

HDH HANOVER &
DISTRICT
HOSPITAL
MINUTES OF THE REGULAR BOARD MEETING

DATE: Tuesday, November 30, 2021

TIME: 1700 hours

PLACE: GoToMeeting

PRESENT: **Voting Governors:** Tina Shier (Acting Chair, Co-Vice Chair), Corwin Leifso (Co-Vice Chair), Tim Kraemer (Treasurer), Terry Leis, Pamela Matheson, Chris Prues, Cathy Rahn,
Non-Voting Governors: Dana Howes (President and CEO), Michelle Scime-Summers (Vice President of Patient Care Services/CNO), Dr. Nick Abell (President of Medical Staff),

Invited Staff: Kim Mighton (Vice President of Finance & Operations), Victoria Cumming (Recording Secretary)

GUESTS: Robyn Nocilla, GBHS

REGRETS: **Voting Governors:** Lorna Eadie Hocking (Chair),
Non-Voting Governors: Dr. Randy Montag (Chief of Staff), Dr. Tim Heerema (Vice President of Medical Staff)

1. CALL TO ORDER

T. Shier called the meeting to order at 1700 hours.

2. OPENING REMARKS

T. Shier welcomed everyone to the meeting and shared opening remarks.

3. APPROVAL OF AGENDA

Moved and Seconded

THAT the agenda be approved as presented.

MOTION CARRIED

4. DECLARATION OF ANY CONFLICT OF INTEREST

No conflicts were declared and the group was reminded to declare a conflict of interest should one arise.

5. MISSION, VISION, VALUES

The Board reviewed the Mission, Vision, and Values and were asked to keep them in mind throughout the meeting.

6. PRESENTATION: RAPID ACCESS ADDICTIONS MEDICINE (RAAM) CLINIC

Robyn Nocilla was introduced to the group and provided a presentation highlighting the Rapid Access Addictions Medicine (RAAM) clinic which included the following;

- A System Solution – The RAAM Clinic improves quality of care for patients with opioid use disorder or an alcohol use disorder from the emergency department, primary care, withdrawal management services, and/or community agencies. Increases access to treatment and medications for addiction and provides addiction medicine training and support to health care providers in these settings;
- The Hanover RAAM Clinic is a partnership between HDH and Grey Bruce Health Services that started last November to provide quick access to medically assisted, integrative, client-centered care for people experiencing urgent addiction & substance related problems;
- Currently the program staffs a Nurse Practitioner and a counsellor. The HDH clinic is

Thursday afternoons from 1-4pm in the quiet room by ED. There has been 155 visits in the past year; and

- Challenges for the RAAM program (appropriate treatment, referrals, stigma, harm reduction, COVID-19).

It was asked if the 155 visits are unique visits or repeat visits. These are not unique visits but are all direct face to face visits. Approximately 50% of referrals are showing up and that is a good number to have. Quite a few patients have even transitioned back to primary care. Follow-up for “no shows” is sometimes done but patients are not repeatedly chased down. It is important that the patients work hard to show up for themselves as a part of their recovery process.

R. Nocilla left the meeting.

7. STRATEGIC MATTERS

7.1 Inter-Hospital Laboratory Partnership (with SBGHC)

D. Howes provided a memo from the IHLP group informing the group that South Bruce Grey Health Centre (SBGHC) will be joining the IHLP partnership. The IHLP group bid to have SBGHC’s laboratory services. SBGHC will be migrate to IHLP starting April 1, 2022. This will be a benefit to our surgical group who use both HDH and SBGHC systems. Conditions and expectations were highlighted that are required in order to join the IHLP and it was confirmed that all of these expectations will be met by SBGHC.

8. OFFICER REPORTS

8.1 President/CEO Report

D. Howes provided a written report in the agenda and highlighted;

- The background on the Quality Improvement Plan (QIP) submissions for the previous few years. Technical specifications will be shared for this coming year requiring the QIP to be completed by April 1, 2022. Ontario Health, the Ministry of Health and the Ministry of Long-Term Care will be working together to align quality improvement efforts. The plan is to have a refreshed quality improvement tool for 2023-24.
- HDH will be hosting a virtual service awards ceremony on December 15, 2021. Staff, Physicians and Board Members will be recognized for their employment milestones.
- The HDH Foundation will be hosting a “Light the Night” event on December 1, 2021 at 6:30pm in the Garden of Fond Memories.
- Meetings have occurred with Canadian Mental Health Association (CMHA) of Grey Bruce to determine if HDH has potential space for their Urgent Response Team.

It was asked what the percentage of unvaccinated staff will be as of December 31, 2021 when the mandatory vaccination policy comes into place. It was clarified that there are only three staff members that remain unvaccinated. The group discussed if there is any recourse from the Government not supporting this movement. It has been brought forward but HDH remains steadfast on its policy. There is no advantage from a legal standpoint with the Government not supporting. It was noted that most hospitals in Ontario Health West have implemented a mandatory vaccine policy. This decision is the best for patients and HDH. There are no concerns with staffing levels due to this policy being implemented.

It was clarified that the Manager of Human Resources and Physician Recruitment position has been filled. This position is no longer an executive position. Karen Otterbein has been hired and comes with a log of experience in the public and private healthcare sectors.

An update was asked for on the COVID-19 Assessment Centre volumes. Volumes do fluctuate depending on outbreaks, Public Health Referrals and the cold and flu season. Additional staff have

been trained in order to take on additional volumes when needed. There is one staff member dedicated to the unit.

9. BUSINESS/COMMITTEE MATTERS

10.1 Finance/Audit & Property Committee Report

T. Kraemer reported that the Finance/Audit & Property Committee met on November 25, 2021. Request for Proposal (RFP) information was received for Audit Services along with presentations from the vendors BDO LLP and KPMG LLP.

Financial statements for the 7th period ending October 31, 2021. At the end of October YTD there was a deficit of \$16,267 before amortization and an YTD deficit of \$177,286 after amortization.

10.2 Fiscal Advisory Committee Report

A meeting is scheduled to occur in December.

10.3 Public Relations Committee Report

Nothing to report at this time.

10.4 By-Law Committee Report

Nothing to report at this time.

10.5 Nominating Committee Report

T. Shier reported that the Nominating Committee is scheduled to meet on December 13, 2021. There have been no applications received at this time. Please bring forward any potential recruits. Patient & Family Advisory Committee member Jeannette Wilken has been orientated and will be joining the Quality Governance and Risk Management meeting this evening.

10. CONSENT AGENDA

Moved and Seconded

THAT the items on the consent agenda are approved as follows;

11.1 Open Board Session Minutes – October 26, 2021

11.2 Board Committee Reports

(a) Finance/Audit & Property Committee Minutes – October 21, 2021

(b) Quality Governance & Risk Management Committee Minutes – October 26, 2021

(c) Medical Advisory Committee – October 7, 2021

11.3 Reports

(a) Finance & Property Report

(b) VP of Patient Care Services/CNO Report

(c) Chief of Staff Report

(d) Foundation Report

(e) Auxiliary Report

MOTION CARRIED

11. ROUND TABLE

There was no further discussion.

12. NEXT MEETING

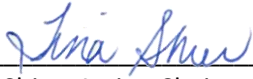
Tuesday, January 25, 2022 at 5:00pm

13. COMPLETION OF BOARD MEETING EVALUATION

T. Shier reminded the group to complete the Board Meeting Evaluation.

14. ADJOURNMENT

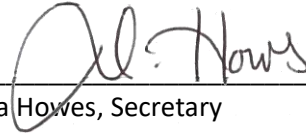
The meeting adjourned at 1741 hours.



Tina Shier, Acting Chair



Victoria Cumming, Recorder



Dana Howes, Secretary