



Patient Advisory Council (PAC) Welcome Meeting Minutes

October 24, 2017

Present PAC Members: Bill Sheehan, Jeff Wilson, Jim Crockett, Jack Gibbs, Larry Glassburn, Marie Judish, Trish Julian

Facilitators: Stacey Hammond and Caitlin Barba

WMC Staff: Stacey Hammond, Caitlin Barba, Kellen Brewer, Chelsea Keene

Meeting Objectives

- ✓ *Build a sense of community*
- ✓ *Identify assets/resources within the community*
- ✓ *Identify personal interests in community issues*
- ✓ *Understand that patients can have a role in solving community issues*
- ✓ *Establish a PAC mission, vision, and working structure*

Topics

Welcome

- 1.) Administrative Tasks
 - a.) Turned in PAC Paperwork.
 - b.) Reviewed Meeting Objectives and Agenda.
 - c.) Reviewed Minutes from 9/26/2017: [PAC approved](#).
 - d.) Discussed HIPAA requirements/training: Reviewed instructions for training log in.
 - i. [For those who have done HIPAA training, turn in documentation to Stacey or Caitlin by next meeting.](#)
- 2.) PAC Meeting 1 Survey: Reviewed results and highlighted specific questions with comments that can inform the mission/vision writing process. [See Slides for reference.](#)
 - a.) [PAC suggests redoing the survey at end of 6 months to compare with initial survey and to use to help prepare for 2nd PAC.](#)
- 3.) Community Building Activity/Ice Breaker

PAC Structure

- 1.) Mission/Vision Statements: *"In 2 groups, use the mission/vision drafts from each member to create 1 mission and 1 vision for each group to present to larger group.*

Highlight that the mission is why we exist and the vision is who we want to be in the future. "

- a. Group 1 mission: support WMC mission and serve as conduit to represent the existing and potential Westminster medical community
 - i. Liked word "conduit"; may need to define "community" – had different interpretations of meaning; liked word "represent."
- b. Group 2 mission: provide high quality patient centered healthcare by using an integrative team approach involving doctors, staff, medical service providers to achieve best patient health
 - i. Liked "high quality patient centered healthcare"; list is not exhaustive but how do we include all involved parties; liked "team approach"
- c. If combined...
 - i. Support WMC community utilizing an integrative team approach to provide high quality patient centered healthcare
 - ii. Support WMC by encouraging WMC to provide high quality patient centered healthcare
 - 1. Jim suggested changing clinic name to encompass community beyond Westminster
 - iii. Support the WMC community to provide high quality patient care, utilizing available resources to advocate, educate and increase awareness to the populations served
 - 1. "Community" is a generic term; needs clarification and description
- d. Did not have time to work on vision statements. Request to sleep on it and spend more time refining mission statement and creating vision statement. No specific deadline for completion can be ongoing process throughout 6 months.

2.) Roles/Responsibilities: *"Brainstorm an ideal PAC structure. What roles/responsibilities/jobs/committees should the PAC have?"*

- Brainstorm:
 - Food ordering person
 - Secretary
 - Chair/lead
 - Co-chair
 - Small groups – team leaders, could rotate
 - Liaison
 - Communication
 - Staff
 - Patient
 - Data manager – "wrangler", recorder, collector
- *"Work together in two small groups to create a vision of PAC structure (aka org chart), will detail out specific roles/duties at next meeting."*

- 3.) Community Agreement: *“Start thinking about what guidelines/rules/agreements we want to have as a group to ensure a successful working relationship. Will be discussed at next meeting.”*
- 4.) PAC Meeting Outline: Reviewed PAC meeting outline. PAC believes the meeting outline reflects their interests and potential purpose/mission of the PAC. No changes suggested at this time.

Community Asset Mapping

- 1.) Mapping Process: Reviewed outline of community asset mapping process (see slides for reference and articles).
- 2.) Next Steps/Group Work: *“Start your community asset map in your small groups. PAC members can visit the clinic and do a walk through, making observations about assets/what they see/notice. Please arrange with Stacey if interested. Suggested first step is to define community scope, brainstorm where you will go to get information, who you might talk to, and methods for gathering information (survey, walk through, interviews, etc.).”*
 - a. PAC requested zip code data for patient panel.
 - b. PAC requested WMC org chart for reference.

Cultural Competency

- 1.) Upcoming Trainings: Stacey will send out an article to read to start thinking about cultural competency as it relates to being a patient advocate and working with people from different backgrounds/beliefs. Next meeting, the PAC work on increasing our awareness of our lens and its impact on our potential work.

Closing

- 1.) Reviewed Upcoming Meeting Dates: Next Meeting is November 21!
- 2.) Next Meeting Agenda: Continue work on mission/vision statements, PAC community agreement, PAC roles/job/committee structure, community asset mapping, and cultural competency/responsiveness training. All members will be present at next meeting and we will take photos for the website.
- 3.) Actions/Tasks for Next Meeting:
 - a. **Complete HIPAA training**: Print certificate and turn into Caitlin or Stacey (should be complete before any PAC members visit office for asset mapping).
 - b. **Review 10/24 Meeting Minutes** to be sent by email.
 - c. **Read the cultural competency article** to be sent by email.

- d. **Find a time to meet in your groups** to work on PAC structure and start Community Mapping Project:
- i. **Review/Revise Mission & Vision Statements:** Using PAC survey, PAC discussion prompts from first meeting, mission/vision articles, and draft statements created during the meeting, revise/work on statements to share at next meeting.
 - ii. **Create a draft outline of the ideal PAC structure/organizational chart:** Include leadership roles/liaisons, committees, roles/responsibilities of various members, potential job duties/descriptions. Bring your draft to the next meeting to discuss.
 - iii. **Create a plan for the community mapping process:**
 1. Define what is a community asset?
 2. Define community boundaries.
What does community mean to you?
 3. Brainstorm what types of assets exist in this community (groups, individuals, places, services, materials, etc).
 4. Determine what type of assets to include in your map.
 5. How will you gather information about what assets exists (surveys, interviews, observations, etc.)?
 6. Clinic Exploration – make appointment with Stacey to walk through clinic and make observations.