

 HANOVER &
DISTRICT
HOSPITAL
MINUTES OF THE REGULAR BOARD MEETING

DATE: Tuesday, September 27, 2022

TIME: 1700 hours

PLACE: GoToMeeting

PRESENT: **Voting Governors:** Tina Shier (Chair), Tim Kraemer (Treasurer), Lorna Eadie Hocking (Immediate Past Chair), Rejane Dunn, Corwin Leifso, Terry Leis, 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:** Pamela Matheson (Vice Chair)
Non-Voting Governors:

1. CALL TO ORDER

T. Shier called the meeting to order at 1702 hours and extended appreciation from the Board to HDH staff and physicians for the dedication displayed over the summer.

2. APPROVAL OF AGENDA

Moved and Seconded

THAT the agenda be approved as presented.

MOTION CARRIED

3. DECLARATION OF ANY CONFLICT OF INTEREST

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

4. MISSION, VISION, VALUES

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

5. DR. KERR CLARK: A Tribute

Dr. R. Montag provided a tribute to Dr. Kerr Clark's life. It was recognized that he was an outstanding member of the HDH community. His life history was shared with the group along with all of the ways he contributed to HDH throughout the years. HDH was honoured to care for him in his final days; his selfless devotion will never be forgotten. Information was provided for the Celebration of Life planned for October 6, 2022.

6. STRATEGIC MATTERS

6.1 Grey Bruce Ontario Health Team (GB OHT) Update

D. Howes provided a briefing note to the Board and highlighted that the GB OHT is continuing to gradually move forward to address the health needs in the Grey Bruce region. An Executive Director position was filled in August to support the OHT endeavors. The team is in process of developing work groups to address defined performance indicators and targets to develop strategies to support priority populations. There are also discussions occurring about creating a Retention and Recruitment Committee to address health human resource challenges.

6.2 Clinical Regional Outlook – Emergency Departments (ED)

D. Howes provided a briefing note to the Board and highlighted that over the last few months HDH and its South West Hospital partners have recognized urgent needs to ensure hospitals work together with other system partners to address the urgent ED pressures. A Grey-Bruce Sub-Region Team has been put together and has met to identify priorities. Next steps include developing strategies and solutions to present to the South West ED Transformation Steering Committee.

It was questioned if the Grey-Bruce Sub-Region has discussed the number of ED's in the area and their proximity to each other. This has been included in the discussion but the group is just at the beginning of these conversations. An impact analysis will need to be completed for the area and broader discussions with the Ministry around funding will need to happen as well. The group may also determine an external consultant may be needed.

A media release distributed in early September was shared with the group thanking and recognizing HDH Staff and Physicians for their work throughout the summer and keeping all programs open. Staff and Physicians also faced unprecedented patient volumes in all areas of the hospital. The fall will continue to be challenging with unplanned closures of other ED's in the region.

The media release was complimented and the group discussed staff morale due to the increased volumes HDH is absorbing. It was noted that there certainly is an increased workload which can be frustrating for staff. There have been some measures put in place due to one-time funding received for the ED to help alleviate pressures for staff. These include the introduction of a Nurse Practitioner and Personal Support Worker's in the ED. The funding has also been used to increase Ward Clerk, Environmental Service and Diagnostic Imaging hours. With these additional measures put in place it still proves difficult for staff to react well to last minute ED closures in the area. It was noted that these new supports are welcomed and do help support staff but it remains busy and there is concern for nurses to exit for higher paying jobs through non-hospital organizations and agency nursing agencies. The pay gap is recognized by HDH but unfortunately, nurse's compensation is provincially negotiated. With Bill 124 in effect it does not allow hospitals any flexibility for compensation. It was noted that the Ontario Nurses Association contract is up for negotiation at the end of March 2023.

6.3 Physician Recruitment Update

D. Howes provided a briefing note to the Board and highlighted that a professional recruiter has been hired to assist in the recruitment of ED Physicians. A Joint Physician Recruitment Committee had an inaugural meeting in September including HDH, the Town of Hanover, the Hanover & District Hospital Foundation (HDHF) and Hanover Medical Associates.

6.4 Restorative Care Unit (RCU) Beds

M. Scime-Summers brought forward a briefing note in regards to the reassignment of RCU Beds. Background was provided on the original purpose of the program and when it was first introduced. Although HDH has realized many successes with the program, volumes have remained consistently low and the program has been underutilized. The beds are currently temporarily closed due to HHR challenges with limited physiotherapy resources available. Acute Care volume data was shared showing an overall increase and projection of this trend to continue. It was recommended by the HDH Leadership Team and Physicians to discontinue the designation of RCU beds and continue to utilize these two beds as acute medicine beds.

Moved and Seconded

THAT the Board of Governors accept the recommendation to discontinue the designation of two RCU beds with the continuation of utilizing these two beds as acute medicine beds.

MOTION CARRIED

7. OFFICER REPORTS

7.1 Board Chair Report

T. Shier provided a written report in the agenda highlighted the previous months events/meetings attended. There was no further discussion.

7.2 President/CEO Report

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

- Ontario Health (OH), the Ministry of Health (MOH) and the Ministry of Long-Term Care (MLTC) have worked together to develop an action plan focusing on five strategic goals to support health system stabilization and recovery for the fall. These five strategic goals were shared with the group along with the initiative developed by Ontario Health West to support this plan.
- Recently, a Long Term Care (LTC) Transitions Committee was established with hospital in the South West Region and Community and LTC partners. This group will focus on transition of care between Hospitals and LTC's and how patients can be supported.
- HDH is preparing for changes that have been introduced under the *Public Hospitals Act* via Bill 7. HDH will be working with Home and Community Support Service and other hospital partners on how this new legislation will be implemented. An Ontario Hospital Association briefing note was provided to the Board for information.

It was questioned if patients awaiting long-term care (LTC) are currently being charged a co-payment. Patients do get charged once they are deemed to have completed their acute care stay. The maximum is around \$65/day. It was clarified that there has been no news on the reopening of LTC beds in Grey-Bruce and this is unlikely to happen as LTC homes are not able to reopen 3 and 4 beds ward rooms. There are new beds opening in Meaford but this will happen gradually while health human resources are established. HDH's Alternative Level of Care (ALC) rate is currently at 25-30% but this was rate was much higher previously and reached 55%.

7.2 (a) Emergency Department Closure Policy # 203

A revised ED Closure Policy was brought forward to the group. This policy was drafted to be more robust and prepare HDH for the possibility for a potential closure over the summer.

Moved and Seconded

THAT the Board of Governors accept Board Policy # 203 – Emergency Department Closure as presented.

MOTION CARRIED

It was noted that the Board was happy to see the consideration for a team nursing approach included in the policy. The group also discussed what would happen if the ED closed and someone should present in distress. It was clarified that there are some functions that Registered Nurse's (RN) would continue with should a physician vacancy be the reason for a closure. There are standing orders in place and Form 1 patients may need to be held in the department until a bed becomes available.

8. BUSINESS/COMMITTEE MATTERS

8.1 Finance/Audit & Property Committee Report

T. Kraemer reported that the Finance/Audit & Property Committee met on September 22, 2022

and reviewed the financial statements for the 5th period ending August 31, 2022. At the end of August YTD there was a deficit of \$8,067 before amortization and an YTD deficit of \$136,250 after building amortization.

The property report included summer projects that were completed included the replacement of the dishwasher and flooring in the Nutritional Services Department along with the completion of the water main project and the maintenance of the helipad to continue to meet Transportation Canada standard.

8.2 Fiscal Advisory Committee Report

Nothing to report at this time.

8.3 Public Relations Committee Report

Nothing to report at this time.

8.4 By-Law Committee Report

Nothing to report at this time.

8.5 Nominating Committee Report

Nothing to report at this time.

9. CONSENT AGENDA

Moved and Seconded

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

9.1 Open Board Session Minutes – June 28, 2022

9.2 Board Committee Reports

(a) Medical Advisory Committee Minutes – June 2, 2022

(i) Monthly Credentialing Report

9.3 Reports

(a) Finance & Property Report

(b) VP of Patient Care Services/CNO Report

(c) Chief of Staff Report

(d) HDH Foundation Report

MOTION CARRIED

10. ROUND TABLE

Dr. Abell

Clarified that although the summer has been tough on staff and physicians it has been for Administration as well.

R. Dunn

Clarified that agency nurses are paid a lot of money but they also don't have job security, benefits, pension or sick time. She also complimented HDH as she received exceptional care numerous times over the last year.

11. NEXT MEETING

Tuesday, October 25, 2022 at 5:00pm

12. COMPLETION OF BOARD MEETING EVALUATION

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

13. ADJOURNMENT

The meeting adjourned at 1804 hours.



Tina Shier, Chair



Victoria Cumming, Recorder



Dana Howes, Secretary