

# **MINUTES**

# Meeting of the Board of Directors Wednesday, April 6, 2022 3:00pm Zoom Video-Conferencing

2021-2022	Oct 6	Nov 3	Dec 1	Feb 2	Mar 2	Apr 6	May 4	Jun 1
Voting Directors:						-		
P. van der Westen (Chair)	✓	✓	√Z	√Z	√Z	√Z		
D. Ross	√Z	✓	√Z	√Z	√Z	√Z		
L. Ballantyne	√Z	√Z	√Z	√Z	√Z	√Z		
A. Dale	√Z	√Z	√Z	√Z	√Z	√Z		
D. Harvey	√Z	√Z	√Z	√Z	√Z	√Z		
R. Hodgkinson	√Z	√Z	√Z	√Z	√Z	√Z		
S. Martyn	√Z	√Z	√Z	√Z	√Z	√Z		
M. Vreman	√Z	√Z	√Z	√Z	√Z	√Z		
H. Lenfesty	√Z	√Z	√Z	√Z	√Z	√Z		
K. Gadsdon			√Z	√Z	NA	√Z		
R. Furneaux				√Z	√Z	√Z		
Ex-Officio Non-Voting Directors:								
Dr. Chehadi	√Z	√Z	√Z	√Z	√Z	√Z		
Dr. J. Armstrong	√Z	√Z	√Z	√Z	√Z	√Z		
Dr. P. Hammond	√Z	√Z	√Z	√Z	√Z	NA		
K. Davies	<b>√</b>	√Z	√Z	√Z	√Z	√Z		
C. Watkin	√Z	√Z	√Z	√Z	√Z	√Z		
J. Thorner	√Z	√Z	√Z	√Z	NA	√Z		
Executive Team:								
T. Sheldon	√Z	√Z	√Z	√Z	√Z	NA		
M. Olanski	√Z	√Z	√Z	√Z	√Z	√Z		
K. Riddell	√Z	√Z	√Z	√Z	√Z	√Z		
J. Bloom	√Z	√Z	√Z	√Z	√Z	√Z		
Guests:								
Kevin Bahadur  – Manager – Transforming Care		√Z	√Z					
Dana Borrie  – Patient Experience Specialist		√Z	√Z					
*Z – Denotes joining the meeting vi	a Zoom ∖	/ideo-Coı	nferencir	ng				

# 1. Call to Order

Peter van der Westen called the Board meeting to order at 3:00pm and asked Andrea McNaughton conduct a roll call.

# 2. Approval of Agenda

MOTION

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

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#### 3. Virtual Lean Huddle

Peter van der Westen stated that several Board members attended the virtual Kaizen Report Out on March 16 and one Board member joined the Tier 2 Huddle on March 17. Peter then asked if anyone else who attended the Kaizen event wanted to share his or her experience and learnings. The following learning outcomes were shared:

- Staff are responsible, work very well together and are very engaged.
- · Culture of the hospital is remarkable.
- Depth of knowledge on Lean is very evident.
- Each department took the time to acknowledge what each teams' needs were and this has helped to ensure that all involved were having their needs met and allowed for all teams to achieve success.
- Collective pride and achievement was evident.
- Sense of teamwork and productivity was inspiring.
- Thanks and appreciation shared for Susan R. for putting emphasis on wellness and doing so in a fun and creative manner.

### **Internal Quality Indicators & Definitions – February 2022**

Craig Watkin introduced himself to those in attendance and stated that he would be providing an overview of the Internal Quality Indicators for the month of February 2022. Highlighting the indicators that were not meeting the targets included:

- Time to Inpatient Bed Date/Time of Disposition to Date/Time left ED
  - This indicator is red for the month of February 2022 at 1.14, leaving the total year-to-date indicator showing green at 1.00.
  - Despite this metric showing red, STEGH remains number one provincially for Time to Inpatient Bed, out of 74 hospitals reporting, with an overall P4R ranking of 1<sup>st</sup> place.
- Readmission rate for STEGH COPD discharges readmitted
  - This indicator does not have data available for December 2021, nor January and February 2022, as there is a lag in reporting. Data will be updated when it becomes available. The year-to-date total is green at 11.8%.
- Medication Reconciliation at Discharge
  - This indicator is green for the month of February 2022 at 91%, leaving the total year-to-date indicator showing red at 89%. Continued focus work is taking place with regard to improvement on this indicator.
- Repeat Emergency Department (ED) Visits for Mental Health
  - This indicator does not have data available for the third quarter, as there is a lag in reporting. Data will be provided when it becomes available. The year-to-date total is green at 22.0%.

#### 4. Patient Experience

Craig Watkin shared a Patient Experience story.

# 5. Declaration of Conflicts of Interest

None declared.

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

**6.1** March 2, 2022 Meeting Minutes

The March 2, 2022 Meeting draft minutes were pre-circulated with the Board package for review.



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#### MOTION

MOVED by Amy Dale, SECONDED by Richard Hodgkinson, that the Board of Directors approve the March 2, 2022 Meeting draft minutes as presented. CARRIED

#### 7. Committee Reports

#### 7.1 Finance & Audit Committee

#### **7.1.1** Finance & Audit Committee Draft Meeting Minutes (March 16, 2022)

The Finance & Audit Committee Draft Meeting Minutes from March 16, 2022, were precirculated with the Board package for information purposes.

#### MOTION

MOVED by Harold Lenfesty, SECONDED by Dan Ross, that the Board of Directors receive the Finance & Audit Committee draft Meeting Minutes from March 16, 2022 as presented.

CARRIED

#### **7.1.2** 2022-2023 Annual Operating and Capital Plan

The 2022-2023 Annual Operating and Capital Plan was pre-circulated with the meeting package for review and approval. Meaghan Vreman provided a brief overview of the 2022-2023 Annual Operating and Capital Plan.

#### MOTION

MOVED by Harold Lenfesty, SECONDED by Richard Hodgkinson, that the Board of Directors approve the 2022-2023 Annual Operating & Capital Plan, as presented, with the expectation that the Plan would be updated by management and reviewed by the Board of Directors once Ministry of Health funding is clarified. CARRIED

#### 7.2 Quality & Safety Committee

# **7.2.1** Quality & Safety Committee Draft Meeting Minutes (March 17, 2022)

The Quality & Safety Committee draft Meeting Minutes from March 17, 2022, were precirculated with the Board package for information purposes.

#### MOTION

MOVED by Amy Dale, SECONDED by Ken Gadsdon, that the Board of Directors receive the March 17, 2022 Quality & Safety Committee Meeting draft minutes as presented.

**CARRIED** 

### 7.2.2 Ethics Update Report

The Ethics Update Report was pre-circulated with the meeting package for information purposes.

# **7.2.3** Emergency Preparedness Report

The Emergency Preparedness Report was pre-circulated with the meeting package for information purposes.

#### 8. Other Business

#### **8.1** COVID-19 Update

Karen Davies provided a brief verbal update on the current situation with COVID-19 at STEGH and within the community.

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Karen began by sharing that we are in the beginning of wave 6 of the COVID pandemic.

At the time of writing, there are 11 patients with COVID in hospital at STEGH. Across the province, all hospital admissions have increased; as well, there has been an increase in the number of COVID patients requiring ventilators.

As of today, 23 staff are off with COVID or because of a high-risk exposure. Additionally, 14 employees are on either modified work or working from home due to a high-risk exposure.

Non-COVID burden of care is high right now within STEGH. The Emergency department is seeing an increase in patients.

Karen asked Dr. Chehadi to share his thoughts on COVID. Dr. Chehadi shared that locally the situation with COVID is becoming a larger impairment on the healthcare system; leaving little room for optimism. By removing masking mandates, this has increased the risk of exposure. The removal of physical distancing and capacity limits has only increased the negative effects of the virus spreading. The efficacy of COVID vaccines have likely peaked and leaving the vaccines more resistant to the current variants of the virus.

# 8.2 Elgin OHT Update

Karen Davies provided the Board with a brief verbal update with regard to the Elgin Ontario Health Team (Elgin OHT). Karen shared that Deanna Huggett begin her role as Executive Director on Monday, March 28, noting the Deanna is getting settled in and beginning to have introductory meetings with key stake holders.

Karen shared that the OHT one-time funding was confirmed for the 2022-2023 fiscal year for \$900,000.

### 9. Officer Reports

#### **9.1** Board Chair Report

The Officer report for the Board Chair was provided verbally at the meeting.

### **9.2** President and CEO Report

The Officer report for the President & CEO was pre-circulated with the meeting package. Karen Davies shared that violence continues to escalate within the healthcare sector and at STEGH. Karen also shared that the increased volume of patients requiring assistance for, mental health and/or addictions concerns, within the region is putting additional pressure on the healthcare sector, and STEGH is seeing these pressures too.

### 9.3 Chief of Staff Report

The Officer report for the Chief of Staff was provided verbally at the meeting.

Dr. Chehadi reported that a replacement orthopaedic surgeon has been secured to replace the vacancy within the STEGH Surgical team. The new orthopaedic surgeon is expected to be settled and begin at STEGH in late summer; although he is officially approved to provide care at STEGH, given he is presently credentialed on a term basis.

#### **MOTION**

MOVED by Harold Lenfesty, SECONDED by Dan Ross, that the Board of Directors receive the Officer Reports as presented.

CARRIED

#### 10. Correspondence / Information

### **10.1** None.



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### 11. In-Camera Meeting

#### **11.1** Move to In-Camera

**MOTION** 

MOVED by Harold Lenfesty, SECONDED by Dan Ross, 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.

# 12. Termination of Meeting

MOTION

MOVED by Dan Ross, SECONDED by Harold Lenfesty, that the Board of Directors terminate the meeting.

**CARRIED**