


MINUTES

Committee:	Medical Advisory Committee				
Date:	September 14 th , 2023	Time:	8:05am-9:22am		
Chair:	Dr. Mark Nelham	Recorder:	Alana Ross		
Present:	Dr. Bueno, Dr. Joseph, Dr. Kelly, Dr. Lam, Dr. Nelham, Dr. Patel, Dr. Ondrejicka, Dr. Ryan, Heather Klopp, Jimmy Trieu, Matt Trovato, Adrianna Walker, Michelle Wick, Dr. Craig McLean				
Regrets:	Heather Zrini, Dr. Nicola McLean				
Guests:	Shari Sherwood				
1	Call to Order / Welcome				
1.1	<ul style="list-style-type: none">Dr. Nelham welcomed everyone and called the meeting to order at 8:05am				
2	Guest Discussion				
3	Approvals and Updates				
3.1	<u>Previous Minutes</u> <ul style="list-style-type: none">Approval / Changes<ul style="list-style-type: none">None <p><u>MOVED AND DULY SECONDED</u> <u>MOTION: To accept the June 8th, 2023 MAC minutes. CARRIED.</u></p>				
4	Business Arising from Minutes				
4.1	<u>CT Scanner:</u> <ul style="list-style-type: none">Ministry requirement is to submit the Business Case with architectural plans first, however, if there is no funding source, it will not be approved<ul style="list-style-type: none">Have been working with Walter Fedy Engineering Services on architectural drawings over the summer, i.e., addressing patient flow, staffing, space and major safety issuesMaking progress, however, it could take up to a year for review and final decisionWaiting for drawings at this point				
4.2	<u>HyperCare:</u> <ul style="list-style-type: none">Working on onboarding physicians in HyperCare; physicians looking for login information <table><tr><td><u>Action:</u><ul style="list-style-type: none">Follow up with Kim van Wyk</td><td><u>By whom / when:</u><ul style="list-style-type: none">Klopp; Today</td></tr></table>			<u>Action:</u> <ul style="list-style-type: none">Follow up with Kim van Wyk	<u>By whom / when:</u> <ul style="list-style-type: none">Klopp; Today
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4.3	<u>Electronic Medical Record:</u> <ul style="list-style-type: none">OneChart<ul style="list-style-type: none">Will be sending out an email today; electronic meds process is in place in ED and progressing well; document outlining pharmacy requirements is at physician station for review<ul style="list-style-type: none">Enter the information into the electronic form and it shows up clearly on the tracking board for the nursing staff to administer to the patient; labels for meds are still pre-printsPaperless!				
5	Medical Staff Reports				
5.1	<u>Chart Audit Review:</u> <ul style="list-style-type: none">Changing process; rough draft worked out				
5.2	<u>Death Audit Review:</u> <ul style="list-style-type: none">No changes at this time				
5.3	<u>Infection Control:</u> <ul style="list-style-type: none">Markers are trending in an improved direction; education being provided to staff around c.diff prevention and documentationCOVID-19 is being treated like other respiratory viruses at this time in regards to returning to work after having the illness				

	<ul style="list-style-type: none"> ○ Anticipates seasonal masking changes are in progress; pending information and direction • Seeing increased prevalence of group-based Strep with eye lesions or cellulitis at SHH and AMGH (3 cases per hospital), and it is apparently world-wide; lesions have been swabbed, and blood cultures taken <ul style="list-style-type: none"> ○ Patients are to be droplet contact isolated, treated for strep, and IPAC notified ○ IPAC is working with Public Health to determine invasiveness and degree of severity ○ It does not seem to be affecting the health care workers at this time, as it takes 4+ continuous hours of contact to contract • There is a new internal medicine physician at HPHA who specializes in infectious diseases and is very generous with his time if anyone requires consultation or assistance <ul style="list-style-type: none"> ○ Working on building a relationship with this physician and having him join the ASP committees 				
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5.4	<p><u>Antimicrobial Stewardship:</u></p> <ul style="list-style-type: none"> • Committee is now functioning and 1st meeting will be in a couple of weeks and will be held quarterly; looking for Dr. Sandra Mekhael to join with Dr. Nelham <ul style="list-style-type: none"> ○ HPHA is looking for SHH to join the broader ASP group, however because SHH data collection will be on Cerner and the other groups do not have Cerner yet, this may not be feasible ○ First target will be data collection around prescription of piperacillin and tazobactam, and blood culture results • ASP protocol is part of the QIP, and there is an online learning piece to be completed with College by physicians by the end of Aug; this has been extended to Oct 				
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5.5	<p><u>Pharmacy & Therapeutics:</u></p> <ul style="list-style-type: none"> • No discussion 				
5.6	<p><u>Lab Liaison:</u></p> <ul style="list-style-type: none"> • Scheduled for Sep 25th 				
5.7	<p><u>Community Engagement Committee:</u></p> <ul style="list-style-type: none"> • Dr. Ondrejicka has joined this committee and is scheduled to attend next week; report in Oct 				
5.8	<p><u>Recruitment & Retention Committee:</u></p> <ul style="list-style-type: none"> • Dr. Ryan has joined this committee and will report as available 				
5.9	<p><u>Quality Assurance Committee:</u></p> <ul style="list-style-type: none"> • Working on building a structure to organize meetings so information is available to other committees on a timely basis • Ethics, and Regional Patient Advisory committees are in need of physician and regional representatives • Phase II of OneChart related to physician documentation is under way; requires physician representative 				
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6	Other Reports				
6.1	<p><u>Lead Hospitalist:</u></p> <ul style="list-style-type: none"> • Ongoing staffing difficulties • New hospitalist, Dr. Jessica Mammoliti, starting next week; waiting for one more reference 				
6.2	<p><u>Emergency:</u></p> <ul style="list-style-type: none"> • ED schedule is in good standing at this time; there are a few open shifts over the next two months <ul style="list-style-type: none"> ○ To date, there have been 500 ED closures in Ontario; we continue to advocate our needs to the Ministry in response to these pressures 				

	<ul style="list-style-type: none"> Waiting to hear if temporary local funding will be extended past Sep 30; there are discussions being held around a new funding model Chief of Emergency term ends as of Oct 30th, and Dr. Ryan will assume the Chief of Staff position as of Nov 1st <ul style="list-style-type: none"> Dr. Nelham will retire from the Chief of Staff position as of Nov 1st Looking for a Chief of Emergency; interest has been received from Dr. Kelly and Dr. McLean Looking for a President of Medical Staff Association Concern for number of meetings with the workload; Dr. Nelham will sub-in for meetings as needed Discussed responsibilities of the Chief of Emergency position, i.e., scheduling, and monthly stipend 		
	<table border="1"> <tr> <td> <u>Action:</u> <ul style="list-style-type: none"> Forward interest in Chief of Emergency position to Dr. Ryan and Dr. Nelham Schedule Professional Staff meeting for discussion of Chief of Emergency and President of Medical Staff Association (In-person / WebEx options) Attend Professional Staff meeting Finalize new appointments for a start of Nov 1st </td><td> <u>By whom / when:</u> <ul style="list-style-type: none"> All; as needed EA; Sep 21st @ 8am All; Sep 21st @ 8am Nelham; Oct 12th </td></tr> </table>	<u>Action:</u> <ul style="list-style-type: none"> Forward interest in Chief of Emergency position to Dr. Ryan and Dr. Nelham Schedule Professional Staff meeting for discussion of Chief of Emergency and President of Medical Staff Association (In-person / WebEx options) Attend Professional Staff meeting Finalize new appointments for a start of Nov 1st 	<u>By whom / when:</u> <ul style="list-style-type: none"> All; as needed EA; Sep 21st @ 8am All; Sep 21st @ 8am Nelham; Oct 12th
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6.3	<u>Chief of Staff Report:</u> <ul style="list-style-type: none"> Looking forward to be building a relationship with the new physician at HPHA around infection control Had opportunity to present information regarding the SH Medical Clinic to the SH Council on Sep 5th, along with Mr. Trieu, Mr. McNeil and Mr. Shaw <ul style="list-style-type: none"> Looking for financial support and implementation of a task force with council representation for review of increase in rural primary healthcare services; would like to break ground in 2024 <ul style="list-style-type: none"> A follow up meeting has been scheduled No news has yet been received from the Ministry regarding the application for the SHFHT <ul style="list-style-type: none"> SH currently has 1K unattached patients, and this number is growing daily 		
6.4	<u>President & CEO Report:</u> <ul style="list-style-type: none"> Report circulated 		
6.5	<u>CNE Report:</u> <ul style="list-style-type: none"> Region met this morning regarding masking mandates <ul style="list-style-type: none"> Our IPAC team will be monitoring local trends and staff will be encouraged to mask in clinical areas If patients and visitors refuse to wear a mask, it will not be enforced Stratford hospital is currently in COVID-19 outbreak Discussed case of urgent transfer of patient to facility with no beds at the call of the surgeon, and refusal by EMS; expecting communication changes to be implemented to EMS process Discussed bed pressures in the region between London, AMGH / SHH, and HPHA Cardiac monitors are all at end of life; new monitors are on site and WiFi project is progressing well to support installation 		
6.6	<u>COO Report:</u> <ul style="list-style-type: none"> P4R is typically ED funding in larger hospitals, and the Ministry has now extended it to small and medium hospitals, i.e., under 30K visits/year; funding letter is pending <ul style="list-style-type: none"> Ministry is investing \$15M into the 88 small and medium hospitals, a possible of \$150K per hospital if divided equally P4R stands for Pay for Results, so a formal plan around efficiency and improvement of patient care is required, and it must be accepted and approved by the Ministry Adjustments will not be made around hospital closures in the first year, however, hospitals that remain open despite the pressures may benefit further from this funding at a later date Discussed increase in percentage of population in the area that is now coming to SHH & AMGH <ul style="list-style-type: none"> Increase from 42% three years ago to 47%, which translates to an increase of \$1M to care for patients we wouldn't normally see; Ontario Health is aware 12 FTEs have been hired between the two sites to support this increase of patients 		
6.7	<u>Patient Experience Story:</u> <ul style="list-style-type: none"> Report circulated 		
	<u>MOVED AND DULY SECONDED</u>		

	<u>MOTION: To approve the Other Reports as presented for the September 14th, 2023 MAC Meeting. CARRIED.</u>		
7	New Business		
7.1	<u>Physician Committees & Assignments:</u> <ul style="list-style-type: none">Reviewed		
7.2	<u>Urgent Palliative Follow-Up Clinic</u> <ul style="list-style-type: none">Discussed need for a enhanced follow-up service through ED for palliative care patients<ul style="list-style-type: none">Concern that care is not what it should/could be for end-of-life patients in the areaDr. Kelly would like to provide follow-up care for these patients, as an outpatient clinic visit, and provide a home or virtual care check in to determine if the patients’ care plans and medications are working efficientlyAn advantage of this process is limiting the visits back to the ED		
	<u>Action:</u> <ul style="list-style-type: none">Meeting for discussion of processForward palliative patient referrals to Dr. Kelly	<u>By whom / when:</u> <ul style="list-style-type: none">Kelly / Lam / Nelham; Sep / OctAll; ongoing	
7.3	<u>Credentialing: New Appointments & Reapplications:</u> <ul style="list-style-type: none">Credentialing and Reappointment list circulated and accepted <u>MOVED AND DULY SECONDED</u> <u>MOTION: To accept the credentialing and reappointments list, as circulated on September 14th, 2023, and to recommend it to the HHS Common Board for Final approval. CARRIED.</u>		
	<u>Action:</u> <ul style="list-style-type: none">Forward credentials list to HHS Common Board for final approval	<u>By whom / when:</u> <ul style="list-style-type: none">EA; Oct	
8	Education / FYI		
9	Adjournment / Next Meeting		
	Regrets to alana.ross@amgh.ca		
	Date	Time	Location
	October 12 th , 2023	8:00am	WebEx
	<u>Motion to Adjourn Meeting</u> <u>MOVED AND DULY SECONDED</u> <u>MOTION: To adjourn the September 14th, 2023 meeting at 9:22am. CARRIED.</u>		
Signature			
			
Dr. Nelham, Committee Chair			