

	<b>MINUTES</b> <b>OPEN SESSION BOARD MEETING</b> <b>Wednesday, September 29, 2021</b> <b>Zoom Videoconference</b> <b>5:00 pm</b>		
	<b>Directors:</b>	Marg Dragan, Vice-Chair ✓ Anthony lafrate ✓ Bill Gillam ✓ Jenny Greensmith ✓	Louis Guimond, Treasurer ✓ Brian Knott, Chair ✓ Katherine Mantha ✓ Bob McKinley ✓
<b>Ex-Officio Directors:</b>	Mike Lapaine ✓ Dr. Michel Haddad ✓	Shannon Landry ✓ Dr. Dhiraj Dhanjani - R	Dr. Lincoln Lam - R
<b>Invited Participants:</b>	Samer Abou-Sweid ✓ Julia Oosterman ✓	Laurie Zimmer ✓ Kathy Alexander ✓	Paula Reaume-Zimmer ✓
<b>Recorder:</b>	Melissa Rondinelli		

## 1.0 CALL TO ORDER

Brian Knott called the meeting to order at 5:00 pm and welcomed the Board and guests.

### 1.1 Traditional Territory Acknowledgement

Brian read the Traditional Territorial Acknowledgement. He also encouraged the Board to take time to reflect tomorrow on the National Day for Truth and Reconciliation.

## 2.0 AGENDA APPROVAL

### 2.1 Approval of Agenda\*

Brian invited members to remove items from the consent agenda. There were no changes to the agenda.

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

### 2.2 Report on September 9 In-Camera Board Meeting

Brian reported the Board endorsed the hospital Vaccination Policy during a special meeting held September 9, 2021.

### 2.3 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 Facilities Quarterly Report\*
- 3.1.4 Auditor's Annual Post Audit Management Letter\*
- 3.1.5 Analysis of Loans and Invest

#### **3.2 ITEMS FOR APPROVAL**

- 3.2.1 Open Session Board Minutes
  - a. June 23, 2021 Pre-AGM\*
  - b. June 23, 2021 Post- AGM\*
- 3.2.2 Chief Financial Officer Certificate\*

***Motion duly made, seconded and carried: to receive the reports presented and to approve the following items in the Consent Agenda: Open Session Board Minutes - Pre-AGM June 23, 2021 and Post-AGM June 23, 2021, and CFO Certificate.***

### **4.0 PRESIDENT & CEO REPORT\***

Mike Lapaine presented his report and highlighted the increased number of same-day joint surgeries, which helps to maintain volumes without using beds, and was helpful during the third way of COVID. Next, he provided an update on the vaccination policy, reporting an increase in vaccination rates, with an estimated 96% of staff to be vaccinated by the deadline, and an even higher rate estimated for physicians. He then brought attention the completed renovations to acute inpatient rooms at the Petrolia site, which will significantly improve patient experience. Questions followed about the trend in ward vs. private patient care rooms, and the gap between community and staff perception results related to whether BWH is heading the right direction in the Leger Report. It was suggested BWH investigate why the staff response was lower than community response.

It was explained most hospitals prefer semi-private/private rooms to benefit from insurance funds, yet must have ward rooms to qualify for funding. There is also a demand for private rooms due to infection prevention and control precautions. Another question about why there is a removable ramp in the Mental Health Patio followed. Paula Reaume-Zimmer explained the ramp is temporary, with contractors working on a permanent solution. She assured the Board access was part of the initiative with Dan Edwards' involvement. Lastly, the Board commended BWH for the earned "Using Blood Wisely" designation.

**Action: Julia Osterman to investigate rationale for staff response to Leger survey question and report back to Board.**

## 5.0 BOARD DECISIONS/OVERSIGHT

### 5.1 Resource Utilization & Audit Committee (RUAC) Highlights\*

Louis Guimond reported the RUAC had a lengthy first meeting, welcomed new members, reviewed the work plan and minor policy changes, received updates on the eVOLVE project, and discussed the No One Waits (NOW) Initiative and challenges with human resources. Louis also reported the auditors had no concerns about management, and highlighted the Facilities Report in the consent agenda, which includes details of 19 projects in planning or underway, valued at over \$40M. Recommended modifications to the work plan and the revised policies will go to the next Governance & Nominating Committee meeting for consideration. There is also intention to look at net zero energy for future projects.

### 5.2 2021-22 Updated Operating Plan\*

It was noted the updated operating plan was fully vetted by the RUAC and Quality Committees with unanimous recommendation for Board approval. Louis reported the hospital is projecting a surplus of \$389K this year, due to global funding and Cancer Care Ontario increases. It was noted COVID expenses have been removed from the plan, due to reimbursement uncertainty, however, recent news from the Ministry indicates the expenses will be covered up to end of September, with the exception of screening and PPE costs. There is speculation reimbursement will continue. Jenny Greensmith noted the Quality Committee discussed the impact of the budget on quality, and was pleased to see investments in Medicine and Rehab retained.

***Motion duly made, seconded and carried: to approve the updated 2021-22 operating plan as presented and use the updated plan to populate the Hospital Accountability Planning Submission.***

### 5.3 Monthly Financial Statement\*

Louis presented the financial statement for the period ending July 31, four months into the fiscal year. He noted the hospital is operating within the parameters of the budget, and referenced the notes to the statement that explain surplus, variances, etc. There were no questions, comments or concerns. Next, Louis pointed out BWH is in a negative cash position waiting on Ministry funds. Samer Abou-Sweid explained the hospital is expecting funds on Friday to help with the overdraft. The bank is aware the situation is short-term. He also noted Marlene Kerwin would be providing an education session on the financial statements in October, and will share the August financial statement at that meeting. There were no questions, comments or concerns.

***Motion duly made, seconded and carried: to approve the Financial Statement for the period ended July 31, 2021 as presented.***

5.4 Resource Utilization and Audit Committee Performance Scorecard\*

Louis reported the Committee briefly discussed the scorecard and is expecting a new scorecard next month. The Board is aware of challenges with the Time to Inpatient Bed indicator. There were no questions, comments or concerns.

5.5 Pandemic Recovery and Hospital Operations Scorecard\*

Samer presented the most up-to-date scorecard, which shows improvement from July and August, when BWH was experiencing staff shortages contributing to an increase in Time to Inpatient Bed. BWH continues to address a backlog of patients due to the pandemic, similar across the province. The hospital is closely monitoring Sarnia-Lambton COVID rates, with neighbouring communities already struggling with capacity issues due to the virus. Operating wait time has increased due to same-day surgery restrictions in July in August, to ensure bed availability for Medicine patients. Concern was shared regarding staff shortages and burnout in light of increasing COVID cases. It was noted the nursing shortage is a global issue, and some regions are offering premiums to retain nurses. There is an expectation salaries will increase across the board in healthcare moving forward. It was questioned whether data for items 17 and 18 is still being collected. It was requested BWH provide details of any leaves of absence. Samer reported redeployment has stopped and an update on leaves would be provided at the next meeting. BWH was questioned about readiness to respond to growing COVID numbers in the community. It was explained the hospital connects with Lambton Public Health regularly to assess the risk to BWH and adjusts plans accordingly. So far, BWH is in a good position; however, it is difficult to predict the future.

**Action: BWH to provide breakdown of redeployments and leaves of absence on the scorecard.**

Bill Gillam joined the meeting at 5:31 pm.

5.6 Quality Committee Highlights\*

Jenny presented the meeting highlights and brought attention to a patient story that stimulated discussion about written communication with patients, when family members are not present. She reported the Infection Prevention and Control Program has been shifting its focus to COVID recovery, working to remove restrictions for a better patient-family centred experience, while being ready to pivot depending on the COVID situation. The Committee also received updates on the NOW initiative, reviewed policies, the work plan and more. There were no questions, comments or concerns.

5.7 Quality Committee Performance Scorecard\*

Jenny reported discussion on this item at the Committee level focused on the indicators not reaching targets, including Time to Inpatient Bed. She noted Shannon Landry helped the Committee to understand the indicators and questioned if there is

correlation between the Length of Stay and Kindness Indicators. There were no questions, comments or concerns.

**5.8 Governance & Nominating Committee Highlights\***

Anthony lafrate reported the Committee considered feedback from other hospitals and the Board, and recommended BWH continue to meet seven times per week in a virtual format. The Committee will discuss future attendance expectations later in the year. There was also discussion about Board goals, which will be a topic for consideration at the upcoming Retreat on October 23, 2021. Additional governance training for the Board is under investigation. In addition, the Committee reviewed Board evaluation and exit survey results, which were positive overall. Lastly, Anthony noted there are plans to present the Board work plan and policy revisions to the Board in November, with G&N expecting a busy year reviewing By-Laws and policies. There were no questions, concerns, or comments.

**5.9 Foundation Report\***

Kathy Alexander presented the Foundation Report. She summarized Foundation efforts during the pandemic, discussed challenges, and celebrated staff and donor contributions to the hospital. Moving forward, the BWH Foundation is focused on the ACCESS Open Minds Project, strategic planning and the Dream Home lottery partnership with the CEEH Foundation, which begins October 1, 2021. It was questioned how ACCESS Open Minds will be funded. Kathy explained the Foundation has committed to fund the renovation for the site; however, operations would be funded through partner organization reallocations. Paula Reaume-Zimmer indicated the initial model is to bring together existing resources to establish the youth hub, while work is underway with the Youth Wellness Hub Ontario for additional funding. Paula added the Sarnia site was recently approved for their new My Wellness Passport initiative and is very much on their radar.

**6.0 CHIEF OF PROFESSIONAL STAFF REPORT\***

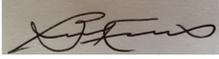
Dr. Haddad presented his report. He highlighted MAC met last week and approved clinical policies, as well as discussed COVID and recruitment efforts. There were no questions, concerns or comments.

**7.0 POLICY FORMATION – None**

**8.0 OPEN FORUM**

Jenny shared details of recent personal positive patient experiences.

**9.0 ADJOURNMENT: *Motion duly made, seconded and carried: to adjourn the meeting at 6:10 pm.***



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Brian Knott  
Chair



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Mike Lapaine  
Secretary



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Melissa Rondinelli  
Senior Executive Assistant - Recorder