

PVN Oversight & Advisory Committee Meeting

Date: Wednesday Nov 02, 2022	Time: 1300-1430	Venue: Zoom
Present: Adrienne Breen, Beverley Pomeroy, Cameron Fani, David Watts, Helen Chiu, Jana Buhlmann, Maria Klement (vice-chair), Prachi Khanna, Rachelle Ferer, Sandy Ketler, Sherry Bar, Terry Wilde, Tammy Hoefer (co-chair), Shannon Griffin, Vikram Bubber (co-chair)		
Regrets: Ashifa Ahmed, Chris Lamoureux, Christine Hunt, Christopher Webber, Cyndi Gerlach, Ellen Froid, Karla Warkotsch, Kris Gustavson, Lindsay Arcscott, Linda Nelson, Mandy Lindsay, Luka Poljak, Salimah Lalli, Tina Strudsholm		

November 02, 2022 – PVN Oversight & Advisory Committee (O&A) Meeting Notes

	Topic	Discussion Notes	Action Items
1.	Welcome & Intros	Tammy welcomed members to the meeting and invited people to acknowledge the lands in which they are calling in from. Regrets noted as above.	n/a
2.	BCPSQC Strategic Plan & Operations Updates	<p>Update on Council Strategic Plan, changes within the Patient & Public Engagement Team, and efficiencies to PVN processes</p> <p>Council strategic plan has been submitted to the Ministry of Health for approval</p> <p>It was noted that the strategic plan was developed through a robust consultation process which included interviews with system leaders, thought exchange contributions and focus groups.</p> <p>O&A members spoke about and supported the notion of a provincial standard for patient engagement. It was noted the Council is focused on creating and modeling expectations and standards by default through their work, e.g., equipping system ability to engage, the organisation is advocating standards for patient engagement.</p> <p>Findings from feedback during strategic plan consultation regarding engagement were discussed – health care partners want more ownership and autonomy of their patient engagement relationships and activities. It also highlighted that different mechanisms of engagement are needed to for populations and communities with the largest health inequities in BC.</p> <p>Members expressed support for reaching marginalized groups and acknowledged very real challenges putting this into practice. There is often limited engagement due to stigma e.g., MH illness not represented on healthcare committees. Other groups include seniors, those experiencing homelessness, and groups who do not have access to technology.</p> <p>Members highlighted benefits of current PVN system and flagged potential unintended consequences of implementing changes towards more automation. There was overall general support and excitement for the evolution of PVN, noting transparency and communication are key.</p>	n/a

		Members flagged importance of patient partner safety – any changes to system need to account for safety as there are risks involved when PP shares their story.	
4.	Open Space	<p>Opportunity for members to raise relevant topics not covered in the agenda</p> <p>Members discussed patient partner tracking of engagement opportunities applied for and participated in, as well as the benefits around keeping a personal record. Different methods were shared and discussed and there was overall support for sharing a template that can be used by PPs to keep record of engagements.</p> <p>It was clarified that PVN can track activity but only for engagements done through PVN.</p>	<p>ACTION: Send tracker template to PPE (TW)</p> <p>ACTION: Review and develop draft template to share (RF)</p>
5.	Remainder 2022/23 meeting dates	Discuss next steps in determining future meeting dates and rescheduling face to face	ACTION: doodle poll for January meeting (RF)
<p>Next meeting:</p> <ul style="list-style-type: none"> January – TBD 			