CHARTER:

Maternal Newborn Health Services Patient Family Advisory Council, GBMC HealthCare, Inc.

Patient Family Advisory Council (PFAC)
Maternal Newborn Health Services (MNH) at GBMC HealthCare, Inc.
Patient Family Advisors, representing the collective voice of all patients and families, will collaborate with the GBMC HealthCare system to achieve its goal of providing the highest quality of care to every patient, every time. This partnership aims to better understand the patient and family experience in an effort to prioritize and improve comprehensive and compassionate patient- and family-centered healthcare.
To assure alignment and integration of patient- and family- centered care, the PFAC will serve as a formal mechanism for involving patients and families in GBMC HealthCare policy and program decision-making. Examples of PFAC involvement includes, but is not limited to:
 Provide guidance to define the ideal patient experience for the continuum of care from preconception, prenatal, delivery, and post-partum. Collaborate with MNH leaders on quality and safety
projects as appropriate, including participation in teams and/or recruitment of other Patient Family Advisors (PFAs) to serve on time-limited, project-focused efforts.
One staff member and one PFA to serve as Co-Chairs, with staff support, to ensure responsibility for:
• Seeking, reviewing, and interviewing for PFA members.
• Setting and prioritizing agendas.
• Convening and facilitating meetings.
• Working effectively with all stakeholders in pursuit of the Council's vision that supports patient- and family- centered care.
• Participating in leadership training, coaching, and mentoring as needed.
 Membership totaling 12-15 members, with the goal of having at least one staff member and PFAC member from each of the following areas:

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	 NICU Parent Education Program Doula Program First-time and experienced parents Parents of multiples (twins, triplets, etc.) Patients who have utilized outpatient lactation support Membership will be diverse Significant other Inclusive of various populations (race, culture, sex, etc.)
Meeting Frequency:	 Full Council will convene in person six times per year. Meetings will not be held in December and July. Between full Council meetings, there may be conference calls, ad hoc meetings, and small group work scheduled as needed to complete ongoing work. The full-time commitment per month is expected to be approximately 3-4 hours for standing meetings, preparation, and correspondence.
Council Members' Responsibilities:	 Each PFAC member is responsible for actively participating to achieve the Council's purpose. PFAC member will be required to complete volunteer services orientation and yearly competencies. Share personal experiences, stories, observations and opinions as a patient or family member. Additionally, reach out broadly and listen to other patients, families, staff and community members as opportunities arise. Work effectively with other patients and families in identifying, promoting and ensuring a focus on creating the ideal patient experience. Review materials provided prior to each meeting and be prepared to provide input during the meeting. Each member is expected to attend all meetings or notify the Administrative Assistant if unable to attend. Council members will be allowed two absences a year and if more than two, member would agree to terminate membership.
Term:	• Council members will be appointed for a one-year term.
Effectiveness Goals:	 TBD by the PFAC. Council will be evaluated annually.
Review Charter:	• Annually by PFAC.

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