Co-Chair: Ms. Margaret Melanson  
V.P. Quality & Patient Centred Care  
Co-Chair: Dr. Wayne MacDonald

Date: Friday, February 12, 2021

Meeting Location: Zoom

Meeting Time: 1:00 p.m. ~ 2:30 p.m.

REQUIRED ATTENDEES

Present (✓)  Regrets (R)  Absent (A)

PATIENT EXPERIENCE ADVISORS

✓ Shirley Renouf  ✓ Siobhan Laskey  ✓ Debra Craig
✓ Wayne MacDonald  ✓ Shirley Young  ✓ Roger Stoddard  ✓ Terry Clark

HORIZON STAFF

✓ Margaret Melanson, VP Quality & Patient Centered Care  ✓ Sonya Green-Hache, Regional Director, Volunteers Auxiliaries & Patient Engagement  ✓ Lauza Saulnier, Regional Director, Quality & Patient Safety Services  ✓ Monica Landry, Executive Assistant to Margaret Melanson
R Maura McKinnon, Chief Human Resources Officer  A Jeff Carter, Corporate Director, Capital Assets and Infrastructure  R Jacquelin Gordon, Director of Nursing Professional Practice  ✓ Dr. Timothy Christie, Director of Ethics

EX-OFFICIO

R Karen McGrath, President and CEO

GUESTS

1.0 Call to Order

1.1 Welcome
- The agenda and January 21, 2021 meeting minutes were approved by consensus W. MacDonald/ M. Melanson

2.0 New Business

2.1 NB Health Council 2019 Hospital Patient Care Experience Survey results – Key indicators and Council Recommendations (full report and results are available on the NBHC website)  M. Melanson/ S. Green-Hache
- A summary of the 16 indicators that correlate with the overall patient experience result was provided. Upon review of the data, the Council selected their top choices of indicators they would like to see addressed by Horizon and become part of the strategic plan.
- This included:
  * Survey results from the NB Health Council provided below

  1. **Indicator Category:** Discharge and Transition

     **Indicator:** Patients completely informed about what to do if worried after discharge. (58.2%)
     Through discussion, PFAC grouped the indicator related to involvement in decision making under the category of Discharge and Transition - The Hospital staff took my preference and those of my family or caregiver into account in deciding what my health care needs would be when I left the hospital. (38.2%)

  2. **Indicator Category:** Coordination of Care


**Indicator:** Patients who reported there was always good communication among staff about their care. (59.8%)
Through discussion, PFAC grouped the indicator related to involvement in decision making under the category of coordination of care – Patients who reported that they were always involved as much as they wanted to be in decisions about their care and treatments (62.3%)

3. **Indicator Category:** Communication about Medications
   **Indicator:** Before giving you any new medicine, how often did hospital staff tell you what the medicine was for? and
   Before giving any new medicine, how often did hospital staff describe possible side effects in a way you could understand? (54.6%)

4. **Indicator Category:** Responsiveness of Staff
   **Indicator:** Staff responded quickly to call button and staff responded quickly to patients needing help to get to the bathroom or to use a bedpan (55.1%)

5. **Indicator Category:** Cleanliness
   **Indicator:** How often were your room and bathroom kept clean? (48.3%)

The Council determined they would like to have further information regarding the top three indicators at their future meetings.

### 3.0 Other Topics / Discussion

<table>
<thead>
<tr>
<th>3.1 COVID-19 Update <em>(if time permits)</em></th>
<th>Deferred</th>
<th>M. Melanson</th>
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<tbody>
<tr>
<td>3.2 EPC/Designated Support Person Update <em>(if time permits)</em></td>
<td>Deferred</td>
<td>S. Green-Hache</td>
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### 4.0 Adjournment

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<thead>
<tr>
<th>4.1 Next Meeting</th>
<th>TBD</th>
<th>All</th>
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