

Perth and Smiths Falls District Hospital

Board of Directors Meeting

Tuesday, April 27, 2021

Via Videoconference @ 7:30 a.m.

PRESENT: S. Bird, G. Church, K. Clupp, C. Dolgowicz, L. Drynan, Dr. B. Guppy, B. Hirst, Dr. W. Hollis, *D. Howard, Chair*, S. Pankow, Dr. M. Roberts, N. Shaw, Dr. K. Stolee, A. Thomlinson, Dr. K. Wickens

REGRETS: J. Fenik, J. Hewitt, Dr. A. Kuchinad

IN ATTENDANCE: D. Hodgins, VP, Finance & Support Services, K. Kelly, Recording Secretary, M. Hallam, ED, PSFDH Foundation, M. Young, President, GWM Auxiliary, M. Hauschild, Patient Story Presenter

1. Call to Order – D. Howard

D. Howard, Chair, called the meeting to order at 7:30 a.m.

2. Chair's Remarks – D. Howard

D. Howard offered the following remarks:

- COVID-19 Wave 3 continues to impact hospital operations. Dr. B. Guppy will speak more specifically to this matter later in the meeting.
- M. Hauschild, former in-patient, was welcomed to the meeting. Mr. Hauschild provided a written letter to the hospital that was included in the previous month meeting materials. He joins today's meeting to share his COVID-19 patient journey.

3. Patient & Family Centred Care – N. Shaw

N. Shaw welcomed M. Hauschild to the meeting to speak to his in-patient experience in the recent months. His written letter was included in the March 23, 2021 Board of Directors meeting materials.

Mr. Hauschild expressed great appreciation and gratitude to the hospital staff because their actions and abilities saved his life. He suffered from COVID-19 and after having passed out at his home and was brought to PSFDH.

D. Howard stated that we are proud of our hospital and she is pleased to hear that the experience was a meaningful one. G. Church thanked Mr. Hauschild for his testimony and thanked him for sharing.

Mr. Hauschild commented that the illness and time in hospital changes a person's perspective. As the Chair of the Economic Recovery Task Force in the Town of Perth, he realizes the critical importance to have community cohesion. He will apply his personal health experience to his volunteer work with the Town.

Dr. B. Guppy also thanked Mr. Hauschild for sharing his story and compliments to the hospital. He asked if there was anything that would have made the experience better. Mr. Hauschild suggested that while trivial, more fresh fruit and vegetables would have been welcomed. He acknowledged the work of the nurses who cared for him and that they each had families and husbands to go home to and yet they came in each day to work.

Mr. Hauschild left the meeting at 7:39 a.m.

4. Declaration of Conflict of Interest – D. Howard

D. Howard reminded members to declare at any point during the meeting.

5. Approval of Agendas – D. Howard

a) Regular Meeting and Consent Agendas

D. Howard confirmed that the draft minutes are posted to the portal earlier for members to review.

Regular Meeting Agenda/ Consent Meeting Agenda

RESOLUTION No. 44/21

MOVED by L. Drynan

SECONDED by K. Clupp

The regular meeting and consent agendas were approved as presented.

CARRIED.

6. Foundations & Auxiliaries

D. Howard welcomed Marilyn Young and Margot Hallam to the meeting.

a) PSFDH Foundation –Dr. K. Wickens, M. Hallam,

Dr. K. Wickens reported that the PSFDH Foundation has hired a communications consultant, H. Sorour, who will work as a link between the foundation and the hospital. She asked members to coordinate time with H. Sorour to gather information. She added that the PSFDHF Foundation website is under construction.

The PSFDH Foundation is launching the "Future Stars" campaign in time for Mother's Day. The funds raised will support women's health at PSFDH. People can purchase a star for \$100 to be placed on the wall outside of the OBS department.

The PSFDH Foundation will have its initial monthly interview with Lake 88 today at 12:10 p.m. today.

M. Hallam thanked N. Shaw and B. Burchill, Manager, OBS for their input on the "Future Stars" wall.

b) GWM Auxiliary – M. Young

M. Young indicated that she did not have a formal report to share but thanked the hospital for the Volunteer Appreciation Week card from the hospital. She shared it with the Auxiliary members.

7. Action Items

7.1 Leadership Report – Dr. B. Guppy

Dr. B. Guppy referred the members to the April 2021 Leadership Report which was shared in advance of the meeting. He highlighted the following:

- Wave 3 and the impacts to health human resources and bed capacity throughout the province.
- Directive No. 2 was issued advising healthcare professionals to ramp down services and any activity that would require to critical care or inpatient bed resources. PSFDH has complied with Directive No. 2.
- OHT update – the Collaborative Decision Making Agreement (CDMA) was signed off and submitted to the Ministry in March. The OHT is in the process of implementing the CDMA structure. As the OHT is not a legal entity, Rideau Community Health Services will assume the accountability for the implementation funding on behalf of the OHT.

RESOLUTION No. 45/21

MOVED by K. Clupp

SECONDED by G. Church

THAT the PSFDH Board of Directors accepts the Leadership Report as presented.

CARRIED.

7.2 Chief of Staff Report – Dr. K. Stolee

Dr. Stolee appreciated hearing Mr. Hauschild's story and will share his remarks with the medical staff.

Dr. Stolee referred the members to the report included in the meeting materials. She highlighted the following items:

- MAC credentials will be discussed in closed session.
- Clinical Leadership – there are no changes to clinical leadership at this time however a recommendation to extend the current term an additional one year.

RESOLUTION No. 46/21

MOVED by L. Drynan

SECONDED by G. Church

THAT the PSFDH Board of Directors accepts the recommendation of the Medical Advisory Committee to extend the term from April 1, 2021 to March 31, 2022 for the following clinical departments:

- *Surgery – Dr. Tom Morell;*
- *Diagnostic Medicine – Dr. Nimish Parikh; and*
- *Internal Medicine – Dr. Robert Del Grande*

CARRIED.

Professional Staff By-Law Change re: Sub-Committee Membership (Courtesy Staff)

Currently, our bylaws do not allow Courtesy staff to be members of any of the MAC subcommittees and the membership can only be made up of active or associate staff of which many are already involved in formal and *ad hoc* committee. Courtesy staff plays a key role in ensuring that our patients receive high quality care. Some of the hospitalists have expressed an interest in participating in committee work and the MAC would like to extend them an invitation. This change is part of the overall by-law review and proposed revisions which will be ready for a review in May.

RESOLUTION No. 47/21

MOVED by C. Dolgowicz

SECONDED by L. Drynan

That the PSFDH Board of Directors accepts the Medical Advisory Committee (MAC) recommendation to allow the appointment of Courtesy Staff to sub-committees of the MAC;

Further, the Courtesy Staff sub-committee members would not have voting rights or the ability to be appointed as sub-committee chair.

CARRIED.

CPSO Certificate of Professional Conduct (CPC)

Under our bylaws, all physicians must provide this certificate at the time of application for privileges which verifies a physician's registration and standing with the College of Physicians and Surgeons (CPSO). Annually at the time of reappointment, by way of Acknowledgements we reaffirm our status regarding these areas. There have been no concerns identified that we are aware of that physicians are not completing the reappointment application with full disclosure. The MAC supports having an up to date CPC in a physician's credentialing file as part of reasonable risk management both for the physician and the hospital in the event that any investigation was brought by the CPSO.

The proposed revision will be incorporated into the professional staff bylaws.

RESOLUTION No. 48/21

*MOVED by B. Hirst
SECONDED by A. Thomlinson*

THAT the PSFDH Board of Directors accepts the Medical Advisory Committee recommendation that privileged members of the professional staff are required to provide to PSFDH a Certificate of Professional Conduct every three (3) years as part of their reappointment requirements.

CARRIED.

RESOLUTION No. 49/21

*MOVED by C. Dolgowicz
SECONDED by A. Thomlinson*

THAT the PSFDH Board of Directors accepts the Chief of Staff Report as presented.

CARRIED.

7.3 Medical Staff Association Report – Dr. M. Roberts

Dr. M. Roberts provided an update on Medical Staff Association (MSA) matters. He brought forward a concern regarding the ramp down of services. He stated that PSFDH has capacity and the ORs are running normally but doing less. He added that the reality is that the team will ramp down as quickly as possible but it seems we are denying people care when we could be helping. This does not sit well with the Medical Staff Association that we could be taking care of people but not able to do so.

Dr. B. Guppy concurred that initially there was some discretion to ramp down services (that would impact bed capacity) with the initial Instruction received from Ontario Health, however, this has changed with the issuing of Directive 2 by the Ontario Chief Medical Officer of Health where ramp down of all elective and non-urgent surgeries and procedures was ordered.

General discussion regarding retraining and redeploying hospital staff to other areas. Dr. Stolee indicated that PSFDH is able to accept non-COVID patients from other hospitals at this point if requested. Dr. Roberts added that our role is to care for the more stable patients given our current ICU Level.

8 Business Arising from Minutes – Nil.

9 New Business

9.1 Fixed Vaccination Site Support – Dr. B. Guppy

Dr. B. Guppy provided an update on the hospital's offer and role to support the fixed vaccination site. PSFDH offered to serve as a paymaster for other organizations providing staff to the vaccination centre based on previous information provided by Ontario Health to assist these organizations using the hospitals established monthly reimbursement process with the Ministry.

However, given that PSFDH is not participating in the fixed site community vaccination centre, the Ministry confirmed that the hospital may not act in this capacity of paymaster and the Leeds, Grenville, and Lanark District Health Unit will be acting in this capacity.

10 Board Committee Reports

10.1 Extended Executive Committee – April 14, 2021 – D. Howard

The draft minutes (open and closed) are available on the portal. She noted that the meeting discussion was primarily on the March 2021 delegation to the Board of Directors. A copy of the response to the delegation is in today's meeting package.

10.2 Finance Committee – April 22, 2021 – K. Clupp

a) Committee Report to the Board

The Committee Report to the Board was included in the materials.

b) CFO Report

D. Hodgins referred the members to the CFO report included in the materials. She advised that the financial statements are delayed due to year end. The year-end audit will be virtual similar to the interim audit conducted in January 2021. She confirmed that the H-SAA and M-SAA extension letters were submitted as required.

c) Capital Planning Sub-Committee Meeting Report (to Finance Committee)

The Sub-Committee Report to the Finance Committee was included in the materials and going forward it will become part of the Finance Committee Report to the Board.

10.3 Sponsored Organizations – D. Howard

D. Howard thanked H. Bedor and R. Fromowitz for joining today's meeting and providing a brief written report for the materials. She recognized that with COVID there have been missed opportunities to have presentations from each sponsored group at board meetings. She has asked LCMH and LCSS to provide a brief written report on a monthly basis in addition to providing quarterly presentations. She noted that R. Fromowitz and H. Bedor presented in January and February, respectively.

Work is ongoing to review the policies and procedures in place along with updating the LMCH MOU with PSFDH as the current version is dated 1997 and does not provide clear guidance.

This connection will provide the board the opportunity to exercise accountability of the two sponsored organizations.

a) Lanark County Support Services – H. Bedor

A brief report was included in the materials.

b) Lanark County Mental Health – R. Fromowitz

A brief report was included in the materials.

c) LCMH Community Advisory Board (CAB) – L. Drynan

L. Drynan provided a verbal report on the matters considered at yesterday's CAB meeting. She reported that LCMH CAB is onboarding five (5) new members at the May 2021 meeting. She noted that LCMH staff members continue to go above and beyond and the board should be mindful of what staff are doing.

D. Howard stated that it is incredible what takes place at both LCMH and LCSS and the important role that the organizations play in the community

H. Bedor, R. Fromowitz, M. Hallam, M. Young left the meeting at 8:30 a.m.

11 Closed Session Items

RESOLUTION No. 50/21

MOVED by B. Hirst

SECONDED by W. Hollis

THAT the PSFDH Board of Directors moved to a closed session at 8:30 a.m.

CARRIED.

RESOLUTION No. 51/21

MOVED by B. Hirst

SECONDED by K. Clupp

THAT the PSFDH Board of Directors moved out of the closed session at 9:01 a.m.

CARRIED.

Approval of Agenda and Closed Session Notes

RESOLUTION No. 52/21

MOVED by S. Pankow

SECONDED by A. Thomlinson

THAT the PSFDH Board of Directors approved the March 23, 2021 closed session notes as presented.

CARRIED.

Appointments of Professional Staff

RESOLUTION No. 53/21

MOVED by C. Dolgowicz

SECONDED by S. Bird

THAT the PSFDH Board of Directors accepts the information and applications for professional appointments as presented and reviewed by the Chief of Staff and approves the requests of appointment, reappointment and privilege changes as follows:

APPOINTMENTS TO MEDICAL STAFF

NEW APPOINTMENTS

Name	Category	AP	Primary D	Cross	Reviewer
Callum, Jeannie	Courtesy	N	IM-TRANS	No	Dr. Del Grande
Setterfield, Jeremy	Associate	Y	SURGERY	No	Dr. Morell

Dr. Del Grande: Jeannie Callum: No concerns

Dr. Morell: Jeremy Setterfield: No concerns. Will make a good addition.

CHANGE IN PRIVILEGES

Name	Current Category	Category Requested	AP	Department	Reviewer
Hurik, Ilona	Courtesy	EM removed Cross	Y	FM	G. Hendry

REAPPOINTMENTS

Name	Category	AP	Dept	Cross	Reviewer	Term
Argue, Megan	Courtesy	Y	FM	EM	G. Hendry	Jul 1-21—Jun 30-22
Chadha, Neel	Courtesy	Y	FM	None	G. Hendry	Jul 1-21—Jun 30-22
Church, Kristen	Active	Y	FM	None	G. Hendry	Jul 1-21—Jun 30-22
Conway, Robin	Active	Y	FM	None	G. Hendry	Jul 1-21—Jun 30-22
Horse, Michael	Active	Y	FM	EM	G. Hendry	Jul 1-21—Jun 30-22
Hurik, Ilona	Courtesy	Y	FM	None	G. Hendry	Jul 1-21—Jun 30-22
Prudhoe, C.	Courtesy	Y	FM	None	G. Hendry	Jul 1-21—Jun 30-22
Siyih, Mahysin	Active	Y	FM	EM	G. Hendry	Jul 1-21—Jun 30-22

Dr. Cunniffe: Dr. Hendry has no issues with reappointing all the above.

Dr. Simpson: No issues with EM cross reappointments.

INFORMATION ONLY

Name	Category	AP	Dept	Cross	Reviewer	Term
Thomas, Gordon	Temporary	N	Int Med	None		26Mar2021-01Jun2021

CARRIED.

Finance Committee Items

External Audit RFP

RESOLUTION No. 54/21

MOVED by K. Clupp
SECONDED by B. Hirst

That the Perth and Smiths Falls District Board of Directors accepts the Finance Committee recommendation and approves the award for external audit services contract to Allan and Partners LLP commencing fiscal 2021/22 audit for a five-year team, with an optional two-year extension term, subject to annual reappointment at the PSFDH Annual General Meeting by the PSFDH Board of Directors.

CARRIED.

GWM Site Roof Repair (Capital Requests SBAR)

RESOLUTION No.55/21

MOVED by K. Clupp
SECONDED by B. Hirst

That the Perth and Smiths Falls District Board of Directors accepts the Finance Committee Recommendation and approves proceeding with the tendering for replacement of the critical roof surfaces.

CARRIED.

12 Standing Items

12.1 Strategic Planning Update – D. Howard

Dr. B. Guppy provided a brief slide presentation on the strategic plan, which expires in June 2021 but has been extended by one year due to COVID-19. The objective is to have a new plan in approved by July 2022.

Dr. B. Guppy reviewed a proposed timeline and TNG recommended process which is a six (6) stage process to occur over a 10 month period. He noted concerns with existing internal resources and additional pressures to meet the timelines and requirements. He put forward key questions for the board's consideration on how to proceed given that it is the Board's strategic plan operationalized by hospital management.

Discussion ensued regarding external facilitation or other support (internal project management resource.) If external support is requested there is a need to conduct a procurement process in the near future.

D. Howard noted that the Board is aware of the strains on the hospital and the various other matters that are in play such as the Ontario Health Team and HIS initiative. The options are to proceed with the support of a facilitator/consultant or hire a person to project manage through this period. She requested the members provide any preliminary thinking on the matter.

It was suggested that external support would be beneficial to meet the proposed June 2022 timeline and support hospital management but the hospital should also consider internal project management support with regular updates to the board at each stage. Dr. Guppy noted that internal project management support would benefit other hospital projects.

More discussion at the next Extended Executive Committee and board meeting regarding timeline and how to proceed. D. Howard reminded the members of the previous process supported initially by TNG Leaders and then taken over by the Senior Leadership Team who worked with staff (and focus groups.)

As an aside, G. Church suggested members connect with MPP Clark to acknowledge his support of our hospital. A letter was sent from D. Howard and Dr. B. Guppy.

13 **Information Items** – items were provided for information.

14 **Next Meeting Date**

Tuesday, May 25, 2021, via videoconference at 7:30 a.m.

15 **Adjournment**

RESOLUTION No. 56/21

MOVED by A. Thomlinson

SECONDED by G. Church

THAT the April 27, 2021 Perth and Smiths Falls District Hospital Board of Directors' meeting adjourned at 9:26 a.m.

CARRIED.



D. Howard, Chair



Dr. B. Guppy, Secretary