

PVN Oversight & Advisory Committee Meeting		
Date: Wednesday February 8, 2023	Time: 1.00-2.00pm	Venue: Zoom
Present: Alana Williams, Ashifa Ahmed, Beverley Pomeroy, David Watts, Jana Buhlmann, Kris Gustavson, Linda Nelson, Mandy Lindsay, Maria Klement (vice-chair), Prachi Khanna, Rachelle Ferrer, Salimah Lalli, Sandy Ketler, Sherry Bar, Stephanie Massot, Tammy Hoefer (co-chair), Terry Wilde, Tina Strudsholm, Vikram Bubber (co-chair)		
Regrets: Chris Lamoureux, Christine Hunt, Christopher Webber, Cyndi Gerlach, Ellen Frood, Helen Chiu, Karla Warkotsch, Lindsay Arscott, Luka Poljak, Shannon Griffin		

February 8, 2023 – PVN Oversight & Advisory Committee (O&A) Meeting Notes

	Topic	Discussion Notes	Action Items
1.	Welcome & Intros	Members welcomed to the meeting and invited people to acknowledge the lands in which they are calling in from. Regrets noted as above.	n/a
2.	People & Community Partnerships	<p>TH provided an overview of feedback heard from the consultation process during the development of the overall Council strategic plan, which included health care organizations wanting more autonomy over their relationships with patient partners and greater focus on community partnerships. The initial proposals for discussion today have stemmed from the strategic planning process, where patient partners were given an opportunity to participate.</p> <p>There is an ambition to build on the success of patient engagement and explore opportunities to expand into people and community partnerships.</p> <p>TH shared a working definition of people and community partnerships: Collaborating with groups of people connected by where they live, shared interest, or similar situations, to address issues affecting their healthcare.</p> <p>Query raised regarding focus on health care as opposed to health generally.</p> <p>TH advised the MoH mandate for the Council is health care.</p> <p>It was noted by group members that PVN has always included community partnerships in its work with patient engagement. Expanding into people and community partnerships indicates a shift in focus as opposed to a brand-new concept.</p> <p>TH noted historically the primary focus of the public & patient engagement team has been on patient engagement, with little emphasis on the public aspect. The goal is to continue the momentum in building capacity for authentic patient engagement, as well as generating momentum for developments in wider community engagement.</p> <p>Concern was raised around clarity of the working definition and use of term people instead of patients as patients receiving and needing health care are the most impacted by the health care system. Suggestions made to ensure</p>	

		<p>plain language is used for the definition. Suggestion to use ‘working together’ as opposed to ‘collaborating’ to help manage expectations. It was noted further clarity needed around term environment and how social determinants will be addressed. Support for terms ‘people and community’ as most will see possibility of belonging in those groups.</p> <p>Group discussed implications of the IAP2 Spectrum on Public Participation on planned work. Concerns raised around co-production and co-design, including managing expectations (i.e., clarity in roles) and ensuring equitable opportunity to contribute. It was noted there are different levels and methods of engagement, and the aim is to ensure you are employing the appropriate levels and methods needed for your specific initiative. Ultimately we are working to continue to promote 2-way conversation to facilitate health care improvements.</p> <p>TH shared initial draft key messaging. Suggestion made to also engage educational institutions, policy/decision making bodies i.e. city councils. It was noted that messaging captures the key point that patient partner work will not diminish as the work moves to include community. Request made to ensure this is highlighted in final messaging. It was noted the key messages and shift are reflective of the engagement events from 2022 and. There was support for ambition to include more voices and diverse public members in conversations around improving health care.</p> <p>MK shared an example from the Kootenay boundary where community engagement initiatives are starting.</p>	
4.	PVN Process Improvement	Tabled	
5.	Any Other Business & Close	-	
<p>Next meeting:</p> <ul style="list-style-type: none"> Monday, April 17th – 1.00-2.30pm via Zoom 			