



**TAMPA GENERAL HOSPITAL
PATIENT AND FAMILY ADVISORY COUNCIL**

Bylaws

Article I. Name.

The name of the organization is the Patient and Family Advisory Council (PFAC) of Tampa General Hospital (TGH).

Article II. Purpose Statement.

The PFAC serves as a resource to leadership and colleagues of TGH. The PFAC provides an opportunity for TGH to listen to healthcare consumers and community members. This is an opportunity for patients and families to participate actively in the development of new programs and collaborate as partners with colleagues, physicians, and leadership. This council will ensure a safe venue for patients and families to provide input into TGH's processes and programs.

Article III. TGH Mission, Vision and Values.

Mission: We heal. We teach. We Innovate. Care for everyone every day.

Vision: TGH will be the safest and most innovative academic health system in America.

Values: Integrity, Compassion, Accountability, Excellence, Courage.

Article IV. Officers.

Section 1. The Executive Committee.

The Executive Committee shall be comprised of a chair, co-chair and secretary, each serving a 3-year term.

Chair: Develops agenda, leads meetings, addresses and coordinates membership issues, serves on committees representing PFAC leadership, and represents the PFAC to organization as needed.

Co-Chair: Leads meeting in chair's absence and serves on committees representing PFAC leadership.

Secretary: Ensures committee membership is kept informed of current status of committees and projects, takes meeting minutes, distributes agenda and meeting minutes, and

serves on committees representing PFAC leadership.

Section 2. Election of Officers.

- a.** PFAs may run for the office positions of the Executive Committee. The Elected Officers must have been members of the PFAC for greater than one year.
- b.** Elections for new officers will take place at the first meeting in January if a current Chair position is open or will be opening due to a completed term.
- c.** The election will be held by secret ballot.
- d.** Elections will be by majority vote (50%+1). In the event no candidate gets 50%+1, there will be a second ballot of the top 2 candidates and will continue until a clear majority is reached.
- e.** Ballots will be prepared and counted by the on-going TGH team members.
- f.** At the end of a three-year term, a current officer may run for a different position on the Executive Committee, but not for the role he or she currently holds.
- g.** In the event of an officer resignation, a replacement officer will be elected for the remainder of the term by special election.

Section 3. Quorum.

A quorum will only be necessary for annual PFAC elections in January, special elections to replace a resigning officer, and for any Bylaw amendments. A quorum consists of a simple majority of the PFAC. Absentee ballots are permitted. All other PFAC recommendations will be decided through consensus of those present at the meetings.

Article V. Members.

Section 1. Membership Eligibility.

Patients, family members, and caregivers are eligible to be members of the PFAC and Patient and Family Advisors (PFA). TGH advisors will act as facilitators. Members should be committed to building a partnership of PFAs and staff working to understand the needs of those represented and to influence programs and policies that address their needs.

Section 2. PFAC Makeup.

The PFAC will be made up of a broad base of as many PFAs as the Executive Committee and advisors deem appropriate.

Section 3. Participation.

Active PFAs are expected to participate in monthly meetings consisting of 2-3 hours, and not exceed unexcused absences for 2 consecutive meetings.

Section 4. Membership Term.

Active PFA membership consists of a maximum of 3 years. After a maximum term of 3 years, membership is extended based on an approved request to the Executive Committee.

Section 5. Vacancies/Leave of Absences.

PFAs may resign or request a leave of absence from the PFAC at any time during their term. A PFA may request a leave of absence when unusual or unavoidable circumstances require that the member suspects absence for an extended period of time from meetings and activities for 3 to 6 months. The PFA will submit his/her request in writing to the Executive Committee, stating the reason for the request and the length of time required.

If a PFA cannot return at the end of the requested leave, he/she will resign from the PFAC. At any resignation, the PFAC may at that time choose to add a replacement or leave the position open until the next rotation of members.

Section 6. Advisor Responsibilities.

- a.** Completion of the required training session.
- b.** Serving a three (3) year term.
- c.** Attendance at meetings of the PFAC/committee/team to which they are assigned for each year of designated term.
- d.** Being prepared to report and actively participate.
- e.** Willingness to share insight and information about experiences in a manner benefiting a positive learning environment.
- f.** Offering feedback in a constructive and professional manner.
- g.** Adhering to all TGH policies and procedures relating to their role as a PFA, such as, but not limited to confidentiality.

Section 7. Criteria for Removal from PFAs.

PFAs may be removed if:

- a.** Unable to meet the attendance responsibilities as initially set forth.
- b.** Their contributions are considered disruptive or negative.
- c.** Hospital and/or patient confidentiality is not respected or is breached.
- d.** There is a failure to comply with TGH PFA requirements.
- e.** Actions are taken by the advisor which are not within the TGH mission, vision or values at any time when representing the PFAC.

Article VI. Patient and Family Advisors (PFAs).

Section 1. Recruitment and Qualifications.

The PFAC comprises a diverse group of patients and family members. PFAs are recruited with recommendations from physicians, nurse managers, TGH team members, and current PFAs. In order to apply, potential PFAs must have been a patient or family member of a patient who utilized services at TGH within two (2) years of submitted application. Patients define the individuals who they consider as ‘family.’ Exceptions to these qualifiers may be considered on an as needed basis.

Section 2. Initial Process.

The interested party will be invited as a guest to a PFAC meeting. The interested party will then be directed to fill out a volunteer application form and proceed with the volunteer orientation process.

Section 3. Requirements.

All PFAs must meet TGH human resources requirements for PFAs prior to participation. Any time PFAs are serving in the capacity of a PFA on TGH premises, they must wear the badge issued by Human Resources.

Section 4. Training.

Volunteer orientation must be completed within 60 days of submitted application to become a

PFA.

Article VII. Patient and Family Advisory Council (PFAC).

PFAC will be made up of selected PFAs and will consist of three (3) co-chairs, advisors, and TGH team members.

Section 1. Meetings.

- a. The PFAC will meet monthly at an agreed upon time and location.
- b. There will be approximately ten (10) monthly meetings per calendar year.
- c. PFAs will attend any additional meetings according to their interests and the needs of the TGH councils/committees/teams.
- d. PFAs are responsible for notification to the TGH colleague liaison or TGH councils/committees chair regarding inability to attend scheduled meetings.

Section 2. Committees.

PFAs may be invited to serve on a variety of committees both internally within the General PFAC as well as on standing TGH committees. A PFA may determine at their own discretion to participate in a committee(s).

Examples include but are not limited to:

- TGH Patient Satisfaction Committee
- TGH Patient Education Council
- TGH Best Practice Innovation Committee
- TGH Safety Committee
- PFAC Access/Technology Committee
- PFAC Peer Rounding Committee
- PFAC Transplant Committee
- PFAC Staff Interviewing Committee

Section 3. Special Committees or Projects.

From time to time it may be necessary to create a special committee or task force in order to further the work of the PFAC. The initiation of such a committee/project group may be

requested by any Council member, the Executive Committee, or TGH support staff.

Article VIII. Environment.

- a.** PFAC will maintain an environment that facilitates trust, support, and open discussion. Inherent within this process will be efforts directed toward the development of individual members.
- b.** Meeting ground rules:
 - i.** Start and end on time
 - ii.** Everyone participates
 - iii.** No one dominates the discussion
 - iv.** Respect each other's ideas
 - v.** One person talks at a time

Article IX. Confidentiality.

To maintain appropriate and confidential handling of personal information, TGH patient and/or family members shall not be discussed by name in PFAC meetings. PFAs must also sign a HIPPA and Confidentiality statement. Confidentiality of TGH business will be maintained via signage of the TGH Code of Conduct.

Article X. Reporting.

The PFAC will report to the TGH Patient Centeredness Oversight Committee.

Article XI. Amendment Procedure.

These bylaws may be amended at any regular meeting of the Council by majority vote of the members present provided that the amendment has been submitted in writing at the previous regular meeting subject to TGH approval.