

**MINUTES OF THE REGULAR BOARD MEETING**

DATE: Tuesday, March 22, 2022

TIME: 1700 hours

PLACE: GoToMeeting

PRESENT: **Voting Governors:** Lorna Eadie Hocking (Chair), Tina Shier (Co-Vice Chair), Corwin Leifso (Co-Vice Chair), Tim Kraemer (Treasurer), Terry Leis, Pamela Matheson, Chris Prues, Cathy Rahn,
Non-Voting Governors: Dana Howes (President and CEO), Michelle Scime-Summers (Vice President of Patient Care Services/CNO), Dr. Randy Montag (Chief of Staff), Dr. Nick Abell (President of Medical Staff), Dr. Tim Heerema (Vice President of Medical Staff)

Invited Staff: Kim Mighton (Vice President of Finance & Operations), Victoria Cumming (Recording Secretary)

REGRETS: **Voting Governors:**
Non-Voting Governors:

1. CALL TO ORDER

L. Eadie Hocking called the meeting to order at 1700 hours.

2. OPENING REMARKS

L. Eadie Hocking welcomed everyone to the meeting and shared opening remarks. Board of Governors supports Senior Team – supporting a healthy work-life balance.

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: ACUTE CARE

Michelle Scime-Summers, VP of Patient Care Services provided a presentation highlighting the HDH Acute Care Unit. The presentation included the following;

- Acute Care Beds;
- Types of Patients;
- Staffing;
- Allied Health & Services;
- Admission Process and Care Standards;
- In-Patient Days Data;
- Alternative Level of Care Days Data; and
- Average Age of Patients Data.

Discussion/Questions;

- Clarification was given on how in-patient days are calculated;
- Discussion around comparing HDH metrics with other hospitals in Grey-Bruce and length of stay utilizing the top 5 diagnosis.
- Information was provided upon request in regards to if any Alternative Level of Care (ALC) patients waiting on long-term care have been able to be transferred. Movement remains slow. Transitional care beds have aided this some but there are still over 100 beds that have been removed from the system in Grey-Bruce. Funding around ALC patients was clarified. Once a patient is deemed to not need an Acute Care bed a co-payment is charged that would be similar in a long-term setting. This fee has been frozen during the pandemic and is adjusted based on patient income. This funding does not cover the full cost of staffing these beds in hospital. Hospitals use a RN and RPN model versus a PSW and RN model in long-term care, which is a more expensive model of care.

7. STRATEGIC MATTERS

There were no strategic matters.

8. OFFICER REPORTS

8.1 President/CEO Report

D. Howes provided a written report in the agenda and highlighted;

- Ontario Hospital Association held a Hospital Advisory Committee meeting in January and February. The meeting focused on the current state and stability of hospitals with respect to financial and health human resources concerns in the context of operating pressures and COVID-19 recovery, as well as planning for the future.
- A meeting is being scheduled with Board Members, members from the Grey Bruce Ontario Health Team Planning Committee and consultants from MD+A Health Solutions to review the Collaborative Decision Making Agreement. All HDH Board members are welcome to participate.
- With the ongoing impact of the pandemic on staff and physicians, HDH has introduced a new wellness program, Employee Wellness Network Solutions. The purpose of the program is to emphasize the importance of building wellness initiatives into daily routines.

9. BUSINESS/COMMITTEE MATTERS

9.1 Finance/Audit & Property Committee Report

T. Kraemer reported that the Finance/Audit & Property Committee met on March 17, 2022 and reviewed the finance and property report for the 11th period ending February 28, 2022. There was a surplus before amortization of \$477,736 and a YTD surplus of \$222,492 after building amortization. The hospital continues to replace fluorescent lighting with new LED fixtures. This project is fully funded by HIRF.

9.2 Fiscal Advisory Committee Report

Nothing to report at this time.

9.3 Public Relations Committee Report

Nothing to report at this time.

9.4 By-Law Committee Report

Nothing to report at this time.

9.5 Nominating Committee Report

Nothing to report at this time.

10. CONSENT AGENDA

Item 10.2 (c) Medical Advisory Committee Minutes – February 3, 2022 was pulled from the consent agenda for further discussion;

Clarification was sought around false positive troponin results. It was explained that this only applies to the iSTAT machine that is utilized after hours when Laboratory. The issue is a common problem with all iSTAT machines. The high sensitivity test reference in the minutes currently isn't performed on HDH's iSTAT machine but an upgrade will be done in July 2023 that will allow for this test. This communication was to inform physicians that should they receive a positive result that it be double checked by the Laboratory. It was noted that there is a review mechanism in place for the iSTAT machine. The group discussed potential risk around determined this would be low risk as there are other mechanisms in place.

It was asked if patient repatriation from the HDH Emergency Department to South Bruce Grey Health Centre (SBGHC) – Walkerton Site has improved. There has been communication with SBGHC and some solutions have been put together to expedite the process for physicians. This new process will be brought forward to the physician group at the next Medical Advisory Committee.

Moved and Seconded

THAT the Board of Governors approve Item 10.3 (c) Medical Advisory Committee Minutes – February 3, 2022 as presented.

MOTION CARRIED

Moved and Seconded

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

10.1 Open Board Session Minutes – February 22, 2022

10.2 Board Committee Reports

(a) Finance/Audit & Property Committee Minutes – February 17, 2022

(b) Quality Governance & Risk Management Committee Minutes – February 22, 2022

(i) Officers of the Professional Staff 2022-23

10.3 Reports

(a) Finance & Property Report

(b) VP of Patient Care Services/CNO Report

(i) Patient Rounding Report

(c) Chief of Staff Report

(d) HDH Foundation Report

MOTION CARRIED

11. ROUND TABLE

There was no further discussion.

12. NEXT MEETING

Tuesday, April 26, 2022 at 5:00pm

13. COMPLETION OF BOARD MEETING EVALUATION

L. Eadie Hocking reminded the group to complete the Board Meeting Evaluation.

14. ADJOURNMENT

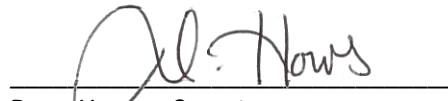
The meeting adjourned at 1732 hours.



Lorna Eadie Hocking, Chair



Victoria Cumming, Recorder



Dana Howes, Secretary