



Meeting of the Board of Directors

Wednesday, December 1, 2021

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					
D. Ross	√Z	✓	√Z					
L. Ballantyne	√Z	√Z	√Z					
A. Dale	√Z	√Z	√Z					
D. Harvey	√Z	√Z	✓Z					
R. Hodgkinson	√Z	√Z	✓Z					
S. Martyn	√Z	√Z	√Z					
M. Vreman	√Z	√Z	√Z					
H. Lenfesty	√Z	√Z	√Z					
K. Gadsdon			✓Z					
Ex-Officio Non-Voting Dire	ctore:							
Dr. Chehadi	vZ	√Z	√Z					
Dr. J. Armstrong	√Z	√Z	✓Z					
Dr. P. Hammond	√Z	✓Z	√Z					
K. Davies	✓ <u> </u>	✓Z	✓Z					
C. Watkin	√Z	 √Z	 √Z					
J. Thorner	√Z	√Z	√Z					
Executive Team:								
T. Sheldon	√Z	√Z	√Z					
M. Olanski	✓Z	√Z	√Z					
K. Riddell	✓Z	√Z	√Z					
Guests:		1		1	1			
Kevin Bahadur – Manager – Transforming Care		√Z	√Z					
Dana Borrie – Patient Experience Specialist		√Z	√Z					
*Z – Denotes joining the meeting	ig via Zooi	m Video-C	onferenci	ing				

1. Call to Order

Peter van der Westen called the open session of the Board meeting to order at 3:06pm and asked Andrea McNaughton conduct a roll call.

2. Approval of Agenda

MOTION

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

3. Virtual Lean Huddle





Kevin Bahadur introduced himself as the Manager of the Transforming Care department at STEGH and shared that he would be presenting on the Continuous Improvement Culture and Governance Huddle. Highlights included:

- There are three Foundational Principles including, Organizational Alignment, Cultural Influence, and Continuous Improvement.
- Areas of consideration for Board of Directors include:
 - Strategic Board Review Once per month, a review the Strategic Board is conducted. This review provides an understanding of how Strategic Objectives connect to Strategic Goals, focuses on lessons learned, and celebrates teams.
 - Tier 2 Huddle Review Once per month, Board members could join huddle to view how leadership team connects to the organizational purpose. Board members can then share what they learned at the Tier 2 huddle with the full Board at the monthly Board of Directors meeting during Board huddle.
 - Kaizen Report Out Held once per month. Board members could join the Kaizen, which celebrates improvements in the organization and recognizes staff for excellent work.
- Climate Agreement An agreement can be developed and used to promote the energy and atmosphere and to help hold each other accountable on how to govern and achieve the desired climate.

Internal Quality Indicators & Definitions – October 2021

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 October 2021. Highlighting the indicators that were not meeting the targets included:

• Readmission rate for STEGH COPD discharges readmitted

This indicator does not have data available for September & October, as there is a lag in reporting. Data will be updated when it becomes available. The year-to-date total is green at 11.5%.

• Percent of Workplace Safety Incidents with Follow Up Completed within 48 Hours - June 1 start

This indicator is red for the month of October at 74.1%, leaving the total year-to-date indicator showing red at 81%. This indicator can be attributed to a delay in the Manager entering the follow-up in to the Risk Monitor Pro system. Reminders are being sent to the leaders to enter their follow up within 48 hours. Leadership is monitoring the incidents reporting system for any trends and reviewing with Managers to provide support where it may be needed.

Craig shared the new Internal Quality Indicator that was adopted at the November 18, 2021 Quality & Safety Committee meeting.

• Repeat Emergency Department (ED) Visits for Mental Health (MH).

A proposed target of <19% is being recommended with the goal of decreasing the number of unplanned repeat visits for either a MH or addiction condition that occurs within 30 days of the initial visit.

The goal being to reduce the number of unplanned repeat MH visits, in part by determining if other supports, services and care planning could be implemented to improve the patient experience and care provided.

4. Patient Experience





Dana Saunders introduced herself to those in attendance and shared that she would be presenting a Patient Experience story. Dana shared the patient's personal experience relating to the care that he received in the STEGH Intensive Care Unit. The patient's experience has allowed him to share his experience to share compassion and be engaged in the process to make improvements, as a member of the Patient Experience Council.

5. Declaration of Conflicts of Interest

None declared.

6. Approval of Draft Minutes of Prior Meetings

6.1 November 3, 2021 Meeting Minutes

The November 3, 2021 Meeting draft minutes were pre-circulated with the Board package for review.

MOTION

MOVED by Richard Hodgkinson, SECONDED by David Harvey, that the Board of Directors approve the November 3, 2021 Meeting draft minutes as presented. CARRIED

7. Committee Reports

7.1 Finance & Audit Committee

7.1.1 Finance & Audit Committee Draft Meeting Minutes (November 17, 2021) The Finance & Audit Committee Draft Meeting Minutes from November 17, 2021

The Finance & Audit Committee Draft Meeting Minutes from November 17, 2021, were pre-circulated with the Board package for information purposes.

MOTION

MOVED by Meaghan Vreman, SECONDED by Richard Hodgkinson, that the Board of Directors receive the Finance & Audit Committee draft Meeting Minutes from November 17, 2021 as presented.

CARRIED

7.1.2 Laboratory Relocation Project Presentation

The Laboratory Relocation Project Presentation was pre-circulated with the meeting package for review and approval.

MOTION

MOVED by Meaghan Vreman, SECONDED by Sally Martyn, that the Board of Directors approve, the Laboratory Relocation Project, which includes the local funding share commitment of \$900,000. \$800,000 to be financed through public donations received by the STEGH Foundation and the remaining \$100,000 to be financed through STEGH funds.

CARRIED

7.1.3 2021-2022 Second Quarter Financial Report

The 2021-2022 Second Quarter Financial Report, was pre-circulated with the meeting package for review. Ms. Vreman provided a brief overview of the Operating Statements and presentation of the COVID-19 expenditures and impact on net position.

MOTION

MOVED by Meaghan Vreman, SECONDED by Dan Ross, that the Board of Directors receive the 2021-2022 Second Quarter Financial Report as presented. CARRIED





7.1.4 2021/2022 Semi-Annual Hospital Service Accountability Agreement (HSAA) Performance Indicators Report)

The 2021/2022 Semi-Annual Hospital Service Accountability Agreement Performance Indicators were pre-circulated with the meeting package for review.

MOTION

MOVED by Meaghan Vreman, SECONDED by Richard Hodgkinson, that the Board of Directors receive the 2021/2022 Semi-Annual Hospital Service Accountability Agreement (HSAA) Performance Indicators Report as presented. CARRIED

7.1.5 2021/2022 Semi-Annual Reporting of Executive, Board, and Consultant Expenses The 2021/2022 Semi-Annual Reporting of Executive, Board, and Consultant Expenses were pre-circulated with the meeting package for review.

MOTION

MOVED by Meaghan Vreman, SECONDED by Harold Lenfesty, that the Board of Directors receive the 2021/2022 Semi-Annual Reporting of Executive, Board, and Consultant Expenses as presented. CARRIED

7.1.5 2021/2022 Second Quarter Regulatory Certification of Obligations of Statutory Payments The 2021/2022 Second Quarter Regulatory Certification of Obligations of Statutory Payments were pre-circulated with the meeting package for review.

MOTION

MOVED by Meaghan Vreman, SECONDED by Richard Hodgkinson, that the Board of Directors receive the 2021/2022 Semi-Annual Reporting of Executive, Board, and Consultant Expenses as presented. CARRIED

7.2 Quality & Safety Committee

7.2.1 Quality & Safety Committee Draft Meeting Minutes (November 18, 2021) The Quality & Safety Committee draft Meeting Minutes from November 18, 2021, were pre-circulated with the Board package for information purposes.

MOTION

MOVED by Amy Dale, SECONDED by Richard Hodgkinson, that the Board of Directors receive the November 18, 2021 Quality & Safety Committee Meeting draft minutes as presented.

CARRIED

7.2.2 Annual Quality Improvement Plan Review

The Annual Quality Improvement Plan Review Presentation was pre-circulated with the meeting package for information purposes.

7.2.3 Patient Satisfaction Presentation

The Patient Satisfaction Presentation was pre-circulated with the meeting package for information purposes.

8. Other Business



MINUTES

8.1 COVID-19 Update

Karen Davies provided a verbal update on COVID-19.

Karen shared that Southwestern Public Health (SWPH) has announced new measures for gathering restrictions for the next six weeks and this is in part to low vaccination rates and high case prevalence in parts of Elgin and Oxford counties.

Currently there are 170 COVID active cases within the Southwestern Public Health (SWPH) region.

Vaccine rates are moving up very slowly in Elgin county. As of today, 82% of the eligible population in Elgin County is fully vaccinated. Vaccine bookings have opened for all children aged 5 to 11, starting on November 23, which may initially cause the vaccination rates to appear as though they have dropped but this is because it will now take into account everyone aged 5+.

The Omicron variant is becoming the main area of concern at this time. Where this variant appears to originate from in India, there is a vaccine rate of approximately 24% of the population. The transmissibility, the vaccine efficacy, and possibility for mutation of the variant all remain unknown at present.

At the time of writing, there are 10 COVID patients admitted at STEGH and all are non-vaccinated. In the past month, there have been anywhere from 10 to 18 COVID patients in hospital, and this number changes daily.

Regionally, our peer hospitals are starting to see more COVID positive patients being admitted.

The COVID Assessment Centre has been a little bit slower, providing testing for about 140 patients per day. Of the patients presenting for COVID testing, 40% are children, less than 12 years old.

Across the country, we are starting to see an increase of COVID positive patients being admitted to hospital, being double vaccinated.

There are two local institutional outbreaks at present, one in Aylmer and one in St. Thomas.

Today was the deadline for the annual flu vaccine, to either receive one or make a declination. The current percentage of compliance of staff and physicians is lower than we would like to see it.

The Executive and Leadership teams continues to provide support to staff and physicians, in many ways, including snack baskets for each department, handing out treat and thanking staff, free staff appreciation lunch, free KN95 masks, etc.

There is a Wellness Committee at STEGH that works hard to offer wellness activities for staff to help lessen the burden on staff during the ongoing pandemic. Karen Riddell shared that we have therapy dogs come onsite for staff to interact with, food, giveaways, ensuring that staff are permitted vacation where possible, resiliency training, online yoga and exercise classes, onsite counseling once per week for staff with a licensed social worker from Homewood Health, ethic coaching from an ethicist, etc.

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 the Elgin OHT is currently completing the first round interviews for an Executive Director (ED) and that the intention is to have the individual begin in the role January 2022. STEGH is the Transfer Payment Agency for the Elgin OHT; however, funding has still not been secured.





9. Officer Reports

9.1 Board Chair Report

The Officer report for the Board Chair was provided verbally during the in-camera portion of the meeting.

- **9.2** President and CEO Report The Officer report for the President & CEO was pre-circulated with the meeting package.
- **9.3** Chief of Staff Report The Officer report for the Chief of Staff was provided verbally the meeting.

9.4 STEGH Foundation Report

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

MOTION MOVED by Harold Lenfesty, SECONDED by Sally Martyn, that the Board of Directors receive the Officer Reports as presented. CARRIED

10. Correspondence / Information

10.1 None.

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 Richard Hodgkinson, SECONDED by Sally Martyn, that the Board of Directors terminate the meeting. CARRIED