

#### DRAFT TERMS OF REFERENCE

# Patient and Family Advisory Council (PFAC)

The Provincial Cancer Care Program is committed to engaging with Newfoundlanders and Labradoreans to establish priorities and to ensure that Program decisions are informed from input by patients and families.

## Background

Eastern Health (EH) values the perspective of patients and families. The organizational vision of *Healthy People*, *Healthy Communities* can only be achieved by working with the patients and families whom we serve. Patients and families have always had an important role to play in the Provincial Cancer Care Program. The establishment of the Cancer Care Program's PFAC Council will serve to formalize roles and identify potential opportunities for patients and families to participate in improving the patient and family experience.

The Cancer Care Program's PFAC includes individuals (cancer survivors and family caregivers) representing those who have experienced cancer in NL as well as front line health care professionals and program leaders. An orientation will be provided to members through a coordinated approach outlined by Client and Family Centered Care Steering Committee.

## **Purpose**

The purpose of the Cancer Care Program's PFAC is to create a forum where patients and family members from across the province can provide insight, advice and support on a person-centered approach to the cancer care experience.

#### **Values**

Eastern Health's organizational values are key principles that guide the work and relationships within the PFAC.

The values of Client and Family Centered Care at Eastern Health (EH) include the following:

- Dignity and Respect: We listen to and honor the client and family views and choices. The
  client knowledge, values, beliefs and cultural backgrounds are respected and considered in
  everything we do.
- **Information Sharing:** We share complete unbiased information with clients and families to help them participate in their care.
- **Partnership and Participation:** Clients and families are encouraged and supported to participate in their care and in decision-making.
- **Collaboration:** Clients and families work together with health-care team members in planning and in making decisions for their health care.

# Scope

The scope of the PFAC is to share ideas based on patient/family member experience to:

- Provide input and feedback on cancer care initiatives to ensure that they are patient and family centered in design, delivery, and operation.
- Develop regional linkages.
- Provide input into ways and means to enhance the cancer care experience including diagnosis, survivorship, and palliative care.

### **Accountabilities of Membership**

All members of the PFAC will:

- Be committed to building a partnership of advisors and staff working together to understand the needs of the patients/families they represent.
- Collaborate on agenda items and priority areas of PFAC work.
- Uphold the values of EH in conducting the business of PFAC.
- Respect and understand the difference between advisory and advocacy roles and the Council's duty to represent the collective voice of all patients and families.
- Respect the confidentiality of the information and material presented and discussed.
- Regularly attend, prepare for (review minutes and reports) and participate in Council
  meetings and in various projects (focus groups, interviews) as required.
- Participate in periodic evaluations of the patient and family engagement process to assist in ongoing improvements of the work of the council.

### Membership

The Cancer Care Program's PFAC includes:

- Patients/families/caregivers will be comprised of individuals representing those who have experienced cancer in NL (up to 10 members).
- Members is recruited from the four Regional Health Authorities. Every attempt is made to achieve provincial representation as well as individual diversity including cancer diagnosis, demographics (age, gender) and background (cultural and spiritual beliefs).
- Staff membership will include frontline health care staff, leaders in the Program and a physician representative.
- Any gaps in committee membership can be addressed by inviting Ad hoc members to attend PFAC meeting(s).
- Co-chairs will be the Program Director and a Patient and Family Advisor.

#### **Membership Terms**

The membership term is up to a two year-commitment and are reviewed annually by the co-chairs. Additionally,

- Members may withdraw at any time through written or verbal notice;
- Consideration to maintain geographical representation and a balance of new and experienced members;
- A rolling membership model is used with an option of a two-year renewal;
- Members will be required to attend 50% of meetings to maintain membership on the Advisory Council.

### **Meetings Schedule:**

Quarterly meetings (September, December, March and June) or at the discretion of the Patient and Family Advisory Council Co-Chairs.