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

Minutes
Board of Directors Meeting
Wednesday, March 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
Staff:	D. Braithwaite, VP Corporate Services / CFO, Temporary Acting President & CEO M. Dobson, Director, Clinical Support & Ambulatory Care Services A. King, Director, Human Resources M. Legge, Director, Quality & Engagement
Regrets:	J. Dietrich, A. Wickert, N. Shaw, President & CEO C. Singh, VP Patient Care / Chief Nursing Executive (CNE)
Guests:	G. Zaki, IT Manager P. Kerr, Media J. McEachnie, Community Member

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.

2.0 Presentation(s)

2.1 Introduction to Project Management

- G. Zaki, SBGHC's Manager of Information Technology (IT), was welcomed to the Board table to provide an overview of the IT portfolio.
- The Board was informed of the ways in which the IT department strategizes its practices in alignment with the corporation's four strategic pillars. Long term strategic directives were reviewed in the spirit of continuous quality improvement.
- SBGHC's IT department works to build trusting relationships between partnering hospitals, which drives efficiencies from a regional lens.
- Following a question posed regarding desktop security, it was clarified that SBGHC follows the national standard for security and is confident in its protection and monitoring.

G. Zaki was thanked for his presentation and exited the meeting at 1800 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 – February 5, 2025
3.2 Governance & Executive Committee Minutes – February 10, 2025
3.2.1 2025/26 Board Workplan
3.3 Corporate Resources Committee Minutes – February 18, 2025
3.3.1 Hospital Service Accountability Agreement Extension
3.4 Quality Improvement Committee Minutes – February 10, 2025
3.5 Chief of Staff Report
3.6 Correspondence – Board to Board Collaboration Minutes – February 7, 2025

4.0 Approval of Agenda

Additions/Changes to Agenda:

- 6.1.1 Presenter adjusted to M. Legge
- Date of the next meeting – April 2, 2025 at the Durham Clinic Boardroom
- Walkerton & District Hospital Foundation Gala - April 2025

(Motion 1)
MOVED by: B. Rier
SECONDED by: L. Parsons
THAT the Agenda be approved as amended.
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

M. Legge, Director, Quality and Engagement presented SBGHC's 2025/26 Quality Improvement Plan as a decision item for approval by the Board of Directors.

- A high-level overview of the preparation process was provided, touching on priority issues, a reflection on SBGHC's 2024/25 QIP performance, and the overall goal of the QIP program.
- The Draft 2025/26 Quality Improvement Plan has been vetted by SBGHC's Senior Leadership, Board Quality Improvement Committee, Patient and Family Advisory Council and requires final approval by the Board of Directors prior to submission to Ontario Health on April 1, 2025.
- Approval of the Consent Agenda equates approval of the 2025/26 Quality Improvement Plan (Quality Improvement Committee minutes of February 10th, 2025).
- Following a question raised regarding the 90th percentile Access and Flow priority indicator, further clarity will be discussed offline.

6.2 Corporate Resources Committee

In the absence of A. Wickert, D. Braithwaite provided an update to the Board from the Corporate Resources Committee meeting on February 18th, 2025.

- Operating financial results for the month ending December 31, 2024 were shared, highlighting a deficit of $119K.
- SBGHC anticipates a small year-end deficit to accommodate one-time purchases to support operations (minor equipment, renovations and contracted work).
- SBGHC aims to reduce Agency Nurse usage (purchased service) as SBGHC's largest compensation variance.
- Notable January events were reviewed.

6.3 Governance & Executive Committee

D. Dunn, Board Chair, provided an update to the Board from the most recent meeting on February 10th, 2025.

- A first draft of the 2025/26 CEO goals were reviewed, and will be presented to the Board in April for approval.
- 2025/26 Board Recruitment strategies were reviewed, aiming to fill four vacancies, bolstering representation from the Municipality of South Bruce. Areas of greatest need in the Board's skills and experience matrix are in the areas of clinical, human resources, and patient and healthcare advocacy.
- Following a call for volunteers, membership on the Nominating Committee was established as follows: D. Dunn, J. Dietrich, J. Haggarty and A. Thompkins.
- A copy of the Draft 2025/26 Board Workplan was included in the consent agenda. Approval of the consent agenda equates approval of the Draft 2025/26 Board Workplan.
- The annual Director assessment survey was released to all voting Directors on Monday, February 3rd. Results of the survey are under review by the Board Chair and will be used as a basis for follow up discussion on an individual basis. Targeted discussion completion in March 2025.

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. SBGHC continues to await approval before advancing to the next stage of the redevelopment process.

6.5 Audit Committee

J. Deitrich, Chair of the Audit Committee, reported that there has been no recent meeting, and thus, no report.

6.6 CEO Report

D. Braithwaite in his role as temporary acting President & CEO reported:

- On Sunday, February 16th, Bruce County declared a significant weather event, launching county-wide road closures. A debrief took place following the event to identify learnings gleaned. Sincere appreciation has been extended to all staff who supported the hospital during this challenging time.
- Recent engagements have taken place with each of the four Foundations supporting the SBGHC. A listing of upcoming opportunities to support the Foundations can be found

within this evening's agenda.

- The Finance team continues to work with Leadership across the organization to prepare a draft budget for the 2025/2026 fiscal year. The Corporate Resources Committee is scheduled to review the budget in March.
- B. McGriskin, MSW, has been recognized as February's Healthcare Highlight Award recipient, and for her outstanding efforts to support the team amidst the recent significant weather event.
- In February, SBGHC recognized Pink Shirt Day, Black History Month, Valentine's Day, and the retirement of M. Scime-Summers, SBGHC's former VP Patient Care / CNE.
- SBGHC's Staff, Physicians and Board members are encouraged to mark their calendars for SBGHC's second annual Easter Eggstravaganza.

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:

- The February Corporate MAC meeting was deferred due to lack of quorum. As such, there are no credentials to report.

6.8 VP of Patient Care/ CNE Report

In the absence of C. Singh, the VP Patient Care / CNE Report to the Board was included in the package for information. No further discussion was had.

6.9 Director Clinic Support Ambulatory Care Report

M. Dobson, Director of Clinical Support and Ambulatory Care Services did not provide a formal report, but welcomed questions from the Board.

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, April 2nd, 2025, at the Durham site (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: J. Haggarty
SECONDED by: J. Bagshaw
To adjourn to an in-camera meeting at 1838 hours.
Question called - Motion CARRIED.

The meeting moved out of in-camera at 1929 hours.

12.0 Motion to approve in-camera resolutions:

(Motion 11)
MOVED by: B. Rier
SECONDED by: T. Ducharme

13.0 Adjournment

The meeting was adjourned by consensus @ 1930 hours.
CARRIED.

_____ _____
Dean Dunn Date
Chair

_____ _____
Nancy Shaw Date
Secretary