

Board of Directors Regular Board Meeting January 11, 2017 MINUTES

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Approved – March 8/17

Present:	Ed Enge ©; Brent Boyko – VC; Marlene Davidson, Sheron Suutari, Doug Moynihan, CEO; Tina Selman, Financial Services Manager, Jennifer Learning, CNO; Dr. Joanne Spencer , COS
	Guests: Jeff Lehman, Karen Lusignan
Absent:	Jeremy Dickson; Dr. Van Der Loo

Recorder: Bonnie Clairmont

	Action Req'd/Dat
1. INTRODUCTION OF GUESTS	Neq u/ Da
E. Enge introduced Jeff Lehman and Karen Lusignan to the Board. Jeff and Karen have shown interest in joining the Board. Ed welcomed them to the meeting.	
2. <u>PRESENTATION- M. Cornell, Risk Management</u> M. Cornell shared a powerpoint presentation outlining the Risk Management policy, the goals and objectives of Risk Management and also the sources of risk information. An effective Risk Management Program should proactively identify and mitigate risk, leading to improved patient safety, quality of care and service while maintaining the integrity of the organization. We strive to achieve this by ensuring all applicable best practice standards and recommendations are in place, doing audit reviews and using performance indicators from Health Quality Ontario. We are currently trying to get more hospital departments involved in preparing QIPs (Quality Improvement Plans). M. Cornell and J. Learning responded to a question regarding the Patient Advocate Committee at AGH.	
3. <u>CALL TO ORDER</u>	
E. Enge chaired and called the meeting to order at 5:13 pm.	
4. <u>DECLARATION OF CONFLICT OF INTEREST</u> None declared.	

		Action Req'd/Dat
5.	AGENDA	
Th	e agenda was reviewed and accepted as presented.	
м	OTION: B. Boyko/S. Suutari	
	"That the Board approve the agenda for January 11, 2017."	
	CARRIED 2017-001	
6.	CONSENT AGENDA	
Th	e Consent Agenda was reviewed with the following changes requested:	
	move page 14 and a spelling correction on page 16. On reviewing the	
	onsent Agenda the following items were discussed:	
	Suutari asked about her position on the Program Advisory Committee	
	nd was informed that the committee would notify her of upcoming	Bonnie sen
	eetings. M. Davidson asked about the results of the LTC inspection. That port is now available on-line. Bonnie will forward to Board members for	LTC Report
	eir review. M. Davidson asked whether we had seen a drop in falls at	Board
	e hospital to which J. Learning informed the board that we had not;	
	owever, we have started a "Catch a Falling Star" program. The	
CO	mmittee meets to discuss possible solutions, policies and procedures,	
	acks falls and does a debriefing after falls occur. D. Moynihan reported	Doug to
tra th	acks falls and does a debriefing after falls occur. D. Moynihan reported at we received data today on Travel Grants which will be analyzed by	report on
tra th se	acks falls and does a debriefing after falls occur. D. Moynihan reported at we received data today on Travel Grants which will be analyzed by nior management and reported to the Board. The drop in staff flu shots	report on
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		Action Req'd/Dat
7.	BUSINESS ARISING	
	Strategic Plan: Formal Approval . E. Enge shared that the Board/Staff did not receive a lot of feedback on the Strategic Plan presented to the community at three separate public meetings.	
	OTION: M. Davidson/B. Boyko	
	hat the new Strategic Plan, Vision, Mission and Values be formally proved and implemented." CARRIED 2017-003	
чр		
8.	STRATEGIC DISCUSSION	
	8.1 Report from the President and CEO	
	See report attached to minutes.	
	D. Moynihan recapped some of the highlights from his report including	
	that the patients were relocated to the new acute wing on December 12 th . Phase 2 construction began December 13 th which has hoarded off	
	all the old acute inpatient rooms in order to rebuild 10 long term care	
	private rooms.	
	AGH senior management met with representatives from the RRDDSAB	
	regarding upcoming changes to services for non-urgent patient	
	transfers. The committee is going to the Ministry for funding to help with this.	
	K. Lusignan is taking the lead on the Health Links project. Karen shared	
	that people in the community that have been identified with four or	
	more chronic diseases will be approached to create a "Coordinated	
	Care Plan" to discuss ways that residents can work towards achieving	
	their goals. Staff from the Family Health Team, Atikokan General	
	Hospital and Community Counselling will meet with residents.	
	D. Moynihan shared the Analysis of Hospital Services for November	
	and December 2016 and noted that the hospital has been full with our	
	acute care occupancy rate up 204.5% in December, 2016 compared to	
	2015.	

		Action Req'd/Date
8.2	Quality/Patient Safety Report by Jennifer Learning, CNO	
See	e report attached to minutes.	
ent pha info ano cor	earning reported that daily huddles have been well received and are nancing patient care. Physiotherapy, Occupational Therapy, armacy, lab, dietitian and telemedicine all come to share ormation with the nursing staff. We have had a couple Mock codes d plan to offer them monthly to give staff the opportunity to ntinue to improve how they all work together as a team when a uma comes into the hospital.	
pro	e finger print scanner in the ER department has not been working operly. We are looking at other options (possibly bar codes) as a cond log-in nurse requirement.	
The	e lab had a temperature and humidity monitoring system installed in	
	cember, 2016 and a significant discrepancy has already been noted	
	he humidity level that had previously been reported now that a	
	ibrated system is in use.	
Dia	gnostic Imaging is experiencing some issues with our new x-ray	
sys	tem. The company we purchased the equipment from has put	
	ether a special group to try to resolve these continuing problems.	
-	are actively looking for a ultrasound technologist to work as a	
	um.	
8.3	Financial Services Manager Report by Tina Selman	
	T. Selman distributed the financial statements for November, 2016.	
	She reported that our cash and investments have decreased about	
	\$300,000 in the past month due to redevelopment costs. These	
	costs will be reimbursed by the Ministry. The long term liabilities	
	remain unchanged. From the Summary of Operations were at a	
	deficit of \$127K at November 30 th . We are still over in nursing salaries by \$100 K due to vacation and overtime.	
	salaries by \$100 K due to vacation and over time.	
9. G	ENERATIVE	
9.1	Report on December 14 th G to G Session	
	E. Enge reported that he, B. Boyko and D. Moynihan attended the	
	session which had good representation with an experienced	
	facilitator. The purpose is to develop local health hubs with Patients	
	First in mind to share ideas on how to improve patient care and	
	build relationships. K. Lusignan from the Family Health Team will be	

	Action Req'd/D
invited to be a part of these sessions. As well we want to work with community organizations (FHT, NWHU, others) to ensure all community input is considered. M. Davidson questioned who the Metis representative was. K. Lusignan asked whether Atikokan would have its own hub.	
9.2 Board Retreat Update	
E. Enge distributed copies of the draft board retreat agenda. The session is scheduled for Friday February 10 th evening and Saturday, February 11 th until noon to be held at the Economic Development Office. Adam Brown, CEO, North of Superior Healthcare Group and Jocelyn Bourgoin, CEO, Manitouwadge General Hospital will make a presentation to the board on establishing community health hubs.	
10. IN CAMERA SESSION	
MOTION: M. Davidson/S/ Suutari	
"That the Board move to an in-camera session of the meeting at 6:03	
pm."	
CARRIED 2017-004	
CARRIED 2017-004	
CARRIED 2017-004	
CARRIED 2017-004 11. <u>RETURN TO OPEN SESSION</u> MOTION: M. Davidson/S. Suutari "That the Board return to an open session of the meeting at 6:20 pm."	
CARRIED 2017-004 11. <u>RETURN TO OPEN SESSION</u> MOTION: M. Davidson/S. Suutari "That the Board return to an open session of the meeting at 6:20 pm." CARRIED 2017-005	
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CARRIED 2017-004 11. <u>RETURN TO OPEN SESSION</u> MOTION: M. Davidson/S. Suutari "That the Board return to an open session of the meeting at 6:20 pm." CARRIED 2017-005 MOTION: M. Davidson/S. Suutari "That the Board approve the In-Camera minutes of November 2, 2016." CARRIED 2017-006 MOTION: S. Suutari/M. Davidson Credentialing:	
CARRIED 2017-004 11. <u>RETURN TO OPEN SESSION</u> MOTION: M. Davidson/S. Suutari "That the Board return to an open session of the meeting at 6:20 pm." CARRIED 2017-005 MOTION: M. Davidson/S. Suutari "That the Board approve the In-Camera minutes of November 2, 2016." CARRIED 2017-006 MOTION: S. Suutari/M. Davidson Credentialing: Locum Appointment	
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		Action Req'd/Da
MOTION: S. Suutari/B. Boyko		-
Credentialing:		
<u>Regional Staff Appointments</u>		
"That the following professi	ional staff	
Dr. Rubens Fernando Barbos		
Dr. Shawn Boyle	Dr. Garud Paska Iyengar	
Dr. Neil Dinesh Dattani	Dr. Andrew Maeng	
Dr. Neil Difesil Dattain	DI. Andrew Macing	
be approved for appointmer	nt to the Regional staff for the remainder	
of the calendar year 2016."	5	
•	CARRIED 2017-008	
MOTION: S. Suutari/M. Davidso	n	
Credentialing:		
Regional Staff Appointment		
"That the following professi	ional staff:	
Ms. Carolyn Gagnon, Nurse P		
	nt to the Regional staff for the remainder	
be approved for appointmer of the calendar year 2016."	nt to the Regional staff for the remainder CARRIED 2017-009	
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of the calendar year 2016."	-	
of the calendar year 2016." MOTION: S.Suutari/B. Boyko	-	
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of the calendar year 2016." MOTION: S.Suutari/B. Boyko Credentialing: <u>Regional Staff Appointments</u> "That the following professi Dr. Sanjay Mahendra Azad Dr. Peter de Bakker	CARRIED 2017-009 ional staff: Dr. Brian Birchenough Ms. Tiffany Green	
of the calendar year 2016." MOTION: S.Suutari/B. Boyko Credentialing: <u>Regional Staff Appointments</u> "That the following professi Dr. Sanjay Mahendra Azad Dr. Peter de Bakker Dr. Sanjoy Kumar Gupta	CARRIED 2017-009 Tonal staff: Dr. Brian Birchenough Ms. Tiffany Green Dr. Mark A. Henderson	
of the calendar year 2016." MOTION: S.Suutari/B. Boyko Credentialing: <u>Regional Staff Appointments</u> "That the following professi Dr. Sanjay Mahendra Azad Dr. Peter de Bakker Dr. Sanjoy Kumar Gupta Dr. Gabriel Mapeso Dr. Michael Scott	ional staff: Dr. Brian Birchenough Ms. Tiffany Green Dr. Mark A. Henderson Dr. Hadia Naqi Ms. Sandra Shymko	
of the calendar year 2016." MOTION: S.Suutari/B. Boyko Credentialing: <u>Regional Staff Appointments</u> "That the following professi Dr. Sanjay Mahendra Azad Dr. Peter de Bakker Dr. Sanjoy Kumar Gupta Dr. Gabriel Mapeso Dr. Michael Scott be approved for appointmer	ional staff: Dr. Brian Birchenough Ms. Tiffany Green Dr. Mark A. Henderson Dr. Hadia Naqi	
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Active Staff Re-appointments	
"That the following professional	staff:
Dr. Vivian Ma	
Dr. Kenneth Sawchuk	
be approved for re-appointment	to the Active staff for the remainder
of the calendar year 2017."	
	CARRIED 2017-011
MOTION: B. Boyko/M. Davidson	
Credentialing:	
Courtesy Staff Re-appointments	
"That the following professional	
Dr. Minoo Bozorgzadeh	Dr. Adrien Chan
Dr. Carlos DeSequeira	Dr. Amir Hossein Faghih
Dr. James Kerry MacDonald	Dr. Mitesh Mehta
Dr. Lise Michelle Mozzon	Dr. Michael Steirman
Dr. Dimitrios Vergidis	
be approved for re-appointment	to the Courtesy staff for the
remainder of the calendar year 2	-
	CARRIED 2017-012
MOTION: M. Davidson/B. Boyko	
MOTION: M. Davidson/B. Boyko Credentialing:	
MOTION: M. Davidson/B. Boyko Credentialing:	CARRIED 2017-012
MOTION: M. Davidson/B. Boyko Credentialing: Locum Staff Re-appointments	CARRIED 2017-012
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MOTION: M. Davidson/B. Boyko Credentialing: Locum Staff Re-appointments "That the following professional Dr. Albert Beller Dr. Monica Carter Dr. Joseph R. Ennett	CARRIED 2017-012 staff: Dr. Kathryn Buddo
MOTION: M. Davidson/B. Boyko Credentialing: Locum Staff Re-appointments "That the following professional Dr. Albert Beller Dr. Monica Carter	CARRIED 2017-012 staff: Dr. Kathryn Buddo Dr. Theresa Frances Clinton
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MOTION: B. Boyko/M. Davidson			
Credentialing:			
Regional Staff Re-appointments			
"That the following professional s	taff:		
Dr. Mohamed Abdel-Hamid, TBRHSC	Dr. Alallam A Alallam, TBRHSC		
Dr. Alireza Bagherli,TBRHSC	Dr. Linda Bakovic,TBRHSC		
Dr. Michael Bartucci,Red Lake MCMH	Dr. Kevin Bezanson, TBRHSC		
Dr. Birubi Rani Biman,TBRHSC	Dr. Dennis Boparai, TBRHSC		
Dr. Russel Clark, TBRHSC	Dr. Mary Anne Cooper, TBRHSC		
Dr. Claude Cullinan, TBRHSC	Ms. Ursula Danner, NP, TBRHSC		
Dr. Eric Davenport,TBRHSC	Dr. Paul Debakker,TBRHSC		
Dr. George Derbyshire, TBRHSC	Mr. Shawn Dookie, NP, TBRHSC		
Ms. Mojgan Dostar, Midwife, TBRHSC	Dr. Kurt Droll, TBRHSC		
Dr. Shiraz Elkheir, Riverside HC Facilities	Dr. Romuald Ferre, TBRHSC	ļ	
Dr. Vivianne Freitas, TBRHSC	Dr. David Greg Gamble, TBRHSC		
Dr. Kenneth Edward Gehman, TBRHSC	Ms. Sara Gleeson, NP, TBRHSC		
Dr. David Gotlib, TBRHSC	Dr. Andrej Habjan, TBRHSC		
Dr. Marlon Hagerty, TBRHSC	Dr. Ayman Hassan, TBRHSC		
Ms. Ashley Hilton, NP, Red Lake MCMH	Dr. Jonathan David Huber, TBRHSC		
Dr. Maria Hudecova, TBRHSC	Dr. Maria Iskhakova, TBRHSC		
Dr. Justin Jagger, TBRHSC	Ms. Sharon C Jaspers, NP, TBRHSC		
Dr. Jon Johnsen, TBRHSC	Dr. Naana Afua Jumah, TBRHSC		
Ms. Barbara Elisabeth Kemeny, Midwife, TBRHSC	Dr. M. Stewart Kennedy, TBRHSC		
Dr. Allan Arthur Gerald Kirk, TBRHSC	Dr. Louise Marian B Knowles, TBRHSC		
Dr. Kalyanapuram R Kothanda Raman, TBRHSC	Dr. Andre Lamy, TBRHSC		
Dr. Kyle Lansdell, TBRHSC	Dr. B Lehmann-Bender, SLMYWHC		
Dr. Bryan Robert MacLeod, TBRHSC	Dr. Stephen McCluskey, TBRHSC		
Dr. Robert G Minty, SLMYWHC	Dr. Rudolf Novak, TBRHSC		
Dr. Ikenna Okorafor, TBRHSC	Dr. Amit Patel, TBRHSC		
Dr. Judy Patterson, TBRHSC	Dr. Jubin Bijan Payandeh, TBRHSC		
Dr. Mark Polle, Red Lake MCMH	Dr. Gordon A Porter, TBRHSC		
Dr. Laura Power, TBRHSC	Dr. Seda Rafilovich, TBRHSC		
Ms. N. Quevillon-Dussault, Midwife, TBRHSC	Dr. Kevin Ramchandar, TBRHSC		
Dr. Anthony Charles Ralph-Edwards, TBRHSC	Dr. Blair Robert Schoales, TBRHSC		
Ms. Vivian Siciliano, NP, TBRHSC	Dr. Andrew Siren, TBRHSC		
Dr. Harshad Telang, TBRHSC	Dr. Andrew Turner, TBRHSC		
Mr. Jeff Yahn, NP, TBRHSC	Dr. Ji Zhou, Sioux Lookout MYWHC		
Dr. Jesse Zroback, North of Superior Healthcare Gro			
be approved for re-appointment to	o the Regional staff for the		
remainder of the calendar year 20	-		
Ternamuer of the calendar year 20			
	CARRIED 2017-014		
12. ADJOURNMENT			
With no further business, the meeting wa	s adjourned: at 6:22 pm on a		
motion by M. Davidson/S. Suutari	motion by M. Davidson/S. Suutari		
	CARRIED 2017-015		

The next <u>regular Board meeting</u> will be held pm in the basement boardroom.	on Wednesday, March 8 th at 5:00	
The joint Finance Committee/Governance Co on <u>Thursday</u> , February 9 th at 5:00 pm in the b Retreat will take place on Friday, February 10 2017 at the Economic Development Office.	pasement boardroom. The Board	
Ed Enge, Board Chair	D. Moynihan, CEO	

Atikokan General Hospital Regular Board Meeting January 11, 2017 - <u>CEO REPORT</u>

Engaged Employees

The patients were relocated on Monday December 12th with no major problems and staff are excited about working in the new acute wing. There is evidence to suggest that the Leadership training afforded to sixteen AGH Managers and Lead Hands in the Fall of 2016 has begun to deliver dividends for the hospital. For example, our newly-inspired leaders are better able to articulate standards for competencies and behaviours to their staff. This, in turn, creates clarity of roles and expectations for each employee. Increased confidence in their leadership team encourages staff to bring forth both workplace issues and solutions. With strong leadership comes engaged, dedicated employees– a positive sign of an evolving, improving organizational culture.

In particular the nursing leadership team is now complete with no vacancies and Jennifer is introducing new practices, training and standards to keep everyone's focus on quality patient care.

Atikokan Community Counselling (ACC) staff have taken training for Life Stress Reduction (Trauma), Problem Gambling, HealthLinks initiatives (in-home assessments); Gain Q3 (an addictions assessment tool); and have attended a Palliative Care Conference (Nov 2016). Upcoming activities will include the Senior-Friendly Hospital Collaboration Showcase (March 2017), and potentially Dialectical Behaviour Training (DBT) held in the region. ACC staff connects with other agencies via regional Case Management, Older Adults, and Mental Health networking meetings, and we share information with our community by attending Interagency Committee Meetings, and hosting Mental Health and Mental Illness Awareness Week presentations.

From the Human Resources department (HR) we are pleased to report the hiring or relocation of the following: Diane Meilleur – Housekeeping / Laundry Aide (casual) Amanda DeCorte – Pharmacy Assistant II Bryan Cain – Maintenance II Brooklyn Battison – transferred from Personal Support Worker to Registered Nurse Sarah Brown – transferred from Housekeeping to Housing Support Worker

The Atikokan General Hospital was represented at the annual Healthcare Student's Homecoming event in Thunder Bay on December 22. At the event, the Hospital connected with students in a number of healthcare programs who are interested in a future with the Atikokan General Hospital.

Meetings were held in November with both the ONA and Unifor Unions. Clarification was achieved on matters relating to employee call-in procedures.

The Accessibility Committee of the Atikokan General Hospital has a mandate for 2017: a comprehensive review of all of the hospital's existing accessibility programs and policies in advance of our Dec. 31, 2017 reporting deadline. HR will be chairing the committee.

The Employee Wellness Committee closed out 2016 with an extravaganza of holidaythemed activities, which included:

A free breakfast for all staff

Deliveries of festive treats (e.g.: cookies, candy canes and hot chocolate)

A door decorating contest

The Wellness Committee plans to solicit feedback from all employees about what they would like to see from the Committee in 2017.

HR continues to work with Nursing Management to improve the orientation process for new staff. HR continues to process an audit of employee files to ensure employee's files are accurate and up to date.

Partnerships - In the past few months progress occurred on several topics:

- The Health Links project under the leadership of Karen Lusignan, the Executive Director of the Atikokan Family Health Team is working to identify high users of our health system.
 Once patients are identified trained personnel meet with the person and create a 'Coordinated Care Plan '
- The NWLHIN is encouraging the furtherance of the 'Blue Print' which asks that we examine the value of collaborating along the principles expressed in the <u>Patients First</u> paper. One **Governance to Governance** activity occurred when we were invited to Fort Frances on December 14. Attended by our chair, vice chair and CEO we joined other health care suppliers to discuss opportunities to work together to improve health care delivery.
- A provincial initiative to introduce **New Accreditation Standards** is the topic of conversation with representatives from the Regional Pharmacy hospital services. AGH has purchased a new document control application to support achieving standards throughout the hospital.
- The **Town of Atikokan Emergency Measures Control Group** met in November to review our preparation plans and receive training from the Emergency Measures Organization office.
- **Paramedic Services** was the topic of a meeting here with a visit from the RRDSSAB management responsible for ambulance services explained how they would be altering their services on non-urgent patient transfers. They also shared information demonstrating the success of the home visits program called Community Paramedicine done by EMS staff.

Redevelopment Project

Phase 2 began the day after patients occupied their rooms. This phase hoards off all the old inpatient rooms, demolishes the walls and ceilings and rebuilds 10 long term care private rooms. Completion is scheduled for April 21.

Chief Nursing Officer Report to the Board

January Board Meeting

Nursing: The nursing staff have moved into the new acute care wing and are really enjoying being in the bright, new area. We have implemented daily "huddles" which brings everyone together for 15 minutes a day to share information that is relevant to patient care. This communication tool has proved to be very useful and the staff are actively engaged in the huddles. Physiotherapy, Occupational therapy, the pharmacy assistant, a lab technician, the dietitian and the telemedicine nurse all come on a regular basis to these huddles and the information sharing has dramatically increased. The acute Nurse Manager is back from leave and all our staff positions are full. We also have three casuals who have expressed an interest in picking up more shifts and are all coming in to upgrade their necessary training in order to work in the ER. We had a mock code with the physicians and nursing staff working together which has not happened before. The staff found this a valuable learning experience. We will offer these monthly so staff continue to improve how they all work together as a team when a trauma comes into the hospital.

Pharmacy: Amanda Decorte was hired to work as a second pharmacy assistant in December. She has training as an X-ray technician but was working at the local pharmacy. She will work two days a week in the pharmacy department to help with that workload and also as a replacement for Corina so she can do her foot care and nursing. Once she is comfortable in the pharmacy department Amanda will be trained in the x-ray department so she can also take calls for x-rays on a casual basis.

The finger print scanner in the ER department has not been working properly for the past several months so we disabled it in December. The finger print scanners are a unique second log-in for the nurse which is a requirement for the Ontario College of Pharmacists guidelines. We are looking at other options as the scanners are expensive to replace.

Lab: Lab submitted Corrective Actions report to IQMH for the 3 discordant findings from the October ISO+ assessment visit (2 minor and 1 major-regional)

• The KRRRLP managers completed the risk assessment for the major discordant and many regional corrective actions will occur in the coming year

 The MESA – temperature and humidity monitoring system was installed Dec 20, 2016 - a significant discrepancy has already been noted in the humidity level that had been previously reported for the laboratory now that a calibrated system is in use

The region is in the final stages of the POC (Point of Care) interface project which includes an upgraded middle-ware system and interface between the POC devices (glucose meters, urinalysis analyzer) and Meditech. This means they can "dock" the machine and it will automatically upload the information from the machine into Meditech. This will be a great help to the nursing staff.

In addition to the RFP for Coagulation analyzers the KRRRLP, Northshore and Thunder Bay hospitals will be participating in an RFP for Glucose meters in 2017 (current contract expires September 2017).

Diagnostics: We are continuing to investigate the cause of software loading failures, as well as worklist/PACS server communication failures. These are two unrelated problems, the first being experienced for months and the latter for approximately one month. The company we purchased the equipment from has put together a special group to try to come up with solutions to these continuing problems.

Robert is now back to being able to offer ultrasounds and we had an ergonomic assessment of his work area and have made changes to it to help alleviate the stress to his body from doing ultrasounds. Amanda Decorte is also interested in becoming an ultrasound technologist so we are looking into how to make this work along with orientating her to the x-ray department. We are actively looking for a ultrasound technologist to work as a locum on a regular basis to help support Robert until Amanda becomes trained.