

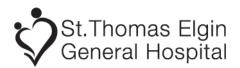
Meeting of the Board of Directors Wednesday, December 7, 2022 3:00pm

Zoom Video-Conferencing

2022-2023	Oct 5	Nov 2	Dec 7	Feb 1	Mar 1	Apr 5	May 3	Jun 7
Voting Directors:								
P. van der Westen (Chair)	√Z	√Z	√Z					
D. Ross	√Z	√Z	√Z					
R. Furneaux	√Z	√Z	√Z					
L. Ballantyne	√Z	√Z	√Z					
A. Dale	√Z	√Z	√Z					
D. Harvey	√Z	√Z	√Z					
S. Martyn	√Z	√Z	√Z					
M. Vreman	√Z	√Z	√Z					
H. Lenfesty	√Z	R	√Z					
K. Gadsdon	√Z	√Z	R					
Ex-Officio Non-Voting Directo	rs:							
Dr. W. Chehadi	√Z	√Z	√Z					
Dr. J. Armstrong	√Z	√Z	√Z					
Dr. P. Hammond	√Z	√Z	√Z					
K. Davies	√Z	R	√Z					
C. Watkin	√Z	√Z	R					
D. Dale	R	√Z	√Z					
Executive Team:								
T. Sheldon	√Z	√Z	√Z					1
M. Olanski	√Z	√Z	√Z					
K. Riddell	R	√Z	R					
J. Bloom	√Z	R	R					
Guests:								
Kevin Bahadur	✓Z	√Z	√Z					
– Manager – Transforming Care	, ,	,						
Brigeen Tracy	√Z							
- Proximity Institute Claire Hefferon - Payne								
- Proximity Institute	√Z							
Debbie Turner			√Z					
- Director - Professional Practice								
*Z – Denotes joining the meeting	g via Zoom \	/ideo-Co	nterencii	ng R – D	enotes l	Regrets	tor meeti	ng

1. Call to Order

Peter van der Westen called the meeting to order at 3:03pm and asked Andrea McNaughton conduct a roll call.



2. Approval of Agenda

MOTION

MOVED by Robert Furneaux, SECONDED by Dan Ross, that the Board of Directors approve the agenda as presented. CARRIED

3. Virtual Board Lean Huddle

Peter van der Westen stated there had been several members who attended the Kaizen Report Out event and Tier 2 Leadership Huddles throughout the month of November. Peter asked the Directors to share their learnings and acknowledgement of those to be celebrated, from their experiences attending these events. Peter reminded the Board to keep in mind how the Board aligns with the hospitals goals and the Strategic Plan. Several members shared their feedback relating to learnings, reflections, celebrations and areas for potential growth.

Robert Furneaux shared that he wanted to celebrate the hospital leadership surpassing the goal of 50 wellness events per month with 468 events taking place in the month of October.

Dan Ross shared that he learned that the team acknowledges the successes, along with the failures, so that improvements can be made from the learnings of what did not go well.

David Harvey shared that the team focused on the patient experience with regard to making improvements within the hospital and not just on improvements for ease of staff. David also shared that he was impressed by the team's determination to find a suitable solution and that they continued trialing different options until they settled on the best option. He also shared how the collaboration between teams was notable.

Linda Ballantyne celebrated the time and leadership of Peter as he conducted the Board Director Evaluations.

Dan Ross celebrated the work being done by Debbie Turner and Karen Davies for the great work being done for Accreditation preparation.

Peter then asked Karen Davies to walk the Board through the Strategic Pillar update on Empowering Our Team.

Internal Quality Indicators & Definitions - October 2022

Monica Olanski introduced herself to those in attendance and shared that she would be filling in for Craig Watkin, to provide an overview of the Internal Quality Indicators for the month of October 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 October 2022 at 3.13. Despite not meeting this target, STEGH continues to rank number 2 provincially for this metric. In-patient length of stay and acuity is increasing and these have a direct impact on this metric.
- Pay for Performance Metrics

This indicator is red for the month of October 2022 at 17%.

Monica highlighted that although STEGH is not meeting the provincial targets on some of the Pay for Performance metrics, we are very close to the targets, which is noteworthy given the current state of hospital census and the increased level of acuity.



- Readmission rate for STEGH COPD discharges readmitted
 - This indicator does not have data available for August, September or October 2022, as there is a lag in reporting. Data will be updated when it becomes available.
- Number of workplace violence incidents reported by Employees
 This indicator is had eight incidents reported in October 2022.

 Monica shared that a great deal of focused attention is being placed on ensuring staff are safe, exploring ways to mitigate risks, and provide support to staff.

4. Pandemic & Diseases of Public Concern – *Update*

Karen Davies provided a brief verbal update on the current situation with the pandemic and other diseases of public concern at STEGH. Karen noted that the pediatric volumes have begun to level out, and that the adult volumes continue to be over capacity. On December 1, STEGH opened additional beds on the third floor over and above the additional 22 beds that have already been opened. These additional beds are needed, otherwise patients are must be held in the Emergency department, which then backlogs the department. These additional beds, on third floor, will be re-opened and staffed as required.

Karen stated that at the time of meeting there were 15 COVID positive patients admitted in hospital. The Intensive Care Unit (ICU) has been more active lately than usual. Staff illnesses continue to remain status quo.

Occupancy continues to be very high within the hospital and the Alternative Level of Care (ALC) number is at 33. Work continues on a daily basis, with Home and Community Care, to place patients in the proper level of care. However, there are not a lot of long-term care beds available within Elgin County.

Flu vaccination numbers at STEGH have reached 75% of staff receiving their flu vaccination and physicians are at 78%.

Ontario Health has recently mandated Assessment Centre's to create COVID, Cold & Flu Care Clinic (CCFCC) for adults and children with respiratory and influenza like symptoms. One of the main goals is to divert patients from the Emergency Departments (ED), and allow the ED's to focus on acute and urgent patient care needs. STEGH is taking a different approach in contrast to most hospitals and looking to set up CCFCC's in the community to allow for greater spread, accessibility and access. As well, STEGH's Assessment Centre is moving in January to accommodate construction for the new MRI, and there are no opportunities for expansion. STEGH is working closely with the Elgin OHT, family health teams, community health centers, primary care physicians and Southwestern Public Health (SWPH) to determine the most appropriate locations to open the clinics within Elgin County. Interest from our community partners has been exceptional. The aim over time is to have a few clinics within the community with the first clinic opening within the next 2-3 weeks, or early January. These CCFCC's will not replace existing walk-in clinics but will be an adjunct to them. Any citizen, with our without a Family Physician can access the CCFCC.

5. Education

Accreditation - Presented by Debbie Turner

Debbie Turner attended the meeting to provide education on Required Organizational Practices (ROPs) for Accreditation.

Debbie shared that there are 38 ROPs and 31 that are applicable to STEGH. These 31 ROPs fall within six categories, including Safety Culture, Communications, Information



Care Transitions, Medication Use, Worklife / Workforce, Infection Control, and Risk Assessment.

Each ROP has one or more tests for compliance to ensure that STEGH demonstrates these standards.

Preparation for Accreditation includes ensuring that all policies and processes are up-to-date.

6. Declaration of Conflicts of Interest

None declared.

7. Approval of Draft Minutes of Prior Meetings

November 2, 2022 Board of Directors Meeting Minutes

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

MOTION

MOVED by Sally Martyn, SECONDED by Robert Furneaux, that the Board of Directors approve the November 2, 2022 Board of Directors Meeting draft minutes as presented. CARRIED

8. Committee Reports

8.1 Governance Committee

8.1.1 Governance Committee Draft Meeting Minutes (November 9, 2022)

The Governance Committee draft Meeting Minutes from November 9, 2022, were precirculated with the Board package for information purposes.

MOTION

MOVED by Dan Ross, SECONDED by Robert Furneaux, that the Board of Directors receive the draft Meeting Minutes of the November 9, 2022 Governance Committee meeting as presented.

CARRIED

8.1.2 Memo – Board Evaluation Survey

The Board Evaluation Survey memo was pre-circulated with the meeting package for review and feedback on the survey.

8.2 Finance & Audit Committee

8.2.1 Finance & Audit Committee Draft Meeting Minutes (November 16, 2022)

The Finance & Audit Committee draft Meeting Minutes from November 16, 2022, were pre-circulated with the Board package for information purposes.

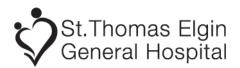
MOTION

MOVED by Meaghan Vreman, SECONDED by Harold Lenfesty, that the Board of Directors receive the draft Meeting Minutes of the November 16, 2022 Finance & Audit Committee meeting as presented.

CARRIED

8.2.2 2022/2023 - Second Quarter Financial Report, Cash Flow Analysis

The 2022/2023 - Second Quarter Financial Report, Cash Flow Analysis was precirculated with the Board package for review and receipt.



MOTION

MOVED by Meaghan Vreman, SECONDED by Harold Lenfesty, that the Board of Directors receive the 2022/2023 - Second Quarter Financial Report as presented. CARRIED

8.2.3 2022/2023 Semi-Annual Hospital Service Accountability Agreement (HSAA) Performance Indicators

The 2022/2023 Semi-Annual Hospital Service Accountability Agreement (HSAA) Performance Indicators was pre-circulated with the Board package for review and receipt.

MOTION

MOVED by Meaghan Vreman, SECONDED by Dan Ross, that the Board of Directors receive the 2022/2023 Semi-Annual Hospital Service Accountability Agreement (HSAA) Performance Indicators as presented.

CARRIED

8.2.4 2022/2023 Semi-Annual Executive, Board and Consultant Expense Report The 2022/2023 Semi-Annual Executive, Board and Consultant Expense Reports were pre-circulated with the Board package for review and receipt.

MOTION

MOVED by Meaghan Vreman, SECONDED by Linda Ballantyne, that the Board of Directors receive the 2022/2023 Semi-Annual Executive, Board and Consultant Expense Report as presented. CARRIED

8.2.5 2022/2023 Second Quarter Regulatory Certification of Obligations of Statutory Payments The 2022/2023 Second Quarter Regulatory Certification of Obligations of Statutory Payments document was pre-circulated with the Board package for review and receipt.

MOTION

MOVED by Meaghan Vreman, SECONDED by David Harvey, that the Board of Directors receive the 2022/2023 Second Quarter Regulatory Certification of Obligations of Statutory Payments document as presented.

CARRIED

8.2.6 Cerner Phase 2, Wave 1 - Presentation / Update

The Cerner Phase 2, Wave 1 - Presentation / Update was pre-circulated with the Board package for information purposes.

8.2.7 OHA – Healthcare Collaborative Benefits Update

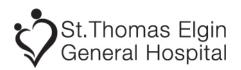
The OHA – Healthcare Collaborative Benefits Update was pre-circulated with the Board package for information purposes.

8.2.8 HIROC Liability Limit Increase Update

The HIROC Liability Limit Increase Update was pre-circulated with the Board package for information purposes.

8.2.9 Diagnostic Imaging Project Presentation

The Diagnostic Imaging Project Presentation was pre-circulated with the Board package for information purposes.



8.3 Quality & Safety Committee

8.3.1 Quality & Safety Committee Draft Meeting Minutes (November 17, 2022)

The Quality & Safety Committee draft Meeting Minutes from November 17, 2022, were pre-circulated with the Board package for information purposes.

MOTION

MOVED by Amy Dale, SECONDED by Dan Ross, that the Board of Directors receive the draft Meeting Minutes of the November 17, 2022 Quality & Safety Committee meeting as presented.

CARRIED

8.3.2 Patient Satisfaction Presentation

The Patient Satisfaction Presentation was included in the meeting package for information purposes.

9. Other Business

9.1 None.

10. Officer Reports

10.1 Board Chair Report

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

10.2 President and CEO Report

The Officer report for the President & CEO was pre-circulated with the meeting package. In addition to the submitted report, Karen shared that the Ministry of Health recently made an announcement regarding Ontario Health Teams (OHTs), to which a guidance document with be forthcoming. Five of the key pieces noted include:

- All OHTs are to be established as new not-for-profit organizations
- Standardized groups that must be involved in decision-making
- Identifying an operational support provider for back-office functions
- Setting a consistent and recognizable approach to communications
- Standardize pathways to improve patient care

Karen shared that we can now return to in-person meetings in the Elmview and still offer zoom meeting as an option for all Committee and Board meetings, moving forward starting in January.

10.3 Chief of Staff Report

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

Dr. Chehadi shared that challenges over the past month remain much the same, that being, increased workflow and demanding interactions with patients. Despite the increased demands on physicians, the level of care being provided to patients continues to be exceptional and timely.

10.4 STEGH Foundation Report

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

MOTION

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

CARRIED



11. Correspondence / Information

None.

12. In-Camera Meeting

12.1 Move to In-Camera

MOTION

MOVED by Dan Ross, SECONDED by Harold Lenfesty, 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

 $\ensuremath{\mathsf{MOVED}}$ by Dan Ross, SECONDED by Harold Lenfesty, that the Board of Directors terminate the meeting.

CARRIED