

CHIEF OF STAFF AND MEDICAL ADVISORY COMMITTEE

**REPORT TO ANNUAL MEETING
SOUTHLAKE REGIONAL HEALTH CENTRE BOARD OF DIRECTORS
June 21, 2023**

Chairman of the Board, Directors, Ladies and Gentlemen, I am pleased to present my first Annual Report as Chief of Staff at Southlake Regional Health Centre.

First and foremost, I would like to share my heartfelt thanks to all the staff at Southlake for their unwavering support towards enabling my success in transitioning to the COS role. The last several years have been immensely challenging with the pandemic, with many of the effects and ongoing experiences still very prevalent in our day to day function. While much of our community has returned to life as they knew it before the pandemic, within the hospital our practises remain guided by COVID-19 ongoing and secondary effects. We all recognize that the new normalcy will never be the Southlake pre-pandemic, but with this has come tremendous learning, change, improvements, and collaboration, both within and across the Healthcare System.

The pandemic years have been very tiring and difficult for our staff, resilient as they are. We are still recovering personally and professionally, separate from the clinical services backlog. No one is immune to these experiences. Each of our staff support and recognize this in each other, and look to us as leaders to support them, and the organization, further. This we do with tremendous pride: be there for each other, ensure accountabilities despite fatigue, model the behaviours we want to see in others and support the learning for civility, culture, diversity, and equity for all.

Many of our staff, medical staff included, have seized the educational offerings to further develop themselves and support our culture and collaborative inter-professional team function. We have seen the successes in improved relationships, increased attendance at Medical Staff Association meetings, and a strong presence and feeling of comradery at this years' Doctors' Day celebration... truly encouraging and uplifting!

None of this is achievable without the tremendous and dedicated support of the Medical Administration Office. They are truly the unsung heroes of the successes achieved annually by the COS. Our Department Chiefs, Division Heads, Physician Leaders, Medical Directors, and Medical Executive Staff all dedicate incredible amounts of time to achieve the progress made.

The Executive Leadership Team has not only welcomed my joining the Team, but demonstrated full support in working towards our goals, especially where I needed their advocacy to advance care needs or medical staff support. Navigating the newness of a COS and VPMA was done with collaboration, value, and shared visioning on how each role strengthens Southlake.

We are in the business of leading and supporting healthcare excellence for our community. While we saw the call to action in our staff at the onset of the pandemic, we equally witnessed this intense support throughout the Pediatric Surge. All our programs collaborated to support the 14+yo pediatric population in need of ICU care. Speaking as a pediatrician, this was unprecedented, but as a COS it demonstrated the deep commitment our colleagues have to each other, and to our community, in a time of great need. To say that our adult specialists were trepidatious in supporting this care is an understatement, but with collaborative support and education from our Pediatricians and SickKids, the entire experience was medicine at its best.

Several of our clinical programs have undergone review this year, to not only grow and strengthen how they function within the hospital, but also within our community and with our external partners. Many have advanced their Departments/Programs with recruitment to build capacity or create new subspecialty expertise; cardiology, cardiovascular surgery, anesthesia, hematology, neurology, pathology, to name a few, as well as expansion of our adult inpatient mental health unit with 13 new funded beds. Despite this, we still have opportunities in our Human Health Resource planning to seek additional medical staff from a variety of specialties.

Additionally, we have numerous longstanding staff, whose career of dedication exemplifies the strengths of Southlake. To those who have retired this year, we are immensely grateful for their lifetime of commitment and compassion to their patients, and to our new recruits, we look forward to many years of excellent experiences as they build their careers.

As the latter part of my first year as Southlake's Chief of Staff approaches, I wish to express my heartfelt gratitude to all those who gave me the opportunity, and everyone who has supported such a positive transition and experience. #the power of many, #by your side, #always with compassion

Physician Leadership

Thank you to the following leaders for their dedication and service to Southlake. Terms have ended or are ending for:

- Dr. Elaine Bouttell, Division Head, Medical Oncology (1.5 years)
- Dr. Jeremy Cohen, Division Head, Cardiology (4 years)
- Dr. Christopher Coutinho, Chief of Anesthesia (1.5 years)
- Dr. Eda Deliallisi, Division Head, General Surgery (2 years)
- Dr. Alan Lossing, Division Head, Vascular Surgery (10 years)
- Dr. David Makary, Chief of Family & Community Medicine (6 years)
- Dr. Brian Stotland, Division Head, Gastroenterology (10 years)
- Dr. ZaeV Wulffhart, Medical Director, Medical Education (12 years)

Retirements

I would like to recognize the following medical staff members that have dedicated years of service to our hospital and community. Their many years of service are a true testimony of their loyalty to the organization.

Dr. Tim Barbetta, retired from Courtesy Staff, Department of Family & Community Medicine & Department of Surgery, Division of Surgical Assistants effective June 1, 2023. (42 years of service)

Dr. Michael Brennagh, retired from Courtesy Staff, Department of Psychiatry effective December 31, 2022. (43 years of service)

Dr. Gayle Climpson-Kennedy, retired from Active Staff, Department of Family & Community Medicine effective March 31, 2023. (39 years of service)

Dr. Sam Henein, retired from Active Staff, Department of Family & Community Medicine effective August 31, 2022 (20 years of service)

Dr. John McKee, retired from Courtesy Staff, Department of Diagnostic Imaging effective January 31, 2023. (36 years of service)

Retirements Continued...

Dr. Margaret Voorpostel, retired from Department of Family & Community Medicine & Department of Surgery, Division of Surgical Assistants effective June 1, 2022. (30 years of service)

Dr. Linda Wong, retiring from Active Staff, Department of Family & Community Medicine resigning as of July 12, 2023. (30 years of service)

Legacy Staff

The following members of the Professional Staff are retiring from practice and have been a long-standing members of the Professional Staff for 30 years or more. The members have requested to maintain an affiliation with the Hospital after dedicating their career to providing care to the local community. Joining the Legacy staff are:

Dr. Sheldon Baryshnik, Legacy Staff, Department of Medicine, Division of Neurology, as of June 30, 2023 (44 years of service)

Dr. Leslie Landecker, Legacy Staff, Department of Surgery, Division of Ophthalmology as of June 30, 2023 (39 years of service)

Dr. Jerry Naiberg, Legacy Staff, Department of Surgery, Division of Otolaryngology as of June 30, 2023 (30 years of service)

Dr. Jack Symmes, Legacy Staff, Department of Medicine, Division of Cardiology as of June 30, 2023 (45 years of service)

Dr. Henry Wang, Legacy Staff, Department of Medicine, Division of Endocrinology as of June 30, 2023. (36 years of service)

ITEMS FOR INFORMATION FOR THE GENERAL MEDICAL STAFF:

Addressing Incivility

Ms. Kelly McShane, Organizational Culture Specialist & Psychologist, gave an introduction on her role to the MAC. Over the past few weeks she has been observing the culture at Southlake and meeting with staff to hear their concerns. She is here to improve the incivility amongst the staff. Ms. McShane has already identified some gaps in our rules as well as lack of knowledge on what incivility is. Workplace policies will be revised to incorporate civility. She is working on establishing expectations of leaders and of staff when incivility occurs. Unit leads will be trained to implement interventions and provide organizational support. She is putting together a response plan on next steps when incivility does happen. The goal is to foster respect and inclusion at Southlake.

Administrative Days for Leadership

The difficulty of balancing administrative time with clinical work and personal time for physician leadership is an ongoing concern. Virtual meetings have some benefits but also invaded what we previous knew as personal time. There is consideration to set a few dedicated administrative days a month so that meetings do not interfere with clinical or personal time. Administrative leadership positions bring a high level of stress and challenges. To ensure everyone is getting a chance to disconnect and improve their mental health and wellness, some order of meetings is required. A survey was completed by Chiefs and Physician Leaders on their preferred administrative times. The survey results will be shared at the June MAC meeting.

Committee Structure Review

The proposal for a new committee structure was presented to the MAC for their feedback by John Marshman and Shannon Brett. They were provided with the BIG report to give background and context on the restructuring of committees and leadership work being done. Initially the BIG report was to bring advocacy in the need for financial funding, however, COVID-19 impacted the hospital data that would affect the outcome of the report. The scope of the BIG report was then changed to look at committee structures and roles and responsibilities of leadership within the hospital. The report recommendations included review of the committee reporting structures and their purpose, as well as the roles and responsibilities of the all leadership to ensure we are working to full scope. How committees align with work flow along with appropriate decision making and approval levels were reviewed. Committee meetings will be about problem solving and decision making, rather than information sessions and will have a clear purpose, scope and accountability.

Prior to COVID, there was discussion of splitting the Quality, Utilization & Resource Management Committee (QURM) into two separate committees; one being a quality committee and the other being a utilization and resources committee but was never executed as QURM was halted. Quality has been the main focus in recent years and focus on utilization of resources would be beneficial to the hospital. MAC supports the new the Operations Committee and Quality Committee and would like to move forward with these meetings. Chain of accountability and structure will be defined between the Chief of Staff role and the Vice President of Medical Affairs role within the main committees. Reorganization of the reporting structure and changes to the Professional Staff Bylaws will be paused until these two meetings have had a chance to evolve.

CPSO – Quality Improvement Partnership Proposal

Dr. David Finkelstein, Physician Engagement Lead at the College of Physicians and Surgeons of Ontario, presented a quality improvement partnership proposal to the Medical Advisory Committee. The proposal would introduce quality projects for physicians within the hospital that would account for quality auditing purposes that are legislated by the Regulated Health Professionals Act. Previously this process was the Quality Assurance Regulation (QA) and conducted randomly once in a 10 year period for a physician’s clinical practice and on care provided in the past. The Quality Improvement Program (QI) is now every five years. It will provide ongoing practice improvement for future care, is a self-guided process of learning, measuring, and improving.

Most recently, family physicians have been participating in the QI program individually or as groups (Family Health Teams). The College is now seeking physicians in the hospital setting to conduct quality projects for this program. For the physicians, these projects help improve their patient clinical practice, help understand gaps, and the time can be used for level 3 credits for continuing medical education (CME). For the hospital, the Excellent Care for All Act requires hospitals to have quality improvement projects. The hospital can tailor the quality project work to align with their strategic direction. Some upfront administrative work is required to start the projects. The Chief of Staff and Vice President of Medical Affairs will discuss the impact of the QI projects and how to support the physicians with this initiative.

Critical, Never Event & Near Miss Incident Updates

Lorri Eckler, Manager of Quality, provided MAC with regular updates on critical incidents, never events and near miss incidents that occurred over the past year. There Quality of Care Committee reviews the incidents, classifies them as critical, never event or near misses and then provides recommendations. MAC was updated on the implemented recommendations as well as informed on the number of incidents that are ongoing. The number of incidents submitted through Safepoint and are being reviewed have increased, however, the number of never events has dropped over the past three years.

Critical Process

MAC members were asked to share the process for Critical with their department members. They were also reminded that during a redirect, physicians on-call at the affected hospital are accountable for continuing to respond to requests to provide consultation.

Cardiac External Review Recommendation

Dr. Peniston provided MAC with an update on the Cardiac Program external review. There were 34 recommendations that the program is working to implement. A number of groups have been working to implement the action items from the Cardiac external review. Much behind the scenes work has been led by the Interim Physician Leader, Regional Cardiac Program and Director of Cardiac Care & ICU. The #1 recommendation of the external review is that a Heart Health Department be developed to create greater strength in the Division. This has been approved. The group will now recruit a Department Chief to lead some of the initiatives. This will kick start the framework of the recommendations and make it easier to grow and build the department with accountability and responsibility. Physician Leadership redevelopment is ongoing within Cardiac. The recommendation of the leadership working group is to have a Department Chief, Deputy Chief (possibly) and Division Heads. An Operations Committee will meet once a month to review how the program functions and its coordination with other programs. Clinical Service Teams will continue as is. The new Department will consist of cardiologists, cardiovascular anesthesiologists and cardiac surgeons.

Leadership Courses for Physicians

In September 2022, Emma Buckingham, Manager of Organizational Development, shared the in-house courses offered at Southlake. Crucial Conversations, Crucial Accountability, Leading Change, and Leading with Emotional Intelligence are a few courses offered through the Physician Leadership Institute but now can be obtained through Organizational Development.

Rotman School of Management at the University of Toronto has partnered with Southlake for a Southlake Rotman Leadership Academy. Starting this September 2023, Physician Leaders, Chiefs and Directors will participate in five two-day modules over nine months to grow their leadership skillsets. It will also help building relationships and networking.

Financial Update

Richard Tam, Interim Chief Financial Officer, provided the MAC with a hospital budgetary update on the February financial results. The Finance Department continues work on the year-end financial results and are hopeful to have them complete by the end of June. As of February, the hospital deficit was \$9.4M, which is approximately 2.2% to the Ministry line. Many one-time funding letters were received due to COVID to help offset costs.

IV Pumps

Sarah Alisch joined MAC to provide clarification on the changes to the drug library for the new IV pumps. The group continues to optimize changes to the drug library software. When staff identify an issue with the pumps, they are to inform their nurse educator, who will then enter the issue into the Drug Library Change Request form. The new IV pumps have much more to offer than the previous ones including the ability to provide patient safety data.

Paging System – Page to Text

Rogers eliminated their page to text services in February and our current paging system was at end of life. As such the hospital moved forward with the online application Hypercare as a communication system for clinical care. The escalation policy for paging is also being reinvigorated for awareness but also to add timelines for escalation. Rollout for Hypercare began in April and the expectation is that all medical staff with hospital duties are now using the Hypercare app.

Paediatric Surge

All hospitals saw the largest surge of paediatric cases in history. This is due to an influx of RSV, flu and viral infections in the paediatric population. Nursing staff was a challenge as the Paediatrics group has always been small, making it difficult to provide these specialty services during a surge. Ontario Health's directive required community hospitals with paediatric services to step up to 150% baseline capacity. The number of pediatric cases admitted to Southlake surged through the month of December through February. Of funded beds we saw 120-170% bed capacity on the pediatric units. To manage the surge, paediatric on-call presence increased in the hospital as well as 7-day a week paediatric hospitalist coverage. Twenty-one physical paediatric beds were available and a NICU satellite space was created. An early newborn discharge program was formed in the Midwifery program; our family medicine residents were redeployed; pediatric elective surgeries were paused; adolescent surgery inpatients were managed on the surgical units, and adolescent inpatients requiring ICU support were managed in the ICU. The Ontario Critical Care COVID Committee approved management of patients 14+ or 50kg+ in adult critical care beds. Connections with external resources such as Sickkids and the GTA Paediatric Chiefs were an asset, as well as the IMS table for paediatric transfers between hospitals. Recovery is the Ontario Health direction on surge care with support for the surgical backlog as a priority. Pediatric care is now manageable and our ENT surgeons have returned to unrestricted work.

PCI Reopening

The Percutaneous Coronary Intervention Unit closed during COVID and was being used as a holding area for transfers. The Director of the Cardiac Program has recruited nursing staff for the unit and retrained them. The PCI Unit reopened in April.

Pulse Survey

The pulse survey results were reviewed by the MAC. Discussion on engaging the medical staff to participate in these surveys took place. Senior Leaders reinforced support for hearing the physician voice and that all feedback is appreciated.

Quality Improvement Plan 2023-24

The development of the 2023-24 Quality Indicators was shared with MAC. This process will be ongoing until April 1, 2024. Guiding principles were provided to ensure alignment with the strategic goals. Some previous indicators are being removed but continue to be monitored. Those include: medication reconciliation at discharge; workplace violence incidents; two patient identification; and information on discharge.

Quality of Care Teleconference

Dr. Charmaine van Schaik and Sarah Alisch provided MAC with an overview on the new initiative for quality of care reviews, which began in June 2022. These 15 minute focused teleconferences bring all those involved together to decide on whether the incident requires a program review or quality of care review. Managers and Clinical Service Managers were educated on the criteria to call a teleconference. They will collect the information and check in with the Chief/Division Head of the Department ahead of the teleconference. A quality of care checklist is available to help guide next steps. Ideally this initiative will provide a safe space for conversation for the team involved. This new change in practice whereby a teleconference is held the day after a death, severe harm or moderate safety concern is identified has proven to be successful. These are meant to be a systems approach rather than finger pointing. The purpose is have an opportunity to explore what occurred and get to the recommendations. Physicians are encouraged to enter in Safepoint. It was requested that the director or manager of the area responsible for the call loop back to the physician who enters the Safepoint.

Revised Rules & Regulations: 7.4.1 Reappointment During Leave of Absence

MAC and the Board of Directors have approved a change to the Professional Staff Rules & Regulations, whereby the requirement to complete the annual reappointment will change from 30 days after their leave ends to completing the reappointment while on leave. This will align with our online process which requires a close date to move to the next reappointment cycle. The new rule is as follow:

“Where a member of the Medical Staff is on an approved leave of absence during the time for making an application for reappointment, the online application shall be completed, processed and reviewed as per approved reappointment process.”

SACU Transition Update

Leadership for the Surgical Acute Care Unit (SACU) has moved from multiple Divisions to the Department of Anesthesia effective September 6, 2022. Historically, the SACU consisted of four surgery beds and two anesthesia emergency beds for the surgical program. Surgical leadership reevaluated and recommended a change due to lack of critical care capacity. The plan was to review the transition after one month and again after six months and address any concerns that arose. The Anesthesia group now manages the patients initially admitted to the SACU. Having a fast tracking ability to admit to the SACU saves on ICU beds. Benchmarking has been done with other hospital sites in the province and have resulted in similar results. Overall there have been change management issues but the surgical program is working through them. The transition has taken time because of the learning curve including a large turnover in surgical nursing. The program is looking at becoming a Level 2 Critical Care centre and further decant critical care services.

Southlake Email Use for Active & Associate Staff

In September 2021, MAC supported the use of Southlake email for all Active and Associate staff for conducting Southlake business. Fifty percent of medical staff continue to use an alternate email, which is a risk for privacy but also makes it difficult for those in the hospital to reach them. MAC is in agreement with enforcing the use of Southlake email for Active and Associate staff and as such, the Medical Staff Office will begin the process as of April 1, 2023. A communication was sent to the medical staff which includes education on how to change a network password and multi-factor authentication. Courtesy and Locum staff will continue to use their preferred email address but this may change in the future.

2023-24 MEDICAL LEADERSHIP

Medical Staff Executive:

Office of President	Dr. Eddie Chan, Emergency Medicine
Office of Vice-President	Dr. Kira Tone, Anesthesiology
Office of Secretary/Treasurer	Dr. Tatiana Conrad, Medicine, Radiation Oncology

Department Chiefs:

Department of Anesthesiology	TBD
Department of Complex Medical Rehabilitation	Dr. David Srouf
Department of Diagnostic Imaging	Dr. Philip Buckler
Department of Emergency Medicine	Dr. Gaurav Puri
Department of Family & Community Medicine	Dr. Mina Moussa
Department of Laboratory Medicine	Dr. Syed Kazimi
Department of Medicine	Dr. Shahzad Qureshi
Department of Obstetrics	Dr. David Rouselle
Department of Paediatrics	Dr. Arif Manji
Department of Psychiatry	Dr. Mahdi Memarpour
Department of Surgery	Dr. Sara Temple

Division Heads (Surgery):

Division of Cardiac Surgery	Dr. Stacy O’Blenes
Division of Dentistry	Dr. Ford Moore
Division of General Surgery	Dr. Frank Eng
Division of Gynaecology	Dr. Peter Watt
Division of Ophthalmology	Dr. Baseer Khan
Division of Orthopaedic Surgery	Dr. Patrick Gamble
Division of Otolaryngology	Dr. Taryn Davids
Division of Plastic Surgery	Dr. Bimpe Ayeni
Division of Surgical Assistants	Dr. Ian Soutter
Division of Thoracic Surgery	Vacant
Division of Urology	Dr. John Preiner
Division of Vascular Surgery	Dr. Lukasz Boba

Division Heads (Medicine):

Division of Cardiology	Dr. Remo Zadra (Interim)
Division of Critical Care Medicine	Dr. Steven Segal
Division of Endocrinology	Dr. Sunil Juta
Division of Gastroenterology	Dr. Andrea Faris
Division of Geriatric Medicine	Dr. Youmna Ahmed
Division of Hospitalist Medicine	Dr. Howard Gerson
Division of Infectious Diseases	Dr. Michael Lingley
Division of Medical Oncology	Dr. Amira Rana
Division of Neurology	Vacant
Division of Palliative Medicine	Dr. Alisha Kassam
Division of Radiation Oncology	Dr. Charles Cho
Division of Respiriology	Dr. Moiz Zafar
Division of Rheumatology	Dr. Nadil Zeiadin

Division of Midwifery	Ms. Carolyn Scott
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PHYSICIAN RECRUITMENT

Medical Manpower Requests (Form As)

The following Medical Manpower Requests were approved by MAC from June 2022 to May 2023:

- Medical Human Resource – Form A: Additional Anesthesiologists – General (2)
- Medical Human Resource – Form A: Additional Cardiologist - Electrophysiologist
- Medical Human Resource – Form A: Additional Cardiologist – General (2)
- Medical Human Resource – Form A: Replacement Cardiologist
- Medical Human Resource – Form A: Additional Emergency Physician
- Medical Human Resources - Form A: Replacement Infectious Disease
- Medical Human Resource – Form A: Additional Neonatologist
- Medical Human Resource – Form A: Additional & Replacement Neurologists
- Medical Human Resource – Form A: Replacement Pathologist
- Medical Human Resource – Form A: Replacement Pathologist Part Time (0.4FTE)
- Medical Human Resource - Form A: Additional Plastic Surgeon
- Medical Human Resource – Form A: Additional Psychiatrist - Adult
- Medical Human Resource – Form A: Additional Radiation Oncologist (0.8 FTE)
- Medical Human Resource – Form A: Additional Respiriologist
- Medical Human Resource – Form A: Additional Rheumatologist
- Medical Human Resource – Form A: Additional Vascular Surgeon

Active Search & Selection Process for the Following:

- Cardiologists – General / Electrophysiologist / Rehab
- Critical Care Intensivist
- Dermatologists
- Geriatrician
- Infectious Diseases Specialist
- Neonatologist
- Neurologist
- Pediatrician - General
- Plastic Surgeon
- Psychiatrists – Adult / Child & Adolescent
- Radiation Oncologist
- Respirologist
- Vascular Surgeon

Selection Committee Recommendations

The following Selection Committees occurred between June 2022 to May 2023:

- Adult Psychiatry Selection Committee – June 28, 2022
- Anesthesiology Selection Committee – September 7, 2022
- Urologist ACS Selection Committee – September 28, 2022
- Emergency Physician Selection Committee – October 27, 2022
- Orthopaedic Surgeon Selection Committee – November 8, 2022
- Rheumatology Selection Committee – November 30, 2022
- Cardiac Surgery Selection Committee – December 1 & 5, 2022 & January 10, 2023

- Cardiology Selection Committee – December 12, 2022
- Hematology Selection Committee – January 24, 2023 & February 16, 2023
- Neurology Selection Committee – March 27 & 30, 2023
- Pathology Selection Committee – April 6, 2023
- Neurology Selection Committee – May 8, 2023
- Pathology Selection Committee - May 9, 2023

MEDICAL STAFF CREDENTIALING

Southlake Regional Health Centre welcomes our new Associate Staff:

Dr. Salman Anwar	Associate	Medicine, Division of Rheumatology
Dr. Justin Chow	Associate	Medicine, Cardiology (start date Aug 1/23)
Dr. Kammie Chow	Associate	Obstetrics & Gynecology
Ms. Meganne-Odile Coyle	Associate	OBGYN, Midwifery with Pediatrics for newborn care
Dr. Cesar Garcia	Associate	Psychiatry
Dr. Grigoriy Ikonnikov	Associate	Emergency Medicine
Dr. Arash Kashfi	Associate	Surgery, General Surgery
Dr. Silas Lamb	Associate	Family & Community Med & Surgery, Surgical Assistants
Dr. Michael Liauw	Associate	Medicine, Palliative Care
Dr. Jeffrey McCormick	Associate	Family & Community Medicine
Dr. Mina Moussa	Associate	Family & Community Medicine
Dr. Mouhannad Sadek	Associate	Medicine, Cardiology (Electrophysiology)
Dr. Sidharth Saini	Associate	Diagnostic Imaging
Dr. Alexandre Sebaldt	Associate	Anesthesia
Dr. Jordan Scott	Associate	Medicine, Medical Oncology (Hematology)
Dr. Marianne Stroz	Associate	Diagnostic Imaging
Dr. Swathy Sudhakar	Associate	Medicine, Hospital Medicine (GP Hospitalist)
Dr. Hin Yu Vincent Tu	Associate	Surgery, Urology, for providing Acute Care Surgery coverage
Dr. Ian Whatley	Associate	Surgery, Orthopaedic Surgery

Community Staff:

Dr. Daniel Robinson	Community	Family & Community Medicine
Dr. Abdul Shaikh	Community	Medicine, Neurology
Dr. Brian Taylor	Community	Family & Community Medicine

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

Dr. Andre Charest	Courtesy	Medicine (Nephrology)
Dr. Andrew Czarnecki	Courtesy	Medicine, Cardiology
Dr. Andrew Di Pierdomenico	Courtesy	Surgery, Urology
Dr. Stephen Flindall	Courtesy	Family & Community Medicine and Surgery, Surgical Assistants
Dr. Mary Mathews	Courtesy	Medicine, Hospital Medicine (GIM)
Dr. Nicola Matthews	Courtesy	Medicine, Nephrology
Dr. Ali Sabri	Courtesy	Diagnostic Imaging

The following additional credentialing occurred from June 2022 to May 2023:

- 73 Locums
- 44 Locum Extensions/Renewals
- 31 Change in Status/Privileges
- 184 Medical Students, Residents, Fellows & Observers

RESIGNATIONS

Dr. Dennis Boparai, resigned from Courtesy Staff, Department of Diagnostic Imaging as of June 30, 2022
Dr. Elaine Bouttell resigned as Division Head of Medical Oncology as of November 30, 2022
Dr. Jeremy Cohen resigned as Division Head of Cardiology as of September 20, 2022
Dr. Crystal Kavanagh resigned as Division Head of Thoracic Surgery as of November 30, 2022
Dr. Carolyn Teng, resigned from Active Staff, Department of Surgery, Division of Cardiac Surgery as of Sept 30, 2022
Ms. Jacqueline Thiessen, resigned from Active Staff, Department of OBGYN, Division of Midwifery as of January 9, 2023

DID NOT REAPPLY FOR PRIVILEGES FOR YEAR JULY 1, 2023 – JUNE 30, 2024:

Dr. Mahmud Almadani, Courtesy Staff, Department of Pediatrics
Dr. Mary Bell, Courtesy Staff, Department of Medicine, Division of Rheumatology
Dr. Theresa Cummings, Active Staff, Department Anesthesia
Dr. Giovanni Di Costanzo, Courtesy Staff, Department of Surgery, Division of Urology
Dr. Sahar Ghorayeb, Community Staff, Department of Family & Community Medicine
Dr. Rupinder Johal, Active Staff, Department of Psychiatry
Dr. Ara Kassarian, Courtesy Staff, Department of Diagnostic Imaging
Dr. Edmund Liang, Active Staff, Department of Surgery, Division of Ophthalmology
Dr. Bahareh Motlagh, Courtesy Staff, Department of Medicine, Division of Cardiology
Dr. Thanashan Rajakulendran, Courtesy Staff, Department of Medicine - Dermatologist
Dr. Ali Sabri, Courtesy Staff, Department of Diagnostic Imaging
Dr. Erik Fangzheng Yao, Active Staff, Family & Community Medicine & Surgery, Division of Surgical Assistants
Dr. Jonathan Yip, Courtesy Staff, Department of Surgery, Division of Otolaryngology
Dr. Keith Matthew, Active Staff, Department of Family & Community Medicine
Dr. William Reginold, Courtesy Staff, Department of Diagnostic Imaging

CPSO SUSPENSION OF PRIVILEGES:

Dr. Wameed Ateyah from Active Staff, Department of Family & Community Medicine (as of April 6, 2021)

DOCUMENTS APPROVED BY THE MEDICAL ADVISORY COMMITTEE

The following documents were approved between June 2022 to May 2023:

- Medical Advisory Committee Terms of Reference 2022-23
 - Medical Staff Committees Reference List 2022-23
 - NOVUMIQ IV Smart pumps Drug Library
 - Policy & Procedure: Pharmacist Adaptation
 - Policy: Novel Precautions
 - Procedure: Radial Arterial Line - Insertion of by a Respiratory Therapist or Certified Clinical Anesthesia Assistant
 - Professional Staff Human Resources Plan for 2023
 - 26 - Drugs & Therapeutics Committee Recommendations
 - 27 - Order Sets
 - 8 - Medical Directives
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Respectfully submitted,
Dr. Charmaine van Schaik
Chief of Staff & Chair of MAC