

AGENDA

ADDED

6.4 2024-05-Monthly Report-CEO

6.6 2024-05-Monthly Report-Operations

Committee:	Medical Advisory Committee				
Date:	May 9, 2024		Time:	8:00am-9:00am	
Location:	Boardroom B110 / MS Teams				
Chair:	Dr. Ryan, Chief of Staff		Recorder:	Alana Ross	
Members:	All SHH Active / Associate, CEO, VPs, Clinical Managers				
Guests: <i>(Open Session Only)</i>	Heather Zrini, Shari Sherwood, Aileen Knip (Board Representative)				
	Agenda Item	Presenter	Anticipated Actions	Time Allotted	Related Attachments
1	Call to Order / Welcome <ul style="list-style-type: none">Notifications:<ul style="list-style-type: none">Video/Audio recordings and transcriptions of the open session meeting are retained for the purpose of creating accurate minutes and will be expunged on final approval of the minutes by the Committee; in-camera sessions are not recorded or transcribed				
2	Guest Discussion				
3	Approvals and Updates				
3.1	Previous Minutes	COS	Decision	1min	• 2024-04-11-MAC Minutes
	<i>*Draft Motion: To accept the April 11, 2024 MAC Minutes.</i>				
4	Business Arising from Minutes				
5	Medical Staff Reports				
5.1	Chart Audit Review	Nelham / McLean	Information	as needed	
5.2	Infection Control	Kelly	Information	as needed	
5.3	Antimicrobial Stewardship	Nelham	Information	as needed	
5.4	Pharmacy & Therapeutics	Pres. MS	Information	as needed	
5.5	Lab Liaison	Bueno	Information	as needed	
5.6	Recruitment and Retention Committee	COS	Information	as needed	
5.7	Quality Assurance Committee	Nelham / CNE	Information	as needed	
	<i>*Draft Motion: To accept the May 9, 2024 Medical Staff Reports to the MAC.</i>				
6	Other Reports				
6.1	Lead Hospitalist	Pres. MS	Information	5min	
6.2	Emergency	Chief of ED	Information	20min	
6.3	Chief of Staff	COS	Information	5min	• 2024-05-Monthly Report-COS
6.4	President & CEO	CEO	Information	5min	• 2024-05-Monthly Report-CEO
6.5	CNE	CNE	Information	5min	
6.6	COO	COO	Information	5min	• 2024-05-Monthly Report-Operations
6.7	Patient Relations	Klopp	Information	5min	

	*Draft Motion: To accept the May 9, 2024 Other Reports to the MAC.				
7	New and Other Business				
7.1	Medical Staff Portal	Ryan / EA	Information	1min	Medical Staff Portal
8	Education / FYI				
8.1	Sessions Available	Walker	Information	1min	
9	In-Camera Session <ul style="list-style-type: none"> • Notifications: <ul style="list-style-type: none"> ○ 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 are secured from unauthorized participants 				
9.1	Move into In-Camera	Chair	Motion, if needed		
	*Draft Motion: To move into the in-camera session at XX:XXam.				
9.2	Move out of In-Camera	Chair			
	*Draft recommendation made to move back into open session at XX:XXpm.				
9.3	Motions made based on In-Camera discussion	Chair	Action		
10	Next Meeting & Adjournment				
	Date	Time		Location	
	June 13, 2024	8:00am-9:00am		Boardroom B110 / MS Teams	

MINUTES

Committee:	Medical Advisory Committee		
Date:	April 11, 2024	Time:	8:06am-9:30am
Chair:	Dr. Sean Ryan	Recorder:	Alana Ross
Present:	Dr. Bueno, Dr. Chan, Dr. Joseph, Dr. Kelly, Dr. Nelham, Dr. Ondrejicka, Dr. Patel, Dr. Ryan, Lynn Higgs, Heather Klopp, Jimmy Trieu, Adriana Walker		
Regrets:	Shane Dejong		
Guests:	Shari Sherwood (Quality), Aileen Knip (Board Representative)		
1	Call to Order / Welcome		
1.1	<ul style="list-style-type: none">Dr. Ryan welcomed everyone and called the meeting to order at 8:06am		
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 March 7, 2024 MAC minutes. CARRIED.</u></p>		
4	Business Arising from Minutes		
5	Medical Staff Reports		
5.1	<u>Chart Audit Review:</u> <ul style="list-style-type: none">No discussion		
5.2	<u>Infection Control:</u> <ul style="list-style-type: none">No discussion		
5.3	<u>Antimicrobial Stewardship:</u> <ul style="list-style-type: none">Will be reviewing blood culture ordering<ul style="list-style-type: none">All physicians must ensure that cultures are drawn or make a note as to why they were not drawn; process is moving along wellCultures should be inputted prior to ordering antibioticsOrdering a pair of blood cultures requires different time stamps; the process is slightly different between the ED and inpatients, and the ED process is easier; in the inpatients side:<ul style="list-style-type: none">Use ALL CAPSPick specimen; you can highlight both and do it in one drop, however, you have to go into the time for one of them and move it up by one minute<ul style="list-style-type: none">List only shows the accessible ordersSign the orderThree c.Diff cases in the past month; one was transferred to London and one was treated at SHH with oral vancomycin; one was an outpatient<ul style="list-style-type: none">Discussed need for more in-depth tracking of follow upA symptomatic/positive patient is an automatic Public Health contactASP is considering tracking urinary infections, specifically those inappropriately treated, due to the large number of cultures drawn; this is not expected to incur a significant costClinical Pathways Model will be brought to MAC in May; Dr. OndrejickaCommunity Acquired Pneumonia; Dr. Mekhaie		
5.4	<u>Pharmacy & Therapeutics:</u> <ul style="list-style-type: none">As of Jan/Feb, the Lexicomp subscription and mobile access via LexiDrug app went to a regional purchase, and London is no longer paying for it<ul style="list-style-type: none">The mobile app does work well on cell phones		

5.5	<u>Lab Liaison:</u> <ul style="list-style-type: none"> Next meeting scheduled in Jun 	
5.6	<u>Recruitment and Retention Committee:</u> <ul style="list-style-type: none"> Next meeting scheduled for May 7 	
5.7	<u>Quality Assurance Committee:</u> <ul style="list-style-type: none"> F2425 QIP finalized; posted in SHH website and a hard copy will be posted in the cafeteria by next week 	
	<i>MOVED AND DULY SECONDED</i> <i>MOTION: To approve the Medical Staff Reports as presented for the April 11, 2024 MAC Meeting. CARRIED.</i>	
6	Other Reports	
6.1	<u>Lead Hospitalist:</u> <ul style="list-style-type: none"> No discussion 	
6.2	<u>Emergency:</u> <ul style="list-style-type: none"> No discussion 	
6.3	<u>Chief of Staff:</u> <ul style="list-style-type: none"> Received an Expression of Interest from an Allergist based out of Kitchener-Waterloo <ul style="list-style-type: none"> Interested in providing a penicillin allergy clinic at SHH; number of visits per month is unknown at this time May be of interest as the wait times for this clinic in London are long Preliminary ED schedule has been developed and posted; Apr is covered, however, there are uncovered shifts in May, Jun, Jul and Aug <ul style="list-style-type: none"> There are also some open Hospitalist shifts Anticipating that EDLP will cover at least some of these shifts, however, all physicians are encouraged to take a look and cover what they can 	
	<u>Action:</u> <ul style="list-style-type: none"> Email physicians to set up discussion 	<u>By whom / when:</u> <ul style="list-style-type: none"> Klopp; Apr
6.4	<u>President & CEO:</u> <ul style="list-style-type: none"> Welcome to Lynn Higgs, Interim VP, Clinical / CNE Stress Testing is being discontinued at SHH as of Jun; referrals have been declining News received regarding 2.8% funding increase (\$112,000) for SHH HOCC HPA-OHT Accreditation scheduled for Apr 22-26; Medical Staff are invited to participate as available <ul style="list-style-type: none"> Includes 10 organizations, i.e., hospitals, FHTs, LTC homes, etc. Anticipating discussion / questions regarding ED medication reconciliation, review of items we missed in previous accreditations, i.e., chest pain, falls, etc., and how we work with our community partners; are we meeting the Required Organizational Practices (ROPs) Concern noted that OHT did not back the significant need for a FHT in SHH CEO reached out to Ministry regarding the CT Scanner; project is still under review Ministry is providing webinars on integrated health facilities Received \$150K for P4R ED services; looking for creative solutions to keep the ED open CEO has requested a meeting with OH for discussion of potential summer closures; COS and Chief of ED are invited to participate 	
6.5	<u>CNE:</u> <ul style="list-style-type: none"> Appreciation extended for the support received 	
6.6	<u>COO:</u> <ul style="list-style-type: none"> QIP submission to HQO has been completed; reviewed the five indicators <ul style="list-style-type: none"> ED LOS (based on arrival time until patient leaves ED, including patients that are admitted but held in ED for 24hrs) <ul style="list-style-type: none"> Target is being met at this time for both facilities, however, this may change if the EDs experience closures over the summer No set standards received for small volume hospitals yet Working on understanding numbers that affect our LOS so they can be optimized Staff completion of Equity and Inclusion training; currently not available to the physicians due to the system 	

	<ul style="list-style-type: none">○ Education of nursing staff related to management of Sickle Cell Disease; based on changes in immigration patterns○ Increase number of Patient Experience Surveys by a minimum of 50%; tied to P4R funding<ul style="list-style-type: none">▪ Patient Experience Survey has been modified to align with the Ministry 'short survey'▪ Surveys are available on the patient entertainment systems; click environment○ Education of nursing staff related to delirium and confusion assessments method (CAM); interventions to reduce the impact of delirium; Ontario health related indicator<ul style="list-style-type: none">▪ Assessment will appear on the patient chart under assessments and interventions● Hospitals anticipating on receiving 4% to base funding, i.e., about \$400K for SHH; still does not address the shortage related to Bill 124<ul style="list-style-type: none">○ Government has announced some extra funding; waiting for more information○ F2425 projection is a \$6.5M total deficit divided between AMGH & SHH; Board is aware<ul style="list-style-type: none">▪ Based on impact of Bill 124, supplies, contracts, and staffing related to increased volumes▪ Hospitals continue to be structurally underfunded, putting them further away from balanced budgets due to annual increases in CPI and inflation, etc.○ Ministry does not require the hospital or Board to approve a budget, but we do have to complete quarterly reporting				
	Action: <ul style="list-style-type: none">● Contact S. Sherwood if you are interested in completing the Equity and Inclusion training		By whom / when: <ul style="list-style-type: none">● All; As needed		
6.7	Patient Relations: <ul style="list-style-type: none">● Shared patient story received in AMGH, but is relevant to all hospitals; involves the positive impact of introducing ourselves to our patients● Reviewed proper collection of urine samples; sometimes difficult to get the specified millilitres				
	<u>MOVED AND DULY SECONDED</u> <u>MOTION: To approve the Other Reports as presented for the April 11, 2024 MAC Meeting. CARRIED.</u>				
7	New Business				
7.1	Credentialing: New Appointments & Reapplications: <ul style="list-style-type: none">● 2024-04-11-Report to MAC-Credentials circulated <u>MOVED AND DULY SECONDED</u> <u>MOTION: To accept the Credentialing Report of April 11, 2024 as presented, and recommend to the Board for Final Approval. CARRIED.</u>				
8	Education / FYI				
8.1	Sessions Available: <ul style="list-style-type: none">● Dates have been sent via email for:<ul style="list-style-type: none">○ Panda Warmer training scheduled for Apr 18○ ACLS (May 21) and PALS (Jun 26) recertification courses available○ Full ACLS (May 22 / Jun 25) and PALS available● ATLS available through LHSC● IO In-service available; contact● Discussed nebulizers and BiPap machines; machines have been ordered from the capital list<ul style="list-style-type: none">○ Will be receiving a battery pack as well; for transfer purposes <div>Recording and transcription stopped at 9:03am</div>				
9	Education / FYI				
9.1	Move into In-Camera <ul style="list-style-type: none">● Human Resources	COS	Motion		
	<u>MOVED AND DULY SECONDED</u> <u>MOTION: To move into in-camera at 9:03pm. CARRIED.</u>				
	Move out of In-Camera	COS	Motion		
	<u>MOVED AND DULY SECONDED</u> <u>MOTION: To move out of in-camera at 9:30pm. CARRIED.</u>				
10	Adjournment / Next Meeting <div>Regrets to alana.ross@amgh.ca</div>				

	Date	Time	Location
	May 9, 2024	8:00am	Boardroom B110 / MS Teams
	<u>Motion to Adjourn Meeting</u> <i><u>MOVED AND DULY SECONDED</u></i> <i><u>MOTION: To adjourn the April 11, 2024 meeting at 9:30am. CARRIED.</u></i>		
Signature			
<div style="border-bottom: 1px solid black; height: 20px; width: 25%; margin-left: 10px;"></div> Dr. Ryan, Committee Chair			

Chief of Staff Report, South Huron Hospital – May 2024

Prepared by: Sean Ryan MD CCFP(EM) FCFP

From a staffing perspective, we have managed to fill all shifts for the month of May. Unfortunately, there are still 18 unfilled ED shifts and 5 unfilled Hospitalist days from June to Labour Day. It is unlikely that our physicians will be able to cover all these shifts and we will need help from the ED Locum Program.

We continue to await the Ministry's decision regarding our application for a CT scanner. The initial feedback from Ontario Health West has been positive and we are hoping for a decision soon.

Finally, a plan and vision for a new primary care clinic in Exeter is taking shape. We are thankful to the Foundation for moving this along and look forward to the next phase of discussions.

Please feel free to contact me at any time with questions or concerns. My email address is ryanse7@gmail.com

PRESIDENT & CEO REPORT

May 2024

METRICS

Area	AMGH	SHHA	Comment
Health Human Resources			Staffing complement is in a good position. HHS continues to recruit and retain staff.
Master Plan and Functional Plan			Capital Branch is reviewing the Master Plan proposal. Waiting for approval to move forward.
Finance			Funding for the next fiscal remains unknown for now. Continue to capture the cost of staying open.
SHH Medical Clinic			Draft plans have been created and meetings with respective individuals will take place over the next few months.

TOP OF MIND

ED Pressures

- As we head into the summer months, our leadership team is keeping a very close eye on the ED
- There are several gaps in the summer schedule and we are reviewing all available options.
- Senior Leadership Team to review pressures and bring forward a plan for summer scheduling

BIG WINS | LEARNING

Accreditation

- Accreditation was a great success
- HHS was measured against over 2500 criteria

OHA Conference

- Had an opportunity to attend the OHA Leadership Summit in Toronto with Glen McNeil
- It was a great few days to hear from great speakers such as Hon. Jane Philpott, Professor Sir Michael Marmot, Dr. David Naylor, Hon. Sylvia Jones and Premier Doug Ford
- Topics included:
 - Ontario's Projected Patterns of Illness and Population Trends
 - Redesigning Health Care for Tomorrow
 - Exploring Health Inequalities and Social Determinants
 - Harnessing the Potential of Technology

PRESIDENT & CEO SUMMARY

HHS participated in Accreditation as an OHT. Ten (10) organizations in the Huron Perth region will be participating in this Accreditation the week of April 22-26.



The accreditation process is a mechanism for organizations to assess against nationally and internationally developed best practices. All staff, physicians, learners, volunteers, patients, and families that the survey team interacted with, were welcoming of the accreditation process and proud to share the important work underway in the organization. The survey team was impressed with the level of care provided throughout. All team members were found to be energetically engaged in the accreditation process, clearly committed to the quality journey, and very proud of their programs and services. All areas focussed on quality improvement, with commitments to ongoing quality improvement activities noted across the organization. Staff were very engaged, not only in care delivery in their immediate area but also in the organization as a whole.

Key Opportunities and Areas of Excellence

Areas of Excellence:

- OHT Collaborative Board dedication and commitment
- Dedication to Collaboration and Partnerships-unified purpose
- Community Support Services Network
- People Centred Care
- Compassionate care
- Knowledgeable skilled competent staff
- Vision towards integrated care

Key Opportunities:

- Varying ages of infrastructures
- Implement robust infrastructure and equipment renewal plan
- Expansion of harmonization of policies and protocols
- Digital Strategy
- Hybrid Charting
- Disparate information systems across the sectors and system
- System Transformation-Leveraging integration across the system
- Care coordination and navigation
- Continue to support new staff (leaders, managers, front-line)

- Equity, Diversity and Inclusion (EDI) and Anti Racism
- Leadership turnover and new graduates/Internationally trained healthcare professional
- Environmental Stewardship policy and metrics

Leadership teams across the OHT will review the report and assess where improvements need to be made over the next couple of months. Action plans will be developed to meet the identified opportunities.

Many thanks to all staff and physicians who participated in the Accreditation process.

Respectfully,

Jimmy Trieu
President & CEO

HHS Operations Report – May 2024

Area	Accomplishments/Highlights	Issues to be aware of/Risks
Human Resources	Participated in Accreditation and specific Human Capital Meeting. Accreditor indicated HR has strong processes and controls in place. Very positive results	<p>Labour Relations – HR is working through complex labour relations matters at all levels within the Hospitals.</p> <p>OPSEU – Collective Bargaining continued for two days in April and the First Collective Agreement is close to being finalized. A final negotiation date has been set for May 13 and the ratification will follow. Central provisions have been largely adopted and the contract will expire in March 2025.</p> <p>SEIU – Arbitration Hearing Notice was provided for COVID-19 Vaccination Grievances held in abeyance for the past three years. LRO and HR met and were able to come to consensus on settlement terms. The two grievances were settled at thresholds below the ESA termination provisions representing a win for the Hospital.</p> <p>SEIU Central Arbitration Award – OHA held a member call to discuss the details of the SEIU central interest arbitration award issued by the Kaplan Board of Arbitration on April 18, 2024. The Board issued increases in wages, benefits, premiums, and vacation entitlements. One interesting addition was</p>

		<p>the enforcement of 70/30 FT/PT ratio. SEIU is now very closely aligned to ONA.</p> <p>Critical Injury – Injury sustained by Health Records employee working alone over weekend and reported late through RL-6. Ministry of Labour conducted on site visit. HR will facilitate training for employees and leaders regarding reporting requirements.</p>
Facilities and Capital Projects	<p>AMGH</p> <ul style="list-style-type: none"> • Security guard contract, awarded expected start date May 13 2024, with 24/7 coverage • Installation and renovation complete for new x ray machine – went live April 22 2024 • Diabetes program has moved registration to community wide scheduling which will ensure billing is captured correctly <p>SHH</p> <ul style="list-style-type: none"> • Elevator project – awaiting TSSA inspection May 1st, will require consultant's inspection there after – with go live date expected to be May 8th 	<p>AMGH</p> <ul style="list-style-type: none"> • Roof project for ED/ DI awarded – expected to start by end of May- will be significant presence of contractor equipment etc. on grounds adjacent to ED and DI- project expected to take 4- 6 weeks <p>SHH</p> <ul style="list-style-type: none"> • Electrical Project continues with delays. Generator tentatively delivered end of April, transfer switch end of May and Hydro One main transformer end of June. Awaiting a firm schedule. At this point electrical room renovation would occur mid-July and full project completion in the fall. • Resignation of PT maintenance staff – unavailable for scheduled shifts effective April 1st but can continue on call until position is filled. Concerns about ability to recruit as this is a 4 day a week position with one week on call in 4 weeks. Department has 1 FT and one PT-

		<p>other PT not interested in more work. Job posted- some interest, scheduling interviews for 2nd week of May</p> <ul style="list-style-type: none"> • Approval for phase two of MH renovation – nurses’ station, patient lounge and dining, new med room and addition of a 2nd observation room. Expect to go out to RFP by mid-July
Lab and Diagnostic Imaging	Another month of zero closure/reduction of diagnostic services due to diagnostic department staffing issues	<ul style="list-style-type: none"> • Unionization: Diagnostic departments in AMGH, excluding cardiorespiratory, have been ratified for unionization. Bargaining has commenced this past month, with more dates set in May to continue the process • Capital Equipment: Major risks with current equipment in AMGH Diagnostic departments; numerous pieces of essential instrumentation requires immediate renewal, and many other items will require it very soon. Will be putting together a BN for capital campaign for the AMGH Foundation.
Privacy, Patient Relations, Registration, Health Records	Installation of second registration window at ACC – provides easier communication between Reg Clerks and Patients.	Space adjustments are acutely needed in ACC . Infection control concerns with food, etc. in the office area. No dedicated space for nursing. Another work station and phone required, transfer “Kitchenette” into current water closet.