

Perth and Smiths Falls District Hospital

Board of Directors Meeting

Tuesday, March 23, 2021

Via Videoconference @ 7:30 a.m.

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

REGRETS: C. Dolgowicz,

IN ATTENDANCE: D. Hodgins, VP, Finance & Support Services, K. Kelly, Recording Secretary, M. Hallam, ED, Dr. K. Wickens, Chair, PSFDH Foundation, M. Young, President, GWM Auxiliary, Dr. T. Ferrier, Local Primary Care Provider, Dr. B. Whitestone – Delegation

1. Call to Order – D. Howard

D. Howard, Chair, called the meeting to order at 7:31 a.m.

2. Chair's Remarks – D. Howard

D. Howard offered the following remarks:

- continued high COVID-19 activity in the region
- the board welcomes Dr. T. Ferrier and Dr. B. Whitestone to the meeting
- a live patient story will be shared next month. A related letter was included in the materials as a preview.
- today's agenda was adjusted to receive the Medical Staff Association report earlier in the meeting.
- a number of resolutions will be brought forward for board consideration (shared in advance.)

3. Patient & Family Centred Care – N. Shaw

A grateful patient letter was included in the materials. A live story will be shared at the April 2021 Board of Directors meeting.

4. Declaration of Conflict of Interest – D. Howard

D. Howard reminded members to declare at any point during the meeting. Dr. A. Kuchinad stated that he has a perceived conflict of interest as his wife works at the clinic (related to this morning's presentation.)

5. Delegation – Dr. T. Ferrier

The Chair welcomed Dr. T. Ferrier, local primary care provider and business partner, B. Whitestone, as a delegation to the today's meeting. Dr. Ferrier requested a delegation on "Diagnostic Radiology" services in the local community. A copy of Dr. Ferrier's presentation was provided to the members. D. Howard that the group will receive the presentations and discussions will be held during the closed session portion.

Dr. Ferrier outlined the premise for today's presentation indicating that the services would make positive changes for our community and improve both access and patient satisfaction. He noted that he does not want to see a loss of services and suggested that all requisitions would flow through the hospital first and then move over to another Independent Health Facility (IHF). The IHF would meet annually with the hospital and ensure that the hospital is not negatively impacted. There would also be a coordinated approach to read the tests with the hospital team.

He noted in summary that the IHF is seeking support of its application as the demand on services is growing. This initiative would be positive for the community.

G. Church thanked Dr. Ferrier for the presentation but noted that PSFDH diagnostic services are significantly superior to other organizations and he was unsure why as a privileged physician he did not approach the hospital to recommend service improvements.

Dr. Stolee requested clarification on what services would be provided by the IHF. Dr. Ferrier indicated that initially, ultrasound and x-ray services would be provided and if there are opportunities would be considered to expand to other modules such as mammography or BMD. He added that the intent is to augment services for the community benefit.

D. Howard suggested that the next steps would be to re-present the IHF application to the Ministry who is ultimately accountable for the application approval. The Ministry has requested the hospital's position as a stakeholder and the hospital responded with its position regarding the impacts on the services.

D. Howard thanked Dr. Ferrier and Dr. Whitestone for attending and providing the presentation. She reminded members that there would be further discussion during the closed session.

End of presentation at 7:58 a.m. Drs. Ferrier and Whitestone left the meeting at this point.

6. Approval of Agendas

a) Regular Meeting and Consent Agendas

Regular Meeting Agenda

RESOLUTION No. 28/21

MOVED by K. Clupp

SECONDED by J. Hewitt

The regular meeting agenda was approved as presented.

CARRIED.

Consent Meeting Agenda

RESOLUTION No. 29/21

MOVED by K. Clupp

SECONDED by A. Thomlinson

The consent agenda was approved as presented.

CARRIED.

7. Foundations & Auxiliaries

D. Howard welcomed Marilyn Young, Margot Hallam, Dr. Kathy Wickens to the meeting.

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

M. Hallam provided an update on foundation matters and reported:

- the foundation board will move to monthly meetings from twice monthly;
- Work is underway to develop committees;
- The Westport Lions Club donated \$25,000 in support of a palliative care room;
- other local donations (stock options) were received; and
- 2021 Black Tie Bingo was cancelled.

b) GWM Auxiliary – M. Young

M. Young provided an update on Auxiliary work. She noted that the volunteers would like to come back and suggested a meeting with Dr. Guppy when time allows. Matters such as the annual meeting, Genie awards are deferred for the time being. Dr. Guppy offered to meet with the volunteers.

D. Howard acknowledged the work of the Auxiliary.

8. Action Items

8.1 Leadership Report – Dr. B. Guppy

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

- OHT Attestation for collaborative decision-making agreement to be submitted today to the Ministry. This will allow for the release of implementation funding.
- COVID-19 – LGL Health Unit area moved from yellow to red and if there is continued increases the region may shift to grey zone. There has been COVID-19 activity in the hospital
- Vaccination Update – there has been good progress for area vaccinations following the provincial framework.

Discussion ensued regarding the impact on ORs should the region move to “grey” zone. Dr. Roberts stated that there have been many lessons learned from the onset of the pandemic and to slow or shut down operating rooms would be a last resort decision.

Dr. Guppy confirmed that over 90% of physicians and approximately 60% of staff received the vaccination. The lower number for staff may be due to the fact staff are vaccinated off-site but have not updated information with Occupational Health. Reminders are sent with each Incident Command Team update to vaccination status.

Dr. Kuchinad remarked that the fixed vaccination clinics have been drawing from pool of emergency physicians as it has greater remuneration which is an incentive. General discussion ensued regarding health human resources for fixed clinic sites. Dr. Guppy has offered PSFDH help to public health unit. N. Shaw added that while we have not received a request from the health unit, PSFDH will support where possible.

RESOLUTION No. 30/21

MOVED by G. Church

SECONDED by B. Hirst

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

CARRIED.

8.2 Chief of Staff Report – Dr. K. Stolee

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

- New Urologist commencing practice Summer 2021 (July arrival and starting in August 2021)
 - o Equipment needs are being determined
 - o Urologist is actively looking for a home
 - o Do not anticipate any disruption to current urology services
- Ophthalmology – recruitment ongoing
- Incident Management Team discussed bed pressures in the province and region. She spoke with Dr. Zelt, IMS Lead who indicated that the area may become inundated due to high numbers. Offers of support were shared.
- Dr. Hendry will be stepping down from position of Clinical Chief of Family Medicine. The Board will send a thank you letter.

RESOLUTION No. 31/21

MOVED by K. Clupp

SECONDED by A. Thomlinson

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

CARRIED.

8.3 Medical Staff Association Report – Dr. M. Roberts

Dr. M. Roberts provided an update on Medical Staff Association (MSA) matters. He reported on the following matters:

- Dr. B. Guppy attended the March MSA meeting and provided a direct update to the group. The presentation was well received by MSA
- He has met the new urologist who will fit in well with our hospital team
- Concerns (recurring) were brought forward:
 - o U/S wait times – work underway to improve (not “urgents” but routine requisition). Dr. Roberts noted that if a referral is submitted, the College requirement is such that it is not only to be received and acknowledged. Determination needed on how long it is “reasonable”. More specific discussion at MAC.
 - o Increasing deficiencies with Meditech system. The MSA continue to stress the importance of implementing the new regional HIS system from a patient safety point of view.
 - o “Free Coffee Fridays” – the MSA has sponsored the next ten Fridays for staff and physicians to enjoy a free hot beverage in the hospital cafeterias. This is an effort to reduce potential breakroom transmissions of COVID. The MSA donated \$2000 to support this initiative.

8.4 Governance Committee Items – J. Hewitt

- i) GP Policy 2.6.5 Liaison Committee Terms
- ii) GP Policy 2.7 Annual Board Planning Cycle & Agenda Control
- iii) GP Policy 2.11 Board & Committee Expenses
- iv) GP Policy 2.12 *in camera* Meetings
- v) GP Policy 2.13 Board Linkages with Other Organizations

RESOLUTION No. 32/21

MOVED by J. Hewitt

SECONDED by Dr. W. Hollis

THAT the PSFDH Board of Directors approves the following Governance Process policies as reviewed and updated by the Governance Committee:

- *2.6.5 Liaison Committee (Terms)*
- *2.7 Annual Board Planning Cycle & Agenda Control*
- *2.11 Board & Committee Expenses*
- *2.12 in camera Meetings; and*
- *2.13 Board Linkages with Other Organizations.*

CARRIED.

vi) Board Quality Committee Work Plan 2020/21

The included Board Quality Committee work plan was reviewed at the March 16, 2021 Governance Committee meeting and is brought forward for approval today.

RESOLUTION No. 33/21

MOVED by J. Hewitt

SECONDED by K. Clupp

THAT the PSFDH Board of Directors accepts the recommendation of the Governance Committee and approves the Board Quality Committee Work Plan for 2020/21.

CARRIED.

vii) PSFDH Foundation Board of Directors Representative

J. Hewitt reported that the Liaison Committee requested that the Governance Committee consider the addition of an *ex officio* position on the board for the chair of the PSFDH foundation or their designate. J. Hewitt referred members to the area hospital survey responses regarding their current practices related to Foundation representatives on their respective hospital boards.

J. Hewitt provided remarks from Brockville General Hospital (BGH) Governance Committee Chair, S. Piracha and the position of BGH. He noted:

- In 2018, BGH moved out of supervision order and reviewed the BGH board composition which had foundation and auxiliary representatives. The positions were deleted (based on the trending at the time.)
- BGH wanted a smaller more effective board and easier to manage issues.
- This change would minimise potential conflicts of interest (having responsibility to two organizations).
- BGH has a skills based board and *ex officio* members do not necessarily fill a required skill.
- Connections and communications can be effective via the CEO

Discussion ensued. B. Hirst noted that St. Joseph's hospital in London, ON had the Foundation Chair as an *ex officio* member (no voting rights) and the process worked well.

J. Hewitt indicated that by-laws do not preclude PSFDH from expanding board to include the Foundation Chair as an *ex officio* member. The Board currently has two *ex officio* members with voting rights (municipal representatives) so there is no need to modify and create another class.

D. Howard stated that she abstained from the Governance Committee motion as more information was gathered. She noted that the OHA Guide to Good Governance offers other options. The options are to have the foundation member assume D. Howard's upcoming vacancy or increase board size by one.

Having considered the information and practices of other hospitals, a motion was brought forward.

RESOLUTION No. 34/21

MOVED by J. Hewitt

SECONDED by G. Church

THAT The PSFDH Board of Directors approves the Governance Committee recommendation to have the PSFDH Foundation Chair or designate be made an ex officio member with voting rights of the PSFDH Board of Directors.

CARRIED.

The matter regarding size and complement of board was deferred to the Governance Committee.

8.5 Capital Equipment Items

Brought forward due to the current signing authority policy

RESOLUTION No. 35/21

MOVED by L. Drynan

SECONDED by G. Church

THAT the PSFDH Board of Directors accepts the recommend of the Finance Committee to approve the list of capital equipment items that were not on the approved list for 2020/21 as outlined in the SBAR dated March 19, 2021.

CARRIED.

M. Hallam left the meeting at 8:49 a.m.

9 Business Arising from Minutes

Nil.

10 New Business

10.1 Quality Improvement Plan 2021/22 – N. Shaw

N. Shaw reported that the requirement to complete a Quality Improvement Plan for 2021/22 has been paused due to COVID-19 to allow organizations to focus on supporting their staff, health care providers, and communities during the COVID-19 pandemic.

N. Shaw noted that despite the pause with this activity, the management team continue to set internal department targets as there is always value to monitor and improve quality. The formal QIP process increases the awareness for quality.

10.2 OHT Governance Advisory Terms of Reference – D. Howard

D. Howard reported on a request received from J. Cosier regarding PSFDH participation (two members) on a governance advisory group and discussed at Governance Committee meeting. She advised there are two existing governance forums where there is PSFDH Board representation: a cross-sectoral forum (G. Church) and another Board-to Board forum. The group would participate in a discussion on the role of OHT member boards in systems governance.

No requirement from CDMA to have board involvement; governance will become important going forward. The terms of reference were provided for information at this point and to gauge interest should a member want to participate. It is outside the formal working framework at this time.

The matter was opened for expressions of interest. It was noted that this is not a requirement at this time.

As there was no immediate interest to participate, D. Howard will respond to J. Cosier to thank her for the invitation but the PSFDH board will not participate at this time. She did suggest an education session be scheduled with J. Cosier on the matter.

11 Board Committee Reports

11.1 Joint Conference Committee (JCC) – March 2, 2021 – D. Howard

D. Howard reported that the JCC met on Tuesday, March 2 and will again on June 1. There was general satisfaction on steps taken since February 2 JCC meeting. Matters of items discussed at the March 2 meeting:

- work is underway to establish appropriate benchmarks for DI modules
- Meditech issues
- PSFDH email accounts to support MSA communication and facilitate work
- agreement to proceed with JCC meetings (quarterly or as required.)

11.2 Extended Executive Committee – March 10, 2021 – D. Howard

D. Howard reported that the Extended Executive Committee received information on many of the items brought forward today. The draft minutes will be posted for information.

11.3 Liaison Committee – March 12, 2021 – Dr. W. Hollis

a) Committee Report to Board

The Committee report was included in the materials. Dr. Hollis reported that the Liaison Committee considered the Patient and Family Advisory Council request to post a statement to the PSFDH website acknowledging unceded territories. This action is aligned with the Board support to acknowledge this matter publically at the annual general meeting of the PSFDH corporation.

No resolution was required as the board is already supportive of the matter. A statement will be posted to the hospital website.

Item 2 c) of the Liaison Committee Terms of Reference

The members were asked to consider what this would mean to them and provide input to the Liaison Committee.

11.4 Governance Committee – March 16, 2021 – J. Hewitt

The Committee report was included in the materials. J. Hewitt stated that the draft Community Panels Terms of Reference were included to solicit board member feedback. He added that more background work to be completed before recommending approval regarding logistics and implementation.

Discussion ensued regarding what level of financial data will be provided to the community panels. Dr. Guppy indicated that information would be shared as education to provide an understanding of the funding formula and how services are developed based on this approach. It would not be a detailed review of the hospital's finances. This level of education will support the understanding and support for hospital position.

11.5 Finance Committee – March 18, 2021 – K. Clupp

K. Clupp noted that the monthly report is included in the materials for information. More discussion on specific finance matters will be held during today's closed session.

He confirmed that he and D. Hodgins participated in two audit RFP presentations.

D. Hodgins provided a review of the included CFO Report and noted that the hospital request was approved to carry over current HIRF dollars until March 31, 2022. This would be in addition to new HIRF dollars to be determined.

12 Closed Session

RESOLUTION No. 36/21

MOVED by B. Hirst

SECONDED by L. Drynan

THAT the PSFDH Board of Directors moved to a closed session at 9:09 a.m.

CARRIED.

RESOLUTION No. 37/21

MOVED by L. Drynan

SECONDED by J. Hewitt

THAT the PSFDH Board of Directors moved out of the closed session at 10:17 a.m.

CARRIED.

Approval of Closed Session Notes

RESOLUTION No. 38/21

MOVED by J. Hewitt

SECONDED by K. Clupp

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

CARRIED.

Appointments of Professional Appointments

RESOLUTION No. 39/21

MOVED by G. Church

SECONDED by S. Pankow

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:

NEW APPOINTMENTS

NAME	C	AP	PRIM D	X	REVIEWER
Jinapriya, Devan	Term 17/2/21-31/3/2021	no	SX-OPH	no	Dr. T. Morell
Singh, Harmanjit	Term 17/2/21-31/3/2021	no	SX-OPH	no	Dr. T. Morell
Johnson, Robert Ellis	Term 17/2/21-31/3/2021	no	SX-OPH	no	Dr. T. Morell
Hookey, Lawrence	Term 05/03/21-31/3/2021	no	SX-GEN	no	Dr. T. Morell

CHANGE IN PRIVILEGES

NAME	CURRENT CATEGORY	REQUESTED CATEGORY	AP	D	REVIEWER
Pierce, Jennifer	C	Assoc	Yes	EM	Dr. J. Simpson

REAPPOINTMENTS

NAME	C	AP	D	X	REVIEWER	TERM
Forghani, Reza	C	No	DI	-	Dr. N. Parikh	June 1/21-May 31/22
Goel, Ankur	C	No	DI	-	Dr. N. Parikh	June 1/21-May 31/22
Guest, William	C	No	DI	-	Dr. N. Parikh	June 1/21-May 31/22
Islam, Omar	C	No	DI	-	Dr. N. Parikh	June 1/21-May 31/22
Kafka, Henryk P	C	No	DI	-	Dr. N. Parikh	June 1/21-May 31/22
Lim, Siok Ping	C	No	DI	-	Dr. N. Parikh	June 1/21-May 31/22
Martens, Jason	C	No	DI	-	Dr. N. Parikh	June 1/21-May 31/22
Nunweiler, Christine	C	No	DI	-	Dr. N. Parikh	June 1/21-May 31/22
Ricketts, Michelle	C	No	DI	-	Dr. N. Parikh	June 1/21-May 31/22
Singh, Nina	C	No	DI	-	Dr. N. Parikh	June 1/21-May 31/22
Stevens, James	C	No	DI	-	Dr. N. Parikh	June 1/21-May 31/22
Suhail, Aamir	C	No	DI	-	Dr. N. Parikh	June 1/21-May 31/22

CARRIED.

Lanark County Mental Health Lease Matter

RESOLUTION No. 40/21

MOVED by L. Drynan

SECONDED by S. Pankow

THAT the PSFDH Board of Directors accepts the Finance Committee recommendation that the Board authorizes the Executive Director of Lanark County Mental Health to execute the lease for the new Perth location at 240 Gore Street, Perth as presented.

CARRIED.

It was noted that all were in favour and J. Hewitt opposed.

Lanark County Mental Health 2021/22 Budget
Lanark County Support Services 2021/22 Budget

RESOLUTION No. 41/21

MOVED by B. Hirst

SECONDED by K. Clupp

THAT the PSFDH Board of Directors accepts the Finance Committee recommendation to:

1. Endorse the fiscal 2021/22 detailed LCMH and LCSS operating budget with a balanced operating margin, and
2. Continue collaboration with Ministry to manage recoveries of incremental COVID-19 costs, separate from the operating budget, and
3. Defer LCMH CAPS submission pending receipt from LHIN regarding performance expectations, funding and timelines.

CARRIED.

HSAA, MSAA Extension Letters

RESOLUTION No. 42/11

MOVED by K. Clupp

SECONDED by L. Drynan

Per the Finance Committee recommendation, the PSFDH Board of Directors accepts the LHIN extending letters to amend the H-SAA and M-SAA effective March 31, 2021 as follows:

- a. Extension of the term to March 31, 2022, and
- b. Extension of the schedules until March 31, 2022, or until such other time as may be agreed to by the provider and the LHIN, and
- c. All other terms and conditions remaining in effect.

CARRIED.

13 Standing Items

13.1 Strategic Planning Update – D. Howard

- No report provided.

14 Information Items

The items were provided for information.

15 Next Meeting Date

Tuesday, April 27, 2021, Tele/Videoconference at 7:30 a.m.

16 Adjournment

RESOLUTION No. 43/21

MOVED by G. Church

SECONDED by K. Clupp

THAT the March 23, 2021 Perth and Smiths Falls District Hospital Board of Directors' meeting adjourned at 10:25 a.m.

CARRIED.

G. Church commented that Dr. B. Guppy should be commended for work on improving the hospital financial position.

A brief session of independent directors occurred following the close of the meeting.



D. Howard, Chair



Dr. B. Guppy, Secretary