

## Perth and Smiths Falls District Hospital

Board of Directors Meeting  
Tuesday, March 28, 2023  
Via Videoconference @ 7:30 a.m.

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PRESENT: G. Church, Chair, B. Smith, K. Clupp, M. Cohen, K. Fair, B. Hirst, I. Boyle, R. Schooley, Dr. W. Hollis, C. Maloney, J. Brown, K. Weekes, Dr. A. Kuchinad, S. Pankow, A. Thomlinson, M. Quigg and Dr. M. Roberts D. Thomson, J. Hewitt and Dr. Morell  
Guests: R. Wilson and P. McKenna

REGRETS: Nil.

IN ATTENDANCE: D. Hodgins, VP, Finance & Support Services, M. Hallam, Executive Director, PSFDH Foundation, D. Quinn, President, GWM Auxiliary, G. Laws, ED, Lanark County Mental Health, H. Bedor, ED, Lanark County Support Services, ~~J. Staples, President, SF Auxiliary~~, C. Rustan, Recording Secretary and Karen Kelly, Marketing and Communications Coordinator

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### 1. Call to Order – G. Church

G. Church, Chair, called the meeting to order at 7:31 a.m.

### 2. Chair's Remarks – G. Church

G. Church welcomed everyone to the meeting.

### 3. Patient & Family Centred Care – B. Smith

#### 3.1 Ruby's Room and Palliative/Supportive Care and MaID at PSFDH

Dr. R. Wilson shared that he and his siblings opted to donate funds in 2014 to develop a Palliative Care Room which is now known as "Ruby's Room", in honour of their late mother. However, as a result of the pandemic, Ruby's room was converted back to a double room to accommodate the increased patient load. While the family was unhappy that the room was converted back, as well as the lack of communication regarding the conversion, the family continues to participate in discussions with the hospital with regards to creating a new Ruby's Room and the growth in the Palliative Care program. As a result, the Wilson family intends to donate an additional \$10,000.

M. Cohen and Dr. R. Wilson will touch base after the meeting to develop an MOU between the Wilson family and the PSFDH. M. Cohen added that there are no direct funds for Palliative Care Services.

K. Weekes met with Nancy Paquin, Manager, MS/OBS, and R. Wilson virtually to provide an overview on Ruby's Room. K. Weekes provided a presentation to the Board on Palliative, Supportive Care and MaID at PSFDH.

I. Boyle informed the Board of Directors that she sits on a committee called Hospice Hub. Hospice Hub has organized a Community engagement session at Algonquin College on April 20<sup>th</sup>, 2023 called "Dying In Lanark County: A Conversation with the Community" and C. Rustan will circulate the invitation after the meeting.

### 4. Declaration of Conflict of Interest – G. Church

Members were asked to declare a conflict at any point during the meeting.

### 5. Approval of Agendas – G. Church

#### 5.1 Regular Meeting Agenda

RESOLUTION No. 30/23

MOVED by K. Clupp  
SECONDED by Dr. W. Hollis

THAT the March 28, 2023 regular meeting agenda be approved with the following addition:  
10.3.4 HSAA Resolution  
CARRIED.

## 5.2 Consent Agenda

RESOLUTION No. 31/23

MOVED by K. Clupp  
SECONDED by Dr. W. Hollis

THAT the March 28, 2023 consent meeting agenda was approved as presented.  
CARRIED.

### i) PSFDH Board of Directors Minutes – February 28, 2023

MOVED by K. Clupp  
SECONDED by Dr. W. Hollis

THAT the Board of Directors Meetings Minutes from February 28, 2023 were approved as presented.  
CARRIED.

## 6. Foundation & Auxiliaries

### 6.1 PSFDH Foundation – M. Hallam

The Foundation report was uploaded to the portal prior to the meeting.  
The Foundation participated in an MRI meeting last week and they are currently working on some action items from that meeting.

D. Thomson addressed that the Foundation flyer does not have the GWM address. M. Hallam noted that both addresses are included on the Flyer.

### 6.2 GWM Auxiliary – D. Quinn

The Auxiliary will have their first post CoVID-19 meeting on May 17<sup>th</sup>, 2023.  
D. Hodgins informed the Board of Directors that the GWM Auxiliary recently made a donation of \$20,000 to the hospital to be put towards the Capital List.

## 7. Action Items

### 7.1 Leadership Report – M. Cohen

The Leadership report was uploaded to the portal prior to the meeting.

RESOLUTION No. 32/23

MOVED by B. Hirst  
SECONDED by C. Maloney

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

### 7.2 Chief of Staff Report – Dr. T. Morell

Dr. Morell provided the following highlights:

- Dr. Lex Wei will become Chief of Internal Medicine on April 1<sup>st</sup>, 2023
- Dr. Del Grande has stepped down as Chief of Internal Medicine after 25 years and has taken on the role of Lumeo Champion
- The MAC will be reviewing and approving 115 policies coming through from the regional level over the next few months along with regional order sets
- We are actively recruiting for some new hospitalists

RESOLUTION No.33/23

MOVED by B. Hirst

*SECONDED by C. Maloney*

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

**7.3 Medical Staff Association**

Dr. Roberts shared the following:

- Unfortunately surgeries are being cancelled again due to bed pressures, which leads to staff morale being down
- K. Weekes provided a presentation to MAC on IV Iron
- Dr. Roberts is concerned that we may lose a number of staff based on how large of a project Lumeo will be and given our current staffing issues

J. Brown suggested incorporating lifestyle and scenery into recruiting to showcase what else Perth has to offer. M. Cohen will bring forward a presentation on recruiting at an upcoming board meeting.

**7.4 Governance Committee Items – J. Hewitt**

**a. Governance Policy – 2.6.9 Medical Advisory Committee Terms of Reference**

RESOLUTION No. 34/23

MOVED by J. Hewitt

*SECONDED by C. Maloney*

*THAT* the Board of Directors approve policy “2.6.9 Medical Advisory Committee Terms of Reference” as presented.

*CARRIED.*

**b. Governance Policy – 2.21 Statement of the Roles and Responsibilities of the Board**

RESOLUTION No. 35/23

MOVED by J. Hewitt

*SECONDED by C. Maloney*

*THAT* the Board of Directors approve policy “2.21 Statement of Roles and Responsibilities of the Board” as presented.

*CARRIED.*

**8. New Business**

Nil.

**9. Business Arising from Minutes**

**9.1 Strategic Plan –Scorecard**

M. Cohen shared the one page document that outlines the four strategic pillars that the hospital will be focusing on for the 2023/2024 fiscal year. Senior Leadership will bring forward the four pillars back monthly starting in the fall to track the hospitals monthly progress against these targets. A fulsome review of the Scorecard will be completed at end of the year to form the basis for the annual CEO and COS performance reviews.

The four themes are:

1. Excellence Experience
2. Changing Needs of our Community
3. Support & Empower our People
4. Ensure our Future Sustainability

The Board of Directors has previously approved the objectives that are aligned with the four themes listed above. All themes, objectives, measures and targets have been posted to the portal as agenda item number 9.1.

*RESOLUTION No.36/23*

MOVED by K. Clupp  
SECONDED by R. Schooley

*THAT the board adopt the 2023-2024 Strategic Plan Scorecard.*  
CARRIED.

**10. Board Committee Reports**

**10.1 Finance Committee Report – March 23, 2023 – K. Clupp**

**10.1.2 Committee Report**

K. Clupp advised that there were some changes to the Operating Margin. PSFDH currently has an unfavourable variance budget sitting at 3.8M. The hospital is expected to receive some additional help from the Ministry, however we will still have a deficit at the end of the year. The Finance Committee approved the draft Operating Budget at their last meeting.

M. Cohen shared that the process for the HSAA and QIP are rushed compared to a normal year. This is the first year that a QIP and HSAA have been implemented since the CoVID-19 pandemic hit. The hospital is working on a commitment with the ministry to have a balanced budget over the next five years.

Resolution No. 37/23

MOVED by K. Fair  
SECONDED by J. Brown

*THAT the Finance committee recommend that the Board of Directors approve the OH proposed HSAA which includes the proposed targets, local obligations, as well as a the balanced budget waiver for the commitment of collaboration with OH to return to a balanced operating margin within the next 5 years.*

CARRIED.

**10.1.3 Financial Statements and Notes**

The Financial Statements and notes were posted to the portal.

**10.1.4 Governance Policy – 4.15 Capital Reserve Investment Fund**

The policy was added as information only. The two amendments that were brought forward by the Finance Committee will be brought to the next Board of Directors meeting.

**10.2 Governance Committee –J. Hewitt**

**10.2.1 Governance Committee Report – March 21 2023**

The Governance Committee report was uploaded to the Portal prior to the meeting.

**10.3 Board Quality Committee**

**10.3.1 Board Quality Committee Report – February 9<sup>th</sup> & March 24<sup>th</sup>**

The Board Quality Committee report was uploaded to the Portal prior to the meeting.

**10.3.2 Quality Improvement Plan\*\***

M. Cohen this is the first QIP that has been completed since 2018-2019 and the 2023-2024 QIP needs to be approved prior to March 31<sup>st</sup>, 2023.

B. Smith informed the Board that the two indicators that have been implemented into the QIP is Falls Prevention and NonViolent Crisis Intervention Training (decreasing injuries in the ED).

RESOLUTION No. 38/23

MOVED by Dr. W. Hollis  
SECONDED by I. Boyle

*THAT the Board of Directors adopt and approve the Quality Improvement Plan that was presented.*  
CARRIED.

### **10.3.3 Quality Improvement Plan – Narrative\*\***

The QIP Narrative was posted to the Portal.

D. Thomson noted that a change was brought forward at Board Quality and it was not made on the document that was attached. The Narrative read “and look at best practices to overcome the challenges associated with developing, implementing, and sustaining a falls prevention program”. This has been reworded to read “and look at best practices to sustain a falls prevention program”.

### **10.3.4 HSAA Resolution – D. Hodgins**

RESOLUTION No. 39/23

MOVED by Dr. W. Hollis

SECONDED by I. Boyle

*THAT* the Board of Directors adopt and approve the QIP Narrative with the change noted above.  
*CARRIED.*

## **11. Closed Session**

RESOLUTION No. 40/23

MOVED by I. Boyle

SECONDED by Dr. W. Hollis

*THAT* the PSFDH Board of Directors moved to closed session number one at 8:46am.

*CARRIED.*

RESOLUTION No. 43/23

MOVED by R. Schooley

SECONDED by J. Hewitt

*THAT* the PSFDH Board of Directors moved out of the closed session number one at 9:23 a.m.

*CARRIED.*

Note: Housekeeping Resolutions 41/23 and 42/23 were moved and approved during closed session #1.

Closed Session Resolutions:

### **Chief of Staff Report**

#### **Professional Staff Appointments/Reappointments**

RESOLUTION No. 44/23

MOVED by Dr. T. Morell

SECONDED by Dr. W. Hollis

*THAT* the PSFDH Board of Directors adopts the Chief of Staff report from Closed Session.

*CARRIED.*

RESOLUTION No. 45/23

MOVED by Dr. W. Hollis

SECONDED by I. Boyle

*THAT* the PSFDH Board of Directors moved to closed session number two at 8:47am.

*CARRIED.*

RESOLUTION No. 47/23

MOVED by R. Schooley

SECONDED by J. Hewitt

THAT the PSFDH Board of Directors moved out of the closed session number two at 9:10 a.m.

CARRIED.

Note: Housekeeping Resolution 46/23 was moved and approved during closed session #2.

**12. Standing Items**

Nil.

**13. Information Items**

Nil.

**14. Next Meeting Date**

Tuesday, April 25<sup>th</sup>, 2023, via videoconference at 7:30 a.m.

**15. Closed Session No.2**

**16. Adjournment**

RESOLUTION No. 48/23

MOVED by C. Maloney

SECONDED by J. Hewitt

THAT the March 28, 2023 Perth and Smiths Falls District Hospital Board of Directors' meeting adjourned at 9:14 a.m.

CARRIED.



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G. Church, Chair



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M. Cohen, Secretary