

Patient & Family Advisory Council

February 22, 2021 ~ 1:00pm - 2:30pm

Minutes

	Sept 21/20	Oct 19/20	Dec 15/20	Nov 16/20	Jan 18/21	Feb 22/21	Mar 15/21	April 19/21	May 17/21	June 21/21
Helene Hamilton (Co-Chair)										
Susan Tkachuk (Vice-Chair)										
Peggy Chapman			X							
Lana Yilmaz						X				
Michael Doughty						X				
Linah Hegazi										
Jan Kasperski										
Brian Cooke										
Julia Boyd						X				
Martha Ronalds										
Sahar Monzavi						X				
Mackenzie M. (LOA)										
Ali B.										
Susan Lohin										
Debra Leah Hartman										
Donna Johnson (Interim CNE)										
Cheryl Williams (Chief Nursing Executive)										
M. Farrell (President)	X	X	X	X	X	X				
D. Pitt (Coordinator Patient Relations)										
L. Volman (Director of Nursing Practice, MH & A)	X	X	X							
F. Wilson (Manager, Patient & Family Collaborative Support Services)		X								
B. Sunstrum (Knowledge Translation Specialist, Forensic Psychiatry)										
E. O'Connell (Co-Chair, Nurse Management Council)										
M. Joyner (Director, Quality Dept)										
V. Constantinescu (Patient Experience Consultant, Quality Dept)										
S. Mondoux (Quality Lead, Emergency Dept)	X	X	X	X						
J. Williams (Resource)										

X = Regrets

 = Not a current member

Abbreviation List:

PFAC = Patient and Family Advisory Council

PFA = Patient and Family Advisor

SJHH = St. Joseph's Healthcare Hamilton

Item	Topic	Presenter
1.0	INTRODUCTION	
1.1	Call to Order <ul style="list-style-type: none"> The agenda for the February 22, 2021 meeting was approved. The minutes from the January 18th meeting were approved. 	<i>S. Thachuk</i>
1.2	Land Acknowledgement <ul style="list-style-type: none"> PFAC opened the meeting with the SJHH Land Acknowledgement. 	<i>S. Thachuk</i>
1.3	Introduction <ul style="list-style-type: none"> Welcomed guests: Catharine Olsiak, Hamilton Joint Boards of Governors, Carmine Nieuwstraten, Director of Pharmacy at SJHH and newly recruited Patient & Family Advisor, Ed Dunn 	<i>S. Thachuk</i>
2.0	ANNOUNCEMENTS	
3.0	PRESENTATIONS	
3.1	COVID-19 – Hospital Updates - Regional: <ul style="list-style-type: none"> As of February 19th, there are 10,112 active cases, 273 fatalities in total. There are 17 active Covid-19 facility outbreaks in the city. Public Health Guidelines: <ul style="list-style-type: none"> Hamilton is currently in the red control category implemented by the Province The number of outbreaks continues to decrease. However, we have seen an increase in outbreaks affecting marginalized populations. There are outbreaks in several Hamilton shelters and also at the Hamilton Wentworth Detention Centre. The number of new hospitalizations has been decreasing; this number was relatively high at roughly 5 new hospitalizations per day earlier in February due to the ongoing high number of hospital outbreaks. However, this has now trended downwards and currently sits at 2.6 Congregate Settings: <ul style="list-style-type: none"> Satellite Health Facility (SHF) – There were outbreaks on both SJHH floors in late January. The current situation is the 5th floor outbreak is declared over with the other anticipated to be over by March 1, 2021 Outbreaks in LTC that we are supporting: Shalom Village, The Meadows in Ancaster and Cathmar Manor: <ul style="list-style-type: none"> The Meadows – Holding Outbreak calls Cathmar Manor– Transition planning for some of the current residents Shalom Village – Voluntary management order continues to address stability re: outbreak management <p>Q: When a patient tests positive for Covid-19, will they be tested for the variant strain? A: With more transmissible variants emerging in Ontario, there is still ongoing concern that increased transmission may lead to a rise in cases. For every result that comes back positive for Covid-19 the lab will test for the variant as well. As it is a two-step testing process, it may take a bit longer to get results back. Individuals need to continue to be vigilant on masking, distancing, minimizing contacts and hand hygiene.</p>	<i>C. Williams</i>
3.2	Vaccination Update – St. Joe's: <p>Provincial Direction for Vaccine Prioritization</p> <ul style="list-style-type: none"> The Provincial direction for vaccine prioritization has been updated The new framework identifies specific high-risk patient populations outlined below <p>SJHH – Covid-19 Vaccination Program</p> <ul style="list-style-type: none"> Two working groups at SJHH work on the vaccination program and oversee the vaccine roll out across the hospital and within the community Internal Planning Working Group <ul style="list-style-type: none"> Applying Healthcare Worker prioritization framework to SJHH Large Scale Vaccination Clinic 	<i>C. Nieuwstraten</i>

	<ul style="list-style-type: none"> • Supportive work for vaccine roll-out (communications, education materials, adverse reaction reporting) • Joint Working Group with Hamilton Health Sciences & Public Health <ul style="list-style-type: none"> • Inpatient Vaccination Program • Initial focus on Alternate Level of Care (ALC) patients <p>Immediate Vaccination Priority:</p> <ul style="list-style-type: none"> • Staff & essential caregivers in long-term care homes, high risk retirement homes & First Nations elder care homes, and any residents of these settings that have not received a first dose vaccine • Alternative level of care (ALC) patients in hospitals with a confirmed admission to a long-term care home, retirement home or other congregate care home for seniors • Highest Priority health care workers, followed by Very High Priority health care workers, in accordance with the Ministry of Health's prioritization framework, Indigenous adults in northern remote & higher risk communities <p>Next Vaccination Priority:</p> <ul style="list-style-type: none"> • Once first dose vaccinations of all staff are completed, essential caregivers and residents of congregate settings and First Nations elder care homes, first-dose vaccinations may be made available to the remainder of Phase One populations: <ul style="list-style-type: none"> • Adults 80 years of age and older • Staff, residents & caregivers in retirement homes and other congregate care settings • Health care workers in the High Priority level in accordance with the Ministry of Health's guidance on Health Care Worker Prioritization • All indigenous adults • Adult recipients of chronic home care <p>SJHH Vaccination Clinic:</p> <ul style="list-style-type: none"> • St. Joe's is excited to be a part of this next phase of providing access to the Covid-19 vaccine. A large-scale vaccination clinic will be launching at St. Joe's West 5th Campus. This clinic expands the local vaccination program and will open on March 1st • The vaccine clinic will be located on the second floor of the West 5th building, where the conference area and library are currently located • It will be used on an on-going basis to accommodate those residents who are eligible for vaccine and able attend an on-site clinic • Once the clinic opens, appointment bookings will become available to eligible recipients. The clinic will be available on a by-appointment only basis, there will be no option for walk-ins • The SJHH clinic is anticipated to start administering the vaccine slowly, with its full capacity being 2,000 vaccines per day <p>Q: When patients residing in long term care are vaccinated will their essential caregiver be vaccinated as well? A: ACTION: C. Nieuwstraten to follow up.</p> <p>Q: What vaccination priority group do Peer Support Workers fall under? A: ACTION: C. Nieuwstraten to follow up.</p> <p>Q: Can anyone go to the clinic even if they are not living in Hamilton? A: At this time, the clinics will provide vaccinations to Hamilton residents only. Work is underway to set up more vaccination clinics across the region.</p> <p>Q: What are the planned logistics to handle the high volume of individuals coming into the hospital for vaccines? A: We will have extra staff on hand for screening, wayfinding, sufficient wheelchairs, elevators will be available. We are coordinating with the Parking department so that patients will not have to pay for hospital parking when they come to receive their vaccine. We are starting with a much smaller</p>	
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	<p>number, so that we can see what patient flow will look like. This will allow us to have a plan in place as we ramp up to a much larger group.</p> <p>Q: When will the 65+ age category receive the vaccine? A: The Provincial Government and the Ministry of Health have set the prioritizing guidelines of the vaccine. As we vaccinate those 80 years and above we will be moving down from that age group, for example, the next age group would be 70 years to 80 years old. We are being proactive and looking ahead at the high risk patients group and preparing strategies to identify those who will require the vaccine. Hamilton's goal is to vaccinate 10,000 people per day once all of the clinics in the city are set up.</p> <p>Q: Do you know how many people declined the vaccine? A: I don't have exact number of the number of people who have declined the vaccine at this time. However, we have had a good response for those who want the vaccine especially from the health care worker group. Public Health has been providing vaccinations to residents, essential caregivers and staff in long term care. Between Hamilton hospitals and long-term care facilities, over 26000 vaccinations have been provided.</p> <p>Q: When will hospital volunteers receive the vaccine? A: Our goal is for when volunteers are able to come back into the hospital they will be able to register for the vaccine.</p> <p>Q: How long is the process from start to finish when a patient comes into the clinic for the vaccine? A: A patient would spend a few minutes for registration, vaccination takes approximately 2-3 min and observation period is about 20 min. We are hopeful the vaccination process will only take about 25-30 min total.</p> <p>Q: What is the plan for the community to receive their second dose of the vaccine? A: Our plan is to provide both doses of the vaccination, we are working with Public Health for those individuals who will return to the hospital for their second dose.</p> <p>Q: Are immuno-compromised patients eligible for the early vaccine? A: That level of detail has not been communicated by the Government yet. There are some immune compromised conditions that you should speak to your health care provider with before you receive the vaccine.</p>	
3.3	<p>COVID-19 – Hospital Updates - St. Joe's:</p> <ul style="list-style-type: none"> As of February 16th, there is one hospital unit outbreak. We are caring for 14 patients with Covid-19. There are 154 healthcare workers who have tested positive for Covid-19. We continue to balance the demand to care for Covid-19 patients and maintain regular services. We are reducing the number of surgeries requiring admission and moved the warm unit back to the Central Teaching Unit (CTU)-Central from CTU West. <p>Caregiver/Support Person and Visitor Policy</p> <ul style="list-style-type: none"> General visiting is currently restricted, however Caregivers/Support People are essential to patient care and allowed to visit Each patient to identify up to 2 Caregiver/Support Person they would like to visit and they can come to visit every day but not at the same time We recognize that family members, loved ones and all care partners are essential to the physical, emotional, social and spiritual wellbeing of our patients, therefore patients choose who their designated caregiver/support person is to meet these needs Some of our regional partners have adjusted their guidelines that might be different than ours. However, our aligns with SJHH mission and vision and evidence based practice Our current process is to identify and screen visitors and ensures the implementation of these guidelines: 	M. Joyner

	<ul style="list-style-type: none"> Each unit has a process to document caregiver/support person names of each patient Caregiver/Support persons provided with a letter that they must show when passing through screening Caregivers/Support Persons expected to follow Health & Safety Protocol when on-site Caregivers/Support People are asked to review safety guidelines. If a caregiver or support person is not adhering to safety guidelines then the following steps are considered: <ul style="list-style-type: none"> Remind/review expectations Remind a second time Ask to leave and if required, call security for support. Notify your manager. Manager to connect with Michelle Joyner to follow-up with Caregiver/Support Person <p>Q: Other organizations have changed their visiting parameters, will St. Joe's following suit? A: Other hospitals have tighter restrictions and are allowing fewer visitors on site. We will continue with our SJHH Caregiver/Support Person & Visitor Policy and adjust if required.</p>	
4.0	STANDING ITEMS	
4.1	<p>Share Your Experience</p> <p>Incident Management System (IMS) Command Table - J. Kasperski</p> <ul style="list-style-type: none"> The Incident Management System (IMS) is a standardized approach to emergency management and is designed to ensure that those in charge establish the following: command and control, safety and quality of care, communications, coordination of resources and supply chain management The role of the SJHH IMS Command Table: <ul style="list-style-type: none"> To provide overall incident management direction and oversight of the hospital's planning, response and recovery during the pandemic To facilitate rapid decision making to support the efficiency of implementing plans, operational changes, and procurement needs that are required to support the business continuity of the hospital during the pandemic Meetings occur based on the impact of the pandemic Due to the fast pace of the meeting and the quantity of items discussed, I have not had many opportunities to contribute, however I am learning a vast amount of valuable information on the hospital system. <p>Pandemic Operations Committee – J. Kasperski</p> <ul style="list-style-type: none"> Pandemic Committee is based on the Incident Management System (IMS) and aligns with and reports to the hospital's IMS Command Table which plans for, respond to and recover from the Pandemic To develop, update, implement and evaluate action plans under each of the Section Leads to support the functional sections of the IMS Command: Operations, Logistics, Planning and Finance Meetings occur based on the impact of the pandemic It has been a great learning experience on how efficiently a hospital operates during a pandemic/global emergency situation. Feedback is always welcome by the committee members and there is an opportunity to follow up after if needed. <p>Hospital Operations Committee – B. Cooke</p> <ul style="list-style-type: none"> Responsible for reviewing, providing guidance and oversight for overall operations of St. Joe's, specifically to support strategic business directions and policy implementation in the areas of clinical, infrastructure, finance and digital operations Oversee operations of clinical services, infrastructure, financial management and digital modernization 	

	<ul style="list-style-type: none"> Review, endorse and oversee implementation of operational plans, proposals and agreements Ensure advancement of major operational initiatives, align clinical and business planning opportunities and achieve service efficiency in alignment with the SJHH strategic plan Two-hour meetings are held on a monthly basis. The committee consists of 15 members, 3 co-chairs from St. Joe's Executive Leadership team and two Patient & Family Advisors Members are very welcoming and I have had many opportunities to contribute, share my opinions and provide feedback. For example, recently I was able to express PFAs support for the well being of staff and physicians. We believe that taking care of our staff and physicians could only lead to better patient/family care. <p>Covid-19 Vaccine Planning Working Group – L. VanLandschoot</p> <ul style="list-style-type: none"> The Medication Management Committee oversees the Vaccine Planning Working Group The vaccination program will be managed by St. Joseph's Healthcare Hamilton (SJHH) in partnership Hamilton Public Health Services, Hamilton Health Sciences (HHS), Primary Care Physicians and Hamilton Paramedic Services Feel comfortable contributing and have advised on some aspects of the After-Visit Summary- how best to record the patient's receipt of the 1st dose of the vaccine Contributed to the Transfer of Accountability based on the movement of patients from one facility to another. For example, when a patient is transferred from long term care to a hospital, it was unclear which hospital the patient was being transferred to, which further created vaccination delay and confusion. Great learning experience, interesting seeing the final outcome how everyone works collaboratively and how all of the pieces come together <p>Family Advisory Council – Deferred</p> <p>Q: What are the current hot topics within your committees? A: For the Pandemic Committee and the IMS Command Table hot topics include:</p> <ul style="list-style-type: none"> Planning and response of LTC outbreaks Establish the SHF, patient flow logistics, safety of the ventilation system, staff recruitment Keeping LTC patients at the LTC home and how we can provide safe care during Covid-19 outbreaks Pandemic funding of supplies 	
4.2	<p>Project Assignments</p> <ul style="list-style-type: none"> An update on all active projects to date was presented There were 9 project requests for Patient & Family Advisor (PFA) participation between the months January 2021 to February 2021. 	V. Constantinescu
5.0	CONCLUDING ITEMS	
5.1	<p>Date of Next Meeting - Held Virtually via ZOOM Monday, March 15, 2021 3:00pm - 5:00pm</p>	