



Campbellford Memorial Hospital
Board of Directors Open Meeting - Minutes
Tuesday, October 29th, 2024 @ 4:00 PM

PRESENT: Glen Wood (Chair), 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: Carrie Hayward

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

1. CALL TO ORDER

Glen Wood called the meeting to order at 4:00 PM.

1.1 Confirmation of Quorum

A Quorum was confirmed.

1.2 Approval of Agenda

Item 4.5 was removed from the Consent Agenda for discussion and added under New Business as agenda item 6.3.

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

Moved by: Marg Carter

Seconded by: Robbie Beatty

Carried

1.3 Declaration of Conflicts of Interest

No conflicts were declared.

2. PATIENT STORY

Was included as part of the presentation on the Emergency Department.

3. EDUCATION SESSION – Emergency Department

VP Patient Care Heather Campbell and ED Manager Bill Detlor presented to the board an overview of the Emergency Department with a focus on the changes that have occurred in the department since the board last received a full update in the fall of 2022.

4. 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.)

4.1 Summary of Motions in Consent Agenda

Motion: Be it resolved that the Consent Agenda be approved as amended, including all motions, other than 4.5, listed in section 4.1 -Summary of Motions in Consent Agenda.

Moved by: Liz Mathewson

Seconded by: Trish Wood

Carried

4.2 Board of Director Meeting Minutes of September 24th, 2024

4.3 Quality Committee Terms of Reference (Policy 4-060)

4.4 Resources & Audit Committee Terms of Reference (Policy 3-040)

4.5 Quarterly Compliance Certificate – Q1

(Item was removed from Consent Agenda and added under New Business as item 6.3)

4.6 Purchase of New Endoscopy Equipment

4.7 Operating Statements – Q1

4.8 Auxiliary Report

4.9 Foundation Report

5. BUSINESS ARISING/COMMITTEE MATTERS

5.1 Quality Committee Report

Liz Mathewson highlighted the work of Heather Campbell, her team, and the nursing staff in addressing issues identified by the IAC. She also celebrated the recent successful Pharmacy Accreditation and recognized the strong efforts involved. Additionally, Liz shared updates on the Patient and Family Advisory Council (PFAC), emphasizing its impactful work and noting her new role as the Board of Directors' representative to PFAC. She recommended that PFAC present a session to the board to showcase their ongoing initiatives, which she believes would be a valuable addition to the board's agenda.

Liz also spoke to the Point of Care Testing Policy, which was recently amended by the Governance Committee. However, the Quality Committee did not endorse the revised policy and requested that the Governance Committee revisit it. Michael Bunn, Chair of the Governance Committee, proposed meeting with Liz Mathewson, Chair of the Quality Committee, to discuss the Quality Committee's concerns before the Governance Committee conducts further review.

5.2 Resource & Audit Committee Report

Glen Wood presented his report, highlighting that the hospital is projected to face a deficit of approximately \$7 million. There were no further questions, discussions, or concerns regarding the items in his report.

6. NEW BUSINESS

6.1 Board Skills Matrix

It was noted that the skills matrix would be circulated following the board meeting, and directors were encouraged to complete it at their earliest convenience. Questions were raised about how directors should rate themselves, with the direction that they focus on skills relevant to board responsibilities. For instance, directors should not rate themselves on IT as if they were assessing the expertise needed for an IT professional but rather on the level of IT understanding appropriate for fulfilling board duties.

A separate discussion focused on the potential inclusion of AI as a specific topic within the matrix. It was noted that AI might already fall under the IT category. Greg Clarke added that AI discussions should include ethical considerations rather than focusing solely on technical aspects. Ultimately, it was concluded that while further discussion on the role of AI in healthcare and its relevance to the board may be necessary, it was not directly applicable to fulfilling the objectives of the skills matrix.

6.2 Board Workplan

Motion:

Be it resolved that the Board of Directors approves the 2024/25 work plan.

Moved by: Sandra Conley

Seconded by: Liz Mathewson

Carried

6.3 Quarterly Compliance Certificate – Q1

Michael Bunn noted that the Certificate indicates the hospital is not compliant with the AODA and that board policy requires a five-year accessibility plan, which is currently not in place. It was noted that one is in development and that the Quality Committee will be reviewing the accessibility plan at their February meeting.

Motion: Be it resolved that the Board of Directors approves receipt of the Quarterly Compliance Certificate Q1 as endorsed by the Resource & Audit Committee.

Moved by: Marg Carter

Seconded by: Dr. Ellen Buck-McFadyen

Carried

7. REPORTS

7.1 Chair Report

Glen Wood presented the Chair Report on behalf of Board Chair Carrie Hayward, who sent her regrets. It was noted that planning for the board retreat is progressing well, with CEO Hohenkerk having secured guest speakers, including the OHA, to lead a financial education session. A separate session on redevelopment, focusing on the roles and responsibilities of the board of directors will also be part of the retreat.

7.2 President/CEO Report

CEO Hohenkerk provided his report, which had been circulated prior to the meeting. He highlighted the ongoing work to establish a new company that will manage the CIS system, as well as his efforts in financial advocacy with Ontario Health. He noted that Ontario Health has acknowledged the revenue deficit at Campbellford Memorial Hospital. Additionally, CEO Hohenkerk mentioned the upcoming Board Orientation session scheduled for next week and shared that he is working to build connections with local First Nation communities to enhance culturally sensitive care.

Liz Mathewson expressed her desire for the hospital to implement a land acknowledgment at the start of each board meeting, stating that there is no longer a valid reason to delay its introduction. The board agreed that it was time to move forward and requested that a discussion be brought to the next board meeting. There was discussion about whether a formal, written land acknowledgment was necessary, or if an informal approach would be more appropriate. Many directors voiced their support for implementing the land acknowledgment as soon as possible.

The board agreed to refer the discussion to the Governance Committee, with the goal of presenting a proposal at the November Board meeting and implementing the land acknowledgment at the December Board Retreat.

7.3 Chief of Staff Report

Dr. Louvish presented his report, which had been circulated prior to the meeting, and highlighted several physician recruitment successes in the Emergency Department over the past month. He also noted that an environmental scan of the ambulatory clinics is currently underway to help the hospital better assess capacity when considering the addition of new clinics in the future.

8. CORRESPONDENCE

9. NEXT MEETING DATE – November 26th, 2024

10. MOTION TO ADJOURN THE OPEN MEETING

Moved by: Robbie Beatty

Seconded by: Greg Clarke

Carried