

Perth and Smiths Falls District Hospital
Board of Directors Meeting
Tuesday, January 25, 2022
Via Videoconference @ 7:30 a.m.

PRESENT: S. Bird, *G. Church, Chair*, K. Clupp, M. Cohen, C. Dolgowicz, L. Drynan, N. Dwyer (Town of Smiths Falls), J. Fenik, J. Hewitt, B. Hirst, Dr. W. Hollis, Dr. A. Kuchinad, M. Quigg, Dr. M. Roberts, N. Shaw, Dr. K. Stolee, A. Thomlinson, Dr. K. Wickens

REGRETS: S. Pankow

IN ATTENDANCE: D. Hodgins, VP, Finance & Support Services, K. Kelly, Recording Secretary, M. Hallam, Executive Director, PSFDH Foundation, M. Young, President, GWM Auxiliary, G. Laws, ED, Lanark County Mental Health, H. Bedor, ED, Lanark County Support Services

1. Call to Order – G. Church

G. Church, Chair, called the meeting to order at 7:30 a.m.

2. Chair's Remarks – G. Church

No remarks.

3. Patient & Family Centred Care – N. Shaw

N. Shaw reported that a Patient & Family Advisory Council member will present at the February 2022 Board meeting. The Council member scheduled for today but was not able to attend at the last moment.

4. Declaration of Conflict of Interest – G. Church

G. Church reminded members to declare a conflict at any point during the meeting.

5. Approval of Agendas – G. Church

a) Regular Meeting and Consent Agendas

Regular Meeting and Consent Agendas

RESOLUTION No. 1/22

MOVED by K. Clupp

SECONDED by M. Quigg

THAT the regular meeting and consent agendas were approved as presented.

CARRIED.

6. Foundation & Auxiliaries

a) PSFDH Foundation – M. Hallam

M. Hallam provided the following updates on behalf of the PSFDH Foundation:

- The winter appeal campaign saw an amazing return of \$203,000 which covered the costs for ICU monitors and defibrillator. Dec/Jan – celebrate for foundation and hospital – achieved new initiatives and outreach with donors (thermometers on lawns of each site).
- The foundation and hospital will work to develop the MRI campaign.

- The foundation will build relationships in the community and then move forward with soliciting support.
- It is recognized that information and education for the community regarding why they should give to the hospital is needed.
- The foundation will coordinate with hospital what is coming (projects and needs) so that the foundation can plan and develop its own strategic plan.
- A draft letter from Michael Cohen for EMCs in the catchment area is in development.
- M. Hallam encouraged members of the new 50/50 lottery.

b) GWM Auxiliary – M. Young

M. Young reported that the auxiliary activities remain quiet but noted the following activities:

- The gift shop is temporarily closed and will reopen in February when restrictions are lessened. The gift shop lease was extended to the end of July 2022.
- The auxiliary continues to work on the 100th anniversary and ways to safely recognize and celebrate the milestone.

b) SFCH Auxiliary – G. Church for J. Staples

G. Church reported that the SFCH Auxiliary gift shop is closed until mid-February and the Auxiliary is planning a couple of events for later this year.

7. Action Items

7.1 Leadership Report – M. Cohen

M. Cohen referred the members to the January 2022 Leadership Report shared in advance of the meeting. He highlighted the following:

- There are ongoing staffing challenges due to COVID-19;
- Patient occupancy is high at 90%;
- A gap analysis is being developed for the MRI and the board will receive in February 2022.
- A wellness/satisfaction survey for physicians will be distributed. This will align with the staff wellness survey.

RESOLUTION No. 2/22

*MOVED by A. Thomlinson
SECONDED by J. Hewitt*

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

CARRIED.

7.2 Chief of Staff Report – Dr. K. Stolee

Dr. Stolee acknowledged the work of the foundation and the auxiliaries to support the hospital and its needs. She referred the members to her report that was included in the materials and highlighted the following:

- PSFDH is seeking midwives to support the obstetrical program. The midwives will assist in newborn care and C-section assists.
- There continues to be active recruitment for radiologist(s); obstetrician; and a physiatrist. Family medicine is stable.

RESOLUTION No. 3/22

*MOVED by M. Quigg
SECONDED by L. Drynan*

THAT the PSFDH Board of Directors accepts the Leadership and Chief of Staff reports as presented.

CARRIED.

7.3 Medical Staff Association (MSA) Report – Dr. M. Roberts

Dr. M. Roberts reported that matters remain quiet. The MSA met last week and spoke to the MRI plans, which was well received and is positive news for PSFDH. The MSA received a presentation from Dr. Evans, infection control expert from KHSC. There is a sense that this area has passed the current peak of COVID-19. However, other areas (larger centres) continue to struggle.

7.4 Finance Committee – K. Clupp

K. Clupp reported that there are two items for resolutions. Information regarding the recommendations is included in the Finance Committee report. The Finance Committee discussed the development of communications support business plan and capital planning next steps.

7.4.1 Communications Support Business Case

RESOLUTION No. 4/22

*MOVED by K. Clupp
SECONDED by B. Hirst*

THAT the PSFDH Board of Directors accepts the Finance Committee recommendation to undertake a business case for developing and supporting a communications function of the hospital serving the hospital, its foundation and agencies.

Further that the Chair of the Liaison Committee, a communications subject area expert, be consulted and included on the project design and execution of the business case.

CARRIED.

7.4.2 Capital Planning Next Steps

The Finance Committee discussed this matter. It was agreed that before PSFDH can move forward with any capital plan, there should be a better understanding of physical plant and capital assets and hospital direction.

RESOLUTION No. 5/22

*MOVED by B. Hirst
SECONDED by Dr. W. Hollis*

THAT the PSFDH Board of Directors accepts the Finance Committee recommendation to defer the extensive work by the Capital Planning Sub-committee until the PSFDH Board of Directors has completed the Strategic Plan for the Hospital;

AND that PSFDH Board of Directors authorizes staff to proceed with the procurement of engineering services to determine the current state of the hospital's infrastructure for all hospital owned sites plus the option to review, as requested, possible Infrastructure options flowing from the Strategic Plan.

CARRIED.

8. Sponsored Organizations

8.1 Lanark County Support Services – H. Bedor

H. Bedor referred to the Q3 report included in the materials and highlighted the following items:

- update on residential supports.
- community involvement – The Dairy Distillery celebrated their 3rd anniversary and gave back to the community with the gift of a new basketball net. Here is the [thank you video link](#).
- Funding requests – The Ministry of Children, Community and Social Services approved two requests submitted by LCSS submitted. The funds will address a proposed solution for an unresolved drainage/water issue and proposed renovation cost to one of the properties.

H. Bedor expressed her appreciation of the hospital's support in all areas most especially during the pandemic. She noted that many similar agencies do not have access to fit testing, IPAC support and PPE needs. LCSS is in a unique position and is grateful to be part of the hospital organization.

8.2 LCMH Report – G. Laws, ED

G. Church welcomed G. Laws to the meeting. He referred to his report included in the materials. He concurred with H. Bedor that having the hospital support has been amazing especially during the pandemic. He reported that he has been in his role for two months and acknowledged that it will be amazing to work with the hospital and to work to bring LCMH to the level that meets the needs of the County. The LCMH services remain open but offices have limited staff on site. The organization continues to meet clients on a regular basis. The use of virtual client meetings has helped staff to reach more clients more regularly.

9. New Business

9.1 MRI Update – M. Cohen

- A detailed plan will be provided next month.

10. Business Arising from Minutes

10.1 Strategic Planning Process – M. Cohen

M. Cohen reviewed a presentation on how to approach the strategic planning process. The recommendations presented were generated through a discussion with the Strategic Planning sub-committee.

Discussion ensued. The members agreed that the capital planning process will help to inform the plan and vision. S. Bird asked how the information generated at the 2021 touchpoint would be utilized. M. Cohen indicated that he is aware of the information and it will be incorporated where relevant.

J. Hewitt remarked that as a member of the sub-committee, he recommended including the government as the policymaker and not as the hospital funder. The government should be consulted from a policy perspective as policy can drive process for our hospital.

PSFDH will engage the OHT and its members as well as the hospital's sponsored organizations.

RESOLUTION No. 7/22

MOVED by J. Hewitt

SECONDED by K. Clupp

THAT the PSFDH board of directors supports the recommendation of the sub-committee approach to proceed with a rebuild of the strategy with details as set out in the presentation dated January 25, 2022.

CARRIED.

11. Board Committee Reports

11.1 Liaison Committee – January 14, 2022 – A. Thomlinson

11.1.1 Committee Report

The Committee Report to the Board was included in the materials. A. Thomlinson highlighted the following items:

- The committee received a presentation from Kelly Barry, Director of Integrated Care, Rideau Community Health Services.
- A municipal candidate brief will be generated with the assistance of J. Fenik. The topic will be the request from municipalities to support the hospital's core capital program.
- The community panel initiative will be paused pending outcome of strategic planning exercise.

The reference to physician presentation was a carry forward from Dr. Ferrier's original request to present to the Liaison Committee. Dr. Hollis followed up with Dr. Ferrier but did not receive a response.

11.2 Finance Committee – January 20, 2022 – K. Clupp

The internal financial statements were shared with the board. D. Hodgins advised that PSFDH received the settlement funding for COVID-19 expenses related to lost revenue, capital and incremental costs.

11.2.1 Committee Report

The Committee Report to the Board was included in the materials.

11.2.2 CFO Report

The report was included for information.

11.2.3 November 2021 Financial Statements (Internal)

This item was discussed above.

M. Hallam, H. Bedor, M. Young, G. Laws left the meeting at 8:45 a.m.

L. Drynan left the meeting at 8:45 a.m.

12. Closed Session

RESOLUTION No. 8/22

MOVED by Dr. W. Hollis

SECONDED by K. Clupp

THAT the PSFDH Board of Directors moved to a closed session at 8:45 a.m.

CARRIED.

RESOLUTION No. 11/22

MOVED by Dr. W. Hollis

SECONDED by M. Quigg

THAT the PSFDH Board of Directors moved out of the closed session at 9:02 a.m.

CARRIED.

Closed Session Resolutions:

RESOLUTION No. 12/22

MOVED by Dr. W. Hollis

SECONDED by B. Hirst

THAT the PSFDH Board of Directors accepts the recommendation of the Chief of Staff and Medical Advisory Committee to approve the requests for appointment and reappointment to the Professional Staff as presented.

CARRIED.

13. Other Items/Information

13.1 Strategic Plan Operational Plan – M. Cohen

The plan was provided for information.

13.2 Accreditation Canada Survey 2022 – M. Cohen

M. Cohen referred the members to the standards and survey results included in the materials. The survey results will inform an action plan and or required education plan. It was supported that the Governance Committee would undertake the task to review the results and develop necessary action plan.

N. Shaw commented that the colour coding of the survey results is reflecting the responses of the board. She noted that the new members may not be aware of certain processes in place and any related action may be simply a point of conversation. The colour coding may suggest an education piece rather than missing information.

13.2.1 Governance Standards

The Governance Standards need to be reviewed by the board to ensure of awareness that the organization has processes in place that meet the accreditation questions. N. Shaw noted that there is an ROP (required organizational practice) embedded in the standards.

Next step: the Governance Committee will review the standards and results and develop necessary action plan(s).

13.2.2 Survey Results/Work Plan

See above.

14. Information Items – items provided for information.

G. Church noted that departure of two Community Health Centre Executive Directors, M. Crapper and J. Jordan. He commented that PSFDH Board of Directors wishes them both well in their next roles.

15. Next Meeting Date

Regular Meeting: Tuesday, February 22, 2022, via videoconference at 7:30 a.m.

16. Adjournment

RESOLUTION No. 13/22

MOVED by K. Clupp

SECONDED by A. Thomlinson

THAT the January 25, 2022 Perth and Smiths Falls District Hospital Board of Directors' meeting adjourned at 9:08 a.m.

CARRIED.



G. Church, Chair



M. Cohen, Secretary