

CHIEF OF STAFF REPORT and MEDICAL ADVISORY COMMITTEE

**REPORT TO ANNUAL MEETING
SOUTHLAKE REGIONAL HEALTH CENTRE BOARD OF DIRECTORS
June 23, 2021**

Chairman of the Board, Directors, Ladies and Gentlemen, I am pleased to present my annual report as Chief of Staff at Southlake Regional Health Centre. This will update the developments and changes that have been initiated through the Medical Advisory Committee over the past year.

I would like to extend both my thanks and appreciation to all the staff members of Southlake for their continued dedication, compassion and excellence during this past year. Our team has once again demonstrated how the whole is greater than the sum of its parts.

While managing the routine demands of a very busy tertiary care community hospital, they have also successfully navigated power failures, floods, temporary loss of access to lab services, as well as providing essential care to patients of our community in the face of a seemingly unending pandemic. Not only was the crisis managed effectively in-house, our staff also participated through both the assessment centre and vaccination centres, as part of a partnership with Public Health and Ontario Health, to monitor and prevent COVID disease in the community.

The Southlake model of mass vaccination was adopted by other centres and was visited by the Premier Ford and General Hillier. Our centre also provided early vaccinations to over 1000 healthcare workers from University Health Network, ensuring that they were safe from infection.

At the height of COVID in early May, physicians signed on as nurse extenders, to provide badly needed support of the work of our Critical Care nursing staff, both in the Intensive Care units and as part of the nurse-led CCOT (Critical Care Outreach Team). This allowed for physicians to experience and appreciate the hard work and expertise that are part of routine nursing practice.

Looking forward to the next few months, there will be challenges as we ramp up to (and above) our previous levels of scheduled activity. Nursing staff that have been deployed to areas of essential service will need to be returned to their pre-COVID environments. Pre-existing shortages will once again be highlighted in the critical care and operating rooms. Patience will be mandatory, both from staff and from patients.

Finally, a thank you to my colleagues on SLT for their support of Southlake and its staff. Many difficult decisions and reviews, particularly with respect to staff, had to be made to ensure the long-term viability of our hospital. Also, thanks to our Hospital Board Chair, Pat Horgan and the other members of the Board of Directors for their support of the Senior Leadership Team.

Physician Leadership

Thank you to the following leaders for their dedication and service to Southlake. Terms are ending as of June 30, 2021 for:

- Dr. Morrie Liquornik, Chief of Surgery (5.5 years)
- Dr. Shea Chia, Division of General Surgery (5 years)
- Dr. Jerome Green, Division Head, Urology (5.5 years)
- Dr. Salvatore Privitera, Division Head, Thoracic Surgery (5.5 years)
- Dr. Carter Thorne, Division Head, Rheumatology (15 years)

Champion Awards 2020

Congratulations to Dr. John Randle as the recipient of the Dr. David Hill Award; Dr. Glen Hanna for receiving the Leadership Award; and the Foundation's Physicians' Council on receiving the Inspiring Community Award. It has been a very challenging year, to say the least and these physicians all very deserving of their awards.

COVID-19 Pandemic - COVID Clinical Advisory Panel (CCAP)

The COVID Clinical Advisory Panel (CCAP) is a group comprised of the Physician Leaders, Clinical Directors, Chief of Staff, Chief of Anesthesia and ICU Medical Director. It was struck in March 2020 in response for the need of urgent COVID related clinical decision making and worked in collaboration with the Emergency Operations Centre (EOC).

Any COVID clinical information circulating for clinical decision-making was brought forward to this group. CCAP met through the second and third waves of COVID, increasing their meeting frequency as necessary. They reviewed Aerosol Generating Medical Procedures (AGMP) and established PPE criteria, based on the aerosolization risk. New drug therapies were brought forward and Southlake participated in various clinical trials. Discussions included entrance screening, visitor restrictions, pre-operative testing, eliminating minimum age for testing, and lab testing and their turnaround times. Emphasis on appropriate use of Personal Protective Equipment (PPE), physical distancing, self-monitoring and hand hygiene was also promoted through CCAP. They also reviewed guidelines around out-of-country travel for physicians with Occupational Health and ensured stock of PPE supplies remained steady. The Committee also worked collaboratively with IPAC to ensure best practices.

COVID-19 Pandemic - Vaccine Task Force Update

Dr. Charmaine van Schaik and Dr. John Randle are the physician co- medical leads for the Vaccine Task Force. Over the past few months, the Task Force has been reinventing the process on vaccine delivery to the long-term care group as well as Southlake staff and physicians. Their strategies continue to change frequently, based on Ministry directives and vaccine allotment. This group managed to set up a pop up-clinic on site with less than 24 hours notice and were able to vaccinate hundreds of staff in early January. They continue to be also responsible for the operations at the Ray Twinney Arena, which has the ability to vaccinate over 1000 people per day. Mobile vaccination units were sent to retirement homes to vaccinate this population, in addition to the arena site. All assigned retirement homes received first doses by January 18, 2021.

A shortage of vaccine coming into Canada occurred in February due to Pfizer retooling their plant in Belgium. As such, all first dose vaccine appointments for health care workers at Southlake were cancelled until further notice. Second dose appointments continued as scheduled within the 21-42 day window. In February, the Ministry mandated 35 days between first and second dose due to vaccine shortage, with a focus to vaccinate long-term care residents and staff as a priority. Outreach teams visited long-term care homes to provide second doses. By the end of February, approximately 2700 staff (90%) have received their second dose at Southlake.

By mid-March, the Vaccine Clinic moved to a 7 day a week schedule at Ray Twinney. There was a provincial change to 16-week interval between doses, except for those in remote areas, over 80 years of age and residents in long term care homes. Vaccine supply was no longer an issue.

A number of pop-up vaccine clinics occurred in the month of May for staff in the hospital and staff could book vaccine appointments by contacting Occupational Health. The Vaccine Clinic remains open 7 days a week at Ray Twinney from 8am to 6pm and averages 1000 doses a day. Vaccine appointments for first dose are now open for those that are 12 and older.

Much appreciation goes to the diligent work of Vaccine Task Force, as well as the many staff and physicians who have volunteered at the pop-up site and assessment centre.

CMIO Updates Over the Past Year

As part of the SHINE partnership, Southlake patients have access to Patient Connect. This allows for an immediate release of pDoc documents and diagnostic imaging (DI) reports and are made available to the patient as soon as these documents are authored. There have been some instances where CAT scans have been posted and patients are requesting to speak with the physician ahead of their scheduled appointment based on the result. At the same time, this approach alleviates anxiety on the part of the patients who currently have to wait to have a discussion with the doctor only to find out that their results are normal. This change brings us in line with other institutions in the GTA and across the country with experience supporting the fact that overall, this approach reduces the number of patient inquiries (this is supported by the data from Health Records since Patient Connect Go Live).

A PDOC/FED Project Oversight Committee has formed to provide guidance and oversee the PDoc and FED adoption and expansion project goals, priorities, and overall progress. As active and visible clinical leaders in the organization, a number of physician leads would champion the adoption/use of pdoc and front-end dictation, participate in project meetings, and engage their peers in support of project goals. A number of physicians continue to use back end dictation and we will need to encourage the change to frontend dictation platform. A number of generic pDoc templates have been created and are available for use.

Dedicated pdoc training was provided from January 11 to March 26, 2021 to support ordering providers to adopt and optimize the use of pDoc. This training is tailored to the individual needs of ordering providers. Southlake offers a voice-recognition dictation solution (Fluency Direct) so providers can continue dictating their reports and notes while using pDoc. The organization is attempting to move away from phone-based transcription services as of April 1, 2021. Backend dictation will be retained for downtime instances.

CMaRS (Clinician Management, Appointment, Reappointment System)

Southlake's current database and online reappointment system dates back to 2010 when Mackenzie shared their online system with us. At that time, many other hospitals were creating their own versions of an online reappointment system for the purpose of credentialing medical staff, including Mount Sinai. With each year, Sinai's dedicated team modified and improved their system (CMaRS) and has expanded their membership to over 50 health centres in Ontario.

Medical Administration lost their Medical Affairs Manager due to budget cutbacks and as such, needed to adopt the CMaRS system to assist with workload. While very moderate modifications were made to Southlake's original online system, it was very much the same as it was back in 2010 and failed to compare to CMaRS in terms of its technical capabilities.

CMaRS is a secure web-based, paperless clinician management, appointment, and reappointment system that was developed at Mount Sinai Hospital. It is serviced entirely at Sinai including all IT issues. It was designed to meet needs of all stakeholders including physicians, Chiefs, Credentials Committee, Medical Advisory Committee & Medical Administration. Hospitals have online access to historical data for all previous years they have used the services. It also has the ability to add medical directive sign-off, SOLS learning, as well as performance reviews.

Aside from the one time set up fees, there is an annual fee of \$50 for each professional staff that is invited to the reappointment process. There is also an option to collect Medical Staff Association fees during the reappointment cycle. At the end of the reappointment cycle, Sinai issues the hospital a cheque or issues an invoice for the amount the hospital owes CMaRS.

The previous reappointment cycle started at the beginning of November and ended in January with professional staff being reappointed for that upcoming calendar year. With CMaRS, we have adopted the academic year (July 1, 2021 to June 30, 2022) and as such, the 2020 Professional Staff reappointments were extended to June 30, 2021.

Critical Incidents

Never events and critical incidents are reviewed quarterly by MAC. These reviews attest to providing a safe environment for our patients and staff. An example of a "never event" is outlined. A patient experienced anaphylactic shock due to an allergy to chlorhexidine (CHD). The team was not aware that the central line contained chlorhexidine. A working group is investigating alternatives for central lines with CHD. Professional staff should be aware of products with CHD includes central lines, mouthwash, body wash, and some lubricants. A list of these products should be available shortly. Professional staff are also reminded to review the patient's chart for allergies prior to any procedure.

Foundation Update

Ms. Jennifer Klotz-Ritter, CEO of Southlake Foundation and Lesley Ring, VP of Major Gifts & Campaigns provided an update for the MAC. They noted last fiscal year finished strong with higher results than forecasted. Net revenue is anticipated to be more than \$12.5M. This year's priorities will include the start of the Master Plan, which will consist of raising funds for over the next 10 years. Part of the Master Plan initiatives include funds towards the Cancer Program, Maternal Child Program and Cardiac Innovation.

The Nature's Emporium Run for Southlake was held from April 12 – May 9. This year it was a virtual challenge taking place over a four week period. Dr. John Randle was the physician ambassador this year. Southlake Golf Tournaments are almost sold out. The tournaments take place on June 28 (Coppinwood) and September 20 (Beacon Hall).

On behalf of all our staff, I would like to welcome and thank both her and her team for their commitment to and compassion for Southlake and our patients.

Master Plan

Tyler Chalk, VP, Strategy, Analytics & Communication provided the MAC with an update on the Master Plan Strategy. T. Chalk noted "our overarching objective is for the Ministry to endorse Southlake's Master Plan and provide a planning grant and approval to proceed with the next stage of planning." The Master Plan was submitted to Ministry of Health in January 2020 and Pre-Capital Submission submitted in July 2020. A. Krystal and T. Chalk have discussed the plan with Ministers Elliott and Mulroney. Next steps include having the Chiefs and Physician Leaders endorse the plan with by sending letters of their program's needs as well as engaging the media on the planning and current infrastructure challenges.

York Region is anticipated to have significant growth in the next 20 years and is one of the top regions provincially for future demand of inpatient hospital activity. Southlake has not had any significant acute care capital expansion since 2003 and has outgrown its footprint, whereas similar regions have either opened new hospitals or have major capital projects underway. It will be important to take an evidence based approach to advocacy using data for the case to be made to the Ministry. As part of the advocacy on behalf of SRHC, Southlake's Physician Leaders will be sending out, with the help of Corporate Communications, a series of letters outlining the needs of their programs and how a new faculty would benefit those programs and their patients.

Patient Oriented Discharge Summary (PODS)

The Patient Oriented Discharge Summary (PODS) was successfully rolled out to clinical programs in February 2020. Unfortunately, opportunities to seek earlier evaluation feedback were delayed due to the activities related to COVID-19. The discharge summary tool was designed to assist in providing patients with sufficient information on discharge. Feedback related to the "Enough Information on Discharge" question received through the NRC Patient Satisfaction Surveys reveal a positive increase following the implementation of PODS from Q1 = 51%, Q2=60% and Q3= 65% (target =58%). Medicine and Maternal Child were able to roll out the survey this past month. Mental Health has slightly altered the survey to be department specific. The survey will soon be available at the patient bedside on the tvs or as printouts. The form is to be completed with the health care provider at the time of discharge. The use of the QCIPA "shield" has not been required for over seven years, with our Quality of Care Committee's commitment to transparency.

Proposed Quality Utilization and Resource Management Membership

As QURM reports to the Senior Leadership Team and the Medical Advisory Committee, the Co-Chairs, Dr. John Randle and Julie Pike, brought forth a request to modify the membership structure to best meet their objectives and to enable focused and nimble decision-making. Based on the success of the COVID Clinical Advisory Panel, the plan is to narrow the membership of QURM in an effort to encourage productive discussion. One significant change is to restrict the membership to Physician Leaders and Directors and to include Annette Jones, Barb Steed, and Dr. Beatty as ex officio members.

The proposed membership and the current membership were provided to the MAC. The committee membership would go from 39 members to 28 members. It was noted that in the new proposal a representative from the Medical Staff Executive is not listed as a committee member, which it has been historically. This is due to the overlap where physicians hold more than one leadership position, including the Medical Staff Executive and a Physician Leader position. MAC approved the change in the Quality Utilization and Resource Management Committee membership with the addition of a representative of the Medical Staff Executive.

Quality Reviews

Mr. Patrick Hawkins, legal counsel from Borden Ladner Gervais, provided quality review training for the Medical Advisory Committee. He gave an overview of why we do reviews, ethical and legal obligations to disclose; legislation governing quality reviews and disclosures; critical incidents; disclosure and quality review of a critical incident; similarities and difference between disclosure and review of critical incidents and patient safety events, as well as when to evoke QCIPA (Quality of Care Information Protection Act).

Physicians must follow hospital policy when evoking QCIPA. At Southlake, QCIPA is enforced through the Quality of Care Committee (QCC). If any quality reviews are undertaken outside of QCC, they are discoverable the hospital is obliged to send their files to the CPSO for review, if requested. It is necessary to maintain all recorded documents and create recommendations. Unexpected outcomes should be disclosed to the patient and reviewed. Critical reviews incidents must be reported to MAC and the Board of Directors.

Any oral opinions are not generally subject to discovery as it would be difficult to recall a conversation from months previous at a hearing but any documentation is subject to discovery. Notwithstanding the previous, individuals involved in the case can be asked what they might remember from the case or the review and can be subject to discovery.

Rules & Regulations: 1.8 Medical Staff Dues

A Special General Medical Staff meeting was held February 1, 2021, to set Medical Staff dues for the upcoming reappointment year (July 1, 2021 to June 30, 2022). Dues will be collected each year at the time of annual reappointment in order to complete the application process. In addition to the Active and Associate staff, Courtesy staff and midwives will now also pay dues but at a reduced amount. The Rules & Regulations were revised to reflect the change.

Revised Rules & Regulations: 8.6 Process for Annual Reappointment to the Medical Staff

The Professional Staff Rules & Regulations for the annual reappointments process have been revised to reflect the new CMARs system, including the new dates for the appointment year beginning July 1 to June 30 of each year.

Revised Rules & Regulations: 18.0 Medical Trainees / Observers / Physician Assistants

The Hospital's insurance company "HIROC" does not cover medical residents in any civil suit. They are protected by the Canadian Medical Protective Association (CMPA). Reference to coverage for medical resident by the Hospital's insurance carrier have been removed from the Professional Staff Rules & Regulations.

Revised Rules & Regulations: 20.3 Division Heads Selection

A change to the Medical Staff Rules & Regulations for Division Heads has been recommended so that those Divisions with five or less members can bypass the selection committee process and choose their Division Head. This position usually rotates among the members. Their selected member will be presented at the May MAC meeting.

Safety Alerts

Two safety alerts have been distributed to the medical staff:

1. CHLORHEXIDINE coated multi-lumen central line catheters: Anaphylaxis
A recent patient safety incident occurred in which a patient developed anaphylaxis during a procedure when a Triple Lumen Catheter was inserted. It was identified that the reaction was most likely related to the catheter having a Chlorhexidine coating and once introduced into the blood stream, the severe allergic reaction occurred. The patient had a chlorhexidine allergy.
2. 2 Patient Identification
Two Patient Identification (2PtID) is one of our five Patient Safety Priorities. Audits of our practice reveal low rates (64.1%) of 2PtID and errors have occurred including a wrong patient surgery, results on wrong patient chart, and wrong medications being administered.

DOCUMENTS APPROVED BY THE MEDICAL ADVISORY COMMITTEE

Drugs & Therapeutics Committee Recommendations: 55
Medical Directives: 16
Miscellaneous: 6
Order Sets: 58
Terms of Reference: 2

2021-22 MEDICAL LEADERSHIP TERMS

The incoming Medical Leadership for 2021/22 Medical Staff Executive, Chiefs and Division Heads are:

Medical Staff Executive:

Office of President
Office of Vice-President
Office of Secretary/Treasurer

Dr. John Randle
Dr. Eddie Chan
Dr. Tom Bertoia

Clinical Chiefs:

Department of Anesthesiology
Department of Complex Medical Rehabilitation
Department of Diagnostic Imaging
Department of Emergency Medicine
Department of Family & Community Medicine
Department of Laboratory Medicine
Department of Medicine
Department of Obstetrics
Department of Paediatrics
Department of Psychiatry
Department of Surgery

Dr. Glen Hanna
Dr. David Srouf
Dr. Raymond Chan
Dr. Gaurav Puri
Dr. David Makary
Dr. Syed Kazimi
Dr. Shahzad Qureshi
Dr. Genevieve Chang
Dr. Arif Manji
Dr. Mahdi Memarpour
Dr. Sara Temple

Clinical Division Heads (Surgery):

Division of Cardiac Surgery
Division of Dentistry
Division of General Surgery
Division of Gynaecology
Division of Ophthalmology
Division of Otolaryngology
Division of Orthopaedic Surgery
Division of Plastic Surgery
Division of Surgical Assistants
Division of Thoracic Surgery
Division of Urology
Division of Vascular Surgery

Dr. Stacy O'Blenes
Dr. Brian Wong
Dr. Eda Deliallisi
Dr. Peter Watt
Dr. Baseer Khan
Dr. Taryn Davids
Dr. Patrick Gamble
Dr. Bimpe Ayeni
Dr. Ian Soutter
Dr. Crystal Kavanagh
Dr. John Preiner
Dr. Alan Lossing

Clinical Division Heads (Medicine):

Division of Cardiology
Division of Endocrinology
Division of Gastroenterology
Division of Hospitalist Medicine
Division of Neurology
Division of Oncology
Division of Radiation Oncology
Division of Respiriology
Division of Rheumatology

Dr. Jeremy Cohen
Dr. Sunil Juta
Dr. Brian Stotland
Dr. Mandana Kayedi
Dr. Usman Moghal
Dr. Peter Anglin
Dr. Charles Cho
Dr. Moiz Zafar
Dr. Nadil Zeiadin

Clinical Division Heads (Family Medicine):

Division of Palliative Medicine

Dr. Alisha Kassam
Dr. Katie Mulhern
Ms. Carolyn Scott

Head Midwife

PHYSICIAN RECRUITMENT

Medical Manpower Requests (Form As)

The following Medical Manpower Requests were approved by MAC from June 2020 to May 2021:

- Additional General Internal Medicine Physician
- Additional Geriatrician
- Additional Infectious Diseases Physician
- Additional Paediatrician
- Additional Pathologist (pending a financial review)
- Additional Radiologist
- Replacement Endocrinologist
- Replacement General Internal Medicine Physician
- Replacement Midwife
- Replacement Radiologist

Active Search & Selection Process for the Following:

- Adult Psychiatrist
- Child & Adolescent Psychiatrist
- Critical Care Medicine Specialist
- Dermatologist
- Neurologist
- Pediatrician

Selection Committee Recommendations

The following Selection Committees occurred between June 2019 to May 2020:

- Cardiac & Critical Care Anesthesia Selection Committee – April 26, 2021
- Chief of Surgery Selection Committee – April 21, 2021
- Division Head, General Surgery Selection Committee – April 7, 2021
- Division Head, Geriatric Medicine – September 1, 2020
- Division Head, Hospital Medicine – September 8, 2020
- Division Head, Rheumatology Selection Committee – April 7, 2021
- Division Head, Palliative Care Selection Committee - December 15, 2020
- Endocrinologist Selection Committee – March 17, 2021
- Geriatrician Selection Committee – March 29, 2021
- GIM - Hospitalist Selection Committee – February 17, 2021
- Infectious Diseases Specialist Selection Committee – March 3, 2021
- Neurology Selection Committee – August 31st, 2020
- Radiologist Selection Committee – March 29, 2021
- Respiriology Selection Committee – April 12, 2021

MEDICAL STAFF CREDENTIALING

Southlake Regional Health Centre welcomes our new Professional Staff.

Associate Staff:

Dr. Asim Cheema	Department of Medicine, Division of Cardiology/Interventional Cardiology
Dr. Michael Da Rosa	Department of Diagnostic Imaging
Dr. Michael Roth	Department of Diagnostic Imaging
Dr. Michael Hickey	Department of Medicine, Critical Care Medicine
Dr. Jonathan Toma	Department of Medicine, Division of Cardiology/Interventional Cardiology
Dr. Erik Yao	Department of Surgery, Division of Surgical Assistants

Community Staff:

Dr. Trudy McFarlane	Department of Family & Community Medicine
Dr. Vahid Salimpour	Department of Family & Community Medicine
Dr. Chad Tyler	Department of Family & Community Medicine

Courtesy Staff: (Active Staff appointment at another health care facility)

Dr. Vikas Agarwal	Department of Diagnostic Imaging
Dr. Bilal Ahmed	Department of Diagnostic Imaging
Dr. Andre Ali-Ridha	Department of Surgery, Division of Ophthalmology
Dr. Ajda El-Zabet	Department of Surgery, Division of Surgical Assistants
Dr. Jeffrey Grenville	Department of Diagnostic Imaging
Dr. Ricky Jrearz	Department of Surgery, Division of General Surgery
Dr. Brent Kerbel	Department of Surgery, Division of Surgical Assistants
Dr. Kapil Kohli	Department of Medicine, Division of GP Hospital Medicine
Dr. Emily Liu	Department of Surgery, Division of Plastic Surgery
Dr. Susan Peters Martinez	Department of Surgery, Division of Surgical Assistants
Dr. Thanashan Rajakulendran	Department of Medicine, Dermatology

Joining our Legacy Staff:

Dr. Daniel Campbell	Courtesy to Legacy Staff, Department of Surgery, Division of General Surgery & Division of Surgical Assistants (1988-2021)
Dr. Kirby Evans	Active to Legacy Staff, Department of Family & Community Medicine (1987-2020)
Dr. Jo-Anne Kalyniuk	Active to Legacy Staff, Department of Family & Community Medicine (1981-2021)
Dr. Peter Mucalov	Courtesy to Legacy Staff, Department of Family & Community Medicine (1984-2021)
Dr. Richard Rinn	Department of Laboratory Medicine (1985-2019)
Dr. Kenneth Roberts	Courtesy to Legacy Staff, Department of Medicine, Division of Respiriology (1982-2020)
Dr. Scott Windsor	Courtesy to Legacy Staff, Department of Family & Community Medicine (1985-2020)

The following additional credentialing occurred from June 2020 to May 2021:

- 51 Locums
- 46 Locum Extensions/Renewals
- Temporary Staff
- 40 Change in Status
- 8 Change in Privileges
- 125 Medical Students, Residents & Fellows
- 0 Observers (Due to COVID-19 restrictions)

RETIREMENTS

Dr. Larry Barcza, retiring from Active Staff, Department of Family & Community Medicine and Department of Surgery, Division of Surgical Assistants, effective June 30, 2021.

Dr. Marybeth Bourne, Department of Family & Community Medicine retirement from her family practice effective May 1, 2021. She remains on Active staff as Investigating Coroner in York Region and for coverage at the Aurora Newmarket Family Health Team.

Dr. James Boyle, retired from Active Staff, Department of Family & Community Medicine and Department of Surgery, Division of Surgical Assistants on January 4, 2021.

Dr. Dan Campbell, retiring from Courtesy Staff, Department of Surgery, Division of Surgical Assistants, effective June 30, 2021

Dr. Joanne Kalyniuk, retiring from Active Staff, Department of Family & Community Medicine, effective June 30, 2021

Dr. Larry Mark, retired from Department of Family & Community Medicine, practice closed effective July 7, 2020 (remains on Courtesy Staff)

Dr. Peter Mucalov, retired from Department of Family & Community Medicine, effective March 25, 2021

Dr. Tim Nicholas, retiring from Courtesy Staff, Department of Family & Community Medicine, effective June 30, 2021. Retired from Active Staff, Department of OBGYN with GP-OB privileges and Department of Medicine, GP-Hospitalist on June 1, 2020.

Dr. Stephen Pearl, retired from Courtesy Staff, Department of Family & Community Medicine on December 31, 2020.

Dr. Scott Windsor, retired from Active Staff, Department of Family & Community Medicine and Department of Surgery, Division of Surgical Assistants on June 1, 2020.

Dr. Norma Yoneyama, retired from Courtesy Staff, Department of Surgery, Division of Surgical Assistants & Family & Community Medicine (retired practice) on December 31, 2020.

RESIGNATIONS

Dr. Maliheh Balouchi from Active Staff, Dept of Family & Community Medicine as of December 31, 2020

Ms. Kara Brockington from Active Staff, Dept of OBGYN, Division of Midwifery as of November 9, 2020

Dr. Andrea Evans from Courtesy Staff, Department of Paediatrics as of December 31, 2020

Dr. Michael Hickey from Dept of Medicine, Division of Critical Care Medicine, as of November 7, 2020

Dr. Jacob Nikon from Department of Medicine, Division of Respiriology as of July 11, 2020

Dr. Jane Roberts from Courtesy Staff, Department of Paediatrics as of December 31, 2020

Dr. Lara Hart from Courtesy Staff, Department of Paediatrics as of February 28, 2021

Dr. Rosemary Northcott from Active Staff, Department of Family & Community Medicine and Department of Surgery, Division of Surgical Assisting as of May 1, 2021

Dr. Samina Kazmi from Courtesy Staff, Department of Medicine, Division of Neurology as of June 1, 2021

Ms. Sally Morgan from Active Staff, Department of Obstetrics, Division of Midwifery as of April 26, 2021 (10 years of service as a midwife and 15 years as RN on the Birthing Unit prior)

Ms. Amanda Sorbara from Active Staff, Dept of Obstetrics, Division of Midwifery as of April 24, 2021

Dr. Natasha Zajc-Dalcourt from Active Staff, Dept of Family & Community Medicine as of July 31, 2020

CHOSE NOT TO REAPPLY FOR PRIVILEGES FOR YEAR JULY 1, 2021 – JUNE 30, 2022:

Dr. Hasan Al-Janabi, resigning from Community Staff, Department of Medicine, Division of Respiriology
Dr. Graham Black, resigning from Courtesy Staff, Department of Paediatrics
Dr. Krysztof Conrad, resigning from Courtesy Staff, Department of Surgery, Division of Otolaryngology
Dr. Biruk Habteselassie, resigning from Active Staff, Department of Family & Community Medicine
Dr. Rizwana Lilani, resigning from Courtesy Staff, Department of Family & Community Medicine
Dr. Robert Madronich, resigning from Courtesy Staff, Dept of Surgery, Division of Plastic Surgery
Dr. Nancy Moran, resigning from Courtesy Staff, Department of Anesthesia
Dr. Sury Naidoo, resigning from Courtesy Staff, Department of Psychiatry
Dr. Kevin O’Grady, resigning from Courtesy Staff, Department of Surgery, Division of Plastic Surgery
Dr. Philip Perna, resigning from Courtesy Staff, Department of Anesthesia
Dr. Menaka Rajasingham, resigning from Courtesy Staff, Department of Anesthesia
Dr. Kalpa Shah, resigning from Courtesy Staff, Dept of Medicine, Division of Hospital Medicine
Dr. Jack Speirs, resignation from Courtesy Staff, Department of Diagnostic Imaging
Dr. Vivian Xia, resigning from Active Staff, Department of Family & Community Medicine

Respectfully submitted,

Dr. Steven Beatty
Chief of Staff & Chair of MAC