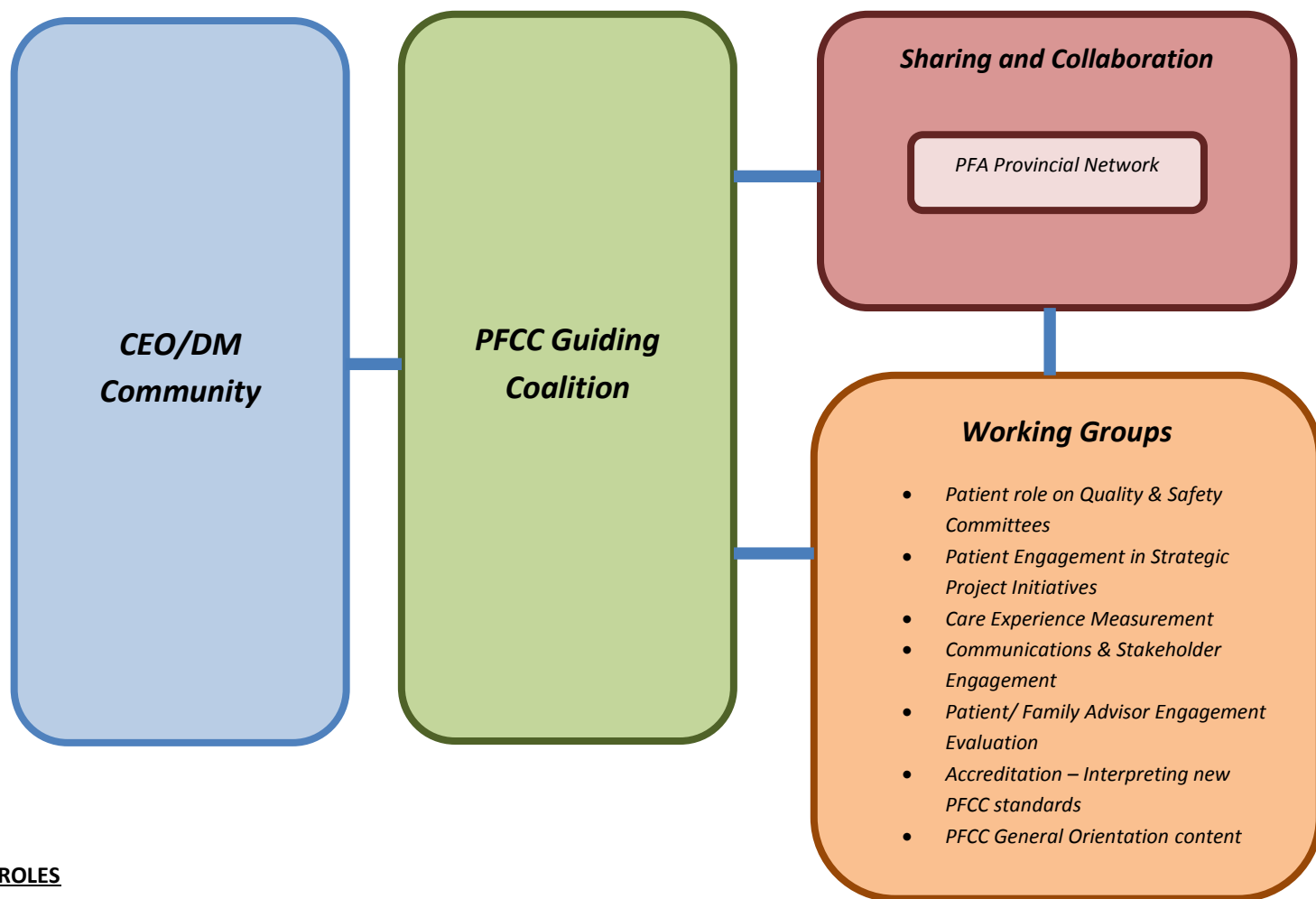


# Patient- and Family-Centered Care Governance Framework



## ROLES

<b>R</b>	<b>Guiding Coalition</b>	<b>(Recommender - the person who initiates or drives the process)</b>
<b>A</b>	<b>CEO/Deputy Minister</b>	<b>(Individual who needs to Agree or Approve a decision)</b>
<b>P</b>	<b>Guiding Coalition &amp; Task Teams</b>	<b>(Perform - person who carries out the decision)</b>
<b>I</b>	<b>Patients, Families, Stakeholders</b>	<b>(Input - who must be considered before a decision is made. Does not have a vote or veto but has the right to be heard)</b>
<b>D</b>	<b>HQC Board of Directors</b>	<b>(Decide - has the final authority and can commit the organization to action)</b>

The **CEO/DM Community** will approve decisions on PFCC-based SBAR documents provided by HQC. This will include decisions about the “what” of PFCC as recommended by the PFCC Forum. The leadership team will have ongoing connection with the PFCC Guiding Coalition via items put forward either for information only, or for their direction and subsequent approval.

The **PFCC Guiding Coalition** will make recommendations to CEO/DM Community about the “what” of PFCC. The majority of the Guiding Coalition’s time will be spent on determining the “how” of PFCC. Prioritization and supporting provincial spread of PFCC philosophy and practices will be critical for success. *This group would be comprised of individuals whose daily work is to advance PFCC and a sponsor from each region/agency. The Ministry of Health will also have representation at this table. We will seek to have one patient/family advisor from every health region serving on this Guiding Coalition.*

**Working Groups** – Working groups may be pilot project teams, grant teams or working teams which seek to implement a PFCC best practice or change. Not all regions or agencies will be involved in each group but rather have the option to participate in those which align with where they are at as an organization. Patients and families from these organizations will be asked to participate.

Working groups are responsible for completing the PFCC Working Group reporting template, and providing an update or presentation at the Guiding Coalition meetings. The reporting template will be submitted to the PFCC Guiding Coalition chairs who, in turn, will circulate the documents to the Guiding Coalition members in advance of the meeting.

### **Sharing and Collaboration**

#### **Patient & Family Advisor Network**

The Patient & Family Advisor Network would be a provincial network of individuals who serve as advisors in the health regions and agencies. These individuals would be brought together (virtually) approximately four times per year to learn about PFCC and to provide advice/insight into the PFCC work. This is intended to ensure that patients and families from across the province have the opportunity to contribute.

The Patient & Family Advisor Network will host a webinar session at minimum quarterly. Frequency may increase pending workload and interest level.

### **Critical Factors for Success**

1. Leadership endorsement
2. System and organizational commitment to designate individuals and time to work on PFCC. Funding of PFCC lead regardless of job title is imperative.
3. The Guiding Coalition must meet the accountability of providing at minimum quarterly updates to the executive council and regional sponsors for PFCC. Information must flow consistently therefore enabling decreased members at the PFCC forum table.
4. Working groups must meet the accountability to report back to the Guiding Coalition (and networks/stakeholder groups) to keep all informed about the adoption and spread of PFCC best practices.