

	<b>MINUTES</b> <b>OPEN SESSION BOARD MEETING</b> <b>Wednesday, January 25, 2023</b> <b>Zoom Videoconference</b>		
	<b>Directors:</b>	Margaret Dragan, Chair v Anthony lafrate - R Bill Gillam, Treasurer v Louis Guimond, Vice-Chair v	Brian Knott - R Katherine Mantha v Bob McKinley v Barry Riedy v
<b>Ex-Officio Directors:</b>	Paula Reaume-Zimmer v Dr. Michel Haddad v	Shannon Landry v Dr. Dhiraj Dhanjani v	Dr. Paxton Moon - R
<b>Invited Participants:</b>	Marlene Kerwin v Keith Marnoch v	Laurie Zimmer v Kathy Alexander v	Lisa Regan v Dr. Ajayi-Obe - R
<b>Recorder:</b>	Melissa Rondinelli		

## 1.0 CALL TO ORDER

Margaret Dragan called the meeting to order at 5:01 pm and thanked the Board and guests for attending. Margaret explained she had invited Louis Guimond to share the Traditional Territorial Acknowledgement at this meeting, and recommended Board members rotate reading the acknowledgement moving forward. Paul Wiersma supported the idea of rotating the acknowledgement, and suggested the exercise be further enhanced by the readers personalizing the acknowledgement if they so choose. Louis shared the Traditional Territorial Acknowledgement.

## 2.0 AGENDA APPROVAL

### 2.1 Approval of Agenda\*

***Motion duly made, seconded and carried: to approve the agenda as presented.***

### 2.2 Declaration of Conflict of Interest – No conflicts declared.

## 3.0 CONSENT AGENDA

### 3.1 INFORMATION ITEMS TO BE RECEIVED

3.1.1 Board Chair Report\*

3.1.2 Professional Staff Association Report\*

3.1.3 Board Evaluation Results

a) Accreditation Governance Functioning Tool Survey Results\*

b) Ontario Hospital Association Board Self-Assessment Survey Results\*

c) Board Meeting Effectiveness Survey Results – Nov. 23, 2022\*

### 3.2 ITEMS FOR APPROVAL

#### 3.2.1 Open Session Board Minutes – November 23, 2022\*

***Motion duly made, seconded and carried: to receive the reports presented and to approve the Open Session Board Minutes of November 23, 2022.***

### 4.0 **ACCREDITATION EDUCATION/ANNUAL SAFETY TRAINING\***

Shannon Landry presented the newsletter for information purposes and briefly reviewed the content. She noted Accreditation is taking place in 12 weeks (April 17-21, 2023) and encouraged Directors to review the material before the survey. Margaret mentioned the newsletters would be saved in ShareFile for quick reference. Discussion about the survey process followed. Shannon explained the Board would be invited to a one-hour meeting with the surveyors, where they would be asked questions about the Board's governance processes. Margaret encouraged all Directors to attend the survey meeting if they are able.

### 5.0 **BOARD DECISIONS/OVERSIGHT/POLICY FORMATION**

#### 5.1 President & CEO Report\*

Paula Reaume-Zimmer presented her first report as President & CEO. She clarified the hospital's new helipad was approved for day use only. Bluewater Health (BWH) continues to await nighttime approval, expected in late February. Next, Paula brought attention to the Ministry's *The Path Forward* document referenced in her report, outlining expectations for Ontario Health Team (OHT) development, including the expectation for OHTs to establish not-for-profit status. She reported the Sarnia-Lambton OHT is awaiting more direction on this work.

Paula then provided an update regarding a recent meeting held between BWH leaders and MPP Bailey. She explained the focus of the meeting was pre-budget advocacy, during which BWH shared preliminary deficit budget details for the next fiscal year. BWH made MPP Bailey aware the hospital continues to see trends of high demand and high patient acuity, and is not in a position to reduce spending. The group toured the daily operations centre, where patient flow and staffing teams address daily pressures. They also discussed the introduction of Independent Health Facilities (IHF), which BWH expects to hear more about. Margaret added that Keith Marnoch provided MPP Bailey with follow-up information after the meeting, and Marlene Kerwin requested he follow-up on BWH's application for Exceptional Circumstances funding. It was questioned whether there was discussion with MPP Bailey about hiring medical staff from outside of the province. Paula indicated MPP Bailey was supportive of the initiative.

Paul reported attending a large community event last evening, where he was pleased to see Paula and Keith in attendance on behalf of the hospital.

*Dr. Dhanjani joined the meeting at 5:17 pm.*

5.2 Chief of Staff Report\*

Dr. Haddad presented his report and highlighted the Medical Advisory Committee's (MAC) work on various policies in preparation for Accreditation. MAC reviewed and recommended the Annual Physician Human Resources Plan, which will come forward for Board approval next month. Dr. Haddad reported BWH has been successful recruiting specialists including a neurologist, general surgeon, and oncologist; and is busy interviewing candidates for psychiatry, pediatrics, and more. Next, he noted BWH's engagement with partners at Western and McMaster to recruit for pediatrics and geriatrics. Dr. Haddad also reported BWH received preliminary approval for the Pediatric Alternate Payment Plan, which is stabilization funding to support the pediatric program, and will assist with recruitment. Dr. Haddad explained hospital competition for pediatric candidates makes recruitment difficult. He also mentioned that while political initiatives to open doors in Ontario for credentialed physicians are positive, it is important that credentialing be driven by the College of Physicians and Surgeons of Ontario to ensure quality.

Margaret welcomed Lisa Regan to the meeting as BWH's new Vice-President Care Transitions.

5.3 Governance & Nominating (G&N) Committee Highlights\*

Margaret presented the highlights on behalf of Anthony Iafate, and noted Keith Marnoch as the new Executive Lead of the Committee. She then reviewed the work of the Committee this month, including discussion of various Board evaluation results, and information updates regarding the delayed ACCESS Open Minds project, and work underway on an Equity, Diversity, and Inclusion (EDI) census tool. Margaret reminded the Board to complete the Board succession planning survey by January 30, 2023. There were no questions or comments.

5.4 Professional Staff By-laws\*

Margaret presented the agenda item and invited Paula to speak. Paula reminded the Board the revised Corporate By-laws were approved in September, and the revised Professional Staff By-laws were approved to be posted for feedback. The Professional Staff By-laws were revised again slightly following feedback, and have been recommended for Board approval by the MAC and the G&N Committee. Margaret explained that once the Professional Staff By-laws are Board approved, a Members Meeting would immediately follow the Open Session Board meeting to approve all of the documents. She then referenced the motion as written and thanked the Professional Staff for their input on this work. There were no questions, comments or concerns.

***Motion duly made, seconded and carried:***

- 1. the revised Professional Staff By-laws of Bluewater Health, in the form presented to the Board of Directors of the Corporation (“Board”), be approved and adopted, and all previous Professional Staff By-laws be repealed and replaced by the By-law;***
- 2. the Professional Staff By-laws be submitted to the members of the Corporation (“Members”) for confirmation; and***
- 3. following confirmation by the Members, the Chair and the Secretary of the Corporation are authorized and directed to certify a copy of the Professional Staff By-laws as confirmed by the Members and to place such certified copy in the minute book of the Corporation.***

5.5 Resource Utilization and Audit Committee (RUAC) Highlights\*

Bill Gillam presented the highlights and brought attention to the fact the Committee would be implementing a consent agenda, and he would be providing with Board with updates on capital developments in the future.

5.6 Monthly Financial Statement\*

Bill invited Marlene Kerwin to present the financial statements. Marlene highlighted BWH’s surplus of \$356K at the end of November, which is better than budget for the period. She explained there are large variances in salaries and wages due to census pressures, high patient acuity and staffing demands. Marlene reported there is offsetting funding available through COVID incremental expense funding which was discontinued in June. Despite the funding being discontinued, BWH continues to report expenses to Ontario Health on a quarterly basis. The Ministry has also introduced funding flexibility, enabling BWH to keep unearned Quality Based Procedure funding to offset COVID pressures. Marlene noted that BWH overachieved hip and knee replacement volumes, which is contributing to the hospital’s deficit. The hospital is hopeful for reallocation funding to offset the deficit, but does not expect funding news until the last quarter of the year. Bill acknowledged BWH’s overachievement of hip and knee surgical volumes during such difficult times and thanked the staff for their work. There were no questions or concerns raised.

***Motion duly made, seconded and carried: to approve the Financial Statement for the period ended November 30, 2022 as presented.***

5.7 Resource Utilization and Audit Committee Performance Scorecard\*

Bill invited Marlene to present the scorecard. Marlene noted a number of indicators were off-target due to the pressures outlined above. She noted absenteeism was tracking positively for the period included in the report, which may shift during flu season months. Margaret asked about the status of the % of Capital Budget Spent indicator. Marlene estimated BWH would reach 60-70% on this indicator by year-end.

5.8 Facilities Report\*

Bill presented the report for information and noted he plans to bring this document forward for discussion moving forward. Margaret highlighted the importance of Board oversight of corporate projects and cash flow. There were no questions, comments or concerns.

5.9 Quality Committee Highlights\*

Kirk Wilson presented the highlights and brought attention to BWH's recognition on the Choosing Wisely Initiative for blood supply, as well as work underway on a new Choosing Labs Wisely initiative. He then highlighted a new procedure available at BWH, endoscopic retrograde cholangiopancreatography (ERCP); used to diagnose and treat problems of the liver, gall bladder, bile ducts and pancreas. Kirk also mentioned the Committee discussed upcoming Accreditation preparations. Shannon added the Infection Prevention and Control team provided the Committee with a presentation on "returning to normal". There were no questions, comments or concerns.

5.10 Quality Committee Performance Scorecard\*

Kirk invited Shannon to present the scorecard. She explained high occupancy and staffing pressures had affected wait time indicators, and credited BWH staff for their hard work addressing patient flow. Next, she mentioned BWH continues to work on a contract for patient experience surveys, while the hospital completes surveys on the units in the meantime. Shannon highlighted the indicator for Indigenous and Anti-Racism or Oppression training was heading in the right direction. Margaret asked about current hospital flow. Lisa Regan reported Emergency Department volumes have reduced from the fall and early January, and BWH has not had to cancel any surgeries. She reported BWH staff and physicians are doing a great job working to ensure wrap around services for patient discharges. Kirk inquired whether the fire at Fairwinds Lodge had affected patient flow. Lisa indicated the hospital was not currently experiencing an increase in demand or alternate level of care patients due to the fire. She reported the Fairwinds Lodge residents have been placed in long-term care homes where appropriate, and work is underway to ensure all residents are placed in suitable housing or provided with support services.

5.11 Ethical Decision-Making Framework\*

Shannon presented the revised framework, which includes new questions with an Equity Diversity and Inclusion (EDI) lens. She explained the hospital worked to simplify the framework, developed an algorithm for teams to determine the path for consultations, and will continue to use the SBAR tool. Shannon suggested approval of the operating plan would be an example where the Board could apply the ethical framework annually. She also reported a revised Ethical Decision-Making pocket tool checklist would be developed pending approval, to be shared with the Board.

***Motion duly made, seconded and carried: to approve the Ethical Decision-Making Framework as presented.***

5.12 Foundation Report\*

Kathy Alexander presented the Foundation report. She reported positive Dream Home sales, with the draw scheduled for February 1, 2023. Kathy advised the Foundation had fulfilled the helipad campaign, and expressed gratitude to donors and the community for their support. There were no questions for Kathy. Margaret shared appreciation for their work and for the CEEH Foundation contribution to the helipad campaign.

6.0 **ADJOURNMENT – Next Meeting: February 22, 2023**

***Motion duly made, seconded and carried: to adjourn the meeting at 5:55 pm.***



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Margaret Dragan,  
Board Chair



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Paula Reaume-Zimmer,  
Secretary



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Melissa Rondinelli,  
Recorder