## PATIENT & FAMILY ADVISORY COUNCIL MINUTES

## *Monday, June 16, 2014*@3:00 – 5:00 pm *Dofasco Board Room*

Patient/Family Members Present: C. Machida (Co-Chair), J. Armstrong, L. Dore, G. Halyk, J. Robertson, M.

Slusarenko, M. Wilson,

Staff Members Present: M. Joyner, F. Wilson, H. Harris, G. Boag, L. Volman

Regrets: D. Vandenberg, J. Green, M. Gagnon, W. Doyle, P. Johnson, M. Doma, T. Jackson

Guests: C. Santoni, P. Valvasori, A. Dideban, T. Coxon, D. Schmidt

The meeting was chaired by C. Machida.

Торіс	Discussion	Action
Introductions	<b>Guests:</b> C. Santoni, Chair of the St. Joseph's Board of Governors; A. Dideban (MBA co-op student from DeGroote School of Business)	
Review of previous minutes	Reviewed and Accepted	
Introduction of new members	New Member: Pam Johnson (Nurse Manager in Psychiatric Emergency Services – replacing Anne Howarth)	The council continues to look for new members. If you know anyone who is interested, please ask them to contact Michelle Joyner 905-522-1155 x32760 or mjoyner@stjoes.ca
Public Affairs announcement	Documentary filmmaking group Ronachan films / EOS from the U.K. are creating a film on different healthcare systems for viewing by audiences in China and asked to attend and record a portion of the meeting to learn more about our patient council, how it works, why they are important, and the membership. No objections were raised to the filming. Film crew attended the second half of the meeting.	

Health IT Strategy	T. Coxon gave an overview of the Health IT	
	Strategy and Roadmap as we need to move	
	from our current provider McKesson to	
	another product. We are on the McKesson	
	platform and we have received notice that a	
	number of our core products will be sunset in	
	the coming years (exact dates unknown) A key	
	element in the execution of our Health IT	
	strategy is the involvement of patients both in	
	development process but also as end users	
	with ability to access health information. She	
	explained that work is underway to develop a	
	proposal for a common LHIN wide platform.	
	SJHH will continue to work through this	
	process and monitor against the timelines for	
	retirement of the current products in use.	
	Depending on the length of process for the	
	LHIN system, SJHH may need to make some	
	decisions locally to ensure the ongoing use of	
	our electronic tools in our environment. EPIC	
	platform is being implemented in ambulatory	
	area and a fall go-live is planned.	
Understanding care provider roles	P. Valvasori seeking feedback from the council	
	on behalf of the Post-Graduate Physician	
	Medical Education Committee regarding a	
	document created to give patients an	
	overview of the physician roles in the hospital	
	that they will interact with (e.g. residents,	
	learners yr1, 2, etc.) as a quick reference tool	
	upon admission. The intent of the document is	
	for patients to understand who is at their	
	bedside with focus on the physician, physician	
	learner roles, and some nursing roles. A	
	comprehensive list of all roles are not included	
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to keep the document brief and within one	
page.	
(such as nursing and allied health) defined	
there. P. Valvasori to connect with nursing to	
future refine. There was agreement that the	
patients must be able to understand who is	
responsible for their care.	
Ronachan films / EOS filmmaker set up	
recording. Consent forms were distributed	
and signed.	
Advisors have begun to interview patients on	
the rehabilitation unit to obtain patient	
feedback. The sub-committee will reconvene	
after a few more of the advisors have had a	
chance to interview patients. The approach to	
the interview may need to be redeveloped as	
it has been difficult to stay focused on	
medication reconciliation.	
There was a call for proposals from the	
Canadian Foundation of Healthcare	
Improvement for team applications to	
participate in the "Partnering with Patients	
and Families for Quality Improvement	
Collaborative". Met with managers for ideas	
of a project that has already been started.	
Decision made to submit proposal on the work	
we are doing with patient interviewing on the	
Rehabilitation units coupled with the "teach-	
	General support and approval of the document was given and suggestions were made that links to the St. Joe's website be included on the document with further roles (such as nursing and allied health) defined there. P. Valvasori to connect with nursing to future refine. There was agreement that the patients must be able to understand who is responsible for their care.  Ronachan films / EOS filmmaker set up recording. Consent forms were distributed and signed.  Advisors have begun to interview patients on the rehabilitation unit to obtain patient feedback. The sub-committee will reconvene after a few more of the advisors have had a chance to interview patients. The approach to the interview may need to be redeveloped as it has been difficult to stay focused on medication reconciliation.  There was a call for proposals from the Canadian Foundation of Healthcare Improvement for team applications to participate in the "Partnering with Patients and Families for Quality Improvement Collaborative". Met with managers for ideas of a project that has already been started. Decision made to submit proposal on the work we are doing with patient interviewing on the

	back" method. We will know by the end of	
	the month to inform on whether we were	
	successful.	
	Patient Engagement conference by The	
	Change Foundation and Health Quality	
	Ontario attended by C. Machida, M. Joyner, J.	
	Armstrong, and members from Quality,	
	Planning, Performance Improvement.	
	Interesting example from conference is a fine	
	tuned individual initiative from BC which	
	includes reaching out to patients and families.	
Patient Tracking Board	D. Schmidt presented on the Patient Tracking	Provide feedback about the boards and
	Boards which have now gone live in Day	poster.
	Surgery waiting area at Charlton, Main Lobby	
	of Charlton, and King St. Campus this week.	
	The Tracking Boards utilize electronic charting	
	by the clinical staff, to display the patient's	
	journey in perioperative program (Day	
	Surgery, Operating Room, Recovery). Families	
	are given a code to watch the progress of	
	loved ones. This initiative will provide	
	improved communication, increase in patient	
	and family satisfaction, and improved	
	charting.	
Health Links	H. Harris reported that Health Links have	Provide update on Health Links at September
	identified two patient populations that require	meeting.
	support and additional focus. These are:	_
	Mental Health and Substance Abuse, and	
	Frail/Elderly/Palliative.	
Next Meeting	Monday, September 15 <sup>th</sup>	
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