

MINUTES

Commi	tee: Medical Advisory	Committee					
Date:	November 14, 2024	†		8:07am-8:59am			
Chair:	Dr. Sean Ryan, Chief o	Dr. Sean Ryan, Chief of Staff		Alana Ross			
Present	Dr. Bueno, Dr. Chan, I	Dr. Sean Ryan, Chief of Staff Recorder: Alana Ross Dr. Bueno, Dr. Chan, Dr. Joseph, Dr. Kelly, Dr. Lam, Dr. Ondrejicka, Dr. Patel, Dr. Ryan, Lynn Higgs, Heather Klopp, Robert Lovecky, Shari Sherwood, Jimmy Trieu, Adriana Walker					
Regrets	•	•	•				
Guests:		Shari Sherwood, Christie MacGregor (Board Representative)					
			,				
1	Call to Order / Welcome						
1.1	 Notifications: Video/Audio recordings and transcriptions of the open session meeting are 						
	the purpose of creating accurate minutes and will be expunged on final approval of the						
2	minutes by the Committee; in-camera sessions are not recorded or transcribed						
2	Guest Discussion / Education Session						
3	Approvals and Updates						
3.1	Previous Minutes						
	Approval / Changes						
	O None						
	MOVED AND DULY SECONDED MOTION: To accept the October 10, 2024 MAC minutes. CARRIED.						
4	Business Arising from Minutes						
5	Medical Staff Reports						
5.1	Chart Audit Review:						
3.1	No discussion						
5.2	Infection Control:						
	No discussion						
5.3							
	 Antimicrobial Stewardship: STI Algorithm is being reviewed today and will be brought to MAC at a later date 						
5.4							
3.4	Pharmacy & Therapeutics: Meeting scheduled payt week: undates to follow						
	Meeting scheduled next week; updates to follow Lab Linision:						
5.5	<u>Lab Liaison:</u> • Next meeting scheduled for Jan 2025						
	Lab Liaison is asked to review the Troponin Algorithm; a number of facilities are moving from 0 in 3						
	hours to 0 in 1 hour based on high sensitivity						
	Action:		By whom	/ when:			
	Forward Troponin algori	ithm	Ryan;	Today			
	 Consider changing the T 	roponin Algorithm as	• Dr. Bu	ueno / Lab Liaison; Jan 2025			
	discussed						
5.6	Recruitment and Retention Committee:						
	Meeting held Nov 5						
	 Discussion regarding financial incentives has not been finalized to date; any committee 						
	recommendations will require Board approval						
	AMGH physician are asking for a \$50-\$60K signing bonus, and that is on top of the \$91K NRRN initiative the Town of Codesich representatives reposite the site of reposition a circums to the site of the sit						
	NRRRInitiative; the Town of Goderich representatives remain hesitant regarding a signing bonus as						
	this is not in the budget						
	bonus is not offered						

	Free clinic space, preferable mortgage rates, etc. are being offered, but the other organizations are					
	 Free clinic space, preferable mortgage rates, etc., are being offered, but the other organizations are offering this as well as a monetary signing bonus 					
	 Three psychiatrists will be starting at AMGH over the next year; Dr. Dixon Dec 2024; Dr. Rose and Dr. Doering Summer / Fall 2025 					
	Currently Dr. Rose and Dr. Doering are providing locum services					
5.7 Quality Assurance Committee:						
No discussion						
	MOVED AND DULY SECONDED					
	MOTION: To approve the Medical Staff Reports as presented for the November 14, 2024 MAC Meeting. CARRIED.					
6	Other Reports					
6.1	 Lead Hospitalist: Discussed the priority of ALC patients to be placed in Long Term Care; the Province has reverted to pre-COVID-19 LTC placement steps, which means ALC patients are not considered crisis and will be in-hospital longer 					
	 This is a concern as we move into Respiratory season; an increase in ALC patients and LOS have already been observed compared to the past two years 					
	 Increased respiratory admissions are happening on an already pressured capacity 					
	Ms. Walker will be meeting with Home Care at a Regional level for review and discussion around					
	access and flow					
	 Looking for Provincial advocacy 					
	 Concern that lack of 'care at home' resources will result in return admissions for ALC 					
	patients					
	Action: By whom / when:					
	Forward to SW CEO, OHA Tables and the MPP Trieu; Nov					
6.2	Emergency:					
	No discussion					
6.3	Chief of Staff:					
	 2024-11-Monthly Report-COS circulated ED schedule is filled to the end of the year; Dr. McLean is working on the next schedule, which will be circulated soon for review Dr. Ryan attended Primary Care Summit last week Some results realized in getting the issue of low resource communities into the top 5 priority goals for next year 					
	 Dr. Ryan and Ms. Walker met with the Exeter Villa to discuss transfer issues 					
	 Exeter Villa representatives are encouraged to call the SHH ED to provide a 'heads up' 					
	when transferring a patient via ambulance					
	 SHH is also committed to communicating with the Exeter Villa when transferring patients 					
back SHHE is very close to acquiring the land peeded to build the new SHMC; expecting m						
	 SHHF is very close to acquiring the land needed to build the new SHMC; expecting more information in the next few weeks 					
6.4	President & CEO:					
0.1	2024-11-Monthly Report-CEO circulated					
	 Next year's funding is expected to be constrained; OHA will continue advocating the importance of funding hospitals so we can continue provide services within our communities We have only received 73% of this year's funding related to Bill 124; received 85% last year; senior leadership is working diligently to get needed funding for operations Now news received regarding the SHH CT Scanner yet; CEO will be contacting OHW later today to inquire again about the application 					
	 Very close to submitting the final MRI package to the Capital Branch for approval of construction and acquisition 					
6.5	CNE:					
	2024-11-Monthly Report-CNE					

- CNE met with EMS, HPHA, and LWHA for discussion of Stroke Bypass, OB Bypass, EMS and 'fit to sit' protocols
 - There is a protocol to follow for AMGH to go on Stroke Bypass due to unsafe conditions and/or over capacity for CTAS 3s, 4s and 5s
 - As of Nov 13, we no longer take CTAS 3s, 4s and 5s if we are over capacity
 - There is currently no formal agreement in place with EMS, and therefore 'fit to sit' cannot be practiced; 'fit to sit' will only be practiced with a formal agreement in place ensuring that EMS will reciprocate as needed
 - 'Fit to Sit' is described as a pre-triage to determine if patients brought in by EMS can sit in the waiting room
 - Over capacities result in off load delays
 - EMS is attempting to implement protocols, but are not involving the physicians who are impacted in the discussion and development of the protocols, i.e., Ortho Bypass
- Recruitment updates
 - Offered the Manager, Mental Health position to a prime candidate, who took a job with the OHA instead
 - Very close to filling the Manager, OR position
- OPP, Huron Perth Memorandum of Agreement regarding patient transition signed on Nov 8
 - Attempting to get OPP officers back on the road as quickly as possible
- Working on an algorithm of decision support for our Admin On-Calls who don't have clinical background
- Appreciation extended to our Staff and Physicians who continue to work through a very busy season

6.6 <u>CFO:</u>

- 2024-11-Monthly Report-CFO circulated
 - o Board meeting held Nov 21; no significant financial changes from last month reported
 - Year-to-date Sep for whole organization, we are sitting at a \$1.4M deficit position against a budgeted \$1.6M
 - SHH has a positive variance of \$300K related to one-time funding, preferred accommodation collections and DI technical fees
 - o There is an overage on the expense side due to stipends and additional benefit costs
 - Quarterly capital updates are presented to the Board, which for SHH is just over \$700K; we have only spent about 20% of that and are waiting for some medical equipment items
 - U/S device to be installed over the next few weeks
 - Vital signs monitors to be purchased before the end of the year
 - Working with Healthcare Materials Management Services (HMMS), London, to streamline procurement processes
 - Working on recruitment in the Labs, screening interested candidates
 - o Flu vaccinations are under way at SHH & AMGH
 - There is a possibility of getting COVID-19 vaccines
 - Considering development of a Medical Directive, however, due to the amount of admin work required in entering data into COVaxON, patients are being directed to Pharmacies
 - There were 5 COVID-19 positive patients at SHH in Oct, but did not reach outbreak status
 - Diversity, Equality and Inclusion (DEI) meetings held recently; working with Ontario Health on the delicate task of collecting sensitive data around identity, gender and ethnicity to determine appropriate labels
 - Pulse check survey coming out soon; gathering data on staff feelings about inclusion levels in the workplace
 - All staff encouraged to participate

6.7 Patient Relations:

- 2024-11-Monthly Report-Patient Relations
 - Accessing the Common Electronic Patient Record (EPR) at a hospital other than SHH
 - MDs cannot use their SHHA EPR credentials for patients seen at other hospitals only at SHHA
 - It would be preferable to use ClinicalConnect

If a MD at SHH was accepting a patient with no family physician on record, they would be required to declare a relationship upon logging into this patient's EPR; the MD would select 'Family practice, admitting, attending, family medicine and record in the chart access log (CAL)' o Positive feedback received from a patient who visited the AMGH ED on Remembrance Day and appreciated the moment of silence at 11am, and the care that they received that busy day 6.8 Patient Care Manager Nursing Skills Day started today; reviewed direct antibiotics with RPNs • Finalizing a cheat sheet that will be posted in ED and Inpatient unit Falls Committee has implemented a volunteer program to have visitors sit with dementia patients to reduce falls Six volunteers recruited to date; starts Dec 6 Alzheimer Society will be coming in to provide some teaching Massive Hemorrhage Protocol (MHP) is on its way; nursing training started today o Policies are being finalized; Power Plan is being finalized in Cerner o Information to be brought forward to the MHP and P&T committees for a final review; once finalized, mock codes will take place o SHH MHP aligns with LWHA; MHA debriefing held for SHH and LWHA with trauma team in London Trillium Gift of Life Network (TGLN) protocol for tissue recovery will go live Dec 1; nursing training started today Nursing staff will notify TGLN about donors; and TGLN will then arrange the entire process Ocular recoveries will take place in the ED by a visiting team Working on Ontario Health at Home protocol Inpatient unit has been over capacity for the past week; staff have done a really good job of keeping flow moving and holders out of the ED **Clinical** Informatics: 6.9 Power Chart Touch is available on the iPads and can be used in inpatients as well as ED o Controlled license process through London; access is same as log on When working in ED, ensure you have added the ED patient list; see shari.sherwood@shha.on.ca with any questions Congratulations to all for 100% of medical staff accessing electronic documentation and Dragon Medical o Tracking taking place through Health Records • SHH is ahead of most facilities in terms of physician adoption o Dragon Medical Quick Reference Guide will be shared with all physicians; reviewed some tips Residents will receive their own log ins Discussed Residents having DynaDoc access and training, however, they cannot sign off on their own notes; these will require sign off by physician preceptors through their inboxes Creates efficiency Test patient available for training Discussed creating and using 'stamps' in DynaDoc Discussed Emergency Department Return Visit Quality Program (EDRAP) Auditing process for return visits; meeting scheduled for Nov 21 at 2pm With move into Electronic Documentation in the ED, we are working on decreasing printing starting Jan 2025 Scanning project starting next year following the LHSC process; all paper charting to be scanned in and available online Alexandra and Tillsonburg are now paperless; working out some challenges SHH ED staff doing very will at using diagnosis functions at discharge **MOVED AND DULY SECONDED** MOTION: To approve the Other Reports as presented for the November 14, 2024 MAC Meeting. CARRIED. 7 **New Business In-Camera Session** Notifications:

	 Guests will be invited by the Committee Chair, as required; any members with conflicts of 					
	interest during in-camera discussion, can be recused as needed All participants of the in-camera session are expected to declare that their surroundings					
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8.1		are secured from unauthorized participants				
0.1	Move into In-Camera					
	Human Resources 2024 11 Report to MAC Credentials SHH circulated					
	o 2024-11-Report to MAC-Credentials SHH circulated					
	MOVED AND DULY SECONDED					
	MOTION: To move into In-Camera at 8:58pm. CARRIED.					
8.2	Move out of In-Camera					
	MOVED AND DULY SECONDED					
	Recommendation made to move back into open session at 8:59pm.					
8.3	Motions Moved Out of In-Camera					
	MOVED AND DULY SECONDED					
	MOTION: To accept the Credentialing Report of November 14, 2024 as presented, and recommend to the					
	Board for Final Approval. CARRIED.					
9	Adjournment / Next Meeting		Regrets to <u>alana.ross@amgh.ca</u>			
	Date	Time	Location			
	December 12, 2024	8:00am	Boardroom B110 / MS Teams			
	Motion to Adjourn Meeting					
	MOVED AND DULY SECONDED					
	MOTION: To adjourn the November 14, 2024 meeting at 8:59am. CARRIED.					
Signature						
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Dr. Sean Ryan, Committee Chair