

**Minutes
Board of Directors Meeting
Wednesday, February 1st, 2023
Zoom Audio/Visual Conference
1730 hours**

Present: B. Heikkila (Chair), Z. Ashley, P. Austin, J. Bagshaw, S. Dowler, D. Dunn, J. Haggarty, D. Harris, L. Hastie, C. Oberle, L. Roth, M. Barrett, M. Sime-Summers

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: S. Nelemans, Infection Control and Occupational Health & Safety Coordinator
S. Osborn, Chesley Hospital Foundation Coordinator
B. Rier, VP Chesley Hospital Foundation
P. Kerr, Media

Regrets: T. McFarlane

Recording Secretary: M. Curry

1.0 Call to Order

The Chair called the meeting to order at 1732 hours with a quorum present.

2.0 Presentations

2.1 Chesley Hospital Foundation

B. Rier and S. Osborn were welcomed to the meeting to present an update on behalf of the Chesley hospital Foundation.

- Through various fundraising initiatives, the Chesley hospital Foundation has the means to fund numerous capital items to enhance health care at the Chesley hospital.
- Education and skills based recruitment are being targeted to bolster the Foundation's staff and Board.
- Robust Physician Recruitment initiatives continue. It was discussed that costs associated with physician recruitment retreats are shared among SBGHC's four sites to bring physicians to the Grey Bruce area.

B. Rier and S. Osborn were thanked for their informative presentation.

2.2 Patient Story – Occupational Health and Safety & Infection Control Coordinator

- S. Nelemans presented a patient story where Infection Control best practice and COVID-19 isolation requirements were reviewed to ensure optimal health outcomes for a patient.

S. Nelemans was thanked and exited the meeting at 1752 hours.

3.0 Approval of Agenda

Additions/Changes to Agenda: none.

(Motion 1)

MOVED by: C. Oberle
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.

S. Osborn exited the meeting at 1758 hours.

5.0 Business/ Committee Matters

5.1 Quality Improvement Committee Report

J. Bagshaw, Chair of the Quality Improvement Committee, advised that in keeping with the Board Committee meeting schedule, there was no meeting in December 2022 or January 2023. The Quality Improvement Committee will reconvene in February 2023.

5.2 Corporate Resources Committee Report

D. Harris, Chair of the Corporate Resources Committee provided an update to the Board from the most recent meeting on January 23rd, 2023.

- The month of December saw a deficit of \$53K, with a YTD deficit of \$463K.
- A projected year end deficit of \$1.5M was noted. This deficit position is largely attributed to significant agency nurse costs, plus overtime costs, and the conclusion of COVID incremental funding.
- Nursing vacancies (43 vacant RN/RPN positions and 21 Agency Nurses on the roster) continue to remain high. SBGHC has a new Recruitment Coordinator to the HR team, who will be participating in a number of upcoming recruitment fairs.
- All of the 2022/23 HIRF projects have been completed.
- In approving the consent agenda, the Board approves the Compliance Statements for November/December 2022, Financial Statements for December 2022, and endorses the CRC's motion to replace the parking gates at the Kincardine and Walkerton sites.
 - It was noted that the parking gate replacement project requires an 8-week order lead time, with anticipated installation in April 2023.

5.3 Governance Committee Report

B. Heikkila, Chair of the Governance Committee provided an update to the Board from the most recent meeting on January 16th, 2023.

- Board quality indicators for Q3 were reviewed with all metrics tracking better than target. Feedback continues to reflect timeliness of meeting packages as an area for

improvement.

- Updated Board Director recruitment tools were reviewed by the group, launching in March.
- Committee annual self-evaluation process is underway.
- CEO recruitment is underway. A special Board meeting will be scheduled to approve the CEO selection.
- Feedback was provided on the Foundation/Capital Committee donor recognition.
- The Board plans to show appreciation to all SBGHC staff and physician through the purchase and delivery of Valentine's Day baked good treats.

5.3.1 By-Law & Policy Review Sub Committee

J. Bagshaw provided an update on behalf of the By-Law & Policy Review Sub Committee.

- 28 policies are expected to require legal review.
- Approximately 25 policies, 2 by-laws and the Letters Patent are pending review.
- Two legal firms have been contacted regarding the review of our revised governing documents.
- All documents requiring legal review will be submitted as one all-inclusive package following internal review.

5.4 Kincardine Redevelopment Oversight Committee Report

B. Heikkila, Chair of the Kincardine Redevelopment Oversight Committee provided an update to the Board from the most recent meeting on January 23rd, 2023.

- The CT Scanner suite addition and equipment installation is progressing as scheduled., with equipment targeted to be delivered on the scheduled date of February 27th, 2023, and go live on March 20th, 2023.
- The Hospital Redevelopment project is progressing well. SBGHC is working with the Ministry of Health Capital Branch to determine how the MRI will fit within the stage 3.1 plan.
- The Kincardine Foundation provided an update on accelerated fundraising activities and the recruitment of additional volunteers for the Capital Campaign.

5.5 Audit Committee Report

D. Dunn, Chair of the Audit Committee provided an update to the Board from the most recent meeting on January 23rd, 2023.

- The Audit plan for 2022/23 was presented by BDO with no concerns to note.

5.6 CEO Report

M. Barrett reported.

- The Chesley Hospital ED continues to operate on reduced hours. SBGHC recognizes the community's desire to resume 24/7 service in Chesley.
- Following MPP Lisa Thompson's announcement on December 19th, 2022, SBGHC will be updating its plans for the expansion of the Kincardine hospital to include the new MRI. The Government will provide \$800,000 in operating funding, which is a prescribed amount based on the number of hours operated per day per week.

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- On January 20th, 2023, the Ontario government announced an expansion of the Learn and Stay grant to connect underserved and growing communities with more health care workers.
 - On January 19th, 2023, the Ontario Government announced that it will introduce legislative changes in February 2023 that, if passed, would allow Canadian health care workers that are already registered or licensed in another Canadian jurisdiction to practice in Ontario immediately, without having to first register with one of Ontario's health regulatory colleges.
 - On January 16th, 2023, the Ontario Government announced that it will expand the number of surgeries and procedures that can be completed in community based surgical and diagnostic centres utilizing existing Independent Health Facilities (IHF's).
 - Hospitals will monitor closely to ensure impacts, particularly with health human resources, do not negatively impact our operations
 - The Ontario Hospital Association (OHA) continues to monitor the appeal of Bill 124 by the government.
 - SBGHC staff were recognized for their great response to the Christmas 2022 storm. Through the work, dedication and care of our staff, SBGHC's four sites remained operational during this period.

5.7 Chief of Staff Report

L. Roth, Chief of Staff, provided a report to the Board, and offered a high-level summary.

- Physician staffing remains precarious but continues to improve at most sites.
- M. Connolly provided the quarterly Physician Scorecard report.
- It is anticipated that the 2023 reappointment report will be coming to the Board in March 2023.

(Motion 6)

MOVED by: D. Harris

SECONDED by: J. Bagshaw

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

Question called – Motion CARRIED.

(Motion 7)

MOVED: L. Hastie

SECONDED: J. Haggarty

THAT the following new applications be approved as recommended:

- Dr. Amit Thatte – Locum, Anesthesia
- Dr. Joshua Hooper – Locum
- Dr. Mohammed Abraham – HFO Locum
- Dr. David Kuipers – Surgical Assist
- Dr. Jason Lam – HFO Locum
- Dr. Lawrence Yau – HFO Locum
- Dr. Kangrui Lin – HFO Locum
- Dr. Zeshan Siddiqui – HFO Locum
- Dr. Jacob Pace – HFO Locum

Question called – Motion CARRIED.

5.8 Director of Clinical Services/CNE Report

M. Scime-Summers was welcomed to the Board table as SBGHC's newly appointed Director of Clinical Services / Chief Nursing Executive (CNE), and provided a report to the Board.

- Work is being done to re-establish the various Clinical Committees within the organization (Acute Care, Emergency Department, Professional Practice, etc.)
- The Human Resources team resumed in-person Corporate Orientation this month, featuring a two-day nursing skills review.
- There are no changes to the staffing situation in Chesley and we are not anticipating a change in the reduction of Emergency Department Services at this time.
- The Quality Improvement Committee of the Board is currently working on the 2023/2024 QIP. For review by the Board in March.
- Preparation is underway for SBGHC's Accreditation Canada on site survey. The leadership team is reviewing all the necessary Required Organizational Practices (ROPs) and high priority items to ensure that all content and processes are embedded into our daily work.

5.9 Director of Clinical Support & Ambulatory Care Services

M. Dobson provided a report to the Board.

- In preparation for the Kincardine CT 'Go Live' on March 20th, staff are being trained to complete CT exams in Kincardine. Online modules have been assigned, with the addition of remote Siemens training to provide virtual exposure to the new equipment.
- Training will take place in a phased approach, with experienced CT staff scheduled in Kincardine to support more advance exams.
- Certificates were received on November 22nd, 2022, formalizing SBGHC's Laboratory status as 'Accredited'.
- SBGHC continues to closely monitor the use of Agency nurses across the organization. The goal continues to be to use Agency nurses on an as-needed basis.
- After nearly three years of operation, the Kincardine Assessment Centre has transferred to the direction of the Kincardine Family Health Team as of January 27th, 2023.
- SBGHC's Corporate Wellness Committee as launched in 2022 with an aim to bring joy to the workplace. A number of initiatives were highlighted.

5.10 Reopening of Clinical Services in Chesley

B. Heikkila reiterated SBGHC's goal to maintain four strong viable sites in the long term.

5.11 Consent Agenda Items brought forward

Corporate Resources Committee Report – Parking Gate Replacement

- A request to extract the CRC report on Parking Gate Replacement from the consent agenda was brought forward. It was clarified that this motion was brought forward to replace aging and non-functioning parking equipment.
- The group discussed that parking charges are a provincial requirement for revenue generation in the hospital setting, and that this issue has been discussed thoroughly at the SBGHC board table in the past.
- By consensus, the group agreed to proceed with this item included in the consent agenda.

6.0 Consent Agenda

Errors/Omissions:

(Motion 5)

MOVED by: J. Haggarty
SECONDED by: D. Harris
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 December 6th, 2022
- 6.2** Approved the Governance Committee Minutes of January 13th and 16th, 2023
- 6.3** Approved the Corporate Resources Committee minutes of January 23rd, 2023
 - 6.3.1 Compliance Statement – November & December 2022
- 6.4** Approved the Audit Committee Minutes of January 23rd, 2023
- 6.5** Approved the Kincardine Redevelopment Oversight Committee minutes of January 23rd, 2023
- 6.6** Correspondence: none

7.0 In-Camera Meeting

- B. Heikkila closed the meeting and shared closing comments that there is a lot going on, and a lot going well, staffing is stable, welcomed our new CNE, successful advancement of projects, preparation for Accreditation, and CEO Recruitment advancing.

(Motion 6)

MOVED by: C. Oberle
SECONDED by: Z. Ashley
To adjourn to an in-camera meeting at 1913 hours.
Question called - Motion CARRIED.

The meeting moved out of in-camera at 2105 hours.

Meeting Feedback

none

8.0 Adjournment

The meeting was adjourned by motion by D. Harris, seconded by S. Dowler at 1928 hours.
CARRIED.

9.0 Next Regular Meeting