

MINUTES

| Committee: | | Medical Advisory Committee | | | | | |
|------------|--------------|-------------------------------------------------------------------------------------------------------------------------------|-------------------|---------------------------|--|--|--|
| Date: | | December 14, 2023 | Time: | 8:30am-9:30am | | | |
| Chair: | | Dr. Sean Ryan | Recorder: | Chelsea Adamson | | | |
| Present: | | Dr. Nelham, Dr. Ryan, Dr. Kelly, Dr. Chan, Dr. Patel, Heather Klopp, Jimmy Trieu, Matt Trovato, Adriana Walker, Michelle Wick | | | | | |
| Regret | ts: | Heather Zrini, Dr. McLean, Alana Ross, Shari Sherwood | | | | | |
| Guests | s: | Aileen Knip (Board Representative) | | | | | |
| | | | | | | | |
| 1 | | o Order / Welcome | | | | | |
| 1.1 | | or. Ryan welcomed everyone and called the m | eeting to order a | t 8:30am | | | |
| 2 | | t Discussion | | | | | |
| 3 | | Approvals and Updates | | | | | |
| 3.1 | | ous Minutes | | | | | |
| | | opproval / Changes One | | | | | |
| | | - None | | | | | |
| | MOV | ED AND DULY SECONDED | | | | | |
| | МОТ | OTION: To accept the November 9, 2023 MAC minutes. CARRIED. | | | | | |
| 4 | Busin | ess Arising from Minutes | | | | | |
| 4.1 | | T Scanner: | | | | | |
| | • 1 | No updates | | | | | |
| | <u>Actio</u> | | | By whom / when: | | | |
| | _ | • Follow up • Trovato; Dec | | to; Dec | | | |
| 4.2 | | <u>unding:</u> Io updates | | | | | |
| 4.3 | | quests for SHH email: Ms. Sherwood has made email access available as requested; working well | | | | | |
| | Actio | <u>n:</u> | By whom | / when: | | | |
| | • F | temove from agenda | ● EA; Ja | ın | | | |
| 4.4 | | FAST Tool: Live and working well | | | | | |
| | Actio | n: | By whom | / when: | | | |
| | | lemove from agenda | • EA; Ja | | | | |
| 4.5 | F2425 | 5 CMaRS Reappointment Process: | 1 | | | | |
| | • P | Privilege reappointment process will be in February 2024 | | | | | |
| 4.6 | Gode | rich CTs: | | | | | |
| | • (| Calling Radiologist | | | | | |
| | | o Concern with having to call Radiologist On-Call for approval; to be determined if this is a Radiology | | | | | |
| | | request or an AMGH Tech request Action: By whom / when: | | | | | |
| | Actio | <u>n:</u> Confirm process | | <u>/ when:</u> to; Dec | | | |
| 17 | _ | | - IIOVa | ito, Dec | | | |
| 4.7 | | Cerner Physician Notes: Requesting a Running Progress Note in Cerner | | | | | |
| | Actio | | | | | | |
| | | n. Deferred | | vood / Walker; Jan | | | |
| | | | 001 4 | , | | | |

| 4.8 | Exeter Villa Physician Coverage: | | | | | |
|------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------|--|--|--|--|
| | Exeter Villa physicians feel they can handle the workload appropriately, however, SHH ED is seeing an | | | | | |
| | increased number of Villa resident visits | | | | | |
| | Villa staff have been requested to contact Dr. Kelly if they require assistance | | | | | |
| | Action: | By whom / when: | | | | |
| | Remove from agenda | EA; Jan | | | | |
| 5 | Medical Staff Reports | | | | | |
| 5.1 | Chart Audit Review: | | | | | |
| | In process of auditing Medication Reconciliation | | | | | |
| 5.2 | Infection Control: | | | | | |
| | Carbapenemase-producing Enterobacteriaceae (CPE) case recently on unit; policy has been developed and | | | | | |
| | approved by IPAC | | | | | |
| | Eight (8) COVID-19 cases have been seen | | | | | |
| | Staff influenza vaccination rate is currently at 71% | | | | | |
| | C. diff education recently provided | | | | | |
| 5.3 | Antimicrobial Stewardship: | | | | | |
| | • • | ure, physician is to leave a comment in the chart as to | | | | |
| | why culture was not obtained | | | | | |
| | ROP approved for committee | | | | | |
| | Three (3) c. Diff cases seen, not hospital acquired | | | | | |
| | One was treated with Flagyl; not appropriate | | | | | |
| | Action: | By whom / when: | | | | |
| | Provide guidelines / education for physicians | ASP Committee / Pharmacy / Dr. Kelly; Dec / Jan | | | | |
| 5.4 | Pharmacy & Therapeutics: | | | | | |
| | In process of streamlining Insulin products; main fo | • | | | | |
| | IV Insulin; suggested simplifying process by using or | | | | | |
| | Nitro spray on backorder; SHH was able to secure more | | | | | |
| | Ketamine; allocated amount is 1 box/month | | | | | |
| 5.5 | Lab Liaison: | | | | | |
| F. 6 | No update | | | | | |
| 5.6 | Community Engagement Committee: | | | | | |
| | No update | | | | | |
| 5.7 | Recruitment & Retention: | | | | | |
| | No update | | | | | |
| 5.8 | Quality Assurance Committee: | | | | | |
| | No update | | | | | |
| | MOVED AND DULY SECONDED | | | | | |
| | MOTION: To approve the Medical Staff Reports as presented for the December 14, 2023 MAC Meeting. | | | | | |
| - | CARRIED. | | | | | |
| 6 | Other Reports | | | | | |
| 6.1 | Lead Hospitalist: | | | | | |
| | No gaps in Hospitalist coverage at this time Walk in Clinics concern regarding labs that require review on weekends. | | | | | |
| | Walk in Clinic; concern regarding labs that require review on weekends Dr. Ryan and Dr. Patel confirmed that they follow up on these reports during the week | | | | | |
| | Dr. Ryan and Dr. Patel confirmed that they follow up on these reports during the week Continue to run Clinic 11:00am-2:00pm with current structure | | | | | |
| 6.2 | | | | | | |
| 0.2 | Emergency: Currently fully staffed over Jan, with the exception of 2 shifts at the end of the month | | | | | |
| | Currently fully staffed over Jan, with the exception of 2 shifts at the end of the month Next level for increased funding is 12,500 visits annually and SHH ED is currently at 9-10K; discussed ways | | | | | |
| | to increase visits to reach threshold | | | | | |
| | AFA visits to be qualified | | | | | |
| | Staff to be registered through ED for needle sticks, TDAP and titres, with follow up provided by IPAC | | | | | |
| | and Occupational Health accordingly | | | | | |
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| | 'Out-of-province' and WSIB visits do not count in these numbers | | | | | |
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| | What counts as a visit requires clarification | | | | | |
| | A patient that 'is triaged' vs 'left without being seen' vs 'before or after diagnostic testing is completed' Determine if infusions and transfusions can be registered through ED, keeping Hospitalist as MRP and treatment in the inpatient unit, according to current process | | | | | |
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| | Action: | By whom / when: | | | | |
| | Determine Short Stay visit registration to ED | Walker / Klopp; Jan | | | | |
| 6.3 | Chief of Staff Report: | | | | | |
| | Medical Directives have been updated with minor c | hanges; MAC approval not required | | | | |
| | No new directives added | | | | | |
| | Action: | By whom / when: | | | | |
| | Add Directives to Cerner | Walker / Sherwood; As updated | | | | |
| | Develop Inpatient Directives | Walker / Sherwood; 2024 | | | | |
| 6.4 | President & CEO Report: | | | | | |
| | Stats presented to MAC | | | | | |
| | Winter season is expected to increase ED closures a | ind pressures | | | | |
| | Meeting scheduled with Lisa Thompson; Dec | | | | | |
| | Discussed possible long term impacts of Clinton and | Seaforth ED closures; currently being reviewed by | | | | |
| | Provincial ED Lead | | | | | |
| | | outed from closed EDs to EDs that remain open, as is | | | | |
| | outlined in funding contracts but is not enacted | | | | | |
| 6.5 | CNE Report: | | | | | |
| | Will be attending death investigation rounds with D | r. McLean | | | | |
| | Quality Initiative re Opioid Overdoses | | | | | |
| | • | ere is currently Narcan-resistant fentanyl out west | | | | |
| | Of 1 in 4 overdose deaths, deceased has had a healthcare visit within 7 days of death | | | | | |
| | Average age of overdoses are between 25-44 | years | | | | |
| | Surgical case referrals to Goderich | I AMAGUE ST III I I III | | | | |
| | | ending patients to AMGH for CT with no beds available | | | | |
| | for admission / surgery | arting at ANACIL in Ion | | | | |
| | Dr. Jennifer Ford, General Surgeon, will be sta Action: Action: Action: Action: Action: The properties of the | By whom / when: | | | | |
| | Action:Organize meeting including SHH and AMGH Chiefs | EA; Jan | | | | |
| | of Staff and Surgeons to develop an HHS | LA, Jaii | | | | |
| | Workflow Policy for CT, Surgery Consult and Plan | | | | | |
| | for Admission | | | | | |
| 6.6 | COO Report: | | | | | |
| 0.0 | | n is better than planned due to a 2% base increase and | | | | |
| | one-time funding | | | | | |
| | = | in a deficit position, however, SHH is performing better | | | | |
| | than average for small hospitals | , , , , | | | | |
| | Pharmacy backlogs; shortages and backorders | | | | | |
| | Expressed importance for everyone to remain vigilant and diligent around Cyber Security | | | | | |
| | Working on continuing blood draw services at Medical Clinic | | | | | |
| | Planning is underway to implement independent lab services, and/or have union increase MLA hours | | | | | |
| | Action: | By whom / when: | | | | |
| | Plan for blood draws at Medical Clinic | Trovato; Dec / Jan | | | | |
| 6.7 | Patient Relations: | | | | | |
| • | | | | | | |
| | appreciative | s to session a riouse, great teamwork, family | | | | |
| | ED is seeing more unattached patients and/or patie | nts with limited access to their family physicians | | | | |
| | Bluewater Clinic is onboarding two new family physicians, which is anticipated to decrease the | | | | | |
| | current number of unattached patients | | | | | |
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| | Actions | | By whom / whon: | | | | |
|-----------|------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------|-------------------------------|--|--|--|--|
| | Action: | | By whom / when: | | | | |
| | | l process to Bluewater Clinic for | Klopp; Next week | | | | |
| | unattached patients | | | | | | |
| | MOVED AND DULY SECONDED | | | | | | |
| | MOTION: To approve the Other Reports as presented for the December 14, 2023 MAC Meeting. CARRIED. | | | | | | |
| 7 | New Business | | | | | | |
| 7.1 | Credentialing: New Appointments & Reapplications: Credentialing and Reappointment list circulated | | | | | | |
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| | MOVED AND DULY SECONDED MOTION: To accept the Credentialing Report of December 14, 2023 as presented, and recommend to the | | | | | | |
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| | Board for Final Approval. CARRIED. | | | | | | |
| 8 | Education / FYI | | | | | | |
| 9 | Adjournment / Next Meeting | | Regrets to alana.ross@amgh.ca | | | | |
| | Date | Time | Location | | | | |
| | January 11, 2024 | 8:00am | Boardroom B110 / WebEx | | | | |
| | Motion to Adjourn Meeting | | | | | | |
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| | MOVED AND DULY SECONDED MOTION: To adjourn the December 14, 2023 meeting at 9:30am. CARRIED. | | | | | | |
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| Signature | | | | | | | |
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Dr. Sean Ryan, Committee Chair