

BRANT COMMUNITY HEALTHCARE SYSTEM

# PATIENT AND FAMILY ADVISOR ORIENTATION HANDBOOK





# A Message from the President and CEO

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Welcome and thank you for joining the Brant Community Healthcare System Patient Family Advisor team.

Your role is vital to BCHS because your opinions, ideas and input will help influence change and have an impact on the care and services we provide to our patients and families.

We value your commitment and appreciate your willingness to volunteer as an advisor partner who will help us transform local health care.

A key goal of the BCHS Strategic Plan is to collaborate with patients and the community to develop an integrated patient and family focused health care system.

Thank you for choosing to be a BCHS Patient Family Advisor – we look forward to working with you!

Sincerely,



David McNeil





## Introduction

Patient and Family Advisors (PFA) have an interest in making a positive difference at Brant Community Healthcare System (BCHS).

This guide will help you develop a good understanding of what it means to be a patient family advisor and how you will work together with BCHS employees. Our goal is to work collaboratively to ensure all members are fully engaged in a meaningful way.

## BCHS Mission, Vision and Values

### Our Vision

Exceptional Care – Exceptional People

### Our Mission

Working together to build a healthier community.

### Our Values

Compassion, Accountability, Respect, Equity

### Strategic Goals

- Advance Quality and Safety
- Partner to Transfer Care
- Support and Empower People
- Build Sustainability
- Champion Health Equity



## Patient Declaration of Values

### Respect and Dignity

Valuing the uniqueness of others and treating everyone with respect and dignity

### Empathy and Compassion

Genuinely caring about others

### Transparency

### Accountability

Acceptance of full responsibility for tasks, actions, outcomes, and risks

### Equity and Engagement

High quality individual care for all



# Roles and Responsibilities

## PATIENT ADVISOR

- Believes patient and family perspective is important
- Develops understanding and leads issues from the patient/family perspective
- Provides the patient/family perspective during engagement activities
- Provides information about preferred method of communication e.g. email, phone, text
- Seizes learning opportunities

## BCHS EMPLOYEE LIAISON

- Believes the patient and family perspective is important
- Participates in engagement activity with both advisor and leader, defining a beginning and end to the work
- Gets to know the advisor
- Ensures the patient or family advisor receives an orientation to the work
- Acts as primary contact person for the advisor during engagement activities
- Evaluates the success and challenges of the engagement

## What is Patient/Family Centered Care?

Patient/family-centered care means BCHS is focused on delivering safe and competent care that is culturally appropriate, compassionate, and respectful - designed specifically to meet the needs, values, beliefs and preferences of clients and their family members.

## How do health care providers involve patients and families in patient/family centered care?

- Engages clients and families to ensure their understanding and meaningful participation in their care
- Monitors and evaluates services and quality with input from clients and families
- Co-designs services with health care providers and clients
- Includes client and family representative on advisory and planning groups
- Partners with clients in planning, assessing, and delivering care
- Visit: [Accreditation Canada](#)





## What Does a PFA Do?

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As a PFA, you will help inform BCHS about how best to meet the needs and priorities of our patients, families and communities by sharing your opinions, ideas, and first-hand knowledge about issues that may have an impact on patient/family experience. PFAs work collaboratively with employees to ensure BCHS is providing the best possible experience for patients, family members and caregivers.



## Definition

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A role that gives patients and families the ability to provide direct input and influence on the policies, programs, and practices that affect the care and services received by individuals and families.

## Who Can Be a PFA?

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Anyone can become an advisor. This role requires someone reliable, trustworthy and committed.

**A medical background is not a requirement to be an advisor**



## What is a PFA Expected to Do?

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- Share your patient/family experience and ideas about improvements to the health care system
- Provide advice regarding policies, programs and practices that shape patient care and services at BCHS
- Understand and support patient/family centered care
- Generate new ideas to improve standards of care
- Gather information from patients and families and share with BCHS to improve processes
- Participate in committees by providing a patient/family perspective
- Give advice for specific projects that may affect patient care. This includes sharing personal stories, participating in meetings, focus groups and surveys and reviewing patient/family materials.
- Have a positive outlook and a sense of humor
- Be passionate and eager to contribute
- Attend monthly committee meetings

## How Can I Be a Successful PFA?



- Be respectful of others and their opinions
- Be comfortable speaking in a group and working with others
- Be a good listener
- Use your personal experience constructively
- See past your own experience
- Focus on the big picture
- Pass no judgement
- Have a positive attitude
- Be able to work collaboratively with other families and health care providers
- Have a desire to expand your knowledge and skills
- Have a goal to help make positive and meaningful change
- Keep all patient and organizational information private and confidential

## Responsibilities and Accountability of a Patient and Family Advisor Are:

- To be accountable to the Quality and Risk Department and supported by Patient Relations, Volunteer Services and Communications.
- To be connected to the lead(s) of the councils and their committees. It is the responsibility of the leads to connect with PFAs to discuss expectations and time commitments. Review of responsibilities will be discussed between the lead and the PFA to determine the skills and interests of the person.
- To uphold all BCHS policies and procedures including but not limited to: Code of Conduct, Privacy and Confidentiality, Scent Free Environment, Infection Control, etc.
- To be responsible to review materials provided before each meeting to be adequately prepared.
- To be responsible for attending their committee and council meetings.
- To not discuss confidential information outside Council/committee meetings.

**\*Advisors on the CEO Patient and Family Advisory Council (PFAC) will attend all monthly meetings. If you cannot attend you must inform the council of your absence.**





## Orientation and Support

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- The volunteer coordinator will provide hospital orientation and support to the PFAs.
- PFAs will be connected to the lead of any committee, councils or working groups they have agreed to serve.
- All new PFAs will be paired with a current PFA member who will act as their mentor and support person.
- **For more information contact the Patient Relations Coordinator at [patientrelations@bchsys.org](mailto:patientrelations@bchsys.org) or at 519-751-5544 extension 2395.**

## How to be an Effective Patient and Family Advisor

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- Believe you can make a positive difference for others by sharing your patient/family health care experiences.
- Use positive communication and listening skills.
- Be open-minded with a positive attitude.
- Have a desire to find solutions and help provide change that will enhance your role.
- Support BCHS in our efforts to provide exceptional patient care.
- Please be patient as change doesn't happen quickly. It's a process.



## Prepare in Advance for Meetings

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Attending meetings is a major part of the PFA role. We have listed some common terms that will be used during the meetings you attend. Please note, each group will have its own norms and culture. You're encouraged to connect with the committee chair if you have questions.

- **Agenda:** a document listing the date and time of the meeting and items that will be discussed.
- **Meeting Minutes:** these are notes about the meeting discussion, action items and next steps. As a member of a group, you are expected to review the minutes from the previous meeting before attending the next meeting. Please notify the note taker should corrections be required.
- **Chairperson:** the person who is in charge of running the meeting. This may be the same individual for each meeting or the group may designate a different chair for each meeting.

## Getting Ready for Your First Meeting

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Before your first meeting, please ensure you have the following items:

- Paper/notebook, pens and documents you received before the meeting including the agenda, minutes and discussion topics. You may wish to use a binder to organize all documents and papers.



## Why is it important for hospitals to have patient and family advisors?

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PFA's have first-hand knowledge and insights about how the local health care system can improve satisfying patient and family needs and health outcomes. With a deep understanding gained through personal experience, PFA's look at things through a unique lens which can assist the hospital in adjusting or enhancing services.

When patients and families are involved, they can help drive changes to health care services which help boost patient experience and satisfaction often resulting in cost savings. Patient participation has significant impacts on patient safety, harm reduction, reducing wait time and the job satisfaction of health care providers.

## How Can I Get Involved?

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- As a PFA you can participate in many ways
  - as much or as little as you feel comfortable.
- There are opportunities to participate including sharing personal stories, serving on program councils, working groups, committees, special Projects, ad hoc groups, interview panels and participating in the Accreditation process.
- After serving as a PFA for 1-year (minimum) you can apply for positions at the Board and Senior Leadership levels.
- Your commitment will vary depending on your availability and interest.
- Virtual meetings are scheduled to accommodate those who cannot meet in person.





## The Power of Story Telling

The best way a PFA can begin their role is to share their personal and family stories about health care experiences. These personal stories provide important context and will help BCHS employees develop a better understanding of the patient/family perspective. From you, we can learn and appreciate how it feels to be a patient or family member receiving care from BCHS and make improvements, adjustments and changes as needed.

Story telling is a powerful tool which helps create real conversations from a grassroots level and helps bring constructive change to health care planning and delivery. When asked to share your story, here are some questions to ask yourself:

- What am I willing to share/not to share?
- Do I have my family's permission to speak about our experience?
- What is the main point of the story – what do I want people to take away after hearing my story?
- Is my health care experience a negative one that is still bothering me? If so, am I able to share the experience in a constructive way?

When you share your story, think carefully about the one main message you want to get across to your audience. Remember to speak from your heart, be real, be respectful and present negative experiences in a constructive way.

When ready to tell your story, here are some helpful hints to keep in mind:

- Know your audience and prepare you story with them in mind
- Rehearse ahead of time
- Balance positive experiences with opportunities for improvement
- Use your own style and make eye-contact with the audience
- Prepare in advance for questions from your audience.  
If you don't know the answer, be honest and tell them.



## Other Advice for Compelling Storytelling:

- Keep it short. Two minutes is the ideal length for keeping people's attention.
- Keep it simple. Your story should be built around a single message that is clear and easy to understand.
- Use the present tense. This allows your audience to experience as if they are part of the story.
- Build in visual images. This will help people store and retain these images, giving a story lasting qualities.
- Repeat or reinforce a key phrase or concept. This will help your audience be clear about your message.

## What You Can Expect as a PFA

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- Availability of accessible meetings rooms or virtual meeting links
- Advisors will be full members of their committees
- You'll receive a rewarding experience and make a positive difference in how local health care is delivered at BCHS
- With so many complicated health terms there will be short terms and abbreviations. These terms are clearly defined/explained in our list of common acronyms.

## A List of Common Health Care Acronyms:

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<b>AC</b>	Accreditation Canada	<b>MAC</b>	Medical Advisory Council
<b>AE</b>	Adverse Event	<b>MDR</b>	Medical Device Reprocessing
<b>ALC</b>	Alternate Level of Care	<b>MIP</b>	Medical Integrated Unit
<b>ALOS</b>	Average Length of Stay	<b>MoHLTC</b>	Ministry of Health & Long-Term Care
<b>CCAC</b>	Community Care Access Centre	<b>MOH</b>	Ministry of Health
<b>CCC</b>	Complex Continuing Care	<b>MRP</b>	Most Responsible Physician
<b>CCO</b>	Cancer Care Ontario	<b>OHA</b>	Ontario Hospital Association
<b>CCU</b>	Critical Care Unit (or ICU Intensive Care Unit)	<b>OHT</b>	Ontario Health Teams
<b>CHC</b>	Community Health Centre	<b>ONA</b>	Ontario Nurses Association
<b>CIHI</b>	Canadian Institute for Health Information	<b>OR</b>	Operating Room
<b>CMHA</b>	Canadian Mental Health Association	<b>OT</b>	Occupational Therapy
<b>CPSI</b>	Canadian Patient Safety Institute	<b>PACU</b>	Post-Anaesthetic Care Unit
<b>CPSO</b>	College of Family Physician and Surgeons of Ontario	<b>PFA</b>	Patient Family Advisor
<b>CQI</b>	Continuous Quality Improvement	<b>PFAC</b>	Patient Family Advisory Council
<b>DEC</b>	Diabetes Education Centre	<b>PRN</b>	("As needed")
<b>DI</b>	Diagnostic Imaging	<b>PSW</b>	Personal Support Worker
<b>ECFAA</b>	Excellent Care for all Act	<b>PT</b>	Physiotherapy
<b>ED</b>	Emergency Department	<b>QCB</b>	Quality Council of the Board
<b>ER</b>	Emergency Room	<b>QI</b>	Quality Improvement
<b>EHR</b>	Electronic Health Record	<b>QIP</b>	Quality Improvement Plan
<b>FBC</b>	Family Birthing Centre	<b>RiskPro</b>	Incident Reporting System
<b>FIPPA</b>	Freedom of Information & Protection of Privacy Act	<b>RN</b>	Registered Nurse
<b>GP</b>	General Practitioner	<b>RNAO</b>	Registered Nurses Association of Ontario
<b>HIM</b>	Health Information Management	<b>ROP</b>	Required Organizational Practice
<b>HNHB</b>	Hamilton Niagara Haldimand Brant	<b>ROI</b>	Release of Information
<b>LHIN</b>	Local Health Integration Network	<b>RPN</b>	Registered Practical Nurse
<b>HR</b>	Human Resources	<b>RPNAO</b>	Registered Practical Nurses Association of Ontario
<b>IPAC</b>	Infection Prevention and Control	<b>SBAR</b>	Situation, Background, Assessment, Recommendation
<b>ICU</b>	Intensive Care Unit	<b>SW</b>	Social Worker
<b>ISU</b>	Integrated Stroke Unit	<b>TOA</b>	Transfer of Accountability
<b>LTC</b>	Long Term Care	<b>TOR</b>	Terms of Reference
		<b>VSL</b>	Value Stream Leader



## Don't Be Discouraged - This work can be slow

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Advisory committees often work at a slow pace which can be frustrating for PFAs and members of the community who may expect quick results and turn-around times. Change in health care takes time and it may be a considerable length of time before committee members begin to see the impact of their efforts.

Committees work at a strategic level which means providing input to influence the philosophy of health care services and not necessarily the delivery of frontline health care. Your role as a PFA is important and is a longer-term investment of effort. Please be patient and continue to raise timely and important themes for your committees to consider.

## Getting Involved in Quality Improvement

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Providing safe, high-quality care for our patients is a top priority for Brant Community Healthcare System.

The goals and action plans set for the year ahead to ensure each and every patient and their families have a good experience while receiving care.

[View our Quality Improvement Plan here.](#)



# Maps & Service Directory

## Brantford General Hospital

### A Wing

#### Level 2

Chapel/Pastoral Care  
CCAC Office

#### Level 1

Tim Hortons  
Gifts Plus Gift Shop  
Business Cashier  
Volunteer Association  
BCHS Foundation  
SC Johnson Dialysis Clinic

#### Main

Release of Information  
Infection Control  
Engineering & Maintenance

### B Wing

#### Level 8

Medical D

#### Level 7

Medical A

#### Level 6

Medical B

#### Level 5

Surgical

#### Level 4

Paediatrics

#### Level 3

Family Birthing Centre

#### Level 2

Inpatient Rehab

#### Level 1

Emergency Department  
Switchboard  
Security  
Patient Relations

#### Main

Environmental Services

### H Wing

#### Level 2

Administration Office

#### Level 1

Communications  
Medical Affairs

### C Wing

#### Level 7

Palliative/Complex  
Care

#### Level 6

Laboratory

#### Level 5

Medical Cardiology

#### Level 4

Medically Complex

#### Level 3

Family Birthing Centre  
Special Care Nursery

#### Level 2

Integrated Stroke Unit

#### Level 1

Emergency Department

#### Main

Nutrition Services

### D Wing

#### Level 5

Critical Care

#### Level 2

Therapy Services

#### Level 1

Diagnostic Imaging (MRI,  
Fluoroscopy, X-Ray, CT  
Scan, Nuclear Medicine,  
Ultrasound,  
Mammography, OBSP)  
Cardiac Diagnostics

#### Main

Ambulatory Care  
Oncology Clinic  
Fracture/Orthopaedic  
Clinic  
Patient Registration  
Tim Hortons 2

#### Lower Level 1

Operating Rooms  
Day Surgery  
Post Anesthetic Care

#### Lower Level 2

Stores/Receiving  
Medical Device  
Reprocessing  
Mail Room

### E Wing

#### Level 5

Financial Services

#### Level 4

Human Resources

#### Level 3

Quality & Risk  
Organizational  
Development

#### Level 2

Information Technology

#### Level 1

Outpatient Mental  
Health  
Mental Health &  
Addictions

#### Main

Pre-op Clinic  
Women's Health Clinic  
Mohawk Classrooms 1&2  
Diabetes Education

#### Lower Level 1

Inpatient Mental Health  
Morrison Auditorium

#### Lower Level 2

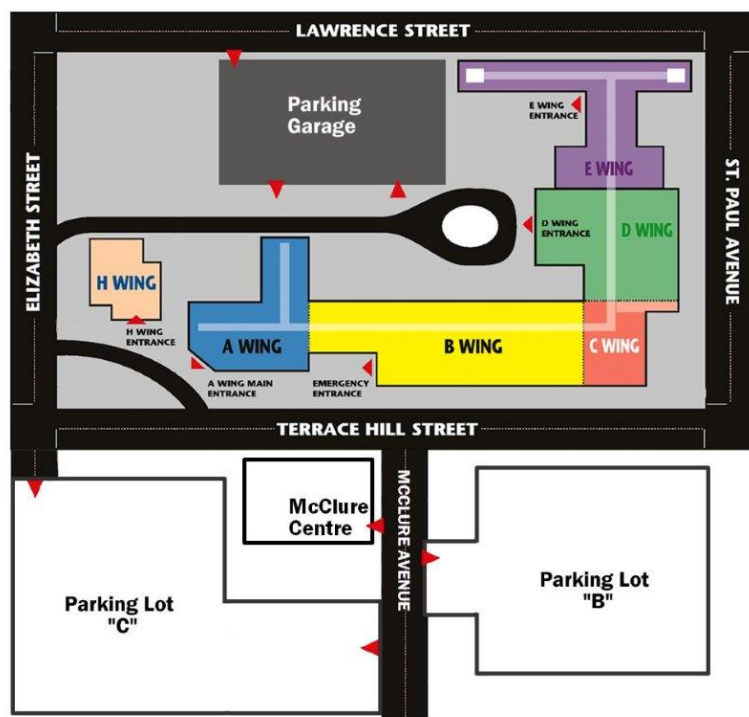
Psychiatrist Offices

#### Lower Level 3

Boardroom  
Purchasing  
Pro Resp.

#### Lower Level 4

Redevelopment





## Staff Uniform Colour Guide

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At BCHS, many of our staff wear different uniforms and the colours are different depending on the department. See below.

<b>Nursing (Registered Nurse or Registered Practical Nurse)</b>
<b>Personal Support Worker</b>
<b>Environmental Services Aide</b>
<b>Registration / Unit / Service Clerk</b>
<b>Therapy Services</b>
<b>Medical Lab Technologist / Assistant</b>
<b>Diagnostic Imaging / Cardiac / Pulmonary Function / EMG</b>
<b>Material Handler</b>
<b>Nutrition Aide</b>

# Codes

MEDICAL CODES		
Blue	Cardiac arrest requiring Code Team response	2nd Code Blue occurring
Navy	Medical emergency requiring Code Team response	2nd Code Navy occurring
Pink	Neonatal emergency requiring Code Team response	2nd Code Pink occurring
EMERGENCY CODES		
Amber	Child missing or abducted within the site	Child missing or abducted within the community
Aqua	Significant flooding, leak or water damage	Flooding, leak or water damage impacting staff and patient safety and patient care
Beige	ICT system severely impaired; workaround available	ICT system down impacting staff, patient safety and patient care
Black - Bomb Threat	Non-specific bomb threat received	Specific bomb threat received
Black - CBRNE	Not applicable	CBRNE or unknown agent intentionally released inside hospital
Black - Suspicious Package	Suspicious package assessment suggests concern	Package looks like a bomb
Black - Suspicious Vehicle	Suspicious vehicle assessment suggests concern	Vehicle looks like a bomb
Brown	Hazardous spill requiring decontamination by external resources	Contaminated or injured person; rescue decontamination required by Fire Department
DECON	Contaminated patient presents; staff can safely decontaminate	Contaminated patient presents requiring decontamination by Fire Department
Green	Horizontal or vertical evacuation	Full building evacuation
Grey - Elevator Failure	Failure of elevators affecting patient safety	Entrapment
Grey - External Air Exclusion	External contaminated air affecting non-clinical areas	External contaminated air affecting staff, patient safety and patient care
Grey - Internal Noxious Odour/Gas Leak	Internal noxious odour/gas leak affecting non-clinical areas	Internal noxious odour/gas leak impacting staff, patient safety and patient care
Grey - Medical Gas Failure	Medical gas failure affecting non-clinical areas	Medical gas failure affecting vented patients and clinical areas
Grey - Utility Failure	Unplanned utility interruption affecting non-clinical areas	Unplanned utility interruption affecting entire site(s)
Maroon	Weather severely impacting community	Weather severely impacting the hospital; Tornado Warning issued or sighted in the area
Orange	Event-caused Mass Casualty Incident; hospital is able to operate within current capabilities	Event-caused Mass Casualty Incident; requiring additional resources beyond the On-Call system
Purple	Not applicable	Hostage taking on-site
Red	Fire alarm sounded; no signs of smoke or fire	Fire alarm sounded; signs of smoke/fire
Silver	External - lockout: person with a weapon in the community with possible threat of coming on-site	Internal- lockdown: person with a weapon in on-site with the intent to cause harm
White	Staff feel threatened and require security response	Violence requiring immediate emergency police response
Yellow	At-risk adult missing within the hospital	At-risk adult has left the building and is missing within the community

# Program Councils

**Emergency Department Program Council** - [Monthly](#)

**Critical Care Program Council** - [Monthly](#)

**MIP Program Council** - [Monthly](#)

**C5 Medical Cardiology Council** - [Monthly](#)

**Oncology Quality Council** - [Quarterly](#)

**Endoscopy Council** - [Monthly](#)

**Mental Health & Addictions Quality Council** - [Monthly](#)

**Mental Health & Addictions Youth Council** - [coming](#)

[clairekislinsky@bchsys.org](mailto:clairekislinsky@bchsys.org)

**Stroke Council** - [coming Quarterly](#)

**Operating Room/Surgical Program Council**

**Rehab, Complex and Transitional Council** - [Monthly](#)

**Maternal Child Program Council**

## Committees

### Emergency Department, Medicine & Critical Care

- Critical Care Program Council
- MIP Program Council
- C5 Program Council
- Patient Flow Steering Committee
- Dialysis Steering Committee
- Respiratory Interventions Committee
- Code Blue Committee
- TGLN Organ & Tissue Donation Committee
- Medication Safety Committee
- Medication Utilization Committee
- Medication Reconciliation Committee Meeting

### Operating Room, Surgical, Paediatrics, Family Birthing Centre

- Skin & Wound Committee
- Oncology Quality Council
- Endoscopy Committee

### Human Resources

- ONA Hospital Association
- SEIU Labour Management
- Joint Health & Safety Committee
- Risk Assessment (working group)
- AODA-Accessibility Committee
- COVID Safety Committee
- Time and Attendance Management - the Steering Committee and the Program Team (Execution Committee)\*
- Struder - Accountability Team (working group - which is the exec team)\*
- Indigenous Cultural Safety Committee
- Recognition Committee
- Wellness Committee

Not applicable

### Other

- Medical Advisory Committee
- Senior Executive Team
- Operations Forum
- Corporate Operations Forum

Not applicable

### Mental Health, Rehab, Complex Care, Transitional

- MHA Quality Council
- Rehab, Complex and Transitional Council
- Stroke Council - [coming](#)
- ALC and Suicide Working Group - [coming](#)

### Finance, Decision Support, Facilities, Laboratory & Diagnostic Imaging

- Budget Committee
- Capital Committee
- Fiscal Advisory Committee
- ICT Steering Committee
- Decision Support Committee
- Master Planning
- Logistics
- Construction Safety Risk Group
- Space Allocation Committee
- Trillium Gift of Life
- Transfusion Committee
- Point of Care Committee
- DI: Quality Assurance (Physicians)
- DI Quality
- Radiation Safety Committee (Nuclear Medicine)

### Quality & Risk

- Critical Incident Review Committee
- Quality & Patient Safety Committee
- Emergency Management Program Committee
- Early Loss Working Group
- RL6 Working Group
- Falls Prevention Working Group

### Board Committees

- Board
- Executive Committee
- Audit Committee
- Governance Committee
- Resources Committee
- Quality Committee
- Joint Governance Committee



## Contact

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For more information check out our website or  
follow us on social media.



[www.bchsys.org](http://www.bchsys.org)

