

**Minutes
Board of Directors Meeting
Wednesday, April 6th, 2022
Zoom Audio/Visual Conference**

Present: B. Heikkila (Chair), Z. Ashley, P. Austin, J. Bagshaw, S. Dowler, D. Dunn, J. Haggarty, D. Harris, L. Hastie, B. MacDonald, T. McFarlane, L. Roth, H. Al, M. Barrett

Staff: D. Braithwaite, Vice President of Corporate Services / Chief Financial Officer
M. Dobson, Director Clinical Support & Ambulatory Care Services
A. King, Director, Human Resources
M. Legge, Manager, Communications, Engagement and Patient Experience

Guests: T. Sweiger & S. Osborne – Chesley Hospital Foundation
P. Przeracki, Manager Pharmacy
P. Kerr, Media

Regrets: None.

Recording Secretary: M. Curry

1.0 Call to Order

The Chair called the meeting to order at 1730 hours with a quorum present.

B. Heikkila opened the meeting by reiterated SBGHC's immediate and first priority to resume services at SBGHC.

2.0 Presentations

2.1 Chesley Hospital Foundation

- S. Osborn and T. Sweiger provided a status report on behalf of the Chesley Hospital Foundation,
- Community engagement and development is a key priority for the Foundation, and creating a robust social media presence is a key factor of this.
- To help inform Foundation campaigns, the Board was informed that staff have been engaged to discuss capital equipment items, and their impact on departments.
- The Foundation is seeking to restore confidence in the Chesley community that has been eroded through the recent reduction in service through education and enhanced engagement through newsletters and social media practice.
- The Foundation was recognized for their efforts over the last several months in light of the clinical service reductions.

S. Osborn and T. Sweiger were thanked for their time, and exited the meeting 1743 hours.

P. Przeracki, Manager, Pharmacy entered the meeting at 1743 hours.

2.2 Patient Story – Pharmacy

- P. Przeracki recounted a patient story from SBGHC's pharmacy department, where a thorough review of colzapine dispensing and administration procedures took place, and process improvements were made to reduce patient's length of visit at the hospital.
- A recommendation was made to advise the stakeholder patient population of the change, and the impact this will have on their routine visits to SBGHC.

P. Przeracki and his team was thanked for their time and efforts, and exited the meeting at 1752 hours.

J. Haggarty entered the meeting at 1800 hours.

3.0 Approval of Agenda

Additions/Changes to Agenda: none.

(Motion 1)

MOVED by: D. Harris

SECONDED by: D. Dunn

THAT the Agenda be approved as presented.

Question called – Motion CARRIED.

4.0 Disclosure of Conflict of interest

There was no conflict of interest declared.

The Chair reviewed the Mission, Vision, and Values, and members were reminded to consider them in decision making during the meeting.

5.0 Business/ Committee Matters

5.1 Quality Improvement Committee Report

J. Bagshaw, Quality Improvement Committee Chair provided a report:

- The regularly scheduled meeting of the QIC was cancelled on February 22nd, 2022 to allow staff to focus efforts on the SBGHC's Recruitment & Retention Action Plan.
- Data published within the quality dashboard is current as of January 2022.
- Communication on wait at triage remains a targeted indicator. Advancements continue.

5.2 Corporate Resources Committee Report

D. Harris, Corporate Resources Committee Chair provided an update to the Board from the most recent meeting on March 28th, 2022.

- A surplus of \$40K was noted for the month of February.
- Year to date surplus sitting at \$1.4M, attributable to a number of items including the recognition of the 2% funding increase, GBIN cost recovery, and Assessment Centre funding.
- Overtime continues to be SBGHC's top expense driver YTD, reaching \$723K over budget.
- SBGHC continues to work with Workfoce Edge on staff scheduling initiatives. Work is underway to identify and mitigate process and practice deficiencies. Management

- has committed to returning to the Committee in June 2022 for an update.
- A status report on the Nursing Recruitment and Retention Action Plan was presented to the committee.
 - R. Al was welcomed to the committee to provide an IT update and an overview of items undertaken by the department to mitigate IT risks.
 - The IT department has undertaken numerous projects to strengthen SBGHC's IT infrastructure, minimize the risk of cybersecurity breaches, and ensure adequate back-up of systems.
 - Significant areas of risk, including ransomware attacks, insecure IT infrastructure, and outdated GBIN systems have been identified, and mitigation strategies have been enlisted.
 - By accepting the CRC minutes of March 28th, 2022 within the consent agenda, the Board will be approving the following: February 2022 Financials, February 2022 Compliance Statements.

5.3 Governance Committee Report

B. Heikkila, Chair of the Governance Committee provided an update to the Board from the most recent meeting on March 21st, 2022.

- The By-Law and Policy Review Committee appointed J. Bagshaw as Chair.
- A status report on the Nursing Recruitment and Retention Action Plan was presented to the committee.
- 2022/23 Board Recruitment Plans were reviewed. In effort to fill three vacancies on SBGHC's Board (targeting specific skill and geographic representation), the Nominating Committee will review all applications received on the submission deadline set for April 8th, 2022.
- 2022/23 Board Goals and 2022/23 CEO Performance Agreement will be presented during the in-camera portion of the meeting this evening.

5.3.1 By-Law and Policy Review Sub-Committee

- No further report.

5.3.2 Corporate Communication Strategy

- A copy of SBGHC's Corporate Communication Strategy, which was informed by internal surveys and individual director feedback, was presented to the Board for decision.
- The strategy presented has been updated to support SBGHC's new strategic plan, specifically focusing on the goal to 'Empower our People'.
- Departmental huddles, branding, and proactive communication were highlighted on the plan.
- Following discussion on corporate survey completion rate, methods to incentivize and motivate responses were discussed.

(Motion 2)

MOVED by: J. Haggarty

SECONDED by: H. Bagshaw

THAT the South Bruce Grey Health Centre Corporate Communication Strategy be approved.

Question called – Motion CARRIED.

5.4 Kincardine Redevelopment Oversight Committee Report

B. Heikkila, Chair of the Kincardine Redevelopment Oversight Committee provided an update:

- The regularly scheduled meeting in March 2022 was cancelled, pending approval from the Ministry of Health regarding the CT suite addition and redevelopment project.

5.5 Audit Committee Report

- No report.

5.6 CEO Report

M. Barrett began his report by recognizing and honoring Dr. R. J. Creighton due to his recent passing. Dr. Creighton was recognized for his 58 of practice medicine in the Walkerton community as a family physician specializing in obstetrics. Dr. Creighton was a dear colleague and friend to SBGHC, and will be greatly missed.

5.6.1 COVID Response

- Assessment Centre volumes across Grey Bruce have decreased considerably, and are very low since the modification to testing guidelines in January 2022.

5.6.2 Action Plan on Nursing Recruitment & Retention

- SBGHC is making progress in the goal to return all clinical services to full operation.
- The use of Agency Nurses has stabilized our existing operations, and has allowed for the granting of the majority of vacation requests in the next schedule – an important factor in retaining our existing nurses.
- An overview of action plan progress, including the number of casual RNs, nursing students, and Midwives was provided to the Board.
- SBGHC continues to model the progress of our recruitment and retention initiatives, together with data on staff movement to determine when services can return to full operation.
- It was noted that many small and rural EDs are experiencing challenges in providing physician coverage in E.Ds. High reliance on locums to maintain coverage.
- An update on the Kincardine CT Scanner project was provided. SBGHC awaits response from the ministry regarding the CT suite addition approval, and stage 2 of the Kincardine Redevelopment project.
- An update was provided on the activities being undertaken by the Grey Bruce OHT, including the engagement of a strategic planning consultant and ongoing recruitment for the OHT development lead.

5.7 Chief of Staff Report

L. Roth provided a report and medical privilege appointment recommendation to the Board for review and approval.

- The recent lab transition to IHLP was noted as being successful.
- Following a two-year hiatus, the Schulich School of Medicine & Dentistry at Western University is resuming their annual Discovery Week for first year students. SBGHC will

be welcoming students at all four sites at the end of May.

- To relieve ED pressures, virtual walk in clinics are being implemented at GBHS. GBHS is requesting the promotion of this program in the EDs and FHTs, and is looking for physicians across Grey Bruce to support the program.

(Motion 3)

MOVED by: B. MacDonald

SECONDED by: S. Dowler

THAT the Board of Directors approve the Chief of Staff report as presented.

Question called – Motion CARRIED.

(Motion 4)

MOVED by: D. Dunn

SECONDED by: D. Harris

THAT the following new applications be approved as recommended:

- Dr. Nisarg Patel – HFO Locum
- Dr. Darryl D’Costa – HFO Locum
- Dr. Ji Zhou – HFO Locum
- Dr. Tarek Loubani – HFO Locum

Question called – Motion CARRIED.

5.8 Director of Clinical Services/CNE Report

H. Al reported.

- H. Al provided a clinical leadership recruitment update. SBGHC is excited to be welcoming a new Manager of Quality, Risk and Informatics, as well as a new Professional Practice and Education Coordinator. Recruitment continues for the Patient Care Manager positions.
- In light of an increasingly stable nursing staff pool, a 99% vacation approval rate was noted.
- On March 21st, 2022, SBGHC reintroduced 4 of the 8 acute inpatient beds in Chesley. Modeling for resumption of ED services in Chesley and Walkerton is ongoing.
- SBGHC’s RQI program went live on April 1st, 2022. It was noted that SBGHC is the first in Canada to fully implement this restorative based training delivery model.

5.9 Director of Clinical Support & Ambulatory Care Services

- SBGHC’s outpatient wait times in the areas of Laboratory, Diagnostic Imaging, and physiotherapy were reviewed. Strategies to address wait times were discussed.
- SBGHC’s Laboratory Accreditation survey occurred during the week of March 28 – April 1st, 2022. A summary report of 4 major non-conformances, and an average of 45 citations were received across each site.
- SBGHC began the transition to IHLP on March 30th, 2022, which will involve faster turnaround times for referrals, alignment of processes, and standardization of equipment.
- On March 14th, 2022, the Chief Medical Officer of Health revoked Directive # 6, which required hospitals to implement COVID-19 vaccination and testing policies. SBGHC has not made any changes to our COVID-19 vaccination policy, and it was noted that other hospitals across Ontario have also maintained their current vaccination policies.

5.10 Update on Reduction of ED Hours in Chesley & Walkerton

- The stabilization of SBGHC’s staffing pool and resumption of services across all sites remains SBGHC’s immediate and first priority.
- SBGHC’s Board is committed to ensuring the hospital’s focus and due diligence to return all services to full operation.

6.0 **Consent Agenda**

Errors/Omissions: none

(Motion 5)

MOVED by: D. Harris

SECONDED by: P. Austin

THAT the Consent Agenda be approved as presented.

Question called – Motion CARRIED.

By virtue of this motion, the South Bruce Grey Health Centre Board of Directors took the following actions:

6.1 Approved the Board Minutes of March 2nd, 2022

6.2 Approved the Governance Committee Minutes of March 21st, 2022

6.3 Approved the Corporate Resources Committee minutes of March 28th, 2022

6.3.1 Compliance Statement – February 2022

6.4 Correspondence:

6.4.1 Brockton Municipal Council Letter

6.4.2 Physician Recruitment & Retention Committee

7.0 **In-Camera Meeting**

(Motion 6)

MOVED by: J. Bagshaw

SECONDED by: P. Austin

To adjourn to an in-camera meeting at 1942 hours.

Question called - Motion CARRIED.

The meeting moved out of in-camera at 2056 hours.

(Motion 7)

MOVED by: D. Harris

SECONDED by: B. MacDonald

THAT the South Bruce Grey Health Centre Board of Directors approve the 2022/23 SBGHC President & CEO Performance Objectives.

Question called - Motion CARRIED.

Meeting Feedback

None.

8.0 Adjourment

The meeting was adjourned by motion by D. Dunn, seconded by P. Austin at 2057 hours.

CARRIED.

9.0 Next Regular Meeting

May 4th, 2022