

Perth and Smiths Falls District Hospital

Board of Directors Meeting
Tuesday, January 24th, 2023
Via Videoconference @ 7:30 a.m.

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, Dr. A. Kuchinad, Dr. M. Roberts, K. Weekes,
M. Quigg, D. Thomson and Dr. Morell

REGRETS: A. Thomlinson, S. Pankow and J. Hewitt

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

1. Call to Order – G. Church

G. Church, Chair, called the meeting to order at 7:35 a.m.

2. Chair's Remarks – G. Church

G. Church welcomed everyone to the meeting.

3. Patient & Family Centred Care – B. Smith

B. Smith provided a PowerPoint presentation on the Emergency Department which incorporated a PT story in regards to a 19 year-old female with no past medical history. The presentation outlined the current staffing/medical models, as well as the volumes in the ED ranging from September 2021 to 2022.

Some of the Quality Improvement Initiatives that can be made are e-CTAS software, renovations to the EDs, Corporate Flow Project, Lumeo/Cerner and the Lanark County Paramedic Program. PSFDH is looking into what opportunities can we utilize from the Lanark County Paramedic Program.

B. Smith addressed the ongoing risks and mitigations. Higher volumes and higher acuity results in higher volume of admitted patients in the department without an inpatient bed, which in turn results in blocked ED beds and less space to assess patients.

Part of the Mitigation strategy is to revise the surge policy to ensure resources are where they need to be and to alert clinicians when the ED has reached a high capacity. As well, review the Acute Medicine Length of Stay and explore feasibility for a Fast Track in Perth.

It is very difficult to bring on new nurses to a facility that is still paper based. The new ED staff are currently completing an extensive orientation. Discussion ensued regarding bringing on social workers and K. Clupp questioned how accurate the numbers were given that the GWM ED tends to see higher numbers.

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. 01/23

MOVED by M. Quigg

SECONDED by K. Fair

*THAT the regular meeting agenda was approved as presented.
CARRIED.*

5.2 Consent Agenda

RESOLUTION No. 02/23

MOVED by Dr. W. Hollis

SECONDED by K. Fair

*THAT the consent meeting agenda was approved as presented.
CARRIED.*

i) PSFDH Board of Directors Minutes – November 22nd, 2022

MOVED by Dr. W. Hollis

SECONDED by M. Quigg

*THAT the Board of Directors Meetings Minutes from November 22nd, 2022 were approved as presented.
CARRIED.*

6. Foundation & Auxiliaries

6.1 PSFDH Foundation – M. Hallam

M. Hallam shared the following highlights:

- The mail drop for the MRI campaign will be going out shortly
- 50/50 will continue into 2023 and the most recent winner, Kelly's Flowers, donated \$10,000 back to the Foundation
- Currently getting quotes for elevator wraps
- Continuously looking for sponsors for the 50/50 early bird draws
- The free Family Skating event will take place on February 11th in Perth and Smiths Falls
- There will be a pancake Fundraiser on February 21st, 2023
- The Golf Tournament will be held on June 16, 2023
- The Fall Gala will be held on September 18th, 2023
- All three Smiths Falls Tim Hortons locations chose PSFDH again for their Smile Cookie Campaign which will run from May 8 -14th, 2023
- The foundation was aiming to raise \$12,500 for new ED stretchers and the event brought in \$15,295

6.2 GWM Auxiliary – D. Quinn

D. Quinn shared that the Auxiliary Volunteers are happy to be back on site.

The Auxiliary is very interested in the Flow Project that B. Smith is working on and they are hoping to be able to ramp up the Meal Assist program again.

7. Education

Nil.

8. Action Items

8.1 Leadership Report – M. Cohen

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

RESOLUTION No. 03/23

MOVED by K. Fair

SECONDED by Dr. W. Hollis

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

8.2 Chief of Staff Report – Dr. T. Morell

The Chief of Staff Report was uploaded to the portal prior to the meeting.

Dr. T. Morell noted that the Obstetrics Unit will re-open on January 8th, 2023. Dr. Del Grande will replace Dr. Stolee as the Lumeo Physician Champion.

RESOLUTION No.04/23

MOVED by Dr. W. Hollis

SECONDED by K. Fair

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

8.3 Medical Staff Association

Dr. Roberts shared that the Medical Staff Association met a week ago and the following items were discussed:

- Patient Flow presentation on what Patient Flow processes
- A presentation was provided on the Community Paramedic Palliative Care Program (Pilot project)
- There has been a CoVID-19 outbreak on the SF Med Surg unit
- There continues to be a significant backlog with regards to DI wait times (particularly U/S)

8.4 Governance Committee Items – J. Hewitt

a. Governance Policy – 4.15 Capital Reserve Investment Fund

Deferred.

b. Governance Policy – 5.0 Evaluation Process for Board of Directors

Deferred.

9. Sponsored Organizations

9.1 LCMH – Board Report – G. Laws, Executive Director

G. Laws report was added to the portal and the following highlights were noted:

- A dashboard overview was provided which discussed the progress that LCMH is making on their key performance indicators access, system integration, partnerships and service expansion
- The temporary FT position for MCERT (community mental health/emergency response nurse) will close shortly and all other positions remain filled
- LCMH is on track with the October and November financial statements
- LCMH is currently in the midst of preparing their QI metrics for the remainder of the year.
- Discussion ensued regarding the priorities and projects that were listed in the Executive Summary
- A second Staff Pulse survey was sent out and results should be in by no later than March
- LCMH is working to create a Community Nurse Position to a Nurse Practitioner (NP) position. This position will assist patients with Mental Health and Substance Abuse issues. G. Laws will complete a “Change of Service” form and once it is approved by OHE the position will be posted. The Change of Service form requires the organization to notify their Board of Directors about the change.

9.2 LCSS – Board Report

The LCSS Board report was uploaded to the portal prior to the meeting.

10. New Business

Nil.

11. Business Arising from Minutes

11.1 Strategic Plan – M. Cohen

M. Cohen continuing to work on the Strategic Plan with PFAC.

The draft Strategic Plan will be brought forward to the Board in February.

11.2 Follow-Up on Urgent Care Centre

M. Cohen it was recommended to focus our efforts on improving flow in the ED and potentially roll-out an ED fast track program at the GWM site.

The Board was in agreement to remove this item from the agenda.

12. Board Committee Reports

12.1 Finance Committee Report – January 19th, 2023 – K. Clupp

12.1.2 Committee Report

The Finance Report was uploaded to the portal prior to the meeting.

K. Clupp provided the following key messages:

- The hospital still has a large deficit (4.7M) which is being effected by the QBP volumes that are down and all of the unfunded protocols
- HHR problems include the uninsured service revenue
- We Finance committee has developed a plan which has been partially addressed in terms of the high deficit. Taking a final approach to sort things out with the Province
- The budget 2023/2024 budget has been approved and it contains a deficit
- Hopeful to receive some funds from the ministry to assist with the lessening the debt
- The priority request list which consists of 13M A1 items

D. Hodgins shared that a balanced budget waiver will need to be completed and the next Finance meeting will review the HSAA approach. Moving forward FAC will be providing a summary to the Finance Committee.

12.1.3 Financial Statements and Notes

D. Hodgins the Financial statements and balance sheet were uploaded to the portal.

As well the revenue and expense summary outlines the activity in the current month, the YTD, the 12 month approved budget and the year end forecast. The financial statements outlined where we ended on March 31, 2022 and where we landed in November.

The notes provide a more detailed breakdown and it was noted that there is a significant decrease in the hospitals cash, however the expenditures are inline with what was projected.

D. Hodgins if there are no new investments and the hospital does not get funded for the hospitals activities it then leads to a significant drain on our cash. To date the hospital is not utilizing the line of credit and there is no short term debt related to cash flow issues.

D. Hodgins displayed the slide which outlines the hospitals current liabilities and long-term liabilities, as well as the revenue and expense statement.

D. Hodgins addresses the 1.2M positive variance which consists of numerous one time funds. The one time money is related to additional funding for CoVID-19 and one-time premiums brought forward from the ministry. The cafeteria, parking and occupancy are down and CoVID protocols put a barrier up in regards to placing students, which in turn means the revenue is down.

D. Hodgins discussed the expenditures and shared that the overall YTD variance is almost 3.2M, which does not offset the positive variance revenue. Salary and benefits are the key contributors and those are items outside of the hospitals control. Supply change issues are ongoing.

The hospital operating surplus net outlines the net speciality funding (LCMH and LCSS) which is a net of zero. The hospital has a deficit of 3.8M and including the net building depreciation it's 4.7M, so overall the hospital has a negative margin of negative 8.87%.

C. Rustan will look at the portal to ensure the agenda items are linked properly.

12.1.4 Capital Budget Investments

D. Hodgins shared the 2023/2024 capital budget investments on the screen and they were uploaded to the portal. The 23/24 capital investment cycle is done annually and the hope is to start the cycle earlier to identify what the hospitals needs are to help plan for future expenditures and to provide a foundation. D. Hodgins displayed the timelines on the screen and shared that the Finance Committee is seeking endorsement for the capital requests which will then be provided to the foundation in February.

The capital projects are dependant on approved financial commitment prior to proceeding. In terms of all of the submissions, managers complete the request and each request is reviewed and ranked into categories, with A1 being the highest priority.

D. Hodgins shared that a capital redevelopment category was created which is used for any major capital redevelopments. PSFDH is solely relying on the MoH planning grant to fund that category and this will not be one that seeks support from the foundation. The Lumeo and MRI project were previously supported by the Board and they were included in the slide to outline the 23/24 financial commitment.

Discussion ensued regarding the equipment depreciation and moving forward the hospital should be effectively retiring assets as we move to bring on new technology. The hospital is working hard to try and makeup for the deferment of the capital.

The overall need for the capital project requests is 20.2M, however after ranking and prioritizing the ask is now 13.7M for the A1 items, new capital requests is 6.1M which leaves a gap of 9M. A contingency category has been developed and that is to ensure that there are funds set aside for those emergency situations that occur throughout the year.

Discussion ensued regarding HIRF funding which is money that is allocated to hospitals with aged infrastructure.

Discussion ensued regarding J. Jordan and S. Clark, M. Cohen noted that both MPPs are aware of the hospitals situation and know that the hospital requires a base funding adjustment. J. Brown offered her assistance to getting the word out.

RESOLUTION No. 05/23

MOVED by K. Clupp
SECONDED by R. Schooley

THAT the PSFDH Board of Directors endorse the 23/24 capital budget priority A1 requests up to 6.1M, Contingent on the approved funding sources prior to commencement of initiative.

Continuation of the MRI and Lumeo projects of the 7.6M utilizing core capital campaign, and interim debt financing to fill the 23/24 commitments.
CARRIED.

12.2 Governance Committee — G. Church for J. Hewitt

12.2.1 Governance Committee Report - January 17, 2023

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

G. Church reached out to each of the new Board Members and a discussion was held to determine what committees peaked their interest. As a result of those conversations, the following recommendation is brought forward for the Board of Directors Consideration.

That the following Board Committee appointments be approved:

- Governance Committee:
 - Caitriona (Cait) Maloney
- Board Quality:
 - Caitriona (Cait) Maloney
 - Isobel Boyle
 - Richard Schooley
- Liaison Committee:
 - Caitriona (Cait) Maloney
 - Isobel Boyle
 - Judy Brown

- Capital Planning Sub-Committee:
 - Judy Brown
 - Richard Schooley
- Finance Committee:
 - Richard Schooley

RESOLUTION No. 06/23

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

THAT the Board Committee appointments be approved as presented.

CARRIED.

13. Closed Session
RESOLUTION No.07/23

MOVED by C. Maloney
SECONDED by I. Boyle

THAT the PSFDH Board of Directors moved to a closed session at 9:06am.

CARRIED.

RESOLUTION No. 11/23

MOVED by R. Schooley
SECONDED by K. Clupp

THAT the PSFDH Board of Directors moved out of the closed session at 9:59 a.m.

CARRIED.

Note: Housekeeping Resolutions 09/23 and 10/23 were moved and approved during closed session.

Closed Session Resolutions:

Chief of Staff Report
Professional Staff Appointments/Reappointments

RESOLUTION No. 12/23
MOVED by D. Thomson
SECONDED by K. Clupp

THAT the PSFDH Board of Directors accepts the December and January privileges that were discussed in closed session.

CARRIED.

Capital Redevelopment Resolution
RESOLUTION No. 13/23
MOVED by K. Fair
SECONDED by R. Schooley

THAT the Capital planning subcommittee recommends to the finance committee of the Perth and Smiths Falls District Hospital that they agree to the submission of the pre-capital planning application as presented; On securing a planning grant, the hospital commits to initiating an integrated master plan for our facility, recognizing the urgency of addressing the deficiencies of the Perth site and fully committing to the 2 site model to best serve our community and our patients, and that the finance committee recommends the same to the Perth and Smiths Falls District Hospital Board of Directors."

ALL in Favour
CARRIED.

Operating Budget Resolution

RESOLUTION No. 14/23

MOVED by K. Clupp

SECONDED by B. Hirst

That Finance seeks the board of director's approval for the 2023/2024 Operating budget with a deficit of 6.4M.

Recognition that the fiscal year 23/24 hospital annual planning submission (HAPS) will require a balanced waiver request and

Delegate authority to the CEO to enter into negotiations with Ontario Health for the Hospital Service Accountability Agreement (HSAA) and Multi-sector Accountability Agreement (MSAA)

ALL in FAVOUR.
CARRIED.

14. Standing Items

Nil.

15. Information Items

The Foundation Family Skating event is scheduled for February 11th from 1:00-2:30pm at the Gerry Lowe rink in Smiths Falls and at the Ice Dogs rink in Perth.

16. Next Meeting Date

Tuesday, February 28th, 2023, via videoconference at 7:30 a.m.

17. Closed Session No.2

18. Adjournment

RESOLUTION No. 15/23

MOVED by I. Boyle

SECONDED by R. Schooley

THAT the January 24th, 2023 Perth and Smiths Falls District Hospital Board of Directors' meeting adjourned at 10:07 a.m.

CARRIED.



G. Church, Chair



M. Cohen, Secretary