

Patient/Partner Experience Council (PEC) | Terms of Reference

Updated: September 2026

1. Purpose

The Patient/Partner Experience Council (PEC) serves as a partnership between patients, families, caregivers, community members, physicians, staff and hospital leadership to improve the quality, safety and experience of care delivered by the Hospital.

The Council exists to:

- Bring the patient and family voice into organizational decision-making.
- Identify opportunities and successes related to patient experience, quality of care.
- Partner in the co-design of programs, policies, services and improvement initiatives.
- Ensure hospital services are viewed through the patient and family lens.
- Act as ambassadors for person-centred care.
- Support a culture of listening, learning and continuous improvement.
- Provide a safe and respectful forum for meaningful engagement and dialogue between patients, families and the Hospital.

2. Guiding Principles

The Council is grounded in the following principles:

- Partnership
- Co-design
- Collaboration
- Transparency
- Accountability
- Integrity
- Empathy and Compassion
- Respect and Dignity
- Equity, Diversity and Inclusion
- Patient Safety

Members will ensure that suggestions and discussions reflect the diverse experiences and needs of patients, families and caregivers across the communities served by the Hospital.

3. Our Framework

What We Must Achieve

The Council will focus on organizational priorities related to:

- Patient Experience
- Quality and Safety
- Education
- Access and Service Delivery
- Engagement
- Communication and Information Sharing

The Council will provide feedback and recommendations in support of these priorities.

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How We Work

The Council may utilize:

- In-person meeting and hybrid or virtual meetings as necessary.
- Project-specific working groups.
- Time-limited task teams.
- Surveys and focus groups.
- Electronic consultations.
- Patient storytelling and experience sharing.
- Co-design workshops.
- Ad-hoc participation based on interests, expertise and availability.

How Success Will Be Measured

Annually, the Council will evaluate:

- Number and scope of initiatives supported.
- Suggestions implemented by the organization.
- Diversity and representation of membership.
- Attendance and engagement levels.
- Member satisfaction.
- Demonstrated impact on patient experience, quality and safety outcomes.

A summary report will be provided annually to Executive Leadership, Medical Quality Assurance Committee and the Board Quality Committee.

4. Membership

The Council will seek broad representation reflective of the communities served by the Hospital.

Membership may include:

Patient/Partners

Individuals who:

- Have received care at the Hospital within the last several years.
- Are family members or caregivers.
- Can speak beyond their individual experiences.
- Are willing to contribute to system improvement.
- Represent diverse populations, ages, cultures, backgrounds and geographic areas.

Organizational Representatives

- CEO
- Vice President Clinical Services
- Director/Manager responsible for Quality and Patient Relations
- Patient Relations Representative
- Communications Representative
- Clinical representatives from key programs

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- Physician Representative
- Ad hoc subject matter experts as required

5. Member Expectations

All members will:

- Treat one another with respect and professionalism.
- Maintain confidentiality where required.
- Act in accordance with hospital policies and codes of conduct.
- Participate constructively and respectfully.
- Consider perspectives beyond their own experiences.
- Support diversity, equity and inclusion.
- Focus on improving care for all patients and families.

6. Recruitment and Term

Patient Experience Partners will be recruited through:

- Referrals from patients and families.
- Hospital staff recommendations.
- Volunteer and community networks.
- Human Resources and formal communications channels.

Membership terms will remain flexible to support both continuity and the inclusion of new voices.

The Hospital will review membership annually to adjust the size, composition and membership of the Council as required to support organizational priorities and effective functioning of the Council.

7. Meetings

- Meetings will occur quarterly.
- Meetings will be in-person or hybrid or virtual as necessary.
- Meeting times may vary to increase accessibility.
- Additional project-specific or ad-hoc meetings may be scheduled as required.
- Decisions will be reached through consensus whenever possible.
- Meeting materials will be circulated in advance.
- Minutes and action items will be documented and shared with members.

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8. Leadership Structure

The Council will be co-led by:

- One Patient/Partner Experience Co-Chair
- One Hospital Leadership Co-Chair

Co-Chairs will:

- Develop agendas.
- Facilitate meetings.
- Ensure balanced discussion.
- Promote ongoing engagement.
- Monitor progress toward objectives.

9. Reporting Relationship

The Patient/Partner Experience Council reports through the Vice President Clinical Services and Quality structure and provides input, feedback and suggestions to Senior Leadership and appropriate Board Committees.

10. Review of Terms of Reference

These Terms of Reference will be reviewed every two years or sooner as required to ensure they continue to reflect the needs of patients, families, caregivers and the organization.

The Patient/Partner Experience Council exists to ensure patients, families and caregivers are true partners in shaping care, improving services and creating exceptional experiences for everyone who seeks care at the Perth and Smiths Falls District Hospital.