

Royal Ottawa Health Care Group (ROHCG) FAMILY ADVISORY COUNCIL		
Vice President of Patient Care Services, Professional Practice and Chief Nursing Executive	APPROVAL DATE: January 13, 2021	
	Date Reviewed: November 23, 2020	
	Date Revised:	
	November 23, 2020	
A family member includes imm be their family, whether or not	ediate family and/or individuals a client considers to related.	
to improve both client and far centred care and enhance cli	Council (FAC) provides input from families in orden mily centred mental health and substance use ent and family experiences across the ROHCG and	
In alignment with The Royal's at The Royal , the FAC works considered and incorporated i	Strategy and Client and Family Vision for Care to ensure that the family perspective is always n organizational policies, practices, committees, and events.	
 committees in the Royal family inclusion and improvement Plan, etc. Promote delivery of fam assist in implementing of family centred care. Propose client and family translate knowledge into collaborate with the Clien and family mental health Royal and in the commune Advise on strategies to with families. In this corr ROHCG Board of Trust Align the FAC's work with Strategic Plan, Client and Improvement Plan, etc. Develop an annual buck Manager of Client and Consultation Participate in ROHCG and the Royal and consultation 	nt Advisory Council on proposals to advance client and substance use care and experiences at The nity. enhance and strengthen the ROHCG's partnership ntext, the Chair will sit as an observer on the ees and participate in all relevant Board activities. th organizational plans such as the ROHCG's nd Family-Centred Care Framework, Quality dget and work plan to submit to the SMT via the d Family Relations. nternal ROHCG events and relevant external	
	 Vice President of Patient Care Services, Professional Practice and Chief Nursing Executive A family member includes imm be their family, whether or not The ROHCG Family Advisory to improve both client and far centred care and enhance cli within the community. In alignment with The Royal's at The Royal , the FAC works considered and incorporated i initiatives, activities, research a Bring the broader famil committees in the Roya family inclusion and im Royal. Promote delivery of fam assist in implementing of family centred care. Propose client and famil translate knowledge into Collaborate with the Clie and family mental health Royal and in the communi Advise on strategies to with families. In this cor ROHCG Board of Trust Align the FAC's work wi Strategic Plan, Client a Improvement Plan, etc. Develop an annual bud Manager of Client and Represent families at in events and consultation Participate in ROHCG 	







Membership	 A person wishing to become a member of the FAC can contact fac@theroyal.ca The FAC will comprise up to 15 family members Executive Council members as well as a staff liaison. Membership is open to families who have, or have had a loved one with mental illness or substance use receiving services at The Royal. The FAC will also consider membership from community members who have lived experience supporting a loved one living with mental illness or substance use. A community member is considered to be someone whose loved one is not currently receiving services at the Royal, nor have they received services in the past. Community members may make up to 25% of the Executive Advisor Council (max. of 4 community members) FAC members use their experience to improve the overall care at the ROHCG and at a regional community level. FAC members must apply and be accepted as volunteers at The Royal Ottawa Volunteer Association (ROVA). FAC Executive Concil members shall be able to contribute a minimum of 10 hours per month on Council activities which includes attending monthly meetings on a regular basis. A membership may be terminated by the decision of the FAC executive committee if the member has not contributed for an extended period, e.g., not attending 3 consecutive meetings of the FAC. Advisors at large who have participated on hospital committees, etc will be considered first for FAC membership at time of a vacancy or a leave of absence (LOA) coverage requests. Members may (should) request LOA) for a period during which they will not be able to attend meetings. The LOA will be approved on a case by case basis.
Quorum	 A quorum will be 50% plus one (1) of the Executive Advisory Council members. Where there is a tie, the Chair will cast the deciding vote. Where quorum is not reached, the meeting can continue in order to share information. No motions, or actions can be voted on without reaching quorum. However, items that require decisions by the FAC, voting can be conducted by email when quorum has not been reached. The Chair shall send out an email for the purpose of voting to all Executive Advisor members, tally votes, and share the results, as required.
Decision Making	 Decisions will normally be by consensus of members present. Contentious issues may need to be settled by a majority vote of members present (if 2/3 of the Executive Council is present) or otherwise using an email vote by current members.



Executive and Positions	 The FAC Executive Committee will be comprised of the Chair, Vice Chair, Member Engagement Coordinator, Mentor(s) and a Secretary. In the absence of the Chair, the Vice Chair will act as a convener of meetings. In case of urgency the Chair and/or the Vice Chair may make administrative decisions, reporting back at the next meeting.
Terms of Office	 The term of office for all members will normally be 2 years. with an option to renew for an additional two-year term. The Past Chair shall remain as a member of the FAC for a further year upon completion of the tenure as Chair.
Frequency of Meetings	 The FAC will conduct a minimum of 10 monthly meetings per year or as needed at the call of the Chair and/or Family Engagement and Experience Coordinator Agendas for meetings will be drafted by the Secretary with input from the Chair and/or the Vice-Chair, with a call for items to all FAC members at least 10 days prior to the meeting. The agenda will be provided to the Chair and Vice Chair for approval before distributing to other Executive council members Meeting minutes will be the primary responsibility of the Secretary with the final approval by FAC members at the following meeting.
Resources	 The Coordinator will act as a liaison between the FAC and the Manager of Client and Family Relations. Requests are made through the Coordinator and will be approved as needed for the facilitation of FAC activities. The budget of the FAC must adhere to the Ontario Broader Public Sector Accountability Act. The ROHCG will ensure office space is made available to the FAC Chair and members as required.
Reporting	The FAC shall report annually on their activities to the SMT via the Coordinator