

Comm	ittee: Medical Advisory Committee	Medical Advisory Committee					
Date:	February 8, 2024	Time:	8:05am-8:44am				
Chair:	Dr. Sean Ryan	Recorder:	Alana Ross				
Presen		Dr. Hammond, Dr. Joseph, Dr. Kelly, Dr. Lam, Dr. Nelham, Dr. Patel, Dr. Ondrejicka, Dr. Ryan, Heather Klopp, Jimmy Trieu, Matt Trovato, Adrianna Walker, Michelle Wick, Mike					
Guests	S: Aileen Knip (Board representative), Shari Sherw	Aileen Knip (Board representative), Shari Sherwood, Heather Zrini,					
1	Call to Order / Welcome						
1.1	Dr. Ryan welcomed everyone and called the meet	Dr. Ryan welcomed everyone and called the meeting to order at 8:05am					
2	Guest Discussion						
3	Approvals and Updates	provals and Updates					
3.1	 Previous Minutes Approval / Changes Deferred to March 						
4	Business Arising from Minutes	Business Arising from Minutes					
5	Medical Staff Reports	-					
5.1	<u>Chart Audit Review:</u> No discussion	art Audit Review:					
5.2	Infection Control: • No discussion						
5.3	 Antimicrobial Stewardship: Draft Terms of Reference; will be submitted to Accreditation Canada as part of ROP requirements 						
	Action:	Action: <u>By whom / when:</u>					
	Forward Terms of Reference to MAC for approval	• EA;	Mar 7				
	 prior to Accreditation Forward draft Terms of Reference and ASP protocols to Accreditation Canada 	• Zrin	i / Nelham; As required				
5.4	narmacy & Therapeutics: Next meeting to be held late Feb / early Mar						
5.5	 Lab Liaison: As of Mar 4 High-Sensitivity Troponins will start Removing Amylase and adding Lipase; change related to best practice guidelines Bloody Easy training; physicians and nurses are to complete training related to blood transfusions Having physicians review the material and sign an attestation was discussed in the past, how work is now being done to make this an accredited program Massive Hemorrhage Protocol PowerPoint available 						
	O PowerPoint available Action: By whom / when:						
	 Follow up with Tim Brown re Troponin protocol; communicate to protocol and algorithm to 	-	ker; This week				
	physicians						
5.6							

r					
	• 30 internationally Family medicine/ED trained physicians have applied to work in Ontario through Health				
	Force Ontario; 16 have applied to AMGH / Goderich; unfortunately, South Huron was not chosen				
	 AMGH will be required to designate a physician supervisor 				
	 A group has been formed to review the candidates and determine which are the best fit 				
5.8	Space issues				
5.0	 <u>Quality Assurance Committee:</u> Reviewed QIP indicators; in process of choosing indicators for the F2425 QIP 				
	 Determining if tracking sickle cell anemia will be an indicator; seem in ED with immigrant population 				
	 No critical incidents to report 				
	MOVED AND DULY SECONDED				
	MOTION: To approve the Medical Staff Reports as presented for the February 8, 2024 MAC Meeting.				
	CARRIED.				
6	Other Reports				
6.1	Lead Hospitalist:				
-	No discussion				
6.2	Emergency:				
0.2	New cardiac monitors went live 2-3 weeks ago; working well				
	 Very few open shifts in ED; next one is in March 				
	 Government has not yet made any announcements related to extending the EDLP funding program beyond 				
	Mar 31				
6.3	Chief of Staff:				
	OH responded regarding the CT Scanner application; discussion meeting scheduled for next week				
6.4	President & CEO:				
	• Working with OHA to advocate for Ministry funding, particularly the extension or permanency of the EDLP				
	program				
	 Discontinuation of the program will lead to massive ED closures across the province 				
	Contribution of smaller hospitals towards the CT wait times; reduction of volumes in the area				
	• SouthWest was working on a review of ED services in the region; plan is to meeting with OHW and				
	discussion the findings; this remains pending				
	 CEO Table meeting scheduled for Feb 14; will discuss move this review forward 				
	Discussed HP&A OHT Accreditation survey process				
	• Although this type of survey process is a first for Accreditation Canada, AC was quite satisfied with				
	our last submissions as a hospital, and it is not anticipated that this survey will be a lot different				
	• One challenge is parcelling out the accreditors to different sites and still maintaining continuity over				
	 the sectors; waiting to hear final plan details The last SHH Accreditation was only partial and bridges with the HP&A survey this year 				
	 The last SHH Accreditation was only partial and bridges with the HP&A survey this year Anticipating leadership meetings with AC at both sites 				
	 Another change is the partnership and new governance structure in place since the last accreditation 				
6.5	CNE:				
	 Physician education opportunities available for CME credits; information circulated 				
	 Register online 				
	• IPAC will reach out to physicians if any eligible patients are identified for the RSV vaccine; must be ordered				
	as it is limited to specific criterion, i.e., LTC, Dialysis, and transplant recipients				
	• SHH has started rolling out Occ Health annuities, updating blood work, vaccines, TB skin tests, etc.				
	Accreditation Canada will be looking at how cohesively we work with the OHT partners, i.e., closure				
	support, communication, EMS destination protocol, etc.				
	HPHA & EMS have scheduled another meeting to discuss the EMS Destination Protocol				
	• Pushing for EMS to bypass Seaforth and Clinton with OBs, traumas, pediatrics, oncology, mental				
	health, etc.				
	 HHS has declined this protocol Concerning for the protocol 				
	 Concern regarding funding following the patients Oracle Health (Corner (One Chart is starting up a regional Digital Health Committee) 				
	 Oracle Health / Cerner / One Chart is starting up a regional Digital Health Committee Tom Janzen (OHA) will be Chair 				
	 Tom Janzen (OHA) will be Chair Looking for physician participation from member hospitals; monthly meetings, 2 hours 				

	During a set of the					
	 Purpose of the committee is to oversee decision making around physician documentation OneChart has a number of physician components including expanded physician 					
	 OneChart has a number of physician components including expanded physician documentation for ED, inpatients and ambulatory, with more to be added 					
		-	ing some of the decision making away from the			
	-	fessional practice group	is some of the decision making away from the			
	-		participation; Dr. Nelham has agreed to attend some of			
	-	find out more about the comm				
	_		documentation with the newer physicians to see if one			
		be interested in becoming par				
	Action:		By whom / when:			
	Digital Health Commi	ttee survey response	Sherwood; Next week			
6.6	<u>COO:</u>					
	Update re Blood Drav	v Clinic at SHMC				
			he MLA resource back into the hospital			
			igh discussion with the union, whereby a staff member			
	has volunteered for extra shifts; model is working well and staff member is happy					
	 Will be discussing this as a permanent solution with the union 					
		from Life Labs is pending				
6.7	Patient Relations:					
			sage; attestation regarding use to be made			
	 It is being set up for use between some of the home care providers 					
	• A test project is under way to investigate a form of virtual care (K303 code), where physicians can text asynchronously with patients					
	Action:		By whom / when:			
	• For physicians not usi	ing HyperCare, please discuss	All; As needed			
	with Ms. Klopp					
	MOVED AND DULY SECO	NDED				
	MOTION: To approve the	Other Reports as presented for	or the February 8, 2024 MAC Meeting. CARRIED.			
7	New Business					
8	Education / FYI					
9	Adjournment / Next Mee	ting	Regrets to alana.ross@amgh.ca			
	Date	Time	Location			
	March 7, 2024	8:00am	Boardroom B110 / WebEx			
	Motion to Adjourn Meeting					
	<u>MOVED AND DULY SECONDED</u> MOTION: To adjourn the February 8, 2024 meeting at 8:44am. CARRIED.					
Signatu		Tebruary 0, 2024 Meeting at	<u></u>			
Jighata						
Non						
Dr. Rya	n, Committee Chair					