

Meeting of the Board of Directors

Wednesday, February 1, 2023

3:00pm

Elmview Conference Room & 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	✓Z				
L. Ballantyne	✓Z	✓Z	✓Z	✓Z				
A. Dale	✓Z	✓Z	✓Z	✓				
D. Harvey	✓Z	✓Z	✓Z	✓Z				
S. Martyn	✓Z	✓Z	✓Z	✓				
M. Vreman	✓Z	✓Z	✓Z	✓				
H. Lenfesty	✓Z	R	✓Z	R				
K. Gadsdon	✓Z	✓Z	R	✓Z				
Ex-Officio Non-Voting Directors:								
Dr. W. Chehadi	✓Z	✓Z	✓Z	R				
Dr. J. Armstrong	✓Z	✓Z	✓Z	✓Z				
Dr. P. Hammond	✓Z	✓Z	✓Z	R				
K. Davies	✓Z	R	✓Z	✓				
C. Watkin	✓Z	✓Z	R	✓				
D. Dale	R	✓Z	✓Z	✓				
Executive Team:								
T. Sheldon	✓Z	✓Z	✓Z	✓				
M. Olanski	✓Z	✓Z	✓Z	✓				
K. Riddell	R	✓Z	R	✓				
J. Bloom	✓Z	R	R	R				
Guests:								
Kevin Bahadur – Manager – Transforming Care	✓Z	✓Z	✓Z					
Brigee Tracy – Proximity Institute	✓Z							
Claire Hefferon - Payne – Proximity Institute	✓Z							
Debbie Turner – Director – Professional Practice			✓Z					
*Z – Denotes joining the meeting via Zoom Video-Conferencing R – Denotes Regrets for meeting								

1. Call to Order

Peter van der Westen called the meeting to order at 3:05pm and asked Andrea McNaughton conduct a roll call.

2. **Approval of Agenda**

MOTION

MOVED by Robert Furneaux, SECONDED by Amy Dale, that the Board of Directors approve the agenda as presented.

CARRIED

3. **Declaration of Conflicts of Interest**

None declared.

4. **Board Lean Huddle**

Peter van der Westen stated there had been a few members who attended the Kaizen Report Out event and Tier 2 Leadership Huddles throughout the month of January. Peter asked the Directors to share their learnings and acknowledgement of those to be celebrated, as they experienced from attending these events.

Peter encouraged the Directors to complete the online training if they have not already done so. Peter also asked for those who have completed the training to share their experience in taking the training and how they benefitted from it.

Several members shared their feedback relating to learnings, reflections, celebrations and areas for potential growth. Members also expressed how they felt the training benefitted them and how they were grateful to have access to educational training sessions.

Peter then asked the respective members of the Executive Team to walk the Board through the Strategic Pillar update on Achieving Operational Excellence. Karen Riddell, Tonya Sheldon, and Craig Watkin then each took turns providing an overview of each of the strategic goals aligned with this pillar.

Internal Quality Indicators & Definitions – December 2022

Craig Watkin introduced himself to those in attendance and then provided an overview of the Internal Quality Indicators for the month of December 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 December 2022 at 2.70. Staffing and capacity challenges continue to have a direct impact on this metric.
- Pay for Performance Metrics
This indicator is red for the month of December 2022 at 17%. STEGH remains ranked number two for Emergency Department performance provincially.
- Readmission rate for STEGH COPD discharges readmitted
This indicator does not have data available for October, November, or December 2022, as there is a lag in reporting. Data will be updated when it becomes available. This data can also change month to month pending any coding corrections submitted to CIHI, up until May 31, 2023.
- Number of workplace violence incidents reported by Employees
This indicator had a total of 13 incidents reported in December 2022.

5. Emergency Management Update

Karen Davies provided a high-level update on the pandemic and other concerns within the hospital and the community.

The number of COVID patients in hospital is highly variable, anywhere from 12 to 22 COVID patients on any given day. There are four active outbreaks within Elgin County as at the time of this report. Southwestern Public Health Unit (SWPHU) COVID Mass Vaccination clinic will be closing as of February 16, 2023; vaccines will continue to be available on an appointment basis at SWPHU.

COVID is relatively asymptomatic at present, which is leading to many people having the virus without knowing and are spreading it within the community.

The COVID Assessment Centre (CAC) has moved to a new location in the South building, near the current patient/visitor entrance. This move allows work to commence on the building renovations required to accommodate the new MRI machine.

Occupancy is very high at present. High occupancy rates have resulted in the need to open additional beds on third floor to meet these occupancy challenges.

Surgical services at STEGH are operating at 100% and wait times for surgeries such as hips, knees and cataracts, are all meeting provincial wait time expectations..

In the coming days, there will be changes in relation to door access for staff and visitors, and communication will be shared related to this once final decisions have been made.

6. Patient Story

Craig Watkin shared a patient experience story.

7. Diversity, Equity, and Inclusion Committee Update - *Presented by Karen Riddell*

Karen Riddell provided a verbal update on the status of the Diversity, Equity, and Inclusion committee at STEGH. Karen shared that the Committee members are encouraged to bring forward any issues that are important to them as staff members, that they feel the hospital, as an employer, should be paying attention to and advancing. Karen reviewed data from the Diversity, Equity, and Inclusion dashboard which was pre-circulated with the meeting package for information purposes.

Karen highlighted the work that has been undertaken at STEGH to train staff, physicians, and volunteers in the areas of Diversity, Equity, and Inclusion, Unconscious Bias, Microaggressions, and Indigenous Cultural Safety.

The Board asked Karen Riddell to obtain information on the different languages spoken by staff at STEGH, especially regarding Indigenous speaking patient needs, and report.

The Board asked Karen Davies to provide an update at a future meeting on the work being done to build stronger linkages with our Indigenous partners.

8. Approval of Draft Minutes of Prior Meetings

December 7, 2022 Board of Directors Meeting Minutes

The December 7, 2022 Board of Directors Meeting draft minutes were pre-circulated with the Board package for review.

MOTION

MOVED by Dan Ross, SECONDED by Meaghan Vreman, that the Board of Directors approve the December 7, 2022 Board of Directors Meeting draft minutes as presented.

CARRIED

9. Committee Reports**9.1 Finance & Audit Committee****9.1.1 Finance & Audit Committee Draft Meeting Minutes (January 18, 2023)**

The Finance & Audit Committee draft Meeting Minutes from January 18, 2023, were pre-circulated with the Board package for information purposes.

MOTION

MOVED by Ken Gadsdon, **SECONDED** by Amy Dale, that the Board of Directors receive the draft Meeting Minutes of the January 18, 2023 Finance & Audit Committee meeting as presented.

CARRIED

9.1.2 Audit Planning Meeting Presentation

The Audit Planning Meeting presentation was pre-circulated with the meeting package for information purposes.

9.1.3 Review and Recommendations for Insurance Coverage

The Insurance Coverage presentation was pre-circulated with the meeting package for review and recommendation.

MOTION

MOVED by Robert Furneaux, **SECONDED** by Sally Martyn, that the Board of Directors approve the Insurance Coverage as presented.

CARRIED

9.1.4 Whistleblower Policy Review

The Whistleblower Policy was pre-circulated with the meeting package for review and approval.

MOTION

MOVED by Ken Gadsdon, **SECONDED** by Amy Dale, that the Board of Directors approve the Whistleblower Policy as presented.

CARRIED

9.2 Quality & Safety Committee

9.2.1 Quality & Safety Committee Draft Meeting Minutes (January 19, 2023)

The Quality & Safety Committee draft Meeting Minutes from January 19, 2023, were pre-circulated with the Board package for information purposes.

MOTION

MOVED by Sally Martyn, **SECONDED** by Dan Ross, that the Board of Directors receive the draft Meeting Minutes of the January 19, 2023 Quality & Safety Committee meeting as presented.

CARRIED

9.2.2 2023/2024 Quality Improvement Plan (QIP) – Briefing Note

The 2023/2024 Quality Improvement Plan (QIP) – Briefing Note was pre-circulated with the meeting package for review and approval.

MOTION

MOVED by Meaghan Vreman, **SECONDED** by Robert Furneaux, that the Board of Directors approve the 2023/2024 Quality Improvement Plan (QIP) as presented.

CARRIED

9.2.3 Risk Management / Critical Incident Event Reporting Presentation

The Risk Management / Critical Incident Event Reporting presentation was pre-circulated with the meeting package for information purposes.

9.2.4 Privacy Report Presentation

The Privacy Report presentation was pre-circulated with the meeting package for information purposes.

9.2.5 Accreditation Update

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

10. Other Business

10.1 Elgin Ontario Health Team (EOHT) Quarterly Update

The EOHT Quarterly Report was pre-circulated with the meeting package for information purposes.

The two medical areas of focus for EOHT are Chronic Heart Failure (CHF) and Chronic Obstructive Pulmonary Disease (COPD) and the OHT is working to determine where the work with these patient populations should begin. At present, they are targeting the largest cohort of the population, which is those patients with rising risk to have COPD.

The Elgin OHT is undergoing a Strategic Priority setting at present and is utilizing the services of MD&A Consultants, which is the consulting group that assisted in getting the EOHT up and running in the early days.

The EOHT Coordinating Council decided that the role of co-chair should include a community member / patient partner. Judith Wiley was set to step down in February 2023 as co-chair, but has agreed to stay on for an extended period, while recruitment of a new co-chair who is a community member or patient partner to take Judith's place.

11. Officer Reports

11.1 Board Chair Report

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

11.2 President and CEO Report

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

11.3 Chief of Staff Report

There was no Officer report for the Chief of Staff.

MOTION

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

CARRIED

12. Correspondence / Information

None.

13. In-Camera Meeting

13.1 Move to In-Camera

MOTION

MOVED by Sally Martyn, 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.

14. Termination of Meeting

MOTION

MOVED by Dan Ross, SECONDED by Ken Gadsdon, that the Board of Directors terminate the meeting.

CARRIED