

# MINUTES

Committee:	<b>Medical Advisory Committee</b>		
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)		
<b>1 Call to Order / Welcome</b>			
1.1	<ul style="list-style-type: none"> <li>Dr. Ryan welcomed everyone and called the meeting to order at 8:06am</li> </ul>		
<b>2 Guest Discussion</b>			
<b>3 Approvals and Updates</b>			
3.1	<p><u>Previous Minutes</u></p> <ul style="list-style-type: none"> <li>Approval / Changes <ul style="list-style-type: none"> <li>None</li> </ul> </li> </ul> <p><b><i>MOVED AND DULY SECONDED</i></b> <b><i>MOTION: To accept the March 7, 2024 MAC minutes. CARRIED.</i></b></p>		
<b>4 Business Arising from Minutes</b>			
<b>5 Medical Staff Reports</b>			
5.1	<p><u>Chart Audit Review:</u></p> <ul style="list-style-type: none"> <li>No discussion</li> </ul>		
5.2	<p><u>Infection Control:</u></p> <ul style="list-style-type: none"> <li>No discussion</li> </ul>		
5.3	<p><u>Antimicrobial Stewardship:</u></p> <ul style="list-style-type: none"> <li>Will be reviewing blood culture ordering <ul style="list-style-type: none"> <li>All physicians must ensure that cultures are drawn or make a note as to why they were not drawn; process is moving along well</li> <li>Cultures should be inputted prior to ordering antibiotics</li> <li>Ordering 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"> <li>Use ALL CAPS</li> <li>Pick 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"> <li>List only shows the accessible orders</li> </ul> </li> <li>Sign the order</li> </ul> </li> </ul> </li> <li>Three 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"> <li>Discussed need for more in-depth tracking of follow up</li> <li>A symptomatic/positive patient is an automatic Public Health contact</li> </ul> </li> <li>ASP 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 cost</li> <li>Clinical Pathways Model will be brought to MAC in May; Dr. Ondrejicka</li> <li>Community Acquired Pneumonia; Dr. Mekhaiel</li> </ul>		
5.4	<p><u>Pharmacy &amp; Therapeutics:</u></p> <ul style="list-style-type: none"> <li>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"> <li>The mobile app does work well on cell phones</li> </ul> </li> </ul>		

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

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

	Date	Time	Location
	May 9, 2024	8:00am	Boardroom B110 / MS Teams
	Motion to Adjourn Meeting <b><i>MOVED AND DULY SECONDED</i></b> <b><i>MOTION: To adjourn the April 11, 2024 meeting at 9:30am. CARRIED.</i></b>		
<b>Signature</b>			
			
_____ Dr. Ryan, Committee Chair			