

Campbellford Memorial Hospital Board of Directors Meeting Tuesday, February 22nd, 2022 @ 4:00 PM

PRESENT: Kevin Huestis (Chair), Nancy French, Karen MacGinnis, Sandra Chapman, Jennifer Glover, Eric Hanna, Sandra Conley, Michael Bunn, Alysia English, Carrie Hayward, Trish Wood, Paul Nichols, Liz Mathewson, Dr. Bruce Bain, Robbie Beatty, Patricia McCallister, Dr. Kelly Parks, Bruce Thompson, Douglas Hunt

REGRETS: Meghan McCarrell

GUESTS: Peter Mitchell (Recorder), Karen Guy (HR Manager), Mark O'Dell (CFO), Rachelle Williams (Finance Manager), Bruce Pye (CIO), Gillian Flynn (Accreditation Canada), Ismael Aquino (Accreditation Canada), Stacey Toews (Accreditation Coordinator)

| AGENDA ITEMS & DISCUSSION | DECISION POINTS |
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| 1. CALL TO ORDER | Kevin Huestis called the meeting to order at 4:06 PM |
| 1.1 Confirmation of Quorum | A Quorum was confirmed. |
| 1.2 Approval of Agenda | Nancy French Moved that the Agenda be Approved as Circulated. |
| | Seconded by Sandra Chapman |
| | Carried. |
| 1.3 Declaration of Conflicts of Interest | No conflicts were declared |
| 2. EDUCATION SESSION | |
| 2.1 Patient Story | |
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| Alysia English presented a positive patient story that highlighted the good work that was | |
| done in the ED when a patient's brother was in the ED. Patient was formerly an ALC | |

| patient was non-verbal and had other special needs and the patient's family was very | |
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| pleased with the care that he received while in the Emergency Department. | |
| 2.2 Accreditation Canada | |
| Representatives from Accreditation Canada gave a brief presentation, which was circulated prior to the meeting. They highlighted some main goals of accreditation are: | |
| Increased uptake of quality initiatives Better change management & risk mitigation Improved efficiency and effectiveness Enhanced organizational learning | |
| Also highlighted that engaging with patients and families is a large part of the people centre care criteria. Noted that patients and their families should be involved in patient planning, space development, and even ensuring patients and their families are aware of shift change times and practices. | |
| The board also heard that accreditation is not a mandatory process, it is voluntary, but shows a commitment to quality and patient care. | |
| Stacey Toews also presented the accreditation work plan to the board and highlighted the process as to how accreditation will be done at CMH and the role of the board. | |
| 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 | Bruce Thompson Motioned to Approve the items in the Consent Agenda. |
| 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.) | Seconded by Trish Wood. |
| | Carried |
| 3.1 Board of Directors meeting minutes of January 25/2022 | |
| 3.2 Governance Committee meeting minutes of February 8/2022 | |
| 3.3 CMH Foundation Report | |
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| 3.4 CMH Foundation Board of Directors Meeting Minutes Jan | |
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| 26/2022 Meeting | |
| 3.5 Auxiliary to CMH Report | |
| 4. BUSINESS ARISING/COMMITTEE MATTERS | |
| 4.1 Redevelopment Update | |
| Paul Nichols provided an update to the board on the work the redevelopment committee is doing. It was noted that CMH has not heard back from the Ministry regarding the stage one redevelopment submission. Paul also highlighted that: | |
| CEO Eric Hanna has been meeting with Government officials; A media campaign, through both traditional and social media, is on going, A letter writing campaign trying to get local municipal and federal officials to support the project has also begun. | |
| Paul Nichols also provided the board an update on the land acquisition for the new hospital and noted there are 5 potential sites, but they are in the process of narrowing it down, and are hopeful the land will be donated Serviced land remains a hurdle, as some of the sites would require the extension of services. | |
| The board had a conversation regarding some of the other challenges regarding acquiring a suitable piece of land, such as the costs associated with servicing non-serviced land. The board was informed that members of the Redevelopment committee and CEO Eric Hanna are meeting with the township to discuss these issues later this week. | |
| 4.2 Website Development Update | |
| The EA to the board provided a brief update on the new website development. Highlighted 2 delays. | |
| The board portal needs to be rebuilt from scratch. The current website contains a staff intranet, which the developer had not included in the new site, so that needs to be worked into the new site. | |
| 4.3 Staffing Partner Update | |

| Alysia English provided the board an update on the MOU with Northumberland Paramedics about having a primary care paramedic assist in the ED if needed. Alysia English is hoping to have an agreement in place in the coming weeks. | |
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| 4.4 ED Physician Staffing Update | |
| Dr. Bain provided the board an update on physician staffing in the ED. He informed the board the College of Physicians and Surgeons has denied a new ED physician's license. The doctor is going to appeal, but there is no timeframe for when it may be resolved. | |
| Dr. Bain did note that physician ED staffing is stable for now despite these challenges. | |
| 5. NEW BUSINESS | |
| 5.1 COVID-19 Update | |
| Alysia English provided the board an update related to the current COVID-19 outbreak in the medical wing of the inpatient unit. She highlighted that in previous outbreaks the entire unit was declared in outbreak; however, because of the work done since the last outbreak, the health unit only placed the medical wing in outbreak. | |
| Alysia English also noted that visitation is restricted during the outbreak expect for patients facing end of life care, volunteers are not permitted to enter the hospital and the endoscopy clinic is currently on hold. No projected end date to the outbreak and the focus remains on ensuring hospital operations are able to continue with as little disruption as possible. | |
| 5.2 Operating Budget 2022-23 Update | |
| Rachelle Williams provided the board an update on the 22-23 operating budget that was circulated prior to the meeting. The update primarily focused on the current projected deficit and what is being done to reduce it. | |

| Mark O'Dell spoke to the revenue generation the hospital is hoping to create to help | |
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| address the deficit, and that department managers have been engaged in the process in | |
| ways they have not been in the past. | |
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| Several board members had questions regarding revenue-generating items, how they | |
| would work, and why weren't they already being done. Hospital staff in attendance | |
| informed the board that sometimes it was a result of COVID-19 restrictions meaning fewer | |
| people in the hospital; others were systemic practices where decisions were made to forgo | |
| the extra revenue. For instance, if the medical team determined a private room was | |
| preferred given the patients conditions, the patient would not pay the extra fee for a | |
| private room. Mark O'Dell also highlighted that EPIC will help maximize how to generate | |
| these revenues and that systems are being put in place to create systemic processes so the | |
| hospital does not face these issues again. | |
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| It was noted that despite the potential savings, there is still a deficit of about \$1 million | |
| and further discussions of how to address that will be presented to the board at the March | |
| meeting. | |
| 5.3 Risk Management Update | It was determined that risk management should be a standing item |
| | at committees to look at the 21 questions highlighted in Bruce |
| Bruce Pye presented his report that was circulated prior to the meeting. Bruce spoke to | Pye's report and how they are being managed. |
| the way in which risk management has traditionally been presented to the board and | |
| highlighted several changes that he feels could benefit the reporting and tracking of risks. | Bruce Pye suggested he would present to the committees a |
| He also noted that EPIC would help to mitigate some risks related to patient care, as have | process of risk management that is manageable and specifics |
| some practices the hospital has implemented. | which committee is addressing which elements of risk management. |
| | management. |
| Carrie Hayward suggested there should be a risk management coordinator to ensure all 21 | |
| questions related to risk management that Bruce's report highlights are being allocated | |
| and addressed, and a way to ensure board committees are actually getting their work | |
| related to risk management complete. | |
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| The board also discussed narrowing down the questions more to see which apply specifically to CMH. The board also discussed how to break these questions down over | |
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| time, each committee takes 2 or 3 related to their work as an example and focuses on | |
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| them each year and re addresses each on a 3 or 4-year cycle. | |
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| 6. REPORTS | |
| 6.1 Chief of Staff | |
| Dr. Bruce Bain presented his report as circulated prior to the meeting. He spoke about the Paxlovid, a pill designed to treat COVID-19, and that he is meeting with hospital partners to determine how distribution might work at CMH. He expressed reservations about the drug and the lack of published pear reviewed data, but the Province is pushing the distribution. | |
| Was noted that it is being distributed at PRHC right now and the regional hub is Lakeridge. 6.2 Interim President and Chief Executive Officer | |
| Eric Hanna presented his report as circulated prior to the meeting. He highlighted that CMH is slightly higher than the provincial average in terms of patients leaving the ED after being triaged but not seen. Eric Hanna noted that it might be a result of the implementation of EPIC that created longer wait times, but it is something worth tracking in regards to a quality indicator. | |
| 7. FUTURE AGENDA ITEMS | |
| Risk Management Plan Community Engagement and Communications Policy | |
| 8. Next Meeting Date – Tuesday, March 29 th , 2022 at 4 pm | Kevin is hopeful this meeting will be in person. |
| 9. MOTION TO ADJOURN THE OPEN MEETING & MOVE INTO THE IN-CAMERA MEETING | Kevin Huestis asked for a motion to adjourn the open meeting at 6:50PM and move into the in-camera session. |
| | Moved by Bruce Thompson |
| | Seconded by Karen MacGinnis |

| Carried |
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