

Patient & Family Advisory Council

May 17, 2021 ~ 3:00pm - 5:00pm

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										
Michael Doughty										
Linah Hegazi										
Jan Kasperski										
Brian Cooke										
Julia Boyd										
Martha Ronalds										
Sahar Monzavi										
Mackenzie M. (LOA)										
Ali B.										
Susan Lohin										
Debra Leah Hartman										
Angelo M.										
Donna Johnson (Interim CNE)										
Cheryl Williams (Chief Nursing Executive)									X	
D. Pitt (Coordinator Patient Relations)										
L. Volman (Director of Nursing Practice, MH & A)	X	X	X						X	
F. Wilson (Manager, Patient & Family Collaborative Support Services)		X								
B. Sunstrum (Knowledge Translation Specialist, Forensic Psychiatry)							X	X	X	
E. O'Connell (Co-Chair, Nurse Management Council)							X	X	X	
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 May 17 2021 meeting was approved. The minutes from the April 18th meeting were approved. 	H. Hamilton
1.2	Land Acknowledgement <ul style="list-style-type: none"> PFAC opened the meeting with the SJHH Land Acknowledgement. 	H. Hamilton
1.3	Introduction Welcomed guests: Arlene Iantomasi, Hamilton Joint Boards of Governors, Carmine Nieuwstraten, Dr. Peter Bieling, Donna Johnson, Patient & Family Advisor community	H. Hamilton
2.0	ANNOUNCEMENTS	
2.1	PFA EVENT Save the Date - Thursday June 3 2021 <ul style="list-style-type: none"> Reminder to RSVP for the Better Together! The Power of Partnership! Event scheduled for June 3rd from 1pm-3pm 	V. Constantinescu
3.0	PRESENTATIONS	
3.1	COVID-19 – Hospital Updates - Regional: <ul style="list-style-type: none"> As of May 17th, there are 40 active COVID facility outbreaks in the city. Outbreaks are seen in workplaces and multi dwelling unit 131 cases per 100,000 people per week contracted either by close contact or community acquired 50 percent of cases acquired are by close contact COVID-19 – Hospital Updates – St. Joe's: <ul style="list-style-type: none"> As of May 17th, we are caring for 27 patients with COVID, 21 in ICU and 6 in acute care Critical care beds have been operating at close to 100 per cent capacity Q: How many beds are currently in the ICU? A: Pre-pandemic there were 23 beds in the ICU. This past fall we added 4 more beds and then again in early April we added more and currently we are at 41 beds in the ICU. There are 37 occupied beds in the ICU ranging from patients who are critically ill from COVID or who have COVID. We have funding for up to 46 beds. Q: What does reproductive mean based on COVID cases? A: The reproduction number is the average number of secondary cases of infection generated by each person infected with COVID-19. A reproduction number greater than one means that the overall number of new cases is growing in a region, while a reproduction number less than one means the overall number of new cases is decreasing and suggests that COVID-19 is coming under control in a region. For example, if a reproductive number at one you would expect 131, if it was 1.12 it would go up to 150 over 7 days they do the analysis and determine how the cases will grow. It is good news when the number is below one. Q: Do you expect the that the number of beds in the ICU will return to pre-pandemic state? A: We expect that there will be more critical care pressure going forward even with vaccines therefore we still need to keep all ICU beds available. We will follow Provincial direction if we need to keep all of the 46 beds open in the ICU. If we will keep some of the extra beds, will we need to ensure we have an adequate number of staff on hand.	D. Johnson

	<p>Caregiver Support Mobile Support Team – St. Joe's: CAREGIVER SUPPORT TEAM</p> <p>Caregiver/ Support person mobile team provides proactive as well as reactive support to clinical teams related to patient/family presence, and also answer questions posed by caregivers related to visiting guidelines.</p> <p>Proactive:</p> <ul style="list-style-type: none"> Proactively call caregivers and support people of newly admitted patients to review current visiting guidelines and answer any questions about visiting guidelines <p>Supportive:</p> <ul style="list-style-type: none"> Make daily rounds on inpatient units ensuring each patient who would like a caregiver to visit has provided contact information. Connect with staff, caregiver/support people and problem solve any difficulties that arise, answer questions. Respond to phone calls from units related to caregiver/support person queries <p>Implementation:</p> <ul style="list-style-type: none"> The mobile support project started on April 28th and to date we have called approx. 358 caregivers / support person. The team is on site daily to solve any issues related to caregiver/support person visits Completed an environmental scan at screening points (Charlton and West 5th). 747 clinic appointments were observed (includes a small sample of vaccine clinic). 406 observations were at West 5th and 341 were at Charlton campus 12% of visitors (n=86) were accompanied by a caregiver/support person 34% (n=29) were deemed not appropriate for admittance by the screeners and were declined entry to the hospital <p>Challenges:</p> <ul style="list-style-type: none"> Some people bring their children (vaccination clinics) Re-entry because they forget the parking ticket Occasionally, there are caregivers insisting to accompany the person (do not meet the criteria) Caregivers for emotional support is difficult to assess <p>Q: Are caregiver supports able to attend a clinic appointment with a patient? A: Currently for Outpatient clinic appointments, patients will need to attend on their own, unless they need assistance with mobility or have cognitive concerns. Inpatients can have up to 2 caregivers visit per day.</p> <p>Q: Have you received any feedback from staff regarding the mobile support team? A: The mobile support team initiative was mentioned at the last Town Hall and there were no questions that came up from staff. We are collecting data so we can see how many patients are bringing a caregiver with them. From shadowing, the screeners have a very thorough process that is very "customer service" focused, taking time to answer questions from patients and family and calling units if a patient requires assistance.</p> <p>Q: When calls are made to caregivers was the reception more supportive or reactive? A: To date we have called almost 400 people and the majority have been extremely thankful that we have been able to answer their questions and provide them with caregiver information.</p>	<p><i>D. Johnson/M. Joyner/V. Constantinescu</i></p>
3.2	<p>Vaccine Update– St. Joe's:</p> <ul style="list-style-type: none"> We are well into the phase two of the Provincial vaccine roll out plan By week of May 31st, ages 12 and older will be able to receive a vaccine Second doses will be offered to the following St. Joe's groups: <ul style="list-style-type: none"> Hematopoietic stem cell transplant recipients Organ Transplant Patients 	<p><i>C. Nieuwstraten</i></p>

	<ul style="list-style-type: none"> • Indigenous patients • ALC-Long Term Care/Transitional Bed/congregate settings and Satellite Health Facility • Patients receiving Dialysis • High-Risk Health Care Workers <p>West 5th Vaccine Clinic</p> <ul style="list-style-type: none"> • Have administered over 55,400 doses to date • Now seeing approximately 1500-1600 clients per day • Patient Mobile teams established at West 5th and Charlton Campuses <ul style="list-style-type: none"> • Inpatients meeting current eligibility criteria • Dialysis • In Development: other ambulatory populations • Weekly clinics planned moving forward <p>Q: Who makes the decision to determine which priority groups receive the second vaccine earlier than anticipated? Is there a way to advocate for other populations to be included?</p> <p>A: The decision who receives a second vaccine is made by the Provincial Government. A science advisory group provides recommendations at the provincial table and the COVID vaccine is included in these recommendations. They review available evidence with respect to patient populations and that is used to formulate a subset for those who will receive the second dose.</p> <p>Hospitals can advocate for specific patient populations, by collecting data and presenting at the provincial table. This can be used to change the product monograph between doses to a patient monograph.</p> <p>Q: In other Provinces, it was recommended that the timeframe for those receiving the second dose could be shortened, is that true for our area?</p> <p>A: We are expecting supply will expand and grow over the next several weeks and that vaccine eligibility will open up to include more age groups. It is possible that the interval between doses could be shortened depending on the supply. Patients will be contacted by the hospital if there is a change in second dose vaccination appointments. Our focus has been in ensuring all patients of St. Joe's receive the first dose.</p> <p>ACTION: Interval between first and second doses could be shortened for St. Joe's patients. C. Nieuwstraten to follow up. MRP: C. Nieuwstraten</p> <p>Comments:</p> <ul style="list-style-type: none"> • Received a letter that my spouse (transplant patient) was able to book their second dose. It was a struggle as the provincial vaccine booking system does not allow you to book the second dose. I called seven times over a period of two weeks and finally received an appointment for my spouse. It was very frustrating. • The process at West 5th in receiving a vaccine is excellent, very efficient and timely, however, the vaccine appointment could be printed on different paper, as the ink disappears quickly • It seems there is variability in who receives the second dose between regions. This could be because each Public Health unit operates differently based on timelines, vaccine supply, patient population etc. • It would be better if they could streamline the second dose appointments with the province 	
	<p>Impact of COVID on Mental Health Services - "It's not Okay" campaign</p> <ul style="list-style-type: none"> • Ontario's leading mental health and addiction organizations are coming together to say Everything Is Not OK in a new campaign that highlights the impacts of COVID-19 on the mental health of children, youth and adults. The campaign calls for immediate action by all levels of government to reduce wait times for mental health and addiction services. Almost 75 per cent of the population is facing increased mental health and substance use challenges during the COVID-19 pandemic • There are seven organizations involved in the campaign including St. Joseph's Healthcare Hamilton, representing the full continuum of mental health and addiction care from community care to hospital care 	<p><i>P. Bieling</i></p>

	<ul style="list-style-type: none"> • They are calling on all levels of government to take action to improve access to support and services for those who need urgent care. The campaign also includes specific actions that the organizations themselves are ready to take on as partners in improving care for the people who need it most. • Before COVID-19, there was a mental health and addiction crisis in Ontario. The pandemic has only made it worse. That's why the Everything Is Not OK campaign is calling for a mental health and addiction system - supported by long-term and sustainable investments - that will provide: <ul style="list-style-type: none"> ○ Consistent care, faster care, easier access to care, transparent care • For more information, visit www.everythingisnotok.ca <p>Comments:</p> <ul style="list-style-type: none"> • With family physicians doing more zoom/telephone appointments, patients are not able to see the physician face to face, which could have a negative impact on their mental health. It is possible they might be too afraid to go to hospital for care • In Ontario, 15 million people have experienced a negative impact due to COVID. How do we will help Ontario recover from this impact? 	
	<p>Patient & Family Advisors - Annual Accomplishments Report</p> <ul style="list-style-type: none"> • During the pandemic, opportunities to partner with patient and families continued to exist and through creative methods like virtual meetings, this partnership was able to continue • In 2020, we had 65 projects reported to us which is 16% more (55projects) than 2019 higher than 2019 • One of the major accomplishments this year was the creation and implementation of the Co-Design Framework a major component of the 2025 Strategic Plan • The annual accomplishments report summarizes of all formalized projects, activities and working groups that included patient and family advisors 	V. Constantinescu
3.3	<p>Share Your Experience PFA's Engaging for Impact Conference - J. Kasperski, H. Hamilton, S. Lohin, N. Schreiner, D. Hartman</p> <ul style="list-style-type: none"> • Engaging for Impact Conference was held on March 26th 2021 • Focus was to bring together client/family advisors and engagement staff from various healthcare organizations in the region to share promising engagement models for better impact and wellness outcomes for clients and families and gained a deeper knowledge of the evolution and the future of client and family engagement in healthcare. • Some sessions that PFA's were involved in included; gender/racial diversity, indigenous people's perspective, creating engagement capable environments, culture change, substance use • Promote the value and impact of client/family partnerships in healthcare and research • Some of the sessions that I participated in were held in small groups using a true co-design process • From my perspective it seems that SJHH is much more advanced in patient engagement • The gender diversity and the indigenous sessions were very interesting • The conference was well put together and provided us with a great opportunity to learn more on engagement 	PFA's
4.0	STANDING ITEMS	
	<p>Project Assignments</p> <ul style="list-style-type: none"> • An update on all active projects to date was presented • There were 8 project requests for Patient & Family Advisor (PFA) participation between the months March 2021 to April 10 2021. 	V. Constantinescu
5.0	CONCLUDING ITEMS	
5.1	<p>Date of Next Meeting - Held Virtually via ZOOM Monday, June 21, 2021 3:00pm – 4:30pm</p>	