SOUTH BRUCE GREY HEALTH CENTRE
CHESLEY | DURHAM | KINCARDINE | WALKERTON

Minutes
Board of Directors Meeting
Wednesday, February 5th, 2025
Zoom Audio/Visual Conference

Present:	D. Dunn (Chair), J. Bagshaw, J. Dietrich, V. Ducharme, J. Haggarty, B. Heikkila, L. Parsons, B. Rier, A. Thompkins, A. Wickert, M. Ballantine, L. Roth, N. Shaw, M. Scime-Summers, C. Singh
Staff:	K. MacKenzie (designate of D. Braithwaite, VP Corporate Services / CFO) M. Dobson, Director, Clinical Support & Ambulatory Care Services A. King, Director, Human Resources M. Legge, Director, Quality & Engagement
Regrets:	None.
Guests:	S. Douglas, Project Manager P. Kerr, Media

Recording Secretary: M. Neerhof

1.0 Call to Order

The Chair called the meeting to order at 1731 hours with a quorum present. Board members, guest presenters and members of the media were welcomed to the meeting.

A special welcome was extended to C. Singh as SBGHC's new Vice President of Patient Care Services / CNE.

M. Scime-Summers was recognized at her last SBGHC Board of Directors meeting as the Vice President of Patient Care Services / CNE.

2.0 Presentation(s)

2.1 Introduction to Project Management

- S. Douglas, SBGHC's Project Manager, was welcomed to the Board table to provide an overview of the Project Management portfolio.
- The project management team works to implement innovative infrastructure upgrades in the ever-evolving hospital environment.
- The team incorporates patient-centred design principles with an aim to improve the patient experience within the hospital.
- Advocacy for new technology and infrastructure upgrades ensure the organization continues to deliver high quality core services to our four communities.
- The team works with our internal stakeholders to implement process and efficiency

improvements across the organization.

- The Board was provided the opportunity to pose questions and provide feedback:
  - Following a question posed regarding the FBC refurbishment, it was clarified that the layout of the space will remain the same, with improvements made to flow.
  - Further clarity was provided on the Walkerton healing room as a space to accommodate spiritual requests (i.e. smudging at beginning / end of life). This is in compliance with Accreditation Canada standards. Applications have been submitted to the MOH to support this project.

S. Douglas was thanked for her presentation and exited the meeting at 1742 hours.

3.0 Consent Agenda

As per the Board Meeting policy, approval of the consent agenda is obtained through the approval of the agenda.

3.1 Board of Directors Minutes – December 4, 2024
3.2 Governance & Executive Committee Minutes – January 13, 2025
3.2.1 2025/26 Board Goals / Objectives
3.3 Audit Committee Minutes – January 13, 2025
3.6 Chief of Staff Report
3.7 Correspondence – Patient Relations – A Fractured Hip – A Blessing in Disguise

4.0 Approval of Agenda

Additions/Changes to Agenda: None.

(Motion 1)
MOVED by: J. Haggarty
SECONDED by: B. Rier
THAT the Agenda be approved as presented.
Question called – Motion CARRIED.

5.0 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.

6.0 Business/ Committee Matters

6.1 Quality Improvement Committee

L. Parsons, Chair of the Quality Improvement Committee reported that the upcoming Quality Improvement Committee meeting is scheduled for Monday, February 10th, 2025.

6.2 Corporate Resources Committee

A. Wickert, Chair of the Corporate Resources Committee reported that the Corporate Resources Committee has not met in the month of January.

6.3 Governance & Executive Committee

D. Dunn, Board Chair, provided an update to the Board from the most recent meeting on January 13th, 2025.

- The Corporate Communications strategy was reviewed with no notable changes or revisions
- 2024/25 Q2 and Q3 data reflected positively on the outstanding commitment our Board maintains to the Organization.
- A copy of the 2025/26 Board Goals / Objectives was included in the consent agenda for approval.
- The Board was reminded of its responsibility to ensure an effective risk management program is in place to identify and manage risk. Risk categories have been distributed to Board Committees for appropriate ongoing oversight.
- Board Recruitment is well underway. A composition survey was issued on January 15th and will be reviewed at the Governance and Executive Committee on February 10th.
- The annual Director Assessment Survey was released to all voting Directors on Monday, February 3rd. Results will be reviewed by the Board Chair and used as a basis for follow up discussion on an individual basis.
- The OHA regional Collaboration and Topical discussion focused on two main items – finance and cyber security.
- Participating Board Chairs were informed at the GBIN CEO meeting of the project progress. The Board will receive a more fulsome update within the coming weeks.
- A Board to Board Collaboration meeting took place on Friday, February 7th with HDH and Brightshores where introductions were made and system issues were discussed from a regional lens.

6.4 Kincardine Redevelopment Oversight Committee

B. Heikkila, Chair of the Kincardine Redevelopment Oversight Committee reported that the committee had its most recent meeting in November 2024. Nothing new to report at this time.

6.5 Audit Committee

J. Deitrich, Committee Chair, provided an update to the Board from the most recent meeting on January 13th, 2025.

- S. Blake Armstrong was welcomed to the Committee as SBGHC's external Auditor. An explanation was provided on the recent transition from 'BDO' to 'MNP'.
- The committee received and reviewed the 2025 Audit Service plan.
- Motions were tabled and passed regarding the following topics:
    - Planning Materiality set at $1.1M
    - MNP be appointed as the Auditor for the fiscal year end of March 31, 2025
- The next regularly scheduled meeting will be held in May 2025.

6.6 CEO Report

N. Shaw, President & CEO, reported:

- C. Singh was welcomed to the organization as SBGHC's Vice President of Clinical Services / CNE
- SBGHC is pleased to be partnering with Brightshores and the Canadian Mental Health Association Grey Bruce on the delivery of mental health and addictions care in the region. M. Scime-Summers was recognized for her role in this collaboration.
- Dr. M. Currie was welcomed as BAFHT's newly recruited Physician. On January 15th, a patient sign up day was held at the Walkerton Legion. As a result, five hundred (500)

orphaned patients were rostered and five hundred (500) were placed on a waiting list.

- The Chesley inpatient unit respiratory outbreak is now resolved. The team was commended for effective infection control diligence.
- January 2025 saw the introduction of the Healthcare Highlight Award – a leadership nominated excellence award platform. This new platform has been well received amongst the team.
- Preparatory work has begun for Accreditation with the self-assessment process underway. A preliminary review of select standards has been completed and work has begun to address shortfalls.
- SBGHC continues to see increased Emergency Department patient volumes across the four sites. This is consistently seen across the Province. Notifications have been issued to the public to anticipate extended wait times.
- The 2025 / 2026 QIP is currently in its final stages of development and is scheduled to advance through the approval process within the coming weeks. The Board will undergo final review in March.
- SBGHC celebrated National Maintenance Day in January.
- On Friday, February 7th, a retirement celebration will be held in honour of M. Scime-Summers. SBGHC extends appreciation to Michelle for her knowledge and expertise and wishes her the best in her retirement. During the month of February Michelle will be completing project work and will be taking vacation in March.
- Discussion was had surrounding Tariffs and the implications to SBGHC's supply contacts. SBGHC will make a concerted effort to secure Canadian products.

6.7 Chief of Staff Report

M. Ballantine, Chief of Staff, included a written report in the consent agenda and additionally highlighted the following items:

- Physician staffing is relatively stable across the sites, with the support of Health Force Ontario's EDLP program in Kincardine.
- Dr. Shoemaker, Cardiologist, will be expanding his on-site ambulatory clinics in Kincardine in the new year and anticipates an on-site presence weekly. This significantly improves local access to cardiology services.
- All sites reported an increase in emergency department volumes and an increase in admitted patient volumes on the inpatient units, highlighting that the organization has routinely been over capacity and experiencing Gridlock Wave 2 (which means that occupancy is greater than (>) 100% corporately and all the flex beds have been utilized, and there are no confirmed discharges to come throughout the organization).

6.8 VP of Patient Care/ CNE Report

M. Scime-Summers, VP Patient Care & CNE reported

- SBGHC continues to meet with HDH regularly to discuss repatriations and expedite access to care for patients.
- Several RN and RPN students from Georgian College have begun placements in Kincardine in Walkerton sits.
- SBGHC is participating in the OH ED nurse education funding, offering a number of courses on site for both RN and RPN groups.
- Providing palliative care training in March.
- SBGHC participates on a weekly OH surge capacity call to review overcapacity status within the region.
- Twice-weekly OH situational surge capacity call participation – many hospital partners are in overcapacity (patients admitted with no beds). Report on bed capacity status within

- A nursing retention committee was formed and initial feedback from staff has been reviewed by the SLT. This group works to identify common themes and tangible takeaways for action.

6.9 Director Clinic Support Ambulatory Care Report

M. Dobson, Director of Clinical Support and Ambulatory Care Services reported

- Pocket Health is an improved patient tool developed to support the access of medical imaging records at any time. This program went live at SBGHC in January.
    - A suggestion was raised to raise awareness of the program and opportunity for paid service through internal signage and communication. A financial assistance program is available through Pocket Health.
    - SBGHC's Privacy Officer maintains an active role on the project's privacy working group.
    - Following a question posed surrounding security, it was clarified that data is being fed through the OCNet PACs system, and there is limited threat of a privacy breach / hack to SBGHC. The team committed to reviewing this further.
    - It was confirmed that there is no revenue stream associated with this program.
- As a result of the recent OBSP expansion, data has shown a 25% increase in patient visits in the 40-49 age cohort. This aligns with provincial data and SBGHC's planned increase in service. Wait times remain under target.

6.10 Update on Reduction in ED hours in Chesley and Durham

- No updates to report at this time.

6.11 Education

None.

6.12 Consent Agenda items, if brought forward:
None.

10.0 Next Regular Meeting

Wednesday, March 5th, 2025, at the Walkerton Site in Haggarty Hall (Hybrid).

11.0 In-Camera Meeting

D. Dunn thanked guests for attending the meeting and requested a motion to move in-camera.

(Motion 10)
MOVED by: H. Haggarty
SECONDED by: A. Wickert
To adjourn to an in-camera meeting at 1845 hours.
Question called - Motion CARRIED.

The meeting moved out of in-camera at 1931 hours.

12.0 Motion to approve in-camera resolutions:

(Motion 11)
MOVED by: J. Haggarty
SECONDED by: J. Bagshaw

13.0 Adjournment

The meeting was adjourned by consensus @ 1932 hours.
CARRIED.

_____ _____
Dean Dunn Date
Chair

_____ _____
Nancy Shaw Date
Secretary