Introduction:

Advancing patient and family engagement within health care organizations and across the 'system of care' is a key commitment articulated in Ontario’s Patients First Act (the Act). It is, with this important objective in mind, that patients and family members are invited to partner with health care providers and leaders to shape the quality of service and health care delivery. Through the sharing of unique health care stories, opinions, perspectives and experiences, the voices of patients and family members will influence, shape and co-design programs and services within Osler and beyond.

Mandate:

The purpose of the William Osler Health System (Osler) Patient/Family Advisory Council (PFAC) is to provide a highly effective and meaningful forum for shared leadership and decision making amongst patient/family advisors (PFAs) and staff/physicians with the goal to advance the patient/family experience within the hospital and along the continuum of care. This work is supported by Osler’s Vision, Mission and Values.

Objectives:

1. Identify and advise on opportunities to incorporate patient/family member perspectives and voices in initiatives that seek to better integrate care within Osler and where appropriate across the Central West region.
2. Model and enable effective patient/family engagement within Osler.
3. Provide advice on recommendations about health care access and/or service delivery improvements from the patient/family perspective.
4. Review and advise regarding Osler strategic, quality, annual business plans and other key planning initiatives.
5. Provide input on and/or co-develop Osler policies and standards that guide Osler services and initiatives, especially related to patient centred care practices and patient/family engagement.
6. Recommend strategies and practical ideas for improving patient care, patient/family communication, recognition and support.
7. Use data to inform recommendations where and when appropriate.
8. When required, engage in outreach and consultation to extended community stakeholders.
9. Work in partnership with and engage in co-design opportunities with internal and external stakeholders.
10. As appropriate, link and collaborate with other local and provincial patient and family advisory groups.
11. Participate in employee orientation, staff education and training and select recruitment panels as needed.
12. Participate in or co-lead Osler specific committees.
13. Build capacity in members so that both individual and collective insight, wisdom and expertise is identified, leveraged and acted upon as a resource.
14. Ensure the role of PFAC is well understood and the PFAC is easily accessed for full optimization of its purpose.
15. Select Patient and family Advisors may also be asked to provide individual consultation for various ad hoc project or initiatives.

When executing its mandate, the PFAC (The Council) will adhere to the following principles:

- The Council will make every effort to provide informed advice on Osler policy and program initiatives.
- The Council will take into account population health and health equity in making its recommendations.
- Osler will respond to the Council’s advice, with the final decision remaining with the Osler Quality Governance Council, Board of Directors, CEO or other leadership staff as appropriate.
- The Council will work in alignment with best practices identified in the Health Quality of Ontario (HQO) Patient and Family Engagement Framework.

Accountability:

- The Council will report to the Quality Governance Council. The CPEO (delegate) will update the Patient Experience Subcommittee and the Quality Governance Council on a monthly basis. An annual report will be submitted to the Quality Governance Council and will be presented by the Co-Chairs in person.
- Unit or Program PFACs will report through to their respective program leadership groups.

Membership:

- Council Members shall be members of the public. Because elected representatives, practicing healthcare professionals, paid employees of health charities, employees of companies in health industries, elected officials and employees of provincial and federal health ministries and agencies already have a strong voice in making their opinions known to decision makers, these persons are not eligible for membership.
- Council Members will need to complete a Peel Police Vulnerable Sector Check (Brampton residence) and a Toronto Police Service Vulnerable Sector Screen (Etobicoke residence) prior to being offered a position on the Council.
• Each Council Member will be required to sign a confidentiality agreement.
• The Council will include between 15-20 members, who ideally represent Osler’s diverse community. Membership will also represent experiences across different programs and sectors, various social determinants of health and a variety of skill sets.
• The role of a Council Member will be to share his/her unique health care stories, opinions, perspectives and lived experiences to health shape the policies, program and initiatives that include patient care at Osler. As needed, and based on their interests and experiences with different aspects of the health care system, Council Members may participate on focused sub-committees or working groups.
• Membership will be a combination of PFAs and Osler Staff, with approximately a 3:1 PFA to staff ratio.
• Required membership includes two Co-chairs. One being the Chief Patient Experience Officer (CPEO) and the other being a PFA. Other required members are the Director, Patient Experience and the Director, Quality and Professional Practice.
• Additional guests will be invited ad hoc for subject matter expertise.
• Present at each meeting, Osler will provide administrative support for minute-taking and general administrative support.
• Members shall be appointed for a term of up to 2-3 years. Length of term will be discussed with potential members and may be varied to allow for staggering. Members may be re-appointed for an additional term at the discretion of the CPEO.
• New members will be recruited through an application and pre-screening process.
• Member attendance and participation is reviewed on an annual basis.

Election of Co-Chair

• The CPEO will appoint, at his/her discretion, the Co-Chair for a period of 2 years, or for an appropriate shorter term determined by the CPEO.

Roles and Responsibilities

Council Members

The role of Council Members is to provide meaningful advice to Osler based on the patient and family experience, reflective of the CW community. This includes:

• Reviewing and providing feedback on Osler documents, proposals, and plans.
• Doing their utmost to attend each meeting of the Osler PFAC, either in person or by teleconference
• Being prepared to be active participants in each meeting (e.g. all meeting materials should be read prior to each meeting)
• Identifying opportunities for improvement in the planning and delivery of health care services.
• Participating in initiatives where the patient’s voice can inform improvements outside of the PFAC.
• Requesting follow-up and feedback in response to recommendations.
• Approving and adhering to these Terms of Reference, in collaboration with Osler staff as needed.
• Participating with the Council mandate.

**Co-Chairs**

In addition to the Council Member’s responsibilities outlined above, Co-Chairs will also:

• Include the CPEO and one PFA
• Liaise between the Council and the Quality Governance Committee, Board of Directors and CEO as needed.
• Encourage participation and active involvement among members.
• Lead and facilitate Council meetings for participants attending either in person or by teleconference.
• Attend external meetings on behalf of the Council as required.
• Set the agenda for each meeting.
• Engage in final approval of an annual work-plan
• Assist in evaluation of the Council on an annual basis.
• In collaboration with Osler staff who support the Council, recruit and orient new Council Members, when required.

**Osler Staff**

The role of Osler staff is to:

• Provide administrative support which may include but is not limited to logistics and coordination, organization of meetings, project management of Council activities, orientation, research and analysis, report writing and translation, and performance measurement and evaluation
• Ensure an adequate budget is available to support the Council mandate and terms of reference
• Respond to Council feedback, advice and provide follow-up and updates as requested
• Facilitate discussions with the Osler Quality Governance Council, CEO, Board of Directors, Osler staff and others
• Prepare briefing notes about agenda items, ensuring they are clearly written and crafted with the perspective of what would be important to patient and family member advisors
• Answer questions about policies/issues answered in a respectful, helpful, and prompt manner
• Support the Co-Chairs and existing Council Members with the recruitment and orientation of new members
• Collaborate with the Co-Chairs, identifying appropriate topics for engaging the Council and developing appropriate meeting agendas and activities to elicit meaningful input.
• Provide follow-up reports to Council following specific recommendations.

Resigning/Dismissal from Council Prior to End-of-Term

In circumstances where a Council Member may need to leave the Council before the end of his/her term:

1. Council Members who elect to resign from their position are requested to provide thirty (30) days written notification of their decision to the Co-Chairs.

2. Where a Member has not fulfilled his/her role as per the Terms of Reference, the Council (via the Co-Chairs) may wish to inform the Quality Governance Council Co-Chairs of the Council’s concerns.

   • The Quality Governance Council Co-Chairs will use the information provided by the Co-Chairs and the Council to inform their decision on whether or not to end the Member’s appointment.
   • As a guiding principle, and before informing the Quality Governance Council Co-Chairs, the Council Co-Chairs will reach out to the Member in question to understand the reason(s) for his/her not fulfilling the role of Council Member in an attempt to mitigate/resolve the issue.
   • The Council will document this outreach process and the Member’s response for the Quality Governance Council Co-Chairs consideration.
   • If Council Members are unable to fulfill their role and or engage in behaviour that materially undermines the integrity of Osler, work of the Council or Council Terms of Reference they may be requested, by the Osler Quality Governance Council Co-Chairs, to resign from the Council.
Meetings

The Council will aim to convene monthly for in-person or teleconferenced meetings, committing to meeting no less than 8 times per year.

Reimbursement

Council Members are eligible for reimbursement of parking costs and other travel costs as negotiated. Light refreshments will be provided at each meeting.

Ethical Framework and Conflict of Interest

Council Members are required to fulfill the duties of their appointment in a professional, ethical and competent manner, and avoid any real or perceived conflict of interest as stated in the conflict of interest agreement.

Council Members have an obligation to declare a personal or pecuniary interest that could raise a conflict of interest concern at the earliest opportunity to the Chair(s). Each member has an ongoing obligation to disclose any actual, potential or perceived conflict of interest arising at any point during a member's term of appointment in regard to any matter under discussion by the Council or related to the Council's mandate.

Confidentiality and Ontario’s Freedom of Information and Protection of Privacy Act. (FIPPA)

Each Council Member will be required to sign a confidentiality agreement.

All confidential information including notes written by individual members in connection with their work on behalf of the Osler Council, is subject to the provisions of Ontario’s Freedom of Information and Protection of Privacy Act, R.S.O. 1990, c.F.31 and may be subject to disclosure in accordance with the Act.

Establishment of Subcommittees/Working Groups

As required, the Council may establish time-limited working groups to provide reports and recommendations to the Council on specific issues and/or priorities set by the Council. Working group membership may overlap with Council membership as appropriate. If interested, members can also get involved in other Osler engagement activities.

Amendments to Terms of Reference

These Terms of Reference will be reviewed after one year and every two years thereafter, and may be amended by the CPEO.