

HDH HANOVER &
DISTRICT
HOSPITAL
MINUTES OF THE REGULAR BOARD MEETING

DATE: Tuesday, March 24, 2026

TIME: 1700 hours

PLACE: Hybrid (HDH Boardroom/Virtual)

PRESENT: **Voting Directors:** Tina Shier (Chair), Pamela Matheson (First Vice Chair), Chris Prues (Treasurer), Don Butland, Leigh Butler, Réjane Dunn, Lorna Eadie Hocking, Cathy Lansink, Corwin Leifso, Terry Leis, Catherine McKay
Non-Voting Directors: Dana Howes (President and CEO), Saskia MacMillan (VP of Patient Care/CNE), Dr. Randy Montag (Chief of Staff), Dr. Nick Abell (President of Medical Staff)
Invited Staff: Kim Mighton (Vice President of Finance & Operations), Victoria Cumming (Recording Secretary)

REGRETS: **Voting Directors:** Keith Hopkins (Second Vice Chair)
Non-Voting Directors & Invited Staff:

1. CALL TO ORDER

T. Shier called the meeting to order at 1700 hours.

2. LAND ACKNOWLEDGMENT

The Land Acknowledgement was spoken, honouring the Indigenous peoples and their ancestral connection to the land on which we gather.

3. APPROVAL OF AGENDA

Moved and Seconded

THAT the agenda be approved as presented.

MOTION CARRIED

4. DECLARATION OF ANY CONFLICT OF INTEREST

No conflicts were declared and the group was reminded to declare a conflict of interest should one arise.

5. MISSION, VISION, VALUES

The Board reviewed the Mission, Vision, and Values and were asked to keep them in mind throughout the meeting.

6. PRESENTATION: 2025-26 GLOBAL WORKFORCE SURVEY RESULTS

D. Howes, President and CEO presented the 2025–26 Global Workforce Survey results. Key highlights included:

- Response rate: 120 respondents
- Overall satisfaction: increased from 75.4% to 85% (+9.6%)
- Highest-scoring dimensions: People-Centred Care (90.3%), Work Team (89.9%), Leadership (87.2%)
- Most improved dimensions: Leadership (+7.1%), Well-Being & Engagement (+6.5%), Patient Safety (+2.9%)
- Organizational strengths: 100% positive rating for treating patients with respect and dignity
- Opportunities: burnout indicators, workload capacity, and psychological health/safety—

though all showed improvement

- Top improvements: harassment prevention (+14%), work–life balance (+12.3%), reduced daily stress (+11.4%)
- Next steps: Share results with Hospital Committees and PFAC to develop an action plan; issue a media release celebrating positive trends.

Discussion:

- It was confirmed that all staff had the opportunity to participate and that the survey met the required response thresholds.
- Clarification was requested regarding the composition of respondents, including the approximate percentage of nurses.
- Comparisons of alignment between staff survey results and patient experience feedback were asked for, especially regarding dignity and respect. This information can be added to the Patient Satisfaction report that comes to the Quality Governance and Risk Management Committee.
- It was observed that the results demonstrate strong themes of exceptional care, and there was encouragement to maintain and build upon these strengths in the action plan.
- It was confirmed that physicians were included in the survey population.
- It was noted that casual employees were included in the total respondent count, which may affect certain percentage breakdowns. Full-time and part-time participation is estimated to be closer to 70%.

7. **STRATEGIC MATTERS**

There were no strategic matters.

8. **OFFICER REPORTS**

8.1 Board Chair Report

T. Shier provided a monthly report, noting that regular communication continued with the President & CEO throughout the period. The Chair shared that she participated in an Ontario Hospital Association (OHA) webinar and highlighted key topics and insights from the session for the Board’s awareness.

8.2 President & CEO Report

D. Howes provided a report on the agenda that highlighted;

- Grey Bruce CMHA Accreditation: Participation in Accreditation Canada’s evaluation, emphasizing the success of the Urgent Response program and strong system partnerships supporting mental health.
- Discovery Healthcare Camp (July 20–24, 2026): HDH will again host the hands-on summer program for high school students in partnership with Schulich School of Medicine & Dentistry.
- Grey Bruce Ontario Health Team: Discussion with Paul Vickers regarding strategies to connect residents to primary care providers, aligned with the Primary Care Act, 2025 and provincial goals for universal attachment by 2029.
- Southwest Planning & Performance Working Group: Continued work on the Hospital Sector Service Plan (HSSP) with regional priorities in laboratory services, digital consolidation, and shared back-office services.
- Conservable Bed Days: HDH continues to perform strongly at 15%, compared to the small-community hospital median of 18.8%.

Discussion:

- There was discussion about shared back-office functions and it was shared what HDH

already is doing in this regard.

- Further information was provided about the Discovery Healthcare Camp including:
 - Cost of approximately \$350 per participant, with lunches included.
 - Foundation support available for students requiring financial assistance.
 - Program capacity limited to about 25-30 students.
 - Emphasis on hand-on learning opportunities beyond typical co-op placements, offering staff a chance to showcase their expertise.
 - Student registration is managed externally through Western University; HDH does not receive tuition revenue.
 - Program is run in partnership with local high schools and Western University.

9. BUSINESS/COMMITTEE MATTERS

9.1 Finance/Audit & Property Committee Report

C. Prues reported that the Finance/Audit & Property Committee was unable to meet on March 19, 2026. A brief update was provided noting that the year-end financial position is trending positively, with the organization anticipating a finish close to breakeven. The operating budget will be presented to the Board at the next meeting.

9.2 Fiscal Advisory Committee (FAC) Report

There was nothing to report at this time. A meeting is scheduled for April.

9.3 By-Law Committee Report

There was nothing to report at this time. A meeting is scheduled for April to conduct the annual By-Law review.

9.4 Nominating Committee Report

There was nothing to report at this time.

10. CONSENT AGENDA

Moved and Seconded

THAT the items on the consent agenda are approved as follows;

10.1 Open Board Session Minutes – February 24, 2026 (*as revised*)

10.2 Board Committee Reports

- (a) Quality Governance & Risk Management Committee Minutes – February 24, 2026

10.3 Reports

- (a) VP of Patient Care Services/CNE Report
- (b) HDH Foundation Report

MOTION CARRIED

11. ROUND TABLE

It was clarified with the group that comments are only redacted from the Board Meeting Evaluation survey when they reference in-camera items.

12. NEXT MEETING

Tuesday, April 28, 2026, at 5:00pm

13. COMPLETION OF BOARD MEETING EVALUATION

T. Shier reminded the group to complete the Board Meeting Evaluation.

14. ADJOURNMENT

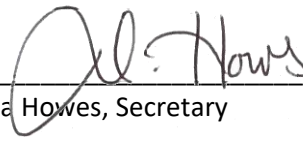
The meeting adjourned at 1754 hours.



Tina Shier, Chair



Victoria Cumming, Recorder



Dana Howes, Secretary