



Patient and Family Advisor Orientation Handbook

Your voice and experience matter.





Strategic Plan 2025-2030

Brant Community Healthcare System

Vision Leading Beyond Care

Mission

Serving as an anchor for community well-being through healthcare excellence.

Values

Be Bold and Courageous
Commit to Excellence
Champion Equity
Be Trustworthy

Strategic Pillars

The 4 Ps



Patients



People



Partners



Progress



To view the full plan, visit bchsys.org/strategicplan

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LOCATIONS



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Brantford, ON N3R 1G9
519-751-5544



Willett Urgent Care Centre

238 Grand River Street N
Paris, ON N3L 2M7
519-442-2251



bchsys.org/pfa



Updated Sept. 2025

A MESSAGE FROM BRANT COMMUNITY HEALTHCARE SYSTEM

Welcome and thank you for joining Brant Community Healthcare System's (BCHS) Patient and Family Advisor team.

More and more, health organizations are beginning to engage patients and caregivers in the design and delivery of their health care. From the bedside to the boardroom, when patients and caregivers are engaged at the right times and in the right ways, it can have positive impacts on the quality of the health system.

A key goal of the BCHS 2025-2030 Strategic Plan is to prioritize high-quality, person-centered care and improve patient outcomes. 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 a Patient and Family Advisor.



*Bonnie Camm,
BCHS President and CEO*

Patient and Family Advisors (PFA) have an interest in making a positive difference at 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.

Land Acknowledgement

A Land Acknowledgement is a formal statement that recognizes the unique and enduring relationship that exists between Indigenous Peoples and their traditional territories.

To recognize the land is an expression of gratitude and appreciation to those whose territory you reside on, and a way of honouring the Indigenous people who have been living and working on the land from time immemorial.

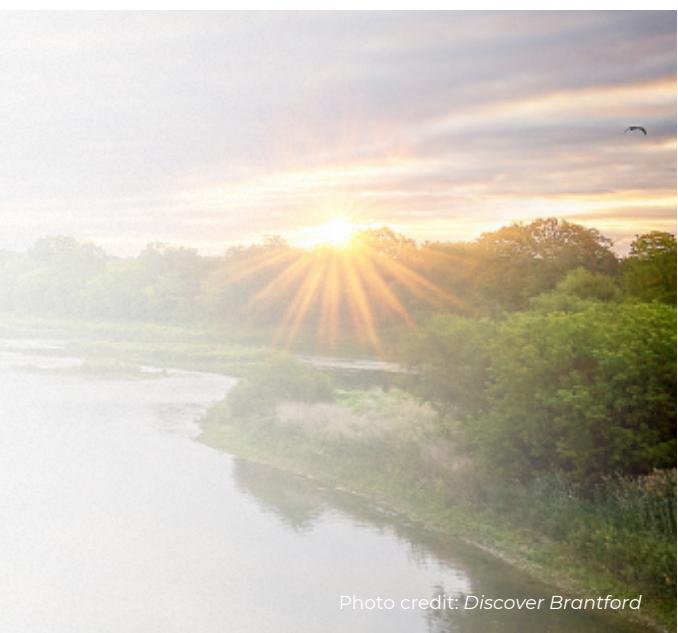


Photo credit: Discover Brantford

Please visit the BCHS website to read all three of our Land Acknowledgement statements.

PEOPLE-CENTERED CARE FRAMEWORK

What is People-Centered Care?

People-centered care at BCHS is an approach to the planning, delivery, and evaluation of health care that is grounded in mutually beneficial partnerships among health care providers, patients, and families.

People-centered care is working “with” patients and families, rather than just doing “to” or “for” them.

People-Centered Care is a true partnership on all levels where everyone around the table has a voice. PCC leads to better health outcomes, improved patient and family experience of care, better clinician and staff satisfaction, and wiser allocation of resources.



How do health care providers involve patients and families in people-centered care?

- Patients define their “family” and determine how they will participate in care and decision-making
- Engages patients and families to ensure their understanding and meaningful participation in their care
- Monitors and evaluates services and quality with input from patients and families
- Co-designs services with health care providers and patients
- Includes patient and family representative on advisory and planning groups
- Partners with patients in planning, assessing, and delivering care

Patient vs. People-Centered Care: What's the difference?

Health Standards Organization (HSO) and Accreditation Canada (AC) are shifting to People-Centered care which recognizes that patients are the experts of their lived experience, and health care providers are the experts in healthcare.



Lived experience expertise + Health care expertise = Safer and more inclusive care



Accreditation Canada and the **Excellent Care of All Act** specifies the importance of including the patient & family voice in decision making.

Volunteering to be a Patient and Family Advisor is YOUR opportunity to contribute to People-Centered Care by sharing your personal experience.



Reviewed by
BCHS Patient
& Family
Advisors

Accreditation Canada is interested in hearing directly from PFAs on how we are doing from their perspective, and how the PFA voice is involved with quality and safety initiatives. PFAs may participate on Accreditation interview panels, discussion groups and support Accreditation tracer training for staff.

PATIENT AND FAMILY ADVISORS

What is a Patient and Family Advisor?

Patient and Family Advisors (PFAs) are members of our community who have had lived experience as a patient, family member or caregiver, and who would like to offer their unique perspective to influence positive change at the hospital.

Patient and Family Advisors are champions of people-centered care.

- Advisors bring expertise about what it is like to be a patient or family member at BCHS.
- Advisors ensure that the voices of patients and families are heard, considered and included.
- Advisors work in partnership with staff and physicians to create a truly patient and family centered care experience through input into policies, programs and practices which affect patient care and services.

This is a volunteer position that will influence hospital decisions and provide a balanced approach to the development of hospital initiatives, programs, services, and policies.

PFA's work in partnership with hospital administration and senior management to co-create a Patient and Family Centered Care experience through the planning, delivery and evaluation of health care.

Why is it important for hospitals to have PFAs?

PFAs have first-hand knowledge and insights about how the local health care system can satisfy patient and family needs and improve health outcomes. With a deep understanding gained through personal experience, PFAs 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.

Getting Involved in Quality Improvement

Providing safe, high-quality care for our patients is a top priority for BCHS. 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](#)

What does a PFA do?

- Partner with staff to ensure that we are providing the best possible experience for patients and families.
- Participate in group discussions, focus groups, patient advisor panels, program councils, committees, and task forces by providing a patient/family perspective.
- Partner with staff to co-design programming and services based on your feelings and experiences.
- Share your patient/family experience and ideas about improvements to the health care system.
- Provide input based on your personal experiences regarding policies, programs and practices that shape patient care and services at BCHS.
- Understand and support people-centered care, and our commitment to cultural safety, including [Truth and Reconciliation Calls To Action](#).
- Support the BCHS commitment to improving access, equity, diversity, inclusion, and belonging within the organization.
- Co-design new ideas with staff to improve standards of care.
- Give input on 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 humour.
- Be passionate and eager to contribute.
- Attend all meetings that you've committed to.

What can you expect as a PFA?

PFAs are recognized as valued members of TeamBCHS. We partner with each PFA to curate involvement and experiences based on individual passion and system need.

Our 2025-2030 Strategic Plan highlights our commitment to providing high-quality, person-centered care, and the various ways PFAs can be involved in this work.

Patients **STRATEGIC PILLAR**

Engaging patients and families to co-design the best possible care experience through the growth and empowerment of our Patient Family Advisory Program.

This commitment is enhanced by the other 3 pillars - **People, Partners, and Progress** - as PFAs work collaboratively to build a culture of inclusion and excellence, participate in improving innovative health outcomes, and provide insights that shape the future of care.

Don't be discouraged – Good things take time

Work being done by advisory committees is a process that takes time. While this can be frustrating for PFAs and members of the community who expect quick results and turn-around times, 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.

Your participation will lead to a rewarding experience and make a positive difference in how local health care is delivered at BCHS.



HOW WILL YOU BE SUPPORTED AS A PFA?

Orientation

- 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.
- New PFAs will be paired with a current PFA who will act as their mentor and support person.

Patient and Family Advisor

- Believes the patient and family perspective is important
- Develops an understanding of the organization and provides suggestions on how we can improve our services
- Provides the patient and family perspective during engagement activities
- Seizes learning opportunities
- Feels comfortable asking questions to the BCHS employee leads

BCHS Employee Lead

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

For more information contact the Patient Engagement Coordinator at
patientfamilyadvisors@bchsys.org or at **519-751-5544 ext. 2177**

Accessibility for Ontarians with Disabilities Act (AODA) Considerations

- Availability of accessible meeting rooms or virtual meeting links

Civility and Respect

BCHS is committed to creating a welcoming environment where every person – patient, visitor, team member or community member – feels respected and valued, inclusive of identity, role, background or circumstance. This will increase safety, reduce stress, build relationships and foster excellence.

Civility and respect exist in a workplace where individuals treat one another and the communities they serve with dignity, empathy and cultural awareness. A respectful environment values all voices, acknowledges differences and encourages interactions grounded in equity, inclusion and mutual respect. It involves being mindful of power dynamics, recognising diverse lived experiences and fostering belonging for everyone.



RESPONSIBILITIES AND ACCOUNTABILITY OF A PATIENT AND FAMILY ADVISOR

- PFAs are accountable to the Quality and Risk Department and supported by the Patient Engagement Coordinator and Volunteer Services.
- PFAs are expected to uphold all BCHS policies and procedures, including but not limited to: Code of Conduct, Privacy and Confidentiality, Scent Free Environment, Infection Control, etc.
- When PFAs join a council or committee, they will be connected with an appropriate lead for that council or committee. 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.

• If you have any feedback or concerns regarding your role as a PFA, please speak with the Patient Engagement Coordinator.

• If you have concerns regarding a volunteer role not as a PFA, please speak with the Volunteer Coordinator.

• Organizational feedback needs to follow the reporting structure on page 12 (unless it is feedback specific to the committee or council that you sit on, then you can bring that to your committee or council lead).

Please note that regularly attending meetings is a major expectation of the PFA role. If you are sitting on a committee or council and no longer wish to be involved, please communicate that change with the Patient Engagement Coordinator to discuss other opportunities.



*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.

Reporting Conflict of Interests

! It is your responsibility to disclose any conflicts of interest that may arise during your involvement as a PFA. This includes, but is not limited to, soliciting of professional services or business promotion.

Logging Volunteer Hours

As a volunteer, PFAs are required to log their hours in one of the following ways:

Option 1

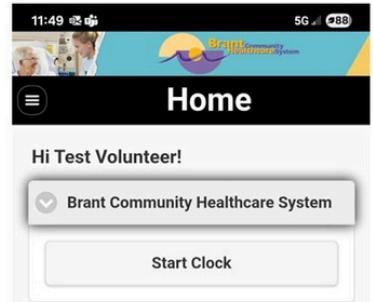
Come to the Volunteer Office (BGH A-Wing, Level Main) and sign in and out at the beginning of your shift/meeting.



Option 2

Download the Better Impact App and log hours on the app by using the Start Clock option.

Don't forget to STOP the clock when you are done.

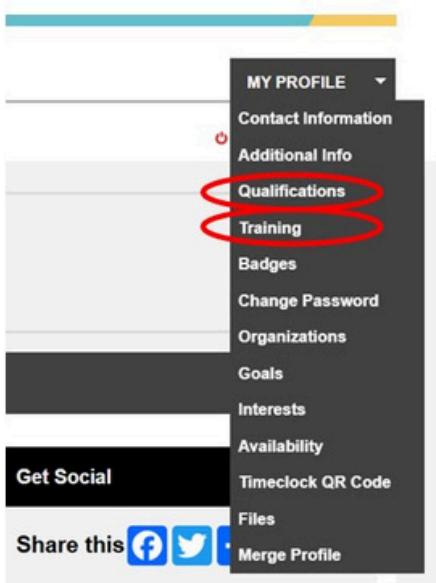


Option 3

Login to www.myimpactpage.com using your username and password. Be sure to select the activity you are logging hours for.

A screenshot of the MyImpactPage.com website. The top navigation bar includes links for HOME, OPPORTUNITIES, SCHEDULE, HOURS (which is highlighted in yellow), and CONTACT, along with a MY PROFILE dropdown. Below the navigation is a "Hours" section with a "Log Hours" button. The "Log Hours" form has fields for "Activity" (a dropdown menu), "Date Volunteered" (09/04/2025), and "Hours" (0). At the bottom are "Save and Log Another" and "Save" buttons.

Completing Required Training and e-Learning Modules



Step 1: Go to www.myimpactpage.com and login using your username and password.

Step 2: Click on My Profile and choose **Qualifications**.

Step 3: Scroll to find qualifications with a triangle beside them. This will indicate that the course has expired and is due to be taken again.

Code of the Month - Code Orange	<input type="text"/>	<input type="text"/>
Code of the Month - Code Pink, Navy and Blue	<input type="text"/>	<input type="text"/>
Code of the Month - Code Maroon	<input type="text"/>	<input type="text"/>

Step 4: Click on My Profile and choose **Trainings**.

Step 5: Click on the Take button to complete the required e-learnings you identified in Step 3.

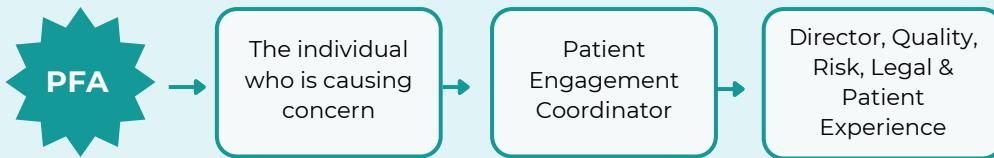
Code of the Month - Code Navy, Pink and Blue	Expires 9/1/2024	<input type="button" value="Take"/>
Code of the Month - Code OB		<input type="button" value="Take"/>

Accountability Reporting Structure

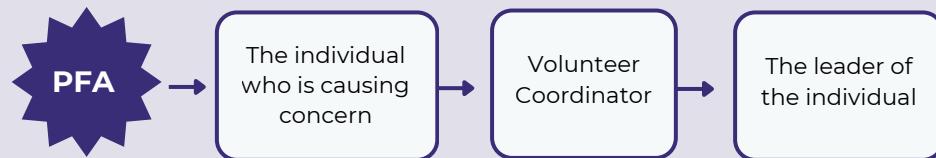
Knowing who to report or direct your questions, comments, or concerns to is an important part in ensuring your voice as a PFA is heard. **You report directly to the Patient Engagement Coordinator.**

This simplified organizational chart illustrates how your work is tied to the organizational reporting structure. As you begin to participate in working groups, committees, councils, etc., you will also have the opportunity to engage with a number of different stakeholders across the organization.

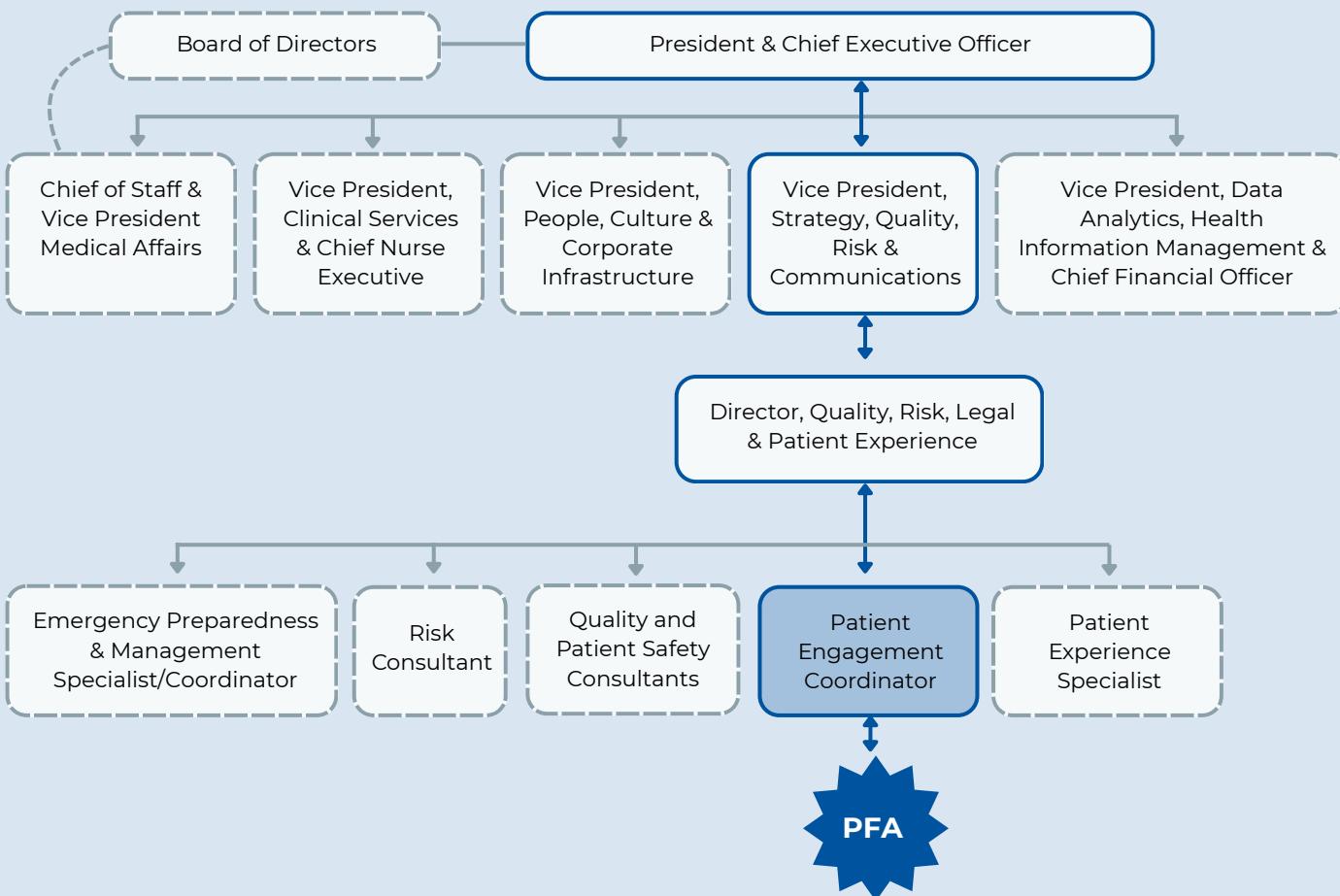
PFA concern or feedback



Volunteer concern or feedback (not as a PFA)



Organizational Structure



HOW CAN I BE A SUCCESSFUL PFA?

- Be respectful of others and their opinions.
- Support equity, diversity, and inclusion, and understand that BCHS is a culturally safe organization.
- Be comfortable speaking in a group and working with others.
- Use your personal experience constructively.
- See past your own experience.
- Focus on the big picture.
- Pass no judgement.
- Have a positive attitude.
- Excellent listening skills.
- Support BCHS in our efforts to provide exceptional patient care.
- Please be patient as change doesn't happen quickly. It's a process.
- Be able to work collaboratively with other families and health care providers.
- Keep all patient and organizational information private and confidential.
- Use positive communication and listening skills.
- Have a desire to find solutions and help provide change that will enhance your role.
- A passion for enhancing the health care experience of patients, families and caregivers.
- Able to share thoughts and opinions in a group setting.
- Complete required training

Believe you can make a positive difference for others by sharing your patient and family health care experiences.



Prepare in Advance for Meetings

PFAs are responsible for attending meetings and reviewing provided materials before each meeting to be adequately prepared. **In preparation for meetings, 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.

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.

PFAs are not to discuss confidential information beyond the scope of their council/committee meetings.

Meeting Guidelines

1

Respect and Constructive Feedback

- Share personal experiences in a constructive manner.
- Avoid stating that your viewpoint represents all patients or family members.

2

Active Listening

- Listen actively to understand diverse perspectives and opinions.
- Acknowledge and validate the experience of others.

3

Open Communication

- Foster two-way communication between PFAs and healthcare providers.
- Encourage open dialogue to facilitate meaningful improvements in patient care.

4

Stay Focused

- While personal stories are important, guide discussions toward shared goals and key decisions.
- Ensure conversations do not center solely on individual experiences, but rather on collective insights.

5

Acknowledge Challenges

- Understand that changes within healthcare can take time and require long-term commitment from all participants.
- Be patient and supportive of the process.

What to Expect

Sharing - An avenue for PFAs to share their patient and family stories and experiences to provide context and understanding for healthcare staff.

Feedback - Gather feedback and information on current initiatives and identify new opportunities for improving the patient experience.

Socialization/Networking - Opportunities to build valuable connections within the organization in order to share insights and ideas.

How to Participate

Be prepared to speak - Be comfortable sharing your thoughts and experiences in a group setting.

Be Open to New Ideas and Perspectives - Maintain a positive attitude towards change and be willing to consider perspectives beyond your own experience.

Collaborate - Work collaboratively with fellow PFAs and healthcare providers to bring about meaningful improvements in patient care.



In addition to the above meeting guidelines, committee, councils, and working groups may have their own rules and regulations that should be followed.

*** Remember to log your hours** (refer to Logging Volunteer Hours on page 11)

Common Healthcare Acronyms

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.

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



[Click here for a comprehensive list of Ontario Health Care Acronyms](#)

**Your voice and
experience matter.**

THE POWER OF STORYTELLING

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. PFAs can begin their role by sharing 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 and 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.

When/why to use it	Example
<ul style="list-style-type: none">When patients, caregivers and health care staff are interested – and comfortable – to draw from lived experiences to address a topic or issueTo build empathy around an issue, and best visualize a range of health care experiences	<ul style="list-style-type: none">Opening board meetings and team huddles with a patient or caregiver story, followed by a discussion on what follow-up actions can be taken in response to the storySharing monthly patient stories with the Board and the Leadership Team

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?

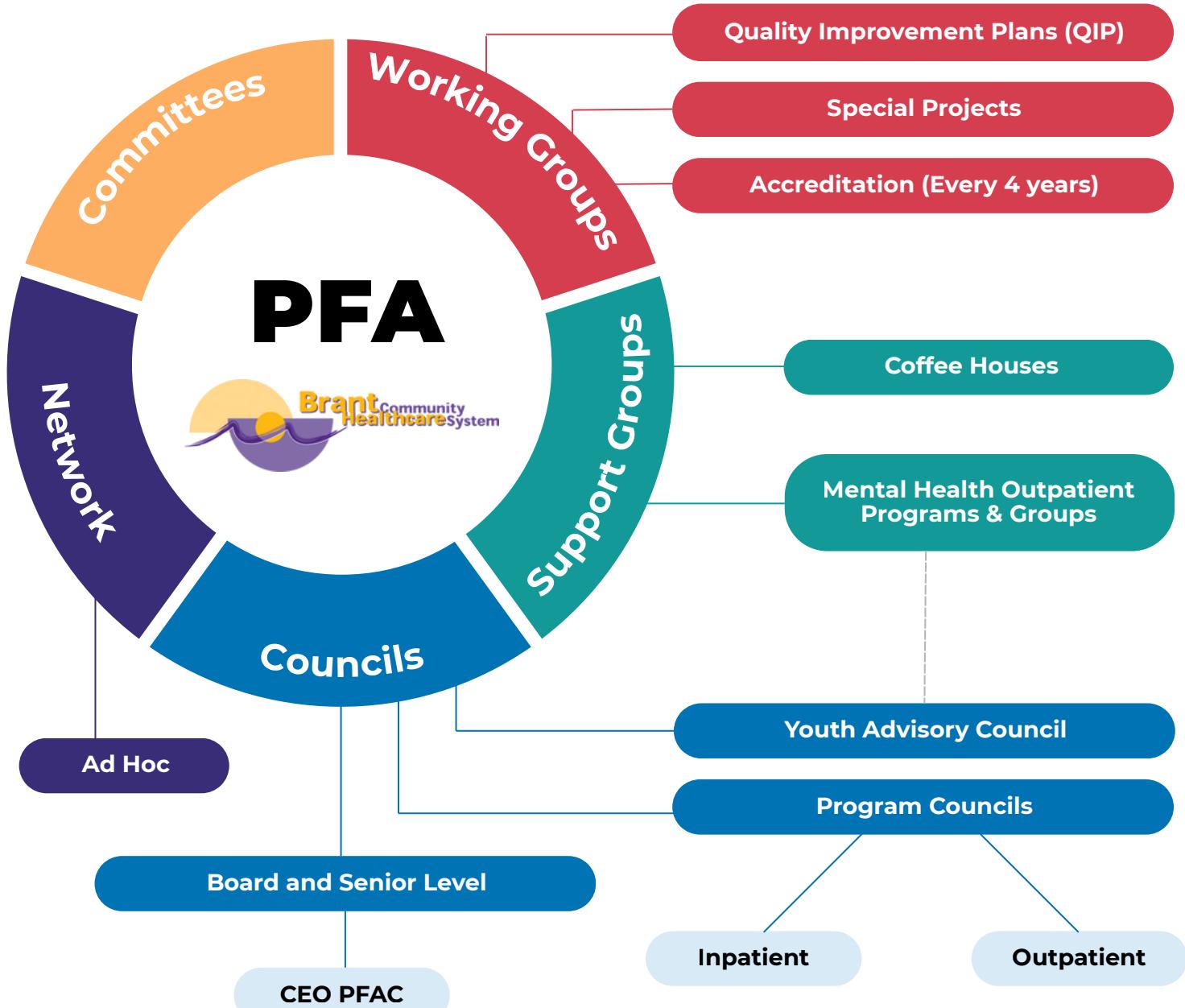
When you share your story, think carefully about the one main message you want to get across to your audience. Remember to speak from your heart, be real, be respectful and present negative experiences in a constructive way.

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

- Know your audience and prepare your 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.
- 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.

HOW CAN I GET INVOLVED?

There are many opportunities to participate depending on your interests and availability. Participation may be in person or virtual.



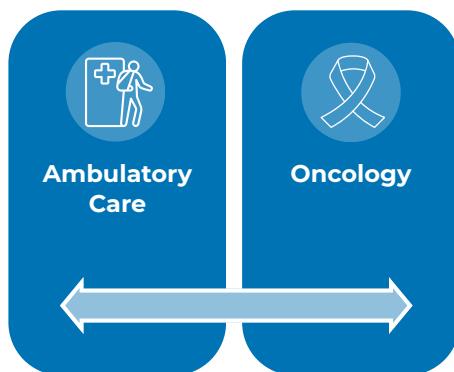
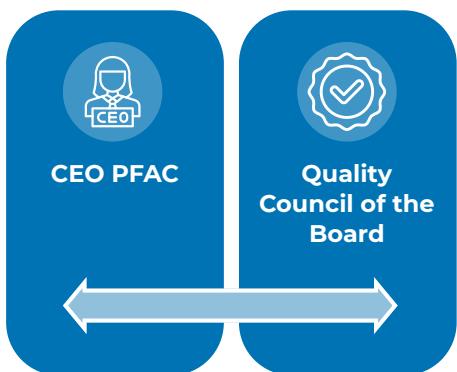
Please note: The councils, support groups, committees, and working groups listed are only some examples. Please discuss with the Patient Engagement Coordinator for more information on PFA opportunities.

Councils

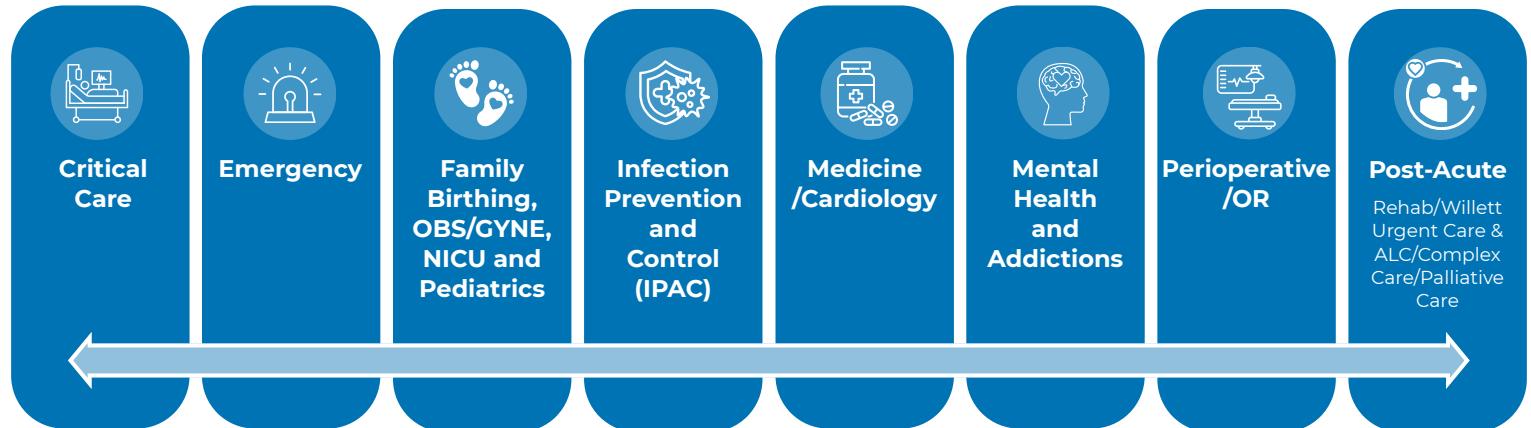
Board and Senior Level

Outpatient Program

Inclusivity



Inpatient Program

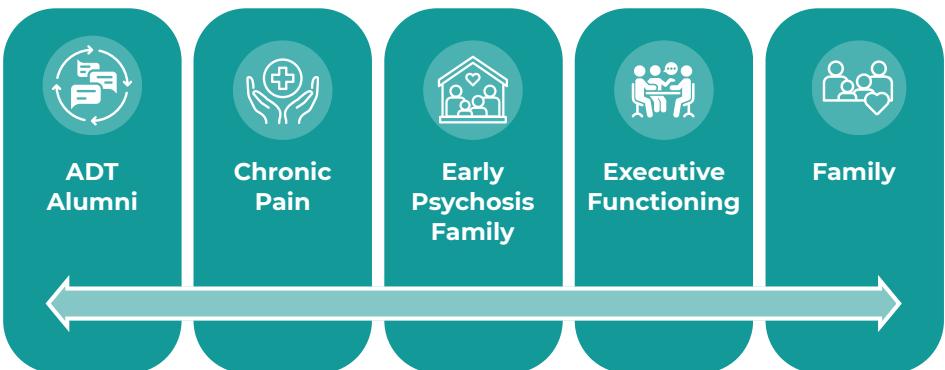


Support Groups

Additional



Mental Health Outpatient Programs & Groups



Committees



* Consists of 12 working groups

Working Groups

Special Projects



Essential Care Partners



Patient Experience Rounding

Other Examples



Cultural Events

ex. Truth & Reconciliation, Black History Month, Ramadan, Pride



Quality Improvement Plans (QIP)

ex. DEI-B, ED, Patient Experience



Clinical Services Plan



Wayfinding



Interview Panels



Accreditation
Every 4 years

Strategic Planning
Every 5 years

Network



PFAs can also identify specific tasks and initiatives that they would like to be involved in, and are only contacted when those opportunities arise.

EXAMPLES OF INVOLVEMENT

When/Why Use It?	
Working Groups	<ul style="list-style-type: none">When our organization has a need to draw from various patient and caregiver perspectives
Committees	<ul style="list-style-type: none">To integrate patient and caregiver voices in high impact decision-making processes regarding care delivery
Support Groups	<ul style="list-style-type: none">To discuss and make decisions on a range of issues that affect patients and caregivers broadly
Panel Discussions <i>Ex. PFA sitting on the Black History Month panel to discuss equity in care</i>	<ul style="list-style-type: none">To enable patients and caregivers to hear and build upon each other's ideasTo partner with patients and caregivers to design programming and services based on their feelings and experiences
Councils <i>Quality Councils represent each department within the Organization. Ex. Emergency, Stoke Unit, Mental Health</i>	<ul style="list-style-type: none">When there are department specific decisions to be made within the organizationTo identify long-term priority areas for patient safety and quality improvement initiativesTo discuss and make decisions on a range of issues that affect patients and caregivers on that specific unit
CEO Patient Family Advisory Council (PFAC)	<ul style="list-style-type: none">When there are high-priority, long-term planning and decision making at the organizational levelWhen significant relationship building between a health care organization and its patients and caregivers is neededTo identify long-term priority areas for patient safety and quality improvement initiativesTo provide strategic direction and feedback on the organization's priorities and planning (ex. Quality Improvement Plans, Diversity, Equity, Inclusion, and Belonging initiatives, and survey processes)
Senior Level <i>Available for experienced PFAs through an application and interview process</i>	<ul style="list-style-type: none">Partner in the hiring of senior level positions within the Organization to ensure that we are maintaining People-Centered Care GoalsPFA representative on the Hospital Board of DirectorsPFA representative on the Medical Advisory Council (MAC)

Monthly Coffee House

Join us for tea, coffee, and good conversation!



PFAs are invited to attend our Monthly Coffee House. It is an informal drop-in style meeting with structured agenda topics and open discussion time.

We meet on the **1st Friday of each month** from **12:00pm – 2:00pm** year-round. Coffee and tea are provided and participants are welcome to bring their lunch.

Purpose

- Offer a welcoming space for PFAs and Youth Advisors to check in and connect.
- Share updates from committees, councils, and working groups.
- Present opportunities for participation in working groups, project planning, and co-design activities.
- Host special guests from the organization seeking patient/family input on policies, projects, patient-facing materials, or services.
- Provide ongoing education and training relevant to patient and family engagement.
- Strengthen relationships, celebrate contributions, and build community among advisors.

Coffee Houses are not intended for:

- Individual patient concerns or complaints unrelated to engagement roles.
** Refer to Accountability Reporting Structure on page 12.*
- Operational decisions that are not open to patient/public input.
- Discussions of confidential or sensitive material not approved for broader consultation.
- Issues that are not within the scope of the hospital.

Membership and Roles

Patient Engagement Coordinator: Facilitates the session, prepares the agenda, shares organizational updates/opportunities, coordinates guest participation, and supports overall discussion.

PFAs/Youth Advisors: Share updates on their involvement, share patient experience stories and experiences, provide feedback on presented topics, ask questions, connect with peers, participate in discussions, identify learning needs, and suggest future topics.

Guests/Organizational Representatives: Present initiatives/materials for input, listen to feedback, respond to questions, and circle back on progress or changes.



Refer to How Can I Be a Successful PFA on page 13 and Meeting Guidelines on page 14.

Agenda Structure

Each session will generally follow this outline:

- 1 Welcome and Check-In
- 2 Patient Stories (ad hoc)
- 3 Update from councils, committees, and working groups
- 4 Opportunities for Involvement (ex. project co-design)
- 5 Guest Presentation(s)
- 6 Open Forum (ex. peer sharing, questions, suggestions)
- 7 Education or Learning Moment
- 8 Wrap-Up and Next Steps

The agenda may shift depending on priorities or guest availability. A brief agenda will be shared prior to each session.

OTHER ORGANIZATIONAL RESOURCES TO SUPPORT PATIENTS AND FAMILIES



Online Orientation Portal for Patient and Family Advisors



Patient Experience Office

The BCHS Patient Experience office is available to help support patients, their family and the community when they have complaints, compliments, or questions about their experience at BCHS.

We have a process to investigate, resolve and record any concerns that we receive and make improvements based upon this feedback.



519-751-5544 ext. 2395

patientexperience@bchsys.org
bchsys.org/patientexperience



Ethics Consultation

BCHS has a Clinical Ethics Consultation Team (CECT).

This service is available to patients, families, and the healthcare team to help navigate patient care conflicts and support your decision making.



ethicsconsultation@bchsys.org
bchsys.org/ethics



Health Information Management

The Privacy and Freedom of Information Office is responsible for ensuring and protecting the privacy of your personal health information and is available to answer your questions.

You may also register for access to your health record at **ConnectMyHealth**
<https://info.connectmyhealth.ca/register> and receive timely and free updates to your health information.



bchsys.org/healthinformationmanagement



Indigenous Health Services

In an effort to improve quality of care, foster inclusivity, and promote a culturally safe environment at BCHS, the Department of Hospital Based Medicine has introduced the physician-led implementation of a Division of Indigenous Medicine.

We work collaboratively with leadership, staff, and physicians to improve the Indigenous patient experience at BCHS and advance the ideals of cultural safety therein.



bchsys.org/IndigenousHealth

PATIENT DECLARATION OF VALUES

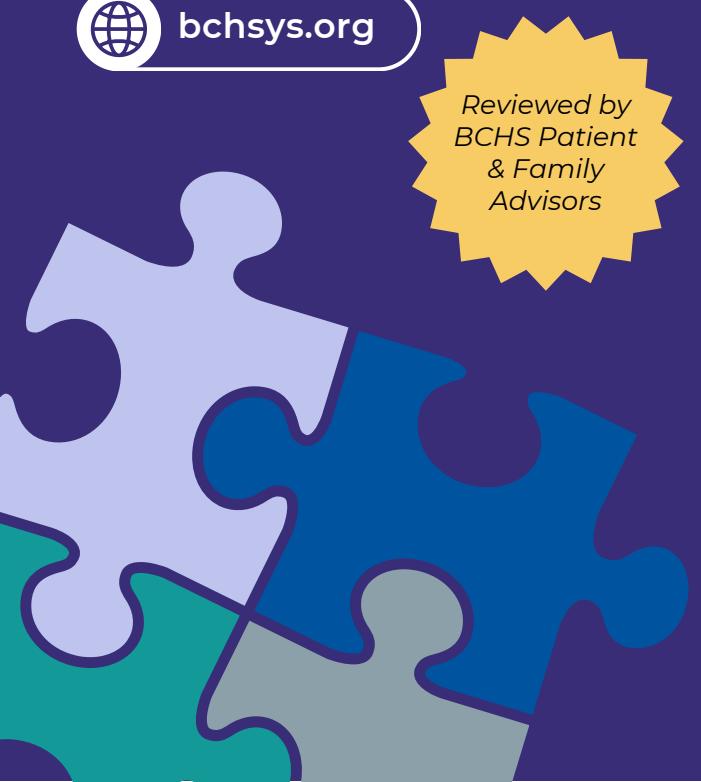
At Brant Community Healthcare System, we are committed to high-quality, person-centered care that honours the diverse cultural identities, traditions, and values of the people we serve.

Our patients and families have developed statements to guide the care they receive in our hospitals.



bchsys.org

Reviewed by
BCHS Patient
& Family
Advisors



YOUR EXPECTATIONS

As a patient, I expect:



QUALITY & ACCOUNTABILITY

- Provide me with high-quality care that follows best practices and standards.
- Make sure my care meets my unique needs.
- Give me a way to share my thoughts or concerns about my care — both good and bad.



COMPASSION

- Be sensitive to my values, beliefs, and cultural practices.
- Be kind and caring toward me.
- Listen to my worries and respond with understanding.



RESPECT

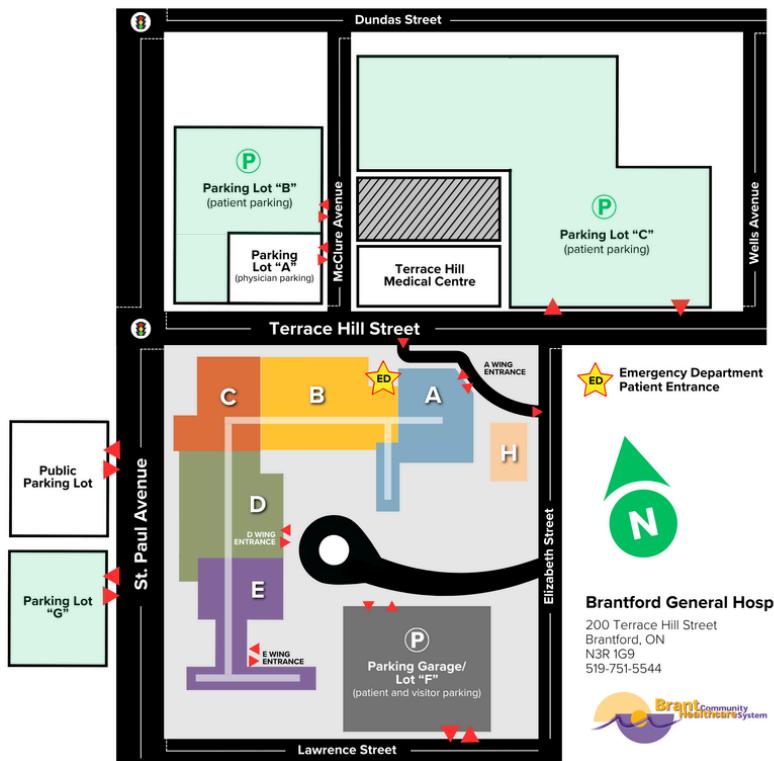
- Treat me with dignity and protect my privacy.
- Involve and educate me so I can make informed choices about my health.
- Include me and those most important to me in my care.
- Respect my background, culture, religion, gender, identity, language and abilities.

OUR EXPECTATIONS

As a Patient or Family Member, I Will:

- ✓ Be kind, patient, and understanding with my care team.
- ✓ Share honest and accurate information about my health.
- ✓ Participate in my health care decisions.
- ✓ Ask questions and talk about any concerns I have.
- ✓ Respect the staff, volunteers, visitors, and other patients.

BRANTFORD GENERAL HOSPITAL



A WING

Main

BCHS@Home
Engineering & Maintenance
Infection Prevention & Control
Release of Information
Volunteer Engagement

Level 1

BCHS Foundation
Indigenous Family Space
SC Johnson Dialysis Clinic
Switchboard
Tim Hortons 1
Visitor Information Desk

Level 2

Multifaith Center
HCCSS Office

Level 4

Paediatric Acute Referral Services (PARS Clinic)

Level 8

Indigenous Health Services

B WING

Main
Environmental Services

Level 1
Emergency Department (ED)
Security

Level 2
Inpatient Rehab

Level 3
Family Birthing Centre

Level 4
Paediatrics

Level 5
Surgical

Level 6
Medical B (B6)

Level 7
Medical A (B7)

Level 8
Medical D (B8)

C WING

Main
Cafeteria and Terrace Bistro
Nutrition Services

Level 1
Emergency Department (ED)
Sexual Assault Domestic Violence (SADV)

Level 2
Integrated Stroke Unit

Level 3
Family Birthing Centre

Level 4
Medically Complex

Level 5
Critical Care Unit (CCU 2)

Medical Cardiology

Level 6
Laboratory

Level 7
Palliative/Complex Care

D WING

Lower Level 2
Mail Room
Medical Device Reprocessing
Stores/Receiving

Lower Level 1
Day Surgery
Operating Rooms
Post Anesthetic Care

Main
Ambulatory Care
Business Cashier
Fracture/Orthopedic Clinic
Internal Medicine Rapid Access Clinic (IMRAC)
Oncology Clinic
Patient Registration
Pulmonary Function
Tim Hortons 2

Level 1
Cardiac Diagnostics
Diagnostic Imaging (MRI, Fluoroscopy, X-Ray, CT Scan, Nuclear Medicine, Ultrasound, Mammography, OBSP)

Level 2
Rehabilitation and Therapy Services
Mac-CARE

Level 5
Critical Care Unit (CCU 1)

E WING

Lower Level 4
Redevelopment

Lower Level 3
Boardroom, Pro Resp., and Purchasing

Lower Level 2
Psychiatrist Offices

Lower Level 1
Inpatient Mental Health
Morrison Auditorium

Main
Diabetes Education
Mohawk Classrooms 1&2
Pre-op Clinic
Women's Health Clinic
Patient Experience Office
Outpatient Mental Health & Addictions

Level 1
Outpatient Mental Health & Addictions

Level 2
Information & Communication Technology (ICT)

Level 3
Organizational Development
Quality & Risk, Privacy
Communications & Public Affairs

Level 4
Human Resources
Occupational Health & Safety

Level 5
Financial Services

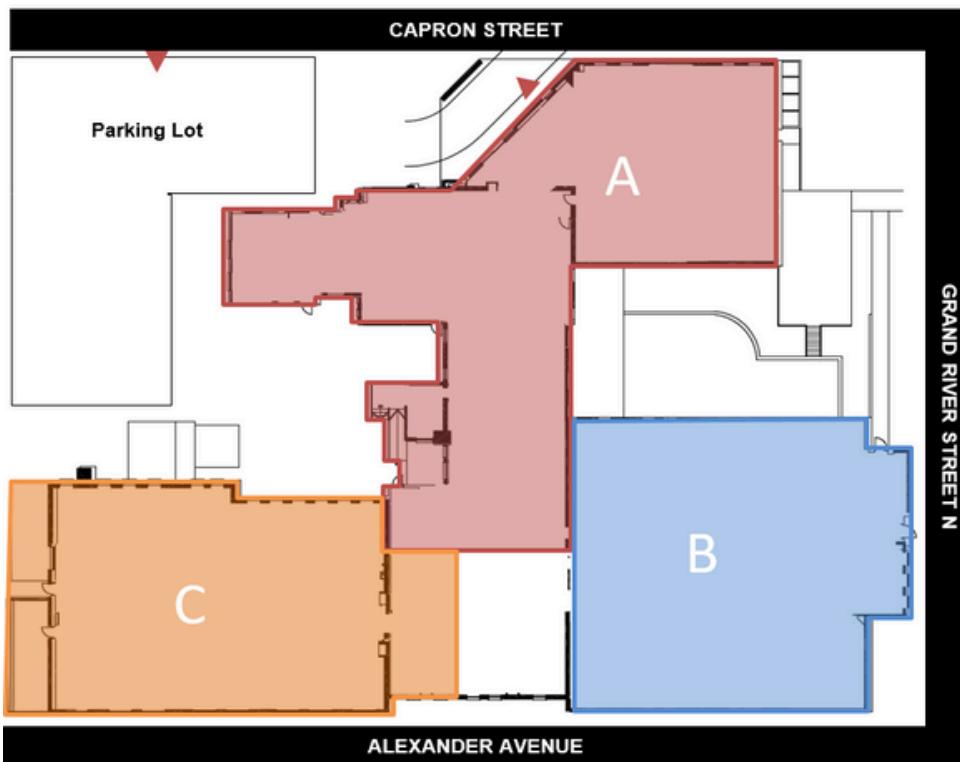
H WING

Level 1
Medical Affairs

Level 2
Administration Office

Level 5
Critical Care Unit (CCU 1)

THE WILLETT



A WING

Basement

Facilities Planning & Engineering

Level 1

Diagnostic Imaging
Security
Urgent Care & Registration
Volunteers

Level 2

Administration Offices
Diabetic Clinic & Education

B WING

Basement

Nutrition Services
Physiotherapy Services

Level 1

Able Living Services - Thrive Group

C WING

Level 1

Clinical Engineering

Level 2

Transitional Care

STAFF UNIFORM COLOUR GUIDE

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

Nursing

(Registered Nurse
/ Registered
Practical Nurse)

**Personal
Support
Worker**

**Registration/
Unit/Service
Clerk**

**Medical Lab
Technologist/
Assistant**

**Diagnostic
Imaging/Cardiac/
Pulmonary/
Function/EMG**

**Environmental
Services Aide**

**Material
Handler**

**Clinical
Nutrition**

**Clinical
Educator**

**Therapy
Services**

**Nutrition
Aide**

**Clinical Externs/
Volunteers**

EMERGENCY CODES

Medical Codes

Code	Stage 1	Stage 2
Blue	Cardiac arrest requiring Code Team response	2nd Code Blue occurring
Blue Pediatric	A single cardiac arrest of a patient within the hospital who is older than 28 days but less than 18 years and requiring a Code Team response	Multiple Code Blue patients occurring within the hospital
Navy	Medical emergency requiring Code Team response	2nd Code Navy occurring
OB	Patient delivering imminently outside of Labour and Delivery on hospital property or close to hospital property	There are multiple Code OB patients
Pink	Neonatal emergency requiring Code Team response	2nd Code Pink occurring
Transfusion	A single patient requiring an immediate and Massive Hemorrhage Protocol (MHP)	There are multiple Code Transfusion patients occurring within the hospital

Emergency Codes

Code	Stage 1	Stage 2
Amber	Child missing or abducted within the site	Child missing or abducted in 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 and 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 impacting staff and 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 and 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)
Lavender	The purpose of Code Lavender is to provide immediate emotional support to staff and physicians when a traumatic event takes place. Code Lavender supports individuals who are experiencing an episode of high or emotional distress. This is a silent code.	
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 and fire
Silver	External – Lockout: person with a weapon in the community with possible threat of coming on-site	Internal – Lockdown: Person with a weapon 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