

Campbellford Memorial Hospital Board of Directors Open Meeting - Minutes

Tuesday, November 26th, 2024 @ 4:00 PM

PRESENT: Carrie Hayward (Chair), Glen Wood, Jeff Hohenkerk, Liz Mathewson, Michael Bunn, Sandra Conley, Marg Carter, Dr. Dimitri Louvish, Doug Hunt, Ellen Buck-McFadyen, Heather Campbell, Robbie Beatty, Trish Wood, Jennifer Glover, Dr. Danish Chippa, Greg Clarke, Deanna Baker, Fiona Harrington, Bruce Thompson **REGRETS**:

GUESTS: Peter Mitchell (Recorder), Adam Kolisnyk, Jessica Brandon

1. CALL TO ORDER

Carrie Hayward called the meeting to order at 4:00 PM.

1.1 Confirmation of Quorum

A Quorum was confirmed.

1.2 Approval of Agenda

Motion: Be it resolved that the Board of Directors approves the agenda as circulated.

Moved by: Trish Wood

Seconded by: Bruce Thompson

Carried

1.3 Declaration of Conflicts of Interest

There were no conflicts declared.

2. PATIENT STORY

During the meeting, Heather Campbell shared a compelling patient story that highlighted the impact of the hospital's new Mobility Team initiative. She described how the introduction of armband identification for mobility levels significantly improved the patient's experience. The patient noted that the system not only enhanced her understanding of her mobility status but also provided clear guidance to staff, ensuring consistency in her care. Moreover, she expressed that the visible identification served as a motivational tool, inspiring her to work towards achieving greater mobility

3. CONSENT AGENDA

(The following items/recommendations have been identified as part of the consent agenda for the regular meeting. Directors are encouraged to contact the Board Chair, CEO or EA to the CEO/Board in advance of the meeting if there are questions about a listed consent agenda item. Any Director may request that any of the Materials be moved to the Board or Committee meeting agenda.)

3.1 Summary of Motions in Consent Agenda

Motion: Be it resolved that the Consent Agenda be approved, including all motions listed in section 3.1 - Summary of Motions in Consent Agenda.

Moved by: Glen Wood

Seconded by: Liz Mathewson

Carried

- 3.2 Board of Director Meeting Minutes of October 29th, 2024
- 3.3 Confidentiality (Policy 5-190)
- 3.4 Open Board Meetings (Policy 5-270)
- 3.5 Board Meeting Evaluation Policy & Form (Policy 5-090)
- 3.6 Equity, Diversity, Inclusion and Antiracism (Policy 5-340)
- 3.7 Quarterly Compliance Certificate Q2
- 3.8 BPSAA Compliance Report Expense Claims
- 3.9 Audit Plan
- 3.10 Operating Statements Q2
- 3.11 Auxiliary Report
- 3.12 Foundation Report
- 4. BUSINESS ARISING/COMMITTEE MATTERS

4.1 Governance Committee Report

Committee Chair Michael Bunn provided an overview of two new policies included in the consent agenda, explaining the process involved in their development. These policies included the Control Policy for the meeting evaluation form and the Equity, Diversity, Inclusion, and Antiracism Policy. He also highlighted recent progress on the Board Portal, noting that updated content has been prepared and is planned for implementation in time for the 2025/26 board year. In response, Carrie requested that leadership explore options to expedite these updates, aiming for completion before next summer. CEO Hohenkerk acknowledged the request and committed to investigating ways to accelerate the timeline.

4.1.1 New Director Orientation Session Debrief

The new directors shared their feedback on the recent orientation session, expressing that the hospital-specific session was highly valuable. They suggested, however, that future orientations could be improved by having all directors attend the Ontario Hospital Association (OHA) session together in the boardroom, rather than logging in individually. Additionally, they noted that having a clinical staff member lead the hospital tour might provide a more insightful and practical experience.

4.1.2 Media & Public Relations (Policy 6-010)

During the meeting, directors raised questions about the appropriate placement of the non-affiliation agreement, noted in the policy, on their social media profiles. It was clarified that including the agreement somewhere in the bio or profile information would be sufficient. However, it was emphasized that for posts that could be considered contentious or are related to the hospital, the non-affiliation statement should also be included on the specific post. There was some discussion about the potential need for more stringent guidelines, but it was noted that the broader expectation is that directors should refrain from actions that could bring the hospital into disrepute. It was agreed that while this principle is important, it does not necessitate further detailed explanation in the policy. Directors were reminded to always be mindful of this responsibility.

Motion: Be it resolved that the Board of Directors approve the Media and Public Relations (Policy 6-010) as amended and recommended by the Governance Committee.

Moved by: Marg Carter Seconded by: Sandra Conley

Carried

4.2 Resource & Audit Committee Report

Committee Chair Glen Wood addressed three key areas during the meeting. First, he discussed the ongoing budget deficit, emphasizing the importance of the board being aware of the continued financial shortfall. While certain expenses could potentially be reduced, he cautioned that any savings must be weighed against the potential consequences of such cuts.

He also outlined the budget assumptions for the 2025/2026 fiscal year, specifically the decision to plan for a 38-bed capacity, despite the hospital often operating at higher volumes. Glen explained that the committee had debated whether the budget should reflect the actual projected patient volumes, which could strengthen the case for securing additional funding, or if it should remain based on 38 beds, which would highlight a deficit and underscore the funding gap. He asked directors to carefully consider the pros and cons of both budgeting approaches.

Lastly, Glen briefly touched on the potential amalgamation of the Campbellford Memorial Health Centre Corporation, noting that a more detailed discussion would take place during the in-camera session.

5. NEW BUSINESS

5.1 Land Acknowledgement

Carrie Hayward provided a brief update on the development of the draft land acknowledgement, referencing the discussion that took place during the Board of Directors meeting in October. She explained that the intention is for this to be a corporate land acknowledgement, which will be read at the beginning of each meeting by different directors.

Several directors expressed concerns regarding the language used in the draft. While acknowledging their lack of expertise on the subject, they requested clarification on certain terms. There was also feedback about the length of the acknowledgement, with a suggestion to create two versions: a longer corporate version for formal use and a shorter version that could be recited at meetings and other hospital-related events. Additionally, directors discussed the possibility of allowing individuals to provide a more personal acknowledgement when reading it at board meetings. Chair Carrie Hayward confirmed that this would be acceptable, emphasizing that the corporate version could be used in place of a personal one.

Some directors raised concerns about the phrase "Indigenous persons," feeling it may not be the most appropriate term, as well as the phrase "lands were generously shared." Carrie clarified that the latter phrase reflects the intent of Indigenous nations at the time, acknowledging the spirit of the treaties. She noted that this would be a point for further discussion during consultations with Indigenous communities.

It was acknowledged that consultations may result in recommendations that the board might not fully support, but overall, directors were in favor of the proposed approach. Suggestions were made to ensure engagement with the Alderville Band Council.

Edits will be made based on the feedback received, and consultations with Indigenous communities will be conducted before presenting the final version of the land acknowledgement to the board for approval.

5.2 Chief Executive Office Performance Evaluation Form

The process for the CEO Performance Evaluation was outlined during the meeting. Directors were informed that they would be asked to complete the evaluation form in January.

5.3 Chief of Staff Performance Evaluation Form

Directors were reminded to complete the evaluation form if they had not already done so. An email reminder will be sent out to ensure all evaluations are submitted.

6. REPORTS

6.1 Chair Report

Chair Carrie Hayward provided an update on the upcoming board retreat scheduled for next week, noting that the agenda and meeting materials would be distributed later in the week. She also provided an update on the recruitment process for the new redevelopment committees.

6.2 President/CEO Report

CEO Hohenkerk summarized his report, which had been circulated prior to the meeting. He encouraged directors to review the pre-reading materials for the upcoming board retreat and to bring forward any questions they may have. He also provided an update on the rollout of the Strategic Plan, highlighting the ongoing work related to the process. A further update will be provided in January, which will include details on the rollout plan.

6.3 Chief of Staff Report

Dr. Louvish summarized his report, which had been circulated prior to the meeting, highlighting the ongoing efforts in physician recruitment and the development of new ambulatory clinics. He also informed the board that the Chief of the Emergency Department is making significant progress in his new role.

7. CORRESPONDENCE

There was no correspondence.

8. NEXT MEETING DATE - January 28th, 2025

9. MOTION TO ADJOURN THE OPEN MEETING

Moved by: Glen Wood

Seconded by: Deanna Baker

Carried