

**Minutes  
Board of Directors Meeting  
Wednesday, November 4<sup>th</sup>, 2020  
Zoom Audio/Visual Conference**

PRESENT: J. Gilbert (Chair), L. Allison, J. Bagshaw, S. Dowler, J. Haggarty, D. Harris, L. Hastie, W. Heikkila, D. Leonce, B. MacDonald, K. Pike, L. Roth, M. Barrett, A. Stanley

Staff: D. Braithwaite, Vice President Corporate Services / CFO  
R. O'Neill, Director, Finance  
A. King, Director Human Resources  
M. Legge, Manager Communications, Engagement and Patient Experience

Guests: P. Kerr, media

Regrets: none

Recording Secretary: M. Curry

### **1.0 Call to Order**

The Chair called the meeting to order at 1800 hours with a quorum present.

### **2.0 Presentation**

- A patient story was presented by M. Connolly, Manager of Health Records, Registration, Patient Movement and Flow, and Privacy Officer, surrounding an incident that occurred within our registration department regarding outpatient lab appointments and wait times.
- A member from our registration department diffused a confrontational patient by discussing how their actions and demeanor was impacting staff and other patients.
- It was noted that the shift to an online scheduling system has improved patient flow during the outpatient lab process

### **3.0 Approval of Agenda**

Additions/Changes to Agenda: None.

*(Motion 1)*

**MOVED by: S. Dowler**  
**SECONDED by: W. Heikkila**  
**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, statements. 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 reported:

- There has not been a meeting since the last Board of Directors meeting.

##### **5.2 Corporate Resources Committee Report**

D. Harris reported:

- The month of September concluded with a surplus of \$310K
- September YTD deficit of \$432K was noted – this deficit will be reduced by MOH funding for Pandemic Pay and COVID related operational costs, and outstanding COVID funding
- A projected year end surplus of \$178K was noted.

##### **5.3 Chief of Staff Report**

L. Roth reported.

- MAC met on October 8th, and informally as Site Chiefs Planning
- A large collection of Medical Directives were reviewed at the most recent MAC meetings.
- The Credentials Committee report, including the listing of credentials approved by the Medical Advisory Committee, will remain in the report of the Chief of Staff, not within the consent Agenda.
- The transfer of mental health patients to a schedule one facility was discussed – the need to open up capacity beyond the hospital to accommodate this population was raised.

*(Motion 3)*

**MOVED by: J. Haggarty**

**SECONDED by: D. Harris**

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

**Question called – Motion CARRIED.**

*(Motion 4)*

**MOVED by: B. MacDonald**

**SECONDED by: D. Leonce**

**THAT the following appointments to the medical/professional staff be approved as recommended:**

- Dr. Patrick Macos – Locum – September 21 2020
- Dr. Ningfu Zhu – Locum – October 19 2020
- Dr. David Kuipers – Locum – October 5 2020
- Dr. Tommy Rohani – Locum – October 10 2020
- Dr. Kathryn Zhao – Radiologist - September 21 2020

**AND THAT the following status changes be approved as recommended:**

- Dr. Michael Curtis – Locum – Associate Staff – October 7 2020

**AND THAT the following probation reviews be approved as recommended.**

- Linnea Camp – RM Associate – 12 Month Review – Locum to Active
- Shannon Jones – RM Associate – 12 Month Review – Locum to Active

**Question called – Motion CARRIED.**

## **5.4 CEO Report**

M. Barrett reported:

### SBGHC Response to COVID-19

- Volumes at the Assessment Centres across Grey Bruce have fluctuated considerably since March, with significant increases during the reopening of schools in mid-September, and a steady decline since that time.
- SBGHC is developing plans to respond to wave two should the situation continue to escalate within Grey Bruce
- From an infrastructure perspective, we are prepared to ramp up if the need arises.

### Surgical Services Redistribution – A Regional Approach

- The hospitals across both the South West LHIN and the Ontario Health West regions are working together to determine how surgical capacity could be maximized across the region
- All hospitals have compiled a list of funded surgeries they are able and unable to complete. With these lists, hospitals are determining if patients and surgeons can move between centers to have their surgery completed and maximize capacity.
- SBGHC participation in this initiative is limited.

### Ontario Health Team Update

- Engagement of key stakeholders is underway including municipalities, HSP Boards, Physicians, Patients/Residents/Clients/Caregivers, Service Provider Organizations (SPOs), Indigenous Communities, and our own Board.

### Strategic Planning

- SBGHC is embarking on the development of a new Strategic Plan
- Staff are now gathering information and feedback to input into the environmental scan
- Surveys were released last week to solicit feedback from our staff, physicians, key partners, and external partners

#### 5.4.1 Grey Bruce OHT – SBGHC Board Engagement

- Executives have been tasked to engage their respective Boards in the

development of the Grey Bruce Ontario Health Team.

- T. Holdsworth has been instrumental in pulling the Grey Bruce OHT Development PowerPoint presentation together
- A patient/client/resident/caregiver survey is being released tomorrow that was produced by the Planning Committee to get a better understanding of the health system in Grey Bruce.

Feedback from the SBGHC Board was received:

- The simple description of the OHT is confusing – it was recommended that a different description be developed
- A description of how the implementation will support the patient population was requested.
- A potential barrier to the successful implementation of the OHT is the handoffs from one health care organization to another. Organization silos, resistance to change are others. Change management education will be required.
- It was raised that the investigation of successful OHTs has been helpful to understand processes.
- The majority of digital solutions are within individual organizations (eg. Cerner). How will we use this technology to communicate with one another?
- It was encouraged to look for some early wins to promote a positive foundation to grow upon.
- Comments from the Board on these 8 points should be sent to M. Barrett
- Each CEO/Executive Director was asked to compose a 1-page document of Directors responses

### **5.5 Chesley ED Update**

J. Gilbert reported:

- Positive feedback was noted from the Chesley Community Engagement Session – another public engagement session will be planned for January 2021.

### **5.6 Consent Agenda Items Brought Forward**

None.

## **6.0 Consent Agenda**

Errors/Omissions:

*(Motion 11)*

**MOVED by: J. Bagshaw**

**SECONDED by: W. Heikkila**

**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 Minutes of September 21, 2020
- 6.2 Approved the Governance Committee Report – October 19, 2020
- 6.3 Approved the Corporate Resources Committee Report – September 28, 2020
  - 5.4.1 Compliance Statement – September 2020
  - 5.4.2 Unaudited Monthly Financial Statements –September 2020
- 6.5 Approved the Kincardine Redevelopment Oversight Committee Report – October 26, 2020
- 6.7 Correspondence
  - 6.7.1 None

## **7.0 In-Camera Meeting**

*(Motion 12)*

**MOVED by: B. MacDonald**

**SECONDED by: S. Dowler**

**To adjourn to an in-camera meeting at 1928 hours.**

**Question called - Motion CARRIED.**

The meeting moved out of in-camera at 2048 hours.

## **8.0 Adjournment**

The meeting was adjourned by motion by J. Haggarty, seconded by D. Leonce @ 2048 hours.

CARRIED.

## **9.0 Next Regular Meeting**

December 3, 2020, @ 1800 hours