purchases and services at:

- St. Francis Memorial Hospital (including Rainbow Valley Community Health Centre)
- Madawaska Valley Hospice Palliative Care program
- Valley Manor Nursing Home

The government does not provide funding for healthcare equipment. Our local healthcare organizations rely on the generosity of the community to ensure that they have the specialized equipment and support they need to provide exceptional care. The Foundation works with the public and these three organizations to raise the needed funds for the care they provide.

## **VISION, MISSION AND VALUES OF SFMH**

### **MISSION**

To provide high quality, patient centred healthcare in collaboration with our partners.

### **VISION**

To be a leader in health services that are patient centred, integrated and responsive to rural community health needs.

### **VALUES**

Respect

Excellence

Learning and Innovation

Leadership and Accountability

## **2. MADAWASKA VALLEY HOSPICE PALLIATIVE CARE (MVHCP)**

**[madawaskavalleyhospicepalliativecare.com/](http://madawaskavalleyhospicepalliativecare.com/)**

Madawaska Valley Hospice Palliative Care is a free support service for individuals and their families who are faced with a life limiting condition. MVHPC offers support in the home (visiting hospice palliative care), wherever that may be – the patient's home, a family member's home, seniors apartments, long term care home, or in our two bed hospice unit (residential hospice) that is situated on the hospital property and shares some nursing care with the hospital.

Bereavement support is available for a minimum of one year to loved ones following a death.

## **3. BARRY'S BAY AND AREA SENIOR CITIZENS HOME SUPPORT SERVICES (BBAHS)**

**[www.bbahs.org/](http://www.bbahs.org/)**

BBAHS is available to help when seniors or physically challenged people need assistance to remain in their homes by providing the following services:

- Transportation Services
- Meals on Wheels
- Frozen Meals
- Care Calls
- Telephone Reassurance
- Assisted Living
- Seniors' Centre Without Walls

MVHPC and BBAH share a Board of Governance (called a “mirror board”) as well as the Mission, Visionary Goal and Values. They are:

**MISSION OF BBAH and MVHPC**

BBAHS improves quality of life for seniors living at home in our rural catchment area.

MVHPC provides compassionate support to enhance the quality of living and dying.

**VISIONARY GOAL OF BBAH and MVHPC**

Our communities understand, recognize and use BBAHS/MVHPC as the primary resource for home support services.

Our communities understand, recognize and use MVHPC as the primary resource for hospice palliative care and 100% of palliative persons use MVHPC services.

**VALUES OF MVHPC and BBAH**

Person-Centred

Respect

Compassion

Integrity

Pursuit of Excellence

Teamwork

Both MVHCP and BBAH are represented on the PFAC by their Executive Directors.

## **ACRONYMS**

The healthcare world uses a lot of acronyms, many of which the members of PFAC need to know. Here is a list of some of the common ones PFAC members will see.

|       |                                                                             |
|-------|-----------------------------------------------------------------------------|
| ALC   | Alternate Level of Care                                                     |
| ALS   | Assisted Living Services                                                    |
| BBAHS | Barry's Bay and Area Seniors Home Support                                   |
| CHC   | Community Health Centre                                                     |
| CIHI  | Canadian Institute for Health Information                                   |
| CQI   | Continuous Quality Improvement                                              |
| DI    | Diagnostic Imaging                                                          |
| EMR   | Electronic Medical Record. At SFMH we use Epic                              |
| EORLA | Eastern Ontario Regional Laboratory Association                             |
| GP    | General Practitioner, family physician                                      |
| HQO   | Health Quality Ontario                                                      |
| IT    | Information Technology                                                      |
| LHIN  | Local Health Integration Network                                            |
| LTC   | Long Term Care                                                              |
| MAC   | Medical Advisory Committee                                                  |
| MVFHT | Madawaska Valley Family Health Team                                         |
| MVHPC | Madawaska Valley Hospice Palliative Care                                    |
| MCCH  | Madawaska Communities Circle of Health or "The Circle"                      |
| MOH   | Ministry of Health                                                          |
| NP    | Nurse Practitioner                                                          |
| OTN   | Ontario Telemedicine Network                                                |
| OHT   | Ontario Health Team                                                         |
| OVOHT | Ottawa Valley Ontario Health Team                                           |
| PFAC  | Patient and Family Advisory Council                                         |
| PHIPA | Personal Health Information Protection Act                                  |
| PRH   | Pembroke Regional Hospital                                                  |
| PSW   | Personal Support Worker                                                     |
| QA    | Quality Assurance                                                           |
| QI    | Quality Improvement                                                         |
| QIP   | Quality Improvement Plan                                                    |
| QRS   | Quality Risk and Safety                                                     |
| RN    | Registered Nurse                                                            |
| RPN   | Registered Practical Nurse                                                  |
| RVH   | Renfrew Victoria Hospital                                                   |
| RVCHC | Rainbow Valley Community Health Centre                                      |
| SFMH  | St. Francis Memorial Hospital                                               |
| SFVHF | St Francis Valley Healthcare Foundation; raises funds for SFMH, VM and MVHP |
| TOH   | The Ottawa Hospital                                                         |
| VM    | Valley Manor Long Term Care home                                            |

# Patient, Family and Caregiver Declaration of Values for Ontario

## ACCOUNTABILITY

- We expect open and seamless communication about our care.
- We expect that everyone on our care team will be accountable and supported to carry out their roles and responsibilities effectively.
- We expect a health care culture that demonstrates that it values the experiences of patients, families and caregivers and incorporates this knowledge into policy, planning and decision making.
- We expect that patient, family and caregiver experiences and outcomes will drive the accountability of the health care system and those who deliver services, programs and care within it.
- We expect that health care providers will act with integrity by acknowledging their abilities, biases and limitations.
- We expect health care providers to comply with their professional responsibilities and to deliver safe care.

## EMPATHY & COMPASSION

- We expect that health care providers will act with empathy, kindness and compassion.
- We expect individualized care plans that acknowledge our unique physical, mental, emotional, cultural and spiritual needs.
- We expect that we will be treated in a manner free from stigma, assumptions, bias and blame.
- We expect health care system providers and leaders will understand that their words, actions and decisions strongly impact the lives of patients, families and caregivers.

## EQUITY & ENGAGEMENT

- We expect equal and fair access to the health care system and services for all regardless of ability, race, ethnicity, language, background, place of origin, gender identity, sexual orientation, age, religion, socioeconomic status, education or location within Ontario. We further expect equal and fair access to health care services for people with disabilities and those who have historically faced stigmatization.
- We expect that we will have opportunities to be included in health care policy development and program design at local, regional and provincial levels of the health care system.
- We expect an awareness of and efforts to eliminate systemic racism and discrimination, including identification and removal of systemic barriers that contribute to inequitable health care outcomes (with particular attention to those most adversely impacted by systemic racism).

## RESPECT & DIGNITY

- We expect that our individual identity, beliefs, history, culture and ability will be respected in our care.
- We expect health care providers will introduce themselves and identify their role in our care.
- We expect that we will be recognized as part of the care team, to be fully informed about our condition, and have the right to make choices in our care.
- We expect that patients, families and caregivers be treated with respect and considered valuable partners on the care team.
- We expect that our personal health information belongs to us, and that it remain private, respected and protected.

## TRANSPARENCY

- We expect that we will be proactively and meaningfully involved in conversations about our care, considering options for our care, and decisions about our care.
- We expect that our health records will be accurate, complete, available and accessible across the provincial health system at our request.
- We expect a transparent, clear and fair process to express a complaint, concern, or compliment about our care that does not impact the quality of the care we receive.

Updated: July 2021

Note: The purpose of this Patient, Family and Caregiver Declaration of Values, drafted by the Minister's Patient and Family Advisory Council in consultation with Ontarians, is to articulate patient, family and caregiver expectations of Ontario's health care system. The Declaration is intended to serve as a compass for the individuals and organizations who are involved in health care and reflects a summary of the principles and values that patients, families and caregivers say are important to them. The Declaration is not intended to establish, alter or affect any legal rights or obligations, and must be interpreted in a manner that is consistent with applicable law.

During my affiliation with the St. Francis Memorial Hospital (SFMH), Madawaska Valley Hospice Palliative Care (MVHPC), and Barry's Bay & Area Home Support (BBAHS), I may have access to information and material relating to patients, physicians, employees, other individuals, or corporate information, which is of a private and confidential nature.

I agree (*place your initials into each box*) to the following requirements and understand they will remain in force even if I cease to have an affiliation with SFMH, MVHPC, or BBAHS:

- I acknowledge that I have read, understand and will adhere to the policies *Privacy and Confidentiality of Patient Personal Health Information and Freedom of Information and Protection of Privacy Act (FIPPA)* which was given to me during orientation.
- It is my legal and ethical responsibility to respect the privacy and confidentiality of patients, employees, and all associated individuals. This includes all SFMH, MVHPC, BBAHS administrative, financial, patient, employees, research and other records.
- I shall ensure the safekeeping of confidential information and ensure it is not inappropriately accessed, used, or released either directly by me, or by virtue of my signature or security access to premises or systems. I will only access information that is a requirement as an employee, volunteer, student, physician and/or contractor at SFMH, MVHPC, or BBAHS.
- I will not disclose or discuss confidential personal health information and/or personal information except to authorized individuals or entities that are authorized to receive such information.
- Any unauthorized disclosure or breach of privacy on my part will be considered to be a serious offense, including disciplinary action up to termination of my affiliation with SFMH, MVHPC or BBAHS.
- I understand that SFMH, MVHPC or BBAHS may conduct periodic audits to ensure compliance with this agreement.

- 
- I have read the above statements, required policies and I understand that failure to comply with these requirements during and beyond my affiliation could result in disciplinary, civil, and/or criminal legal action.

By signing below, I acknowledge that this agreement continues in perpetuity following my affiliation with SFMH, MVHPV and BBAHS.

Name \_\_\_\_\_ Signature \_\_\_\_\_ dd - mm - yy  
(Please Print)

Initials \_\_\_\_\_

Name of Company/Corporation (if applicable): \_\_\_\_\_

Name of Witness \_\_\_\_\_ Signature \_\_\_\_\_ dd - mm - yy  
(Please Print)