

## Meeting of the Board of Directors Wednesday, May 4, 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	√Z	
D. Ross	√Z	✓	√Z	√Z	√Z	√Z	√Z	
L. Ballantyne	√Z							
A. Dale	√Z							
D. Harvey	√Z							
R. Hodgkinson	√Z	√Z	√Z	√Z	√Z	√Z		
S. Martyn	√Z							
M. Vreman	√Z							
H. Lenfesty	√Z							
K. Gadsdon			√Z	√Z	NA	√Z	NA	
R. Furneaux				√Z	√Z	√Z	√Z	
Ex-Officio Non-Voting Directors:								
Dr. Chehadi	√Z							
Dr. J. Armstrong	√Z							
Dr. P. Hammond	√Z	√Z	√Z	√Z	√Z	NA	√Z	
K. Davies	✓	√Z	√Z	√Z	√Z	√Z	√Z	
C. Watkin	√Z							
J. Thorner	√Z	√Z	√Z	√Z	NA	√Z	√Z	
Executive Team:								
T. Sheldon	√Z	√Z	√Z	√Z	√Z	NA	√Z	
M. Olanski	√Z							
K. Riddell	√Z							
J. Bloom	√Z	√Z	√Z	√Z	√Z	√Z	NA	
Guests:								
Kevin Bahadur – Manager – Transforming Care		√Z	√Z					
Dana Borrie  – Patient Experience Specialist		√Z	√Z					
*Z – Denotes joining the meeting via Zoom Video-Conferencing								

## 1. Call to Order

Peter van der Westen called the Board meeting to order at 3:01pm.

Peter began by sharing that Richard Hodgkinson, who passed away suddenly in April, was a valued member of the Board of Directors and that he will be missed by all.

## 2. Approval of Agenda

MOTION

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

## 3. Virtual Lean Huddle

## St.Thomas Elgin General Hospital

## **MINUTES**

Peter van der Westen shared that he attended the Kaizen Report Out on April 20 and highlighted the two presentations on process improvements. 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:

- Appreciated the 5S process that was utilized to remove waste and make things more efficient.
- Collegiality and willingness to work across boundaries and not work in "silos" was remarkable.
- The desire to improve patient care and work efficiency was a highlight.
- Importance of the removal of wastes and equipment that is no longer needed/used and making room for new equipment that is required.
- Lean process highlights the tremendous amount of work required across all levels of organization to make the largest improvement by way of small improvements every day.
- Showed clearly how the lean process works; take process apart, eliminate waste, and then put the process back together.
- Acknowledgement of successes and recognition of staff is important and appreciated.

## Internal Quality Indicators & Definitions – March 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 March 2022, highlighting the indicators that had improved from the previous month as well as the indicators that had not met target. These included:

## Time to Inpatient Bed

This indicator improved for the month of March and is green 1.00, leaving the year-to-date indicator green at 1.00. As a result, STEGH was number 1 for Time to Inpatient Bed in the province and an overall ranking of number 1 for the P4R targets.

Medication Reconciliation at Discharge

This indicator is red for the month of March 2022 at 88%, leaving the year-to-date indicator red at 89%. A working group has been formed to target this indicator and make improvements and progress moving forward.

#### 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

April 6, 2022 Meeting Minutes

The April 6, 2022 Meeting draft minutes were pre-circulated with the Board package for review.

MOTION

MOVED by Harold Lenfesty, SECONDED by Robert Furneaux, that the Board of Directors approve the April 6, 2022 Meeting draft minutes as presented. CARRIED

## 7. Committee Reports



### 7.1 Quality & Safety Committee

## **7.1.1** Quality & Safety Committee Draft Meeting Minutes (April 21, 2022)

The Quality & Safety Committee draft Meeting Minutes from April 21, 2022, were precirculated with the Board package for information purposes.

Amy Dale highlighted the Occupational Health and Safety Report that was presented by Karen Riddell. Amy noted that there had been a change to the Occupational Health and Safety Act that increased the maximum fines for Directors or Officers of Corporations from \$100K to \$1.5M. Questions were raised as to how this affects STEGH Directors and whether the Directors and Officers liability insurance has coverage for such a fine. It was confirmed that the fines are just that, fines and not damages for negligence, and thus not something that the HIROC insurance policy covers. However, under the hospital Corporate By-law, the Board of Directors have indemnity from the hospital itself for any such fines that may be levied against the Directors, unless the Directors themselves have been engaging in something unlawful.

For Board Directors not to be covered by the hospital, as per section 5.06(c) of the By-law, a Board member would have to be found to be unlawful in their behavior. Otherwise, the By-law covers the liability requirements for Board Directors.

#### MOTION

MOVED by Sally Martyn, SECONDED by Dan Ross, that the Board of Directors receive the April 21, 2022 Quality & Safety Committee Meeting draft minutes, subject to the amendments pertaining to the increased fines for Board Directors as stated above and in the Occupational Health & Safety presentation.

CARRIED

#### **7.1.2** Stroke Distinction Presentation

The Stroke Distinction Presentation was pre-circulated with the meeting package for information purposes.

7.1.3 Quality & Safety Committee Composition – Staff Support Member Vacancy Following a brief explanation on the Staff Support Member vacancy for the Quality & Safety Committee, the recommendation was made by the Quality & Safety Committee to appoint Debbie Turner, STEGH Director of Professional Practice, to fill the Staff Support Member vacancy was made.

#### MOTION

MOVED by Robert Furneaux, SECONDED by Harold Lenfesty, that the Board of Directors approve the appointment of Debbie Turner, STEGH Director of Professional Practice, to fill the Staff Support Member vacancy; as this position is required as a member of the Quality & Safety Committee, as stated in the Governance Policy Manual – section 2.3.1 (g).

**CARRIED** 

## **7.1.4** Occupational Health & Safety Report

The Occupational Health & Safety Report presentation was pre-circulated with the meeting package for information purposes.

#### **7.1.5** Senior Friendly Care Strategy

The Senior Friendly Care Strategy presentation was pre-circulated with the meeting package for information purposes.

#### **7.1.6** 2022-2023 Quality Improvement Plan Submission



The 2022-2023 Quality Improvement Plan Submission briefing note was pre-circulated with the meeting package for review and approval.

#### **MOTION**

MOVED by David Harvey, SECONDED by Linda Ballantyne, that the Board of Directors approve the 2022-2023 Quality Improvement Plan Submission as presented. CARRIED

## 8. Strategic Plan - 2022-2023 Annual Objectives

Karen Davies reminded the Board that in November 2021 the Executive Team refreshed the Tier 3 Huddle board. Karen shared that it was important to the Executive Team not to create a further burden of work, but to capture the great work that is already taking place, while continuing to move forward in a steadfast way. Throughout the months of February and March 2022, the Executive Team made several iterations of the goals and objectives, until there was a solid straw dog plan prepared to share the Leadership Team for feedback. The refreshed plan was shared with the entire Leadership Team and the Medical Advisory Committee group by way of drop in sessions, where they were able to review the refreshed plan and provide feedback.

Karen then took the Board through the refreshed 2022-2023 Strategic Plan Annual Objectives one goal at a time and answered questions that arose during the presentation.

#### MOTION

MOVED by Harold Lenfesty, SECONDED by Linda Ballantyne, that the Board of Directors approve the refreshed 2022-2023 Strategic Annual Goals and Objectives as presented.

CARRIED

#### 9. Other Business

#### 9.1 COVID-19 Update

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

Karen began by sharing that at the time of meeting there were 11 COVID positive patients admitted in hospital.

The main concern of leadership and the Executive Team remains the mental and physical wellness of the staff that are coming to work each day. Staff burnout is still a very real concern and ensuring that staff have access to the wellness tools that they require in order to continue showing up to work each day remains top priority.

Karen then shared the statistics of COVID over the past two years.

From March 2020 to March 2022:

- 3318 COVID positive patients seen in the COVID Assessment Centre
- 357 COVID positive patients cared for in the Emergency Department
- 535 COVID positive patients admitted
- 1 outbreak
- 143 COVID positive patients admitted to the Intensive Care Unit
- 51 COVID related deaths

## 9.2 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 Coordinating



Council is looking at how to address both the initial application goal of COPD/CHF patients, as well as the mental health and addictions population.

Deanna Huggett has now been in the Executive Director role for one month and things are beginning to have some traction.

## 10. Officer Reports

### **10.1** Board Chair Report

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

Peter shared that the Board will review the annual work plan goals that were made at the beginning of the Board year and will report at the June 1, 2022 meeting.

Regarding the recent vacancy on the Board of Directors, the decision was made to wait until the summer months to begin the process of recruiting to fill the vacant position. Peter shared that in discussion with Dan Ross, Vice Chair, and Karen Davies, the desire to recruit someone from one of our local Indigenous Communities to join the Board would help to diversify the Board.

## 10.2 President and CEO Report

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

## **10.3** Chief of Staff Report

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

Dr. Chehadi shared three important updates which included the following:

- The Ministry of Health opened up the applications for Physician On-Call Funding, which allows STEGH to true up some of the numbers; however, there is no actual increase in the payment of this service.
- A fifth Intensivist was brought on board at STEGH which will allow some additional support to the already busy program.
- STEGH has received some expressions on interest by Psychiatrists to join the team at STEGH. This is in the initial stages of discussing bringing on a sixth psychiatrist to the team.

#### **MOTION**

MOVED by Robert Furneaux, SECONDED by David Harvey, that the Board of Directors receive the Officer Reports as presented.

CARRIED

#### 11. Correspondence / Information

#### **11.1** None.

#### 12. In-Camera Meeting

#### **12.1** Move to In-Camera

#### MOTION

MOVED by Dan Ross, SECONDED by Amy Dale, 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.

## 13. Termination of Meeting

MOTION

MOVED by Harold Lenfesty, SECONDED by Sally Martyn, that the Board of Directors terminate the meeting.

