



Community Advisory Council

MINUTES

Monday, January 21, 2012

4:00 pm – 6:00 pm

Room C3-401, Victoria Hospital, LHSC

Membership:

- Bonnie Adamson
- Michelle Baldwin
- Charlene Beynon
- Cathy Cuyllé
- Bonnie Doxtator
- David DuCharme
- Rev. Robert W. Foster
- Marc Garson*
- Dr. Madeline Hardy
- Dr. Frank Harper
- Michelle Hurtubise*
- John Irvine
- Elisa Jones*
- Tony LaRocca
- Dwayne Linner
- Dr. Scott McKay
- Leslie Meredith
- Bill Peel
- Michelle Quintyn
- Ellen Rosen*
- Sab Sferrazza
- Diane Smith
- Carol Young-Ritchie

Guest:

- Dave Crockett**
- Cathy Stark**
- Vico Dagnone (observer)**

Staff Support:

- Kelly Almond
- Michele Lavigne

*denotes regrets

Meeting Schedule

- December 17, 2012
- January 21, 2013
- March 18
- May 13
- September 23
- November 18
- 4:00-6:00 pm

1) Review and approval of December 17 meeting minutes

Bonnie Adamson welcomed members and acknowledged new individuals at the table and round table introductions were made. Bonnie welcomed Vico Dagnone, a student mentoring with Bonnie, as an observer to our meeting today. Minutes were passed.

2) Summary of feedback on Wayfinding and next steps

A summary reflecting council members' input and feedback on the previously circulated wayfinding survey was shared with members. Dave Crockett attended the meeting to provide an update on learnings derived from council members' feedback and explained how it will be applied and executed in current and next steps planning. Dave welcomed questions and comments from members.

Actions: 1) *Check in* with Children's Hospital Family Feedback Survey re wayfinding feedback from families. 2) Provide the CAC with status updates on improvements implemented by the LHSC wayfinding steering committee process.

3) Review of revised Terms of Reference and next steps

Cathy Cuyllé presented the proposed changes to update the 2010 Terms of Reference to reflect council members' "homework" and feedback requested at the Dec. 17/12 CAC meeting. She reviewed the "from" and "to" recommendations to reflect the Council's new vision and goals (improve patient experiences, collaboration) and to reflect best practices derived from consultation with other patient advisory councils, research and expert consultation.

There was general discussion amongst the council in reviewing some of the more detailed feedback provided and Cathy will make these changes to the terms of reference based on today's input from members. The new Terms of Reference were then approved by the council.

Action: Members were invited to advise Cathy Cuyllé (cathy.cuyllé@lhsc.on.ca) if they are interested in putting forth their names for consideration for the CAC co-chair role.

4) Finalizing the Council's "Rules of the Road"

Cathy also presented the feedback pertaining to the Rules of the Road or "How we will *be* together" based on the feedback received from council members from the December meeting. Feedback was broken into three themes: behaviors, principles, and council purpose. All agreed to the outline as presented and asked that "parking lot", and "have fun" be added to the rules of the road, as well as a 10 minute break be added to each agenda to enable CAC members to get to know one and other better. It was also agreed that members and presenters will identify any items discussed at council that need to remain confidential. Otherwise, the preference is that the majority of matters discussed be considered open for public scrutiny and that all council decisions result from robust, open, candid and respectful discussion with contribution from everyone. It was agreed that outcomes will always be stronger when diverse perspectives are shared and considered in any matter.

Action: Add "parking lot", "have fun" to Rules of the Road, and add 10-minute break to future agendas.

5) LHSC Smoking Policy Presentation

The council welcomed Cathy Stark, Manager, Occupational Health and Safety Services at London Health Sciences Centre, who shared *proposed* changes to the London Health Sciences Centre Smoking Policy.

6) The meeting was adjourned after a brief *check-in* to assess how effectively the meeting met objectives and expectations, and to seek opportunities to improve future meetings. All agreed that the robust dialogue and divergent perspectives shared made for an informative and meaningful meeting and that the informal, conversational atmosphere enabled the exact environment of collaboration and consensus desired by the Council