RENAL PATIENT AND FAMILY ADVISORY COUNCIL
Virtual WebEx MEETING MINUTES
Tuesday January 11th, 2022
4:00pm to 6:30pm

In Attendance: Ashley Papathanassiou (Facilitator), Kathleen Anderson (Chair), Don Bester (Manager), Deb Beaupre, Dr. Rehman

Minutes: Ashley Papathanassiou

Guest Speaker(s): Sara Hendrix's, Shari Sherwood, & Clarence MacDonald-Weins: Virtual Care Appointment Software

Regrets/Absent: Terri Chanda, Kathy MacKay, Cathy DuVal, Pamela Ireland, April Herod,

	Agenda Item	Discussion	Motion/Action Plan/ Follow-up
1.0	1.1 Welcome	Happy New Year everyone!	
	1.2 Guest Speakers	Guest Speakers: Sara Hendrix's, Shari Sherwood, & Clarence MacDonald-Weins: Virtual Care Appointment Software	- Shari will follow up with us when updates come up.
		Clarence & Shari: WebEx is quite a time-consuming workflow for clerical staff to set up appointments, taking an average time of 3-5mins. This new program creates the details automatically and reducing booking time to less than 30 seconds. Accessibility is also improved, and doesn't require any log-in or profile creation on the patient front. This is also an approved software to use for clinical appointments from the Ministry.	

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		Clarence: WebEx integrated software. A more patient friendly version that increases the accessibility for virtual meetings on both the patient and corporate side. Provides the ability to invite your family member/care giver to your appointment by forwarding the email with appointment details. Virtual care system provides patients a reminder to view their appointment details, and details for how to join. Once joined on, there is a patient "waiting room" that gives a countdown to appointment and the details of your appointment. The program walks the patient through testing video and audio prior to starting the meeting, and offers chat options similar to regular WebEx once in the meeting. Physician is able to update patient with status, example: "stepped out" "meeting over" etc. Reminder emails are sent to patients prior to appointment date. Email includes all WebEx details, and provides opportunity to add appointment automatically to calendar on smart phones or computers. The software does require both video and audio, patients with no video would require use of the older version of WebEx appointments to join via audio only. Dr. Rehman enquired about delays/lag time in the presentation. Clarence confirms that when used outside of the test environment, the software runs more quickly and smoothly. No software download is required, can be used in any work environment, either in clinic or from home for both the health team and the patient. Accessible via smart phone, desk top, or lap top. When will this be available in Nephrology: Shari – reports being completed for finance and functional reports. Once that is done, it can be provided for approval for use in Renal. Due to programming needs, probably looking at a few months before it is in place. Possibility we could utilize program to replace OTN in the future. Meetings can be left "running" if allied health wants to join room while physician is busy or done with the appointment. The health team member would need to disclose who they are when joining, as it will not specify who is in room at each time.	

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		Shari: Still waiting on approval for Patient Portal use in the program. Will update us once she can.	
		- Dr. Rehman asked after presentation: How do you as patients feel about the virtual clinic appointments? Deb: prefers in-person visits. Haven't seen most healthcare providers for some time due to virtual appointments. Feels like the WebEx option is better than telephone, as it adds the face to face. Kathleen: WebEx huge improvement from telephone visit, but feels at least an annual visit in person would be important to have a really assessment of how the patient is doing. Overall feeling: important to have family members/care givers present. Important to have face to face visit at least at some point through the year to visualize patient. PFAC wanting to advocate, possibly submit a letter of suggestion for Renal Exec. Don: Challenge is restrictions for clinical settings are based on provincial mandates and recommendations. Program is looking at strategies for patient management and clinical planning. Focus right now being on emergency management of COVID numbers and admissions. Still trying to determine what services and capacity will look like going forward.	- Ashley to poll council for buy in for letter to advocate for in-person visits. If council is in favour, Kathleen to write letter, submit to Don/Renal Exec.
	1.3 Meeting Minuets from Dec.	- Meeting minuets not sent for December. (Apologies).	- Ashley to send mins.

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2.0	*Items:* 2. Co-Chair Election: Previous Group Discussion – Confirmation of Delegate 3. Valentines celebration/Thank you to staff/patients:	- Deb's name put forth. Ashley and Deb to have a further discussion regarding role. Big Valentine for each site.	- Confirmation to be provided in Feb meeting. - Ashley to create
3.0	3.1 Kronicle 3.2 World Kidney Day Update on items	- Winter edition approval. - Look at holding table at Vic, higher volume of traffic. Need to ensure we are able to do so with COVID numbers/restrictions.	- Approved. - Ashley to reach out about setting table up. Will do so in Feb to let COVID settle a bit.
4.0	4.1 Indigenous Engagement Update 4.2 Renal Exec.	- No Updates. - No Updates. - Ashley working on quantitative review of transplant process: Initial review is done. Focus now on updating all files, then putting in process changes based	- -

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	4.3 Transplant Work Up Desk Assessment	on stakeholder recommendation. PFAC's recommendations of info package, and touch points were well received. Once package created, PFAC will be consulted prior to putting out to patients.	- Ashley to provide update as things progress
5.0	***Upcoming Meetings***	**Next Meeting Date:** Tuesday February 9th ***Up-Coming Meeting dates***: Tuesday March 8th Wednesday April 5th Tuesday May 10th Wednesday June 8th	