



PVN is supported through the:



Patient Voices Network: Oversight & Advisory (O&A) Committee Meeting Minutes

December 3, 2019

2:00 - 3:30 pm

WebEx

Present:

Kimberly Strain (Patient Partner-Fraser Valley)	Christina Thomas (Doctors of BC)	Belinda Boyd (Vancouver Coastal Health)
Esther Storvold (Patient Partner- Interior)	Cindy Charleyboy (Patient Partner-Interior)	Shannon Gibson (Ministry of Health)
Kris Gustavson (PHSA)	Colleen McGavin (BC Support Unit)	Tammy Hoefer (BCPSQC)
Kate McNamee (Providence Health Care)	Tina Strudsholm (Northern Health)	Shannon Sahota (BCPSQC)
Deborah Harver (Island Health)	Sherri Mytopher (Patient Partner - Northern)	Jim Cawsey (Patient Partner-Island)
Kevin Barry (Patient Partner- Interior)	Karla Warkotsch (Interior Health)	

Regrets:

Helen Chiu (BC Provincial Renal Agency)	Megan Hunt (FNHA)
Kyle Warkentin (Patient Partner - Youth - Fraser Valley)	Pamela Jessen (Patient Partner - Vancouver Island)
Alyson Hagan-Johnson (Patient Partner - Vancouver Island)	Tanis Hampe (Northern Health)
Lin Chen (Patient Partner - Greater Vancouver/Sunshine Coast)	Megan O'Reilly (Patient Partner-Interior)
Mandy Lindsay (Fraser Health)	

Time	Discussion Topic	Key Notes	Action Items	Responsibility
------	------------------	-----------	--------------	----------------

Time	Discussion Topic	Key Notes	Action Items	Responsibility
2:00	Welcome & Introductions	Committee went around and shared about themselves.		
	Approval of the Agenda <ul style="list-style-type: none"> • Update on PVN Volunteer Conduct Management Process 	PVN Volunteer Agreement has been updated with a section on the PVN Volunteer Conduct Management Process, and shared with the Network based on feedback received from O&A Committee. There is no need to re-sign the agreement if you have already done so. If PVN members have any questions and concerns, they are encouraged to reach out to engagement leaders directly.		
	Thank You to Outgoing Members <ol style="list-style-type: none"> a. Renewal of Membership (Jim and Pamela) b. Recruitment of new members 	<p>We have recruited for the three available patient partner positions on the O&A Committee. We will officially welcome them on their first meeting in February, after they have been oriented. The new members are:</p> <p>Joe Bring- Fraser Valley</p> <p>Vikram Bubber- Lower Mainland</p> <p>Beverley Pomeroy- Fraser Valley</p> <p>Thank you to Jim Cawsey, Pamela Jessen, and Cindy Charleyboy for helping with the selection of our new patient partners!</p>		

Time	Discussion Topic	Key Notes	Action Items	Responsibility
	<p>O&A Terms of Reference</p> <ul style="list-style-type: none"> • Position of “Vice Chair” (for PP and Council co-chairs) • Co-Chair term extension 	<p>The Committee discussed the idea of designating vice-chair position for patient partner co-chair position. The purpose is if there is ever an instance when the patient partner co-chair is not available, there will be a ‘back-up’ vice co-chair who can help chair the meeting. It is also a mechanism for succession planning to the patient partner co-chair position.</p> <p>The Committee decided that it would be more appropriate to have a patient partner volunteer to be a vice co-chair as they work towards becoming a co-chair to the Committee, as opposed to asking a committee member to serve on the spot without notice or training.</p> <p>If Tammy is ever unable to serve as co-chair for a committee meeting, the Council co-chair would be the new PVN Manager.</p> <p>Jim’s term as co-Chair was to be up by the end of today’s meeting. Due to the turnover in O&A membership, Jim was asked to extend his term by another year</p>	<p>Jim and Tammy to amend the TOR for feedback from Committee for February meeting.</p> <p>Tammy to send out job description for PVN Manager for information.</p>	<p>Jim and Tammy</p> <p>Tammy</p>

Time	Discussion Topic	Key Notes	Action Items	Responsibility
		<p>in order to have a successful transition plan for the next co-chair.</p> <p>Committee agrees that TOR should be amended to illustrate extension of co-chair terms and the vice-chair position.</p>		
	Patient Partner Compensation Report	<p>The report has been completed and now sitting with our representatives at the Ministry of Health. This report does belong to the MoH and the Council will work with them on a broader distribution plan.</p>	<p>Tammy will be sharing this report with the Committee as soon as she receives the ok from the MoH, however the Committee is being asked to refrain from sharing publicly as this is the role of the MoH.</p>	Tammy
	Patient Approved Logo	<p>The briefing note for the use of a patient-approved logo was discussed with the committee. The purpose of the BN is to document what already exists with other health authorities and organizations in terms of patient approved logos, and their existing processes for approval.</p> <p>The committee agreed that it is not the role of the Council to approve the use of this logo for other organizations, rather, share it as an idea and provide advice on best practice for its application.</p> <p>In the meantime, the O&A Committee</p>	<p>Tammy will move forward with engaging Council leadership on a discussion of incorporating a patient- approved logo on appropriate Council resources, and look into identifying what the criteria for use will look like. Tammy will then bring it back to the Committee for review and feedback before</p>	Tammy

Time	Discussion Topic	Key Notes	Action Items	Responsibility
		<p>agreed it is worth pursuing the use of a PAL within the Council for resources and tools and would be an indication internally and externally that patient partners had been included in their development.</p>	<p>moving forward with next steps.</p>	
	<p>The Use of Term “Patient Partner”</p>	<p>The Committee had a discussion on the use of the term ‘patient partner.’ It was discussed that the word ‘patient’ does not always apply to those working within initiatives in the system. Many patient partners do not feel like they are just a “patient¹” as defined by Webster’s. Patient partners have diverse lived experiences (ex caregiver, family members, patient) and the term “patient” does not always apply as to why they are being engaged.</p> <p>While there are many other terms such as person, public, community member, the committee agreed it would be challenging to find a term acceptable to all in all situations. Given that the standard naming internationally and nationally is still patient, there was agreement to keep the term for now while looking to see how the things evolve at other tables.</p> <p>In the meantime, one of the things the engagement leaders can do during their orientations is indicate that while we use</p>		

¹ A person receiving or registered to receive medical treatment

Time	Discussion Topic	Key Notes	Action Items	Responsibility
		the term patient, we mean those with lived experience whether as a care giver, family member, or someone who received care directly.		
	Future Meeting Dates	Shannon will be sending out future meeting dates and details	Send out future meeting dates	Shannon
	Closing Remarks			