PATIENT & FAMILY ADVISORY COUNCIL (PFAC)

CHARTER

Stephens Memorial Hospital
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Objective

The Patient and Family Advisory Council is a volunteer group representing patients and families served by Stephens Memorial Hospital (SMH). The council is comprised of local community members and caregivers engaged and committed to continuous improvement of patient and family experiences. An active PFAC is an important part of our participation in accreditation organizations such as the National Committee for Quality Assurance (NCQA) and its Patient-Centered Medical Home Recognition program, focused on the principles of the right care, in the right amount, at the right time.

Mission

The Patient Family Advisory Council is dedicated to cultivating partnerships between patients and their family members, caregivers, and administration, with an emphasis on patient safety and family-centered care.

Through contributions to hospital planning, procedures and policies, the PFAC serves as the voice of patients and families who are committed to working together to improve patient and family experiences.

Values

We are dedicated to preserving diversity and inclusiveness aligned with our organizational values.

Patient Centered: We focus on each individual's unique needs, and partner with the people we care for, their families and care teams to develop a shared plan.

- Act with compassion and kindness.
- Listen actively and validate concerns; focus on the individual’s needs.
- Communicate effectively with patients, clients and families.
- Treat everyone with respect and courtesy; acknowledge cultural differences.
- Be empowered to advocate and speak up for patient and client safety.
- Partner with the people we care for, their families and care teams to develop a shared plan.

Respect: We embrace diversity and recognize the value of each person.

- Recognize all the people we care for, their family, visitors and co-workers as valued members of the healthcare team.
• Listen actively and respond thoughtfully.
• Treat others as you would want to be treated.
• Embrace diversity, acknowledging each person’s uniqueness.
• Be empathetic, compassionate and kind.
• Foster a professional and healing atmosphere.

Integrity: We are honest, transparent and ethical, and maintain a culture of trust and accountability.

• Demonstrate professionalism at all times, regardless of the behavior of others.
• Maintain confidentiality and respect the privacy of all.
• Develop and maintain a culture of trust and accountability.
• Act with honesty and transparency at all levels of the organization.
• Model behavior that is consistently honest and ethical.
• Acknowledge mistakes as opportunities to learn and grow.

Excellence: We set high standards and always strive to exceed expectations.

• Consistently seek improvements in processes and performance.
• Set high standards.
• Strive to exceed expectations with every interaction.
• Lead by example.
• Work collaboratively as a team.
• Pursue opportunities to learn and grow personally and professionally.

Ownership: We take responsibility for our actions, follow through on our commitments, and approach challenges with optimism.

• Follow up and follow through.
• Look beyond our individual roles to do what is necessary to get the job done successfully.
• Take responsibility for our actions and our collective outcomes.
• Approach challenges with optimism.
• Represent our organization in a positive light.
• Promote an accountable, fair and supportive environment.
Innovation: We welcome diverse perspectives, embrace change, and are committed to lifelong learning.

- Welcome change with a positive attitude.
- Inspire others and foster creativity.
- Be courageous.
- Encourage diverse perspectives.
- Invest in people, technology and research.
- Commit to lifelong learning and educating.

Purpose

- To serve as an advisory resource to the hospital, physician practices, and/or other affiliated programs
- To review and discuss quality improvement reports and ongoing efforts to improve healthcare practices and outcomes
- To create awareness of the PFAC’s role in the community and to encourage broad participation
- To understand, provide feedback on, and/or establish action steps for goals set by MaineHealth and/or SMH that impact patient care

Size & Composition

The PFAC is comprised of up to 15 members, with a target of 10 Patient and Family Advisors and a maximum of 5 staff members.

Membership Criteria

The Council is welcoming, inclusive, and strives to be representative of the patients and their families who receive care at Stephens Memorial Hospital.

We look for new Patient and Family Advisors to have recent patient and/or family experience(s) at Stephens Memorial Hospital, ideally within the past 36 months.

The Council is committed to expanding the diversity of backgrounds and experiences among its membership.

Volunteer Members may include patients themselves, as well as parents, spouses, significant others, siblings, grandparents, step-relatives, close friends, and other non-professional caregivers.

At its discretion, Council leadership may invite others to join the council to balance the skill set of the committee.
**Term**

Patient and Family Advisors are invited to serve an initial three-year term and may serve two additional three-year terms, upon mutual agreement with council leadership, up to a total of nine years.

Past members are welcome to attend Council meetings as non-voting members and may have the opportunity to serve on hospital committees.

All officers are elected for one or more two-year term(s).

**Staff Members**

Stephens Memorial Hospital (SMH) Staff PFAC Members may include an Executive Sponsor and a Staff Liaison, plus representatives from Quality and Safety, Patient Care Services, and Volunteer Services.

Additional SMH staff and subject matter experts are invited to PFAC meetings to obtain feedback from the Council on safe patient and family centered care related issues, provide input to the Council, and educate Council members on specific topics, as needed.

**Election Process & Timing**

The election calendar coincides with beginning of the Stephens Memorial Hospital fiscal year, October 1. The process includes:

- Nominations for new Officers put forward by a committee made of current Officers and Chair Emeritus
- Nominations for new Officers at the August meeting
- Voting for new Officers at the September meeting
- Installation of Chair and Co-Chair at October meeting

**Officers**

The Council is comprised of elected officers: a Chair (Patient and Family Advisor) and one or two Co-Chairs (Patient and Family Advisor(s)).

**Role of Chair:**

- Facilitate Council meetings
- Review and finalize agenda and minutes in partnership with Co-Chair
- Serve as a Representative for the PFAC
• Facilitate Council in setting annual priorities
• Participate on local committees and workgroups as requested
• Participate in prospective Council candidate interview
• Partnership with Chair/Co-Chair(s) to ensure each new member receives the Council Orientation

Role of Co-Chair:
• Collaborate with the Chair on matters relating to the council, including agendas, guest speakers and requests for feedback
• Fulfill responsibilities of the Chair when he/she is unavailable
• Review Charter and facilitate any updates, if needed
• Co-Chair should have served at least two years on the advisory council before assuming office. At the discretion of the Nominating Committee, this requirement may be waived to accommodate extenuating circumstances

Role of Staff Liaison
• Work with the Chair and Co-Chair regarding meeting agenda and business
• Take meeting minutes and distribute along with other meeting materials
• Triage staff requests seeking input from Council
• Arrange for meeting room and refreshments/food

Role of Members
• Attend monthly Council meetings and communicate with staff liaison when unable to attend
• Share relevant feedback and provide input based on patient and family experiences
• Provide recommendations and/or raise significant issues from a patient and family perspective that the PFAC and/or SMH should consider, relative to agenda topics
• Participate on Council Committees and/or SMH Committees, as time and interest allows and provides a brief summary of items relevant to Council priorities to be added to monthly meeting minutes
• Solicit community input on relevant agenda topics relative to patients and families and share with the Council
• Participate in SMH ad-hoc volunteer projects/opportunities brought to the Council, when possible
• Be committed to improve care for all SMH patients and family members
• Respect the collaborative process and the forum to discuss issues
• Be willing to listen to and consider differing viewpoints

Meetings
Meetings take place on the third Thursday of each month from 10:00 a.m. to 11:30 a.m. in person or virtually, as circumstances permit.

Voting
• Patient and Family Advisors have voting privileges
• Staff Members are considered ex-officio (non-voting) members
• To conduct business at meetings, a quorum consists of 50% +1 of all voting members
• To pass a motion or elect elected officers, 50% + 1 of all voting members is required

Recruiting Process
Candidates are referred by Volunteer Services, PFAC members, hospital staff, board and administration. Likewise, candidates may seek out membership independently. Candidates are current or former patients and family members or individuals who bring unique or specific skills to the council.

Prospective candidates interview with the PFAC chair(s) to discuss council activities, candidate skill sets and candidate interests and talk about council engagement and responsibilities.

Qualified candidates attend a meeting of the PFAC to observe council activities, meet council members and determine their continued level of interest. Qualified and committed candidates are formally brought on to the council and agree to attend council meetings, becoming actively engaged and share experiences as appropriate. They are encouraged to serve on hospital service lines and/or hospital committees as appropriate.

Orientation Procedures
The chair or designee will review the Member Handbook with new council members, including the PFAC Charter and how the council fits within the SMH
structure. The chair or designee will also reinforce the expectations of privacy and confidentiality.

New council members will take a guided tour of the hospital, visiting public spaces plus individual hospital units and departments, being introduced to staff as available. New council members will work with existing members and others to become familiar with the planning, delivery, and evaluation of care.

New council members will be encouraged to play an active role in council discussions, ask questions when something is not clear and give feedback to the chair regarding satisfaction with council membership.

**Reporting Structure**