

#### Purpose:

The Family Advisory Council will:

- 1) partner with the health care teams of Monroe Carell Jr. Children's Hospital at Vanderbilt ("Children's Hospital") to promote core concepts of patient-and family-centered care;
  - A. respect and dignity
- B. information sharing
- C. participation
- D. collaboration
- 2) collaborate with Children's Hospital staff to improve the quality of care provided to patients and their families and patient and family satisfaction in all inpatient and outpatient settings;
- 3) offer input to Children's Hospital leadership in planning and evaluating services, programs, policies and teaching and resource materials;
- 4) promote a positive relationship among Children's Hospital, its families, and the regional community and thereby serve as a vital link between the hospital and the community.
- 5) contribute to the education of patients and families as well as healthcare providers, students, faculty and staff at Children's Hospital.
- 6) serve on key committees related to the scope of our work.

Revised: February 2021

Monroe Carell Jr. Children's Hospital at Vanderbilt Family Advisory Council

Brittany Swanson, Chair

Janet Cross, Administrative Liaison



Scope of work:	The Family Advisory Council provides family perspectives in the development and implementation of programs, policies and practice standards. The Family Advisory Council has the authority given it by the Administration of Children's Hospital. It cannot enter into agreements or bind Children's Hospital in any other fashion. Events organized by the Family Advisory Council and statements issued by the Family Advisory Council on behalf of Children's Hospital are done so with prior approval of Children's Hospital.
<u>Givens or</u> <u>Boundaries:</u>	Children's Hospital is dedicated to working in a mutually beneficial partnership with the Family Advisory Council in keeping with the hospital's commitment to patient- and family-centered care. Children's Hospital will:
	<ol> <li>collaborate with the Council in policy making and in the planning and evaluating of programs and services;</li> <li>ensure decision makers are at the table when appropriate;</li> <li>share strategies, operational plans and priorities;</li> <li>receive and respond to recommendations from the Council with transparency and clear communication;</li> <li>offer new member orientation to Council members;</li> <li>provide meeting space, refreshments, and child care (with advanced notice);</li> <li>provide staff support for preparation and distribution of meeting minutes, agendas and any other</li> </ol>
	Council communication; 8) offer financial support for Council activities as appropriate and available; 9) demonstrate sensitivity in using non-medical terms/systems to promote family understanding 10) incorporate family participation into leadership and Board opportunities;

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	11)provide technical support to facilitate virtual family participation
	12)provide interpreters and assistance for a diverse group of family members with all backgrounds and
	abilities.
Agenda Setting	The Chair, Chair-Elect and Director of Patient- and Family-Centered Care will compile the agenda.
Process:	
	1) Any member who has an item for the agenda is encouraged to submit ideas before the meeting.
	2) Known future agenda items will be communicated by the chair in advance of meetings to
	promote sensitivity to experiences of all family members.
	3) A "parking lot" will be maintained by the Chair for future discussions and/or agenda items not
	addressed.
	4) Each agenda will reserve a portion of the time for follow up to previous projects or agenda items.
	5) The agenda will be sent out one week in advance of the upcoming meeting and will include the
	minutes from the previous meeting.
	6) Minutes are kept at each meeting by a designated support staff, are reviewed by the Chair and
	Administrative Liaison, and are distributed to all members and stakeholders with the agenda for the
	upcoming meeting.
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# The Family Advisory Council is comprised of family members who: FAC Membership: 1) are receiving care at Children's Hospital, in either inpatient or outpatient settings; 2) have the ability to look beyond personal experience and consider the perspectives of other patients, families, faculty, staff and the organization; 3) display respect for oneself and each person at the table and the unique perspective they bring; 4) value diversity: 5) value compromise; 6) trust the process; 7) utilize effective communication skills; 8) have time available to contribute to the group, either by attending monthly meetings and/or by providing input on projects in some capacity (email, telephone or written communication); 9) have a commitment to quality health care at Children's Hospital; 10) demonstrate the ability to support the family-centered care values of Children's Hospital and the willingness to share personal experiences to assist in program development and problem solving; 11) possess a desire to be part of a decision-making process and the willingness to support the Council's final recommendations. 12) maintain confidentially and professionalism about patients, families and the medical center outside of the Council setting: 13) complete the application and screening process for family advisors through Volunteer Services.



The Council is comprised of up to 25 family members whose children are receiving care at Children's Hospital. The Council welcomes all families and strives to include people with diverse backgrounds to fully represent the large variety of health care issues, diagnoses, and cultures of the Children's Hospital families. Membership terms will be a two-year term with the option of renewing membership after each term. The goal for annual membership will include 25% new membership.

Election of the Chair position will take place in September annually. The Chair position requires a three-year commitment. Year one: Chair –elect; Year two: Chair; Year three: Past Chair. Family advisors will transition into their new roles effective January 1 of each calendar year.

In addition to family members, Children's Hospital health care providers from diverse areas of the hospital

In addition to family members, Children's Hospital health care providers from diverse areas of the hospital make up the remainder of the Council, including but not limited to: Children's Hospital Administration, Nurse Managers, Child Life, Family Resource Center, Quality, and other ad hoc staff members are included in meetings in conjunction with the agenda items. The goal for ratio of staff to family members is 1:4. Children's Hospital health care providers are non-voting members of the Council.

Families reaching milestones (transition to adult care; no treatment or follow up at Children's Hospital; etc.) will transition from the Family Advisory Council to other family advisor opportunities within three years of the milestone. Unique membership situations will be discussed and evaluated by Council membership and taken to the Chair and Administrative Liaison for decision-making.

### <u>Decision-making</u> Process:

Decision making is by consensus. Consensus is defined as: an agreement in the judgment or opinion reached by a group as a whole. All perspectives will be heard and understood in exploring topics and issues. Clarifications, more information, data and examples will be collected and presented to build common



	understanding. Consensus means everyone understands what he or she is agreeing to and for how long.  If the group is unable to reach a decision by consensus, the Chair and the Administrative Liaison will
	consider all information and make a decision that will then be communicated to the Council.
Ground Rules for	A voting process will be used exclusively for election of Chair and Chair-elect.  1. Manage time according to agenda unless the group decides otherwise
FAC Meetings:	2. Listen to others
	3. One person speaks at a time
	4. Work for consensus
	5. Value each other's opinions and expertise
	6. Recognize that if you don't speak up, we assume you agree
	7. Avoid side conversations
	8. Maintain confidentiality 9. Brainstorm all ideas (list all, don't eliminate, discuss)
	10. Ensure stakeholders and decision makers are present and prepared prior to discussion
	11. These ground rules are to be followed and modeled by all Family Advisory Council members in participation of all Children's Hospital meetings, seminars, or any other professional setting in which a member is representing the Council.
<u>Meetings:</u>	1) The Council meets once a month (currently, on the 2nd Tuesday of each month from 6:00 p.m. to 8:00 p.m.) at Children's Hospital.

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- 2) Meetings are open to Family Advisory Council membership, stakeholders and visiting potential members. Stakeholders include: any VUMC employee, students, families of current patients, current and past Council members, Pediatric Advisory Council members, VUH Council members, and invited guests
- 4) Dinner is provided and parking is free.
- 5) The Council realizes that Children's Hospital serves a broad geographical area and given that its members may have medical needs, not all members may be able to attend meetings. Therefore, with advance notice, special considerations are made for members that can best serve the Council by contributing via email, telephone, alternative meetings, or by other means of communication.
- 6) With advance notice, some child care options are available.