



SOUTHCOAST HEALTH

PATIENT & FAMILY ADVISORY COUNCIL BY-LAWS

BACKGROUND

In September 2010, Southcoast Health established a Patient & Family Advisory Council in accordance with the 2008 Massachusetts Department of Public Health and the hospital licensure regulation.

The formation of a PFAC is intended to facilitate patient and family participation in hospital care and decision-making, information sharing, and policy and program development

MISSION & GOALS

The Southcoast Health Patient & Family Advisory Council (PFAC) seeks to provide a vehicle for improved communication between patients, families and staff and serves as an advisory resource to administration and trustees.

The PFAC's goal is to act as a "consumer advisory group" and serve as a link between Southcoast Health, Southcoast Hospital Group, Southcoast Physicians Group, Visiting Nurses Association and Southcoast Health Network and the communities we serve. The PFAC serves as a voice for patients and families about the way in which care is delivered and to discuss concerns about care, quality, and access.

The PFAC's goal is also to champion family participation in hospital care and decision-making and gather information about significant issues and trends to be considered by Southcoast Health administration and staff in its policymaking, program development and staff training and education. The PFAC will also help advise Southcoast on community-based education needs to better inform the public about how to play an active role in their health care.

COUNCIL PURPOSE

The purpose of the Council is to advise the hospital on issues and trends deemed as significant or urgent by the PFAC, and such issues and trends will be communicated to and through the PFAC staff members of the Council to the Southcoast Health senior administration and its Quality Steering Committee. The Council will focus on patient-family communications that enhance and strengthen patient care and services, acknowledge and advocate for the cultural needs of a diverse population, promote user friendly mechanisms for patient and family member communications to ensure dignity and respect. The Council will generate and be receptive to innovative concepts for the betterment of the health system and its patients, and proactively engage in seeking and stimulating continuous improvement of Southcoast patients' experience.

COUNCIL MEMBERSHIP

The Southcoast Health Patient Family Advisory Council consists of patients, families, and staff, with at least 50 percent of the representation coming from the community.

The PFAC is co-chaired by someone from the community, such as a current or former patient or a family member, and by someone from Southcoast Health, such as an administrator, trustee, or physician.

The PFAC meets every month, except in July and December.



Community membership will be on a volunteer basis.

Vacancies will be filled on an as-needed basis and as recommended by the Membership and Recruiting Committee.

MEMBERSHIP QUALIFICATIONS

Membership is open to the community and the PFAC seeks to recruit members that reflect the diversity of the communities that Southcoast Health serves. Members will be recruited to offer a broad representation of the hospital's patient groups and constituents. Members must demonstrate the capacity and skill to advocate on behalf of the patients and family members served by Southcoast Health, commit to a high quality of comprehensive and compassionate care delivered with dignity and respect for all patients and families.

COMMUNITY MEMBERS' ELECTION

Interested Members can obtain information about the council at the Southcoast Office of Service Excellence and Patient Experience. An application for prospective members can be found on the Southcoast Health website at <http://www.southcoast.org/pfac/application.html>.

The Council co-chairs carefully review applicants' interest in serving on the PFAC, considering their traits, areas of expertise, and skills that align with the Council's mission. The community Co-chair screens applicants and submits recommendations to the Staff co-chair. Once an applicant has been screened, the co-chairs determine whether an interview is necessary. If an interview is conducted, the prospective candidate attends a PFAC meeting as a guest, where the co-chairs introduce them to the Council. After the meeting, the co-chairs meet with the prospective candidate to gauge their interest in continuing the process. If the prospective candidate expresses interest in joining the council, they receive an invitation to an orientation and onboarding session.

MEMBERSHIP RESPONSIBILITIES

Council members will participate in an orientation program. In compliance with federal privacy regulations, the orientation program will include but not limited to a review and acceptance of the Southcoast Health, Inc., Confidentiality Agreement, Code of Conduct & Confidential Information training, and relevant hospital policies and procedures. All Council members agree to sign a Confidentiality Agreement annually.

In the event a PFAC member(s) has input regarding a patient or incident, that information shall be channeled to an appropriate hospital representative for follow-up.

Members are expected to serve on at least one committee proposed by the PFAC and/or Southcoast Health.

Members are expected to attend 70% of the Council meetings during a given calendar year. Any member who misses three or more meetings without being excused by the community co-chair shall be considered inactive and the membership committee will review their status. A member may request a leave of absence from the PFAC during their term due to unavoidable circumstances. The request is to be in writing and addressed to the Council co-chairs stating the reason for the leave and the length of time required. The co-chairs will determine if the request is accepted. A member may resign at any time



by providing written notice of resignation to the PFAC Co-Chairs. Such resignation will take effect at the time specified by the member.

Any community council member who fails to act in accordance with the responsibilities outlined herein may be dismissed from the council.

SOUTHCOAST STAFF RESPONSIBILITIES AND SUPPORT

Southcoast Health, Inc., will assign appropriate staff to serve as members of the Council. Other Southcoast staff can participate on the PFAC committees according to their expertise and interest. Staff will collaborate with the Council to promote the best possible practices and will work together in policymaking, planning and evaluating programs and services. The Council and Southcoast staff will work collaboratively on an annual plan to include goals and objectives. Southcoast staff will review and respond to requests and recommendations made by the Council. Southcoast staff will provide new member orientation as related to hospital policies, regulations, and compliance. Southcoast staff will provide adequate meeting space and staff support for the benefit of recording minutes, meeting notifications, attendance, record keeping, transmission of the PFAC Annual Report to the hospital's trustees and administration, to any agency or regulatory authority requesting or required by law to receive a copy, and will make a copy available to the public upon request. Council minutes will be maintained for a minimum of five (5) years.

COUNCIL LEADERSHIP

The Council shall have two co-chairs, a Southcoast staff member, and a community member.

The Southcoast community co-chair is appointed by the administration, and the community co-chair serves until the position is vacated. The Co-Chair may resign from the position with a thirty-day (30) notice to the Council. The Council may choose a replacement to serve as co-chair or leave the position open until a replacement is appointed.

Co-chairs schedule and cancel meetings, set the agenda, preside over the meetings, and coordinate between Council members and Southcoast staff when necessary.

The Co-chairs of the Council can form committees as needed including as hoc committees.

Non-council community and hospital members may serve on Council committees at the discretion of the council.

COUNCIL COMMITTEE CHAIRPERSONS

Committee Chairpersons may be selected by the Council Committee Co-Chairs and reaffirmed by the Council.

COUNCIL MEETING SCHEDULE

The Council meets monthly, except during July and December, on the fourth Monday of each month from 5:00pm to 6:30pm unless otherwise indicated. Special meetings may be called by either or both co-chairs as deemed necessary with given notice of 48 hours of the meeting schedule and agenda.

Quorum - the council will abide by a 50% quorum in order to conduct business.



Voting may be conducted electronically or at meetings for most items requiring a vote. A vote requires a response (yes, no, or abstain,) from a quorum of members.

CHANGES TO THE PATIENT & FAMILY ADVISORY COUNCIL DOCUMENT

The Council agrees to review this document every two years on Policies and Procedures, and can be modified by a majority of the Council present. These by-laws may be altered, amended or repealed and new by-laws may adopted by the Council at any regular or special meeting of the Council providing notice is given of such a meeting, and notice is given of a proposed change in the by-laws. Any change to the bylaws requires an affirmative vote of a majority of the Council present at such meeting. Two weeks' notice must be given to the entire Council of any proposed changes.