



**Campbellford Memorial Hospital**  
**Board of Directors Meeting - Minutes**  
**Tuesday, May 28<sup>th</sup>, 2024 @ 4:00 PM**

**PRESENT:** Carrie Hayward (Chair), Kevin Huestis, Jeff Hohenkerk, Liz Mathewson, Michael Bunn, Sandra Conley, Marg Carter, Bruce Thompson, Dr. Dimitri Louvish, Doug Hunt, Ellen Buck-McFadyen, Heather Campbell, Robbie Beatty, Trish Wood, Nancy French, Jennifer Glover, Dr. Danish Chippa, Glen Wood

**REGRETS:**

**GUESTS:** Peter Mitchell (Recorder), Adam Kolisnyk (VP Corporate Services/CFO),

**1. CALL TO ORDER**

Carrie Hayward called the meeting to order at 4:03 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:** Marg Carter

**Seconded by:** Doug Hunt

***Carried***

**1.3 Declaration of Conflicts of Interest**

No conflicts were declared.

**2. ALC BILLING/BILL 7 IMPACTS**

Heather Campbell presented an update to the Board of Directors regarding the Alternative Level of Care (ALC) billing procedures and the implications of Bill 7 on hospital operations. She detailed the billing process for ALC patients and noted that, to date, the hospital has not charged any patients under the provisions of Bill 7. The Board engaged in a discussion about the significant number of ALC patients awaiting services from the Community Care Access Centre (CCAC). Heather attributed these delays to a shortage of resources within the CCAC.

**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 as circulated, including all motions listed in section 3.1 - Summary of Motions in Consent Agenda.

**Moved by:** Dr. Ellen Buck-McFadyen

**Seconded by:** Michael Bunn

***Carried***

**3.2 Board of Director Meeting Minutes of April 30th Meeting**

**3.3 Quarterly Compliance Certificate – Q4**

**3.4 BPSAA Compliance Reports Expense Claims**

**3.5 Operating Statements – Q4**

**3.6 Foundation Report**

Directors acknowledged their appreciation to the Foundation for agreeing to fund the new Endoscopy scopes.

**3.7 Auxiliary Report**

**4. BUSINESS ARISING/COMMITTEE MATTERS**

#### **4.1 Quality Committee Report**

Liz Mathewson presented the Quality Committee Report, which had been circulated prior to the meeting. She highlighted the receipt of a favorable Patient and Family Advisory Council (PFAC) report at the most recent meeting and noted that significant progress is being made on the resolutions pertaining to the Independent Assessment Committee (IAC) report. Additionally, she emphasized that the committee had reviewed the work plan.

#### **4.2 Resource & Audit Committee Report**

Glen Wood provided an update on the year-end financials, indicating that they were closely aligned with the budget projections. He noted that the hospital is anticipating a deficit for the 2024-2025 fiscal year, but reassured the Board that leadership has developed plans to reduce the deficit and achieve financial balance within the five-year period stipulated by the Ministry of Health. He also highlighted the efforts of the Human Resources department in maintaining low vacancy rates. Furthermore, Glen mentioned that while cash reserves are currently robust, there is an expectation to utilize the line of credit towards the end of the fiscal year. The Directors posed several questions about turnover rates and expressed appreciation for HR's success in reducing these rates.

The Board also inquired about the Justice, Equity, Diversity, and Inclusion (JEDI) Committee's reference to conducting a policy review through a JEDI lens.

Additionally, the Board requested an update from CFO Adam Kolisnyk regarding the new security staff arrangements. He explained that the new security company provides enhanced security, with guards receiving more extensive training, taking on greater responsibilities, and possessing increased capabilities to manage security concerns.

### **5. NEW BUSINESS**

#### **5.1 Board Meeting Evaluation**

Carrie Hayward reminded directors to complete the survey when they have a moment.

#### **5.2 Strategic Planning Update**

Sandra Conley, along with CEO Jeff Hohenkerk, provided an update on the strategic planning process and its associated timelines. Sandra expressed gratitude to the Directors for their substantial engagement, given the significant demands on their time.

CEO Hohenkerk elaborated on the forthcoming schedule and outlined the ongoing efforts that will follow the initial approval phase. He indicated that, in the coming months, work will continue to refine the details of the

strategic plan following the Board's approval of the strategic directions, core values, and purpose statement. He further described the development of necessary processes and the creation of a comprehensive communication plan to support the implementation.

Carrie Hayward also addressed the complexities of developing a strategic plan, particularly within an organization experiencing high turnover, notably among its leadership team. She emphasized the need for the plan to be both compelling and effective, stating that she will not present it to the Board for approval in June unless it meets these standards. She affirmed her commitment to ensuring the plan is thoroughly developed and aligned with the organization's goals before seeking Board approval.

### **5.3 HSAA Article 8 – Form of Compliance Declaration**

**Motion:** The Board of Directors of the Campbellford Memorial Hospital hereby authorizes Board Chair Carrie Hayward to make the following declaration to Ontario Health:

“After making inquiries of the President & Chief Executive Officer, Jeff Hohenkerk, and other appropriate officers of the HSP, and subject to any exceptions identified on Appendix 1 to this Declaration of Compliance, to the best of the Board's knowledge and belief, the HSP has fulfilled its obligations under Agreement during the Applicable Period and has received the required reports referred to in Section 8.6 of the Agreement.”

**Moved by:** Marg Carter

**Seconded by:** Doug Hunt

**Carried.**

## **6. REPORTS**

### **6.1 Chair Report**

There was a discussion regarding the rescheduling of the Annual General Meeting (AGM), noting that the date has been moved from June 19th to June 24th. It was also requested that Directors who are available make an effort to attend the staff awards ceremony.

### **6.2 President/CEO Report**

CEO Jeff Hohenkerk provided an update, focusing on the recent staff appreciation events and the hospital's ongoing redevelopment initiatives as outlined in his report that was circulated prior to the meeting. He also highlighted various other current initiatives at the hospital.

**6.3 Chief of Staff Report**

Dr. Louvish presented his report that was circulated prior to the meeting and highlighted various elements related to physician recruitment.

**7. CORRESPONDENCE**

There was no correspondence.

**8. NEXT MEETING DATE – May 28th, 2024**

Prior to adjourning the meeting Chair Carrie Hayward acknowledged directors Nancy French and Kevin Huestis who are attending their final official board meeting after nine years as directors.

**9. MOTION TO ADJOURN THE OPEN MEETING**

**Moved by:** Marg Carter

**Seconded by:** Robbie Beatty

**Carried.**