



## Meeting of the Board of Directors

Wednesday, March 3, 2021 3:00pm

Boardroom & WebEx

2020-2021	Oct 7	Nov 4	Dec 2	Feb 3	Mar 3	Apr 7	May 5	Jun 2
P. van der Westen (Chair)	$\checkmark$	$\checkmark$	✓	√	√W			
D. Ross	$\checkmark$	$\checkmark$	√W	√W	$\checkmark$			
L. Ballantyne	√ W	√W	√W	√W	√W			
A. Dale	√W	√W	√W	√W	√W			
D. Harvey	√ W	√W	√W	√W	√W			
R. Hodgkinson	NA	√W	√W	√W	√W			
S. Martyn	√ W	√T	√W	NA	√W			
R. Robertson	√ W	NA	√W	√W	NA			
M. Vreman	√ W	√W	√W	√W	√W			
H. Lenfesty				NA	$\checkmark$			
Dr. Chehadi	✓	√W	√W	✓W	✓W			1
Dr. Mills	√ W	NA	√W	√W	√W			
Dr. P. Hammond	NA	√W	√W	√W	√W			
R. Biron	$\checkmark$	$\checkmark$	✓	√	$\checkmark$			
K. Davies	√ W	√W	√W	√W	√W			
J. Thorner	√ W	√W	√W	√W	√W			
*W – Denotes joining the meeting via WebEx / *T – Denotes joining the meeting via Telephone								

#### 1. Call to Order

Dan Ross, who was chairing this meeting, called the meeting to order at 3:00pm and asked Andrea Kingdon to conduct a roll call.

#### 2. Approval of Agenda

MOTION

MOVED by Harold Lenfesty, SECONDED by Richard Hodgkinson, that the Board of Directors approve the agenda as presented. CARRIED

### 3. Declaration of Conflicts of Interest

None declared.

#### 4. Quality Improvement Plan Indicators & Definitions – December 2020

Dan Ross invited Karen Davies to provide the Board of Directors with a brief review of the Quality Improvement Plan indicators for the month of January 2021. Ms. Davies noted the following:

- > Quality Improvement Plan (QIP) Indicators
  - When you left hospital, did the hospital make sure you had follow-up care with a doctor or other health care professional?





This metric does not have data available for January 2021, as there is a lag in reporting from National Research Corporation (NRC) Picker Survey responses. Data will be updated when it becomes available.

• Time to Inpatient Bed

This metric is red for the month of January 2021. STEGH's target for this metric is 1hour; provincially the target is less aggressive at 2-hours. The challenge to meet this target can be attributed to the transferring of patients into and out of hot zones (i.e., COVID positive unit), time required to perform appropriate cleaning, and the level of acuity of patients presenting to the emergency department and requiring admission.

#### • Pay for Performance Metrics

The Time to Inpatient Bed, Ambulance Offload, and Physician Initial Assessment are all red this week and these metrics continue to be the most challenging given the pandemic. STEGH's Emergency Department visits vary in number from day-to-day. STEGH continues to have four rankings out of the six that are in the top 6 out of 73 hospitals. STEGH remains 1<sup>st</sup> for the Non-Admit Low Acuity Length of Stay. For Non-Admit High Acuity Length of Stay, STEGH is in 6<sup>th</sup> place. For Time to Inpatient Bed, STEGH remains in 1<sup>st</sup> place. In addition, for the Admitted Length of Stay, STEGH is 2<sup>nd</sup> place. With regard to the overall ranking, STEGH has been 4<sup>th</sup> for the past two months, which is a slight drop from 2<sup>nd</sup> place overall at this time last year.

• Readmission rate for STEGH

Decision Support has confirmed that internally there were no readmissions for the month of January 2021. However, the data provided by CIHI for the months of December 2020 and January 2021 are not available yet and will be updated when they become available.

• Number of Workplace Violence Incidents reported by Employees

A target of 13 incidents/month was set for this metric based on last year's total incidents. For the month of January 2021, there were 16 incidents reported and this is attributed to an overall increase in reporting including verbal aggression and Code White events (violent/behavioural situations) most often attributed to mental health patients.

#### 5. Approval of Draft Minutes of Prior Meetings

The February 3, 2021 Board of Directors draft Meeting Minutes were pre-circulated with the Board package for review.

#### MOTION

MOVED by Harold Lenfesty, SECONDED by Richard Hodgkinson, that the Board of Directors approve the February 3, 2021 Board of Directors draft Meeting Minutes as presented.

CARRIED

#### 6. Committee Reports

#### 6.1 Finance & Audit Committee

#### **6.1.1** Finance & Audit Committee Draft Meeting Minutes

The Finance & Audit Committee draft Meeting Minutes from February 11, 2021, were pre-circulated with the Board package for information purposes.





**6.1.2** 2020-2021 Third Quarter Financial Report and Cash Flow Analysis The 2020/2021 Second Quarter Financial Report, was pre-circulated with the meeting package for review.

#### MOTION

MOVED by Sally Martyn, SECONDED by Harold Lenfesty, that the Board of Directors receive the 2020-2021 Third Quarter Financial Report and Cash Flow Analysis as presented.

CARRIED

#### 6.1.3 2021/2022 Operating Plan & Budget Deferral

The 2021/2022 Operating Plan & Budget Briefing Note was pre-circulated with the meeting package for information purposes. The submission of the operating plan and budget to the Board, and ultimately to the Ministry of Health, is deferred until such time the Ministry provides direction and guidelines relating to funding and the Hospital Annual Planning Submission process. This direction is expected to be received after the provincial budget is approved, which is expected in March.

**6.1.4** 2020/2021 Third Quarter – Regulatory Certification of Obligations of Statutory Payments Dan Ross referred to the Third Quarter Certification of Obligations of Statutory Payments document that was pre-circulated with the meeting package.

#### MOTION

MOVED by Richard Hodgkinson, SECONDED by Amy Dale, that the Board of Directors receive the 2020/2021 Third Quarter – Regulatory Certification of Obligations of Statutory Payments as presented. CARRIED

#### 6.2 Quality & Safety Committee

- **6.2.1** Quality & Safety Committee Draft Meeting Minutes The Quality & Safety Committee draft Meeting Minutes from February 18, 2021, were pre-circulated with the Board package for information purposes.
- 6.2.2 2021/2022 Quality Improvement Plan

The 2021/2022 Quality Improvement Plan Briefing Note was pre-circulated with the board package for information purposes.

#### 7. Other Business

7.1 COVID-19 Update - Briefing Note

Mr. Biron shared the following information in addition to the briefing note.

As of this morning, there were no COVID positive patients in hospital. However, at any given time any number of patients in hospital can be awaiting test results, so this information can change at any time. Mr. Biron shared that in many ways, the second wave of COVID-19 is behind us. In Southwest Ontario, there is a downward trend in cases, which will allow STEGH to prepare for the anticipated third wave of positive cases.

The Southwestern Public Health (SWPH) is leading the local approach to vaccination and more information will be shared as it becomes available regarding vaccines. SWPH has secured the Memorial Arena as a vaccination site. It is unlikely that STEGH would be used as a vaccination site for staff and physicians, as London Health Sciences Centre is leading this program. STEGH ordered an ultra cold freezer to preserve the





vaccines in and that freezer has been loaned to SWPH to support their community vaccination program.

Karen Riddell shared that 310 staff and physicians at STEGH have received their first vaccination. In addition, 160 staff and physicians have received their second vaccination. Those vaccinated include staff and physicians in the higher risk areas like the COVID Assessment Centre, ICU, and Emergency Department. The next group of staff at STEGH scheduled to receive the vaccine includes those in the areas of the Operating Room (OR), Post-Anesthesia Care Unit (PACU) & the Complex Continuing Care (CCC) unit.

A Ministry of Labour Inspector was recently onsite at STEGH inspecting the COVID-19 Assessment Centre and auditing the various COVID-19 safety requirements. The inspector made note of many positive measures in place at STEGH and no orders were issued.

7.2 2021/2022 Hospital Service Accountability Agreement (HSAA) Extension

Robert Biron referred to the 2021/2022 Hospital Service Accountability Agreement (HSAA) Extension Letter that was included with the meeting package. Mainly noting that, STEGH was anticipating the extension of the Hospital Service Accountability Agreement, similar to last year.

MOVED by Harold Lenfesty, SECONDED by Richard Hodgkinson, that the Board of Directors approve the execution of the extending letter for the 2021/2022 Extension of Hospital Service Accountability Agreement. CARRIED

#### 8. Officer Reports

8.1 Board Chair Report

Dan Ross shared that no report would be provided for this month.

8.2 President and CEO Report

The Officer report for the CEO was pre-circulated with the meeting package.

Mr. Biron highlighted the advocacy for MRI service at STEGH. Mr. Biron noted that he also shared the MRI Service Advocacy presentation with the STEGH Foundation and it was well received. The STEGH Foundation Board passed a motion that they too would be sending a letter of advocacy to the Minister of Health.

Provincial Funding Notice is expected in the next week or two and this will be the first indicator as to whether the MRI Service has been included in the Provincial Budget. Mr. Biron shared that he is cautiously optimistic with regard to receiving approval and funding for the MRI Service. In the event that the advocacy for the MRI Service was unsuccessful, then the next plan would be to broaden the advocacy for an in-year allocation.

Sally Martyn expressed that the County of Elgin had passed a motion to extend support of this vital service. Ms. Martyn shared that she would provide a copy of the County's letter to Mr. Biron.

Mr. Lenfesty posed a question regarding the length of time that would be required to have the MRI Service up and running. The Executive Team is working to ensure that all necessary procurement steps are in place to be able to have the MRI Service operational within 6-months from time of approval.



# MINUTES

#### 8.3 Chief of Staff Report

Dr. Waleed Chehadi provided the Board with a verbal report. Dr. Chehadi noted that last year the Board had extended physicians' privileges by one year due to the pandemic. This year a new electronic online application tool developed by Mount Sinai hospital was instituted. This new online portal allows for the storage of all necessary documents to ensure compliance with the various standards. Dr. Chehadi shared that the Credentialing deadline was February 24, 2021 and that this was extended to March 5, 2021. This tool allows for the department Chiefs to review the applications and approve them. The approved applications then are automatically submitted to Dr. Chehadi for his review and approval. The applications are then are presented to the Medical Advisory Committee and then the Board of Directors for a final approval. Dr. Chehadi shared that this new online tool has cut back on a significant amount of labor time for Patty Aldrich, Medical Affairs assistant.

#### 8.4 STEGH Foundation Report

The STEGH Foundation report was pre-circulated with the meeting package.

MOTION

MOVED by Richard Hodgkinson, SECONDED by Harold Lenfesty, that the Board of Directors receive the Officer Reports as presented. CARRIED

#### 9. Correspondence / Information

- **9.1** STEGH MRI Board Letter to Minister Elliot
- 9.2 Letter of Support STEGH MRI

#### 10. In-Camera Meeting

 10.1 Move to In-Camera MOTION MOVED by Harold Lenfesty, SECONDED by Sally Martyn, that the meeting of the Board of Directors move to the in-camera portion of the meeting. CARRIED

Having completed the In-Camera meeting, the meeting resumed in the open session.

#### 11. Termination of Meeting

MOTION

MOVED by Harold Lenfesty, SECONDED by Richard Hodgkinson, that the Board of Directors terminate the meeting. CARRIED