

MINUTES

Committee:		HHS Common Board					
Date:		January 11, 2024	Time:	4:02pm-5:33pm			
Chair:		Glen McNeil, Board Chair	Recorder:	Alana Ross			
Crian.							
Present:		Allan Ball, Dr. Aaron Daters, Brian Heagle, Steve Ireland, Aileen Knip, Christie MacGregor, Glen McNeil, Dr. Shannon Natuik, Tara Oke, Pat O'Rourke, Susan Reis, Dr. Sean Ryan, Jane Sager, Bruce Shaw, Laura					
		Stire, Jimmy Trieu, Michelle Wick					
Regrets:		Heather Hern					
Guests:		Matt Troyato					
0.0000							
1	Call to	to Order / Welcome					
1.1	• Mı	Mr. McNeil welcomed everyone and called the meeting to order at 4:02pm					
2	Educat						
3	Approv	rovals and Updates					
3.1	Declara	claration of Conflict of Interest					
	• Mı	Mr. McNeil asked if anyone had a conflict of interest to declare based on information contained in the					
	pa	ckage					
		No conflicts were declared					
3.2	Agenda	_					
	1	Approval / Changes					
		O None DIAND DULY SECONDED					
		OVED AND BOLT SECONDED OTION: To approve the January 11, 2024 HHS Common Board agenda. CARRIED.					
3.3							
Approval / Changes							
		None					
MOVED AND DULY SECONDED							
	MOTION: To approve the December 14, 2023 HHS Common Board minutes. CARRIED.						
4	Busine	ness Arising from Minutes					
5	Staff R						
5.1		esident & CEO:					
	• 20	2024-01-Monthly Report-CEO circulated					
		 Financial challenges impacting all hospitals across the Province Government is focusing on five areas before the next election in 18 months, i.e., 					
				ructure; healthcare being the biggest line			
		item of the Ontario Governm		ructure, heartheare being the biggest inte			
		 OHA continues to advocate o 		hcare			
		Election items include:					
		 Expansion of homec 	are vs expansion	of long term care; homecare provides			
		better value for dolla	ars				
			•	nented this year, which will all more private			
				rvices within the province			
		 Fixing Primary Care; 	what this will loc	ok like is unknown			
		- HHR	f O	ation which is a small. I ASON !			
				rtion, which is normally around \$50B, has			
		not been negotiated according to what th	•	l impact decisions around Master Planning			
	1	according to what the	ic cost of filliasti	actare rooks like			

Master Plans that were approved over the course of the pandemic have already recognized an increased cost of 50 to 60% **MOVED AND DULY SECONDED** MOTION: To accept the President & CEO report, as presented. CARRIED. 5.2 CNE: 2024-01-Monthly Report-CNE circulated Although finance are suffering, the Ministry is investing a significant amount of money in Emergency Nursing Education Development; this does not affect our bottom line Training has be ongoing over the last six months and the are also some specialty programs that will be paid for; very important for quality recruitment and retention Emergency closures and subsequent overcrowding continues, and there is no permanent solution in place to address this issue as of yet, i.e., planning for some EDs not to run 24/7 and reallocating the resources to the EDs that are striving to remain open 24/7 Communication regarding ED closures is not necessarily received according to protocol, but the choice could come down to a simple sick call, which may not be known ahead of Leaders in Ontario Southwest have developed and submitted an ED report to OHW; response pending AMGH & SHH 'wait time' and 'left without being seen' indicators are still in good standing, despite the significant increase in ED volumes; patients waiting in ED for an inpatient bed continues to be an issue and it increases risk of morbidity and mortality On behalf of the HHS Common Board, the Board Chair maintains support of all physician and nursing staff with the intent of keeping AMGH & SHH Emergency rooms open; the diligence of our teams is not unnoticed by our MPP and Government **MOVED AND DULY SECONDED** MOTION: To accept the CNE report, as presented. CARRIED. 5.3 COO: 2024-01-Monthly Report-COO circulated Graphs have been included in the COO report to show AMGH & SHH in comparison to their peers (small hospitals, less than 100 beds) As of Q2, the average deficit was over 7% (SHH 5% and AMGH 2%); deficits are not sustainable, however, both AMGH & SHH are performing better than peer hospitals, both as individual organizations and as a partnership Regarding the South Huron Community Blood Draw clinic Working on bringing the MLT resource that provides blood draws at the clinic back in the Lab proper to ensure adequate staffing for the ED and inpatient unit; there is no financial benefit to this move Work continues with DynaCare, Life Labs and the Union to find a permanent solution to maintain the blood draw clinic for the community An Expression of Interest was circulated and one Lab staff has responded positively; a schedule has been developed to continue clinic blood draws over the next three months, and a formal proposal is expected as of Jan 18 Working with Auditors to plan F2324 year-end and F2425 budgeting Establishing timelines for information to be brought to the appropriate committees; a preliminary budget will be brought to A&F on Mar 7, and Board on Mar 14 Anticipating funding announcements from OH in Feb, i.e., Bill 124 Working towards bringing the Quality Improvement Plan (QIP) to QA on May 15 **MOVED AND DULY SECONDED** MOTION: To accept the COO report, as presented. CARRIED. 5.4 AMGH Chief of Staff: 2024-01-Monthly Report-COS, 2023-11-15 MAC Minutes, and 2024-01-Report to Board-Credentials (AMGH) circulated

Appreciative of the strong nursing support
 The ED schedule has been posted to Apr, however, AMGH currently only has 8 ED physicians to cover 90 shifts per month, and will therefore continue to depend on the HFO EDLP program fill some of the gaps
 An extension of the HFO EDLP program past Mar 31 is crucial to keeping the shifts covered and the ED open

MOVED AND DULY SECONDED

MOTION: To accept the AMGH Chief of Staff report, the November 15, 2023 MAC Minutes, and the January 2024 Credentials Report, as presented.

5.5 SHH Chief of Staff:

- 2024-01-Monthly Report-COS and 2023-12-14 MAC Minutes circulated
 - ED coverage is in good standing with support of the HFO EDLP program; again, an extension of the HFO EDLP program past Mar 31 is crucial

MOVED AND DULY SECONDED

MOTION: To accept the SHH Chief of Staff report, and the December 14, 2023 MAC Minutes, as presented. CARRIED.

5.6 AMGH President of Medical Staff:

- 2024-01-Monthly Report-Pres MS circulated
 - AMGH ED coverage consists of local physicians, regular visiting locum physicians, and EDLP locum physicians (last minute)
 - Our ED shifts are getting are covered because we are relying on emergency outside help (EDLP), which may not be sustainable as these physicians are paid exorbitantly and only provide the actual shift work; the resultant workload of their patients lands on the local physicians, which is creating burn out quickly
 - There are two regular visiting locum physicians that come here because they like Goderich and AMGH, and they can be scheduled a head of time, so it was suggested that we attempt to grow this group
 - It comes down to making AMGH [&SHH] a first choice among physicians;
 maintaining the positive culture at HHS is a definite positive
 - AMGH is attempting to implement a Hospitalist program to support the inpatients group
 - Anaesthesia continues to operate at 80%

MOVED AND DULY SECONDED

MOTION: To accept the AMGH President of Medical Staff report as presented. CARRIED.

5.7 Patient Experience Story:

- 2024-01-Monthly Report-Patient Relations circulated
 - Letters of appreciation to AMGH & SHH have been increasing; Board members expressed appreciation at seeing these testimonials
 - o Appreciation extended to SHH regarding their dietary program
 - Because of the strong leadership and positive culture throughout HHS, employees are beginning to seek employment in our hospitals
 - Respect for personal lives of staff
 - Staff feel empowered to shape their work
 - Support programs in place
 - Recognition
 - Support of the Foundations provides the tools needed to provide care

MOVED AND DULY SECONDED

MOTION: To accept the Patient Relations Report as presented. CARRIED

6 Committee Reports & Previous Minutes

- 6.1 <u>Governance & Nominating:</u>
 - G&N meeting held on December 15, 2023
 - Next meeting scheduled for January 19, 2024

- Ms. Sager as assumed the Committee Chair position of G&N, as of Jan 2024
- o Appreciation extended to Mr. Ireland for Acting as Chair of G&N over the last several months
- o G&N Ad Hoc continues to meet to review Terms of Reference and governance policies
 - OHA has released four draft governance policy samples, which will be discussed in Jan, i.e., Code of Conduct, Confidentiality, Audit & Finance, and Nominating Process
 - Several TORs are expected to be circulated in Feb with recommendation for approval
 - A few TORs are being further investigated based on changing committee responsibilities
- All Board and ex-officio members are encouraged to complete the <u>F2324 Skills Matrix</u> at their earliest convenience; this allows the Board to identify skills to recruit for
- HP&A OHT meeting has been rescheduled to Jan 31, 2024

MOVED AND DULY SECONDED

MOTION: To accept the verbal update of the Governance & Nominating Committee, and the November 17, 2023 G&N minutes, as presented. CARRIED.

6.2 Audit & Finance:

- A&F meeting held on December 4, 2024
 - Next meeting scheduled for February 1, 2024
 - Reviewed AMGH & SHH Period 8 results; accepted
 - Due to timing, Period 8 results have not been reviewed by A&F and have been brought directly to the Board
 - At the end of each annual audit the external auditor provides a management letter with suggestions for improvement; the letters were reviewed by A&F in Dec to ensure that actions have been taken to rectify any issues
 - Controls have been put in place to increase revenue related to ALC patients and preferred accommodations
 - Increased control around payroll and accounts receivable
 - AMGH & SHH are preparing for the yearend Audit and budget deadlines

MOVED AND DULY SECONDED

MOTION: To accept the verbal update of the Audit & Finance Committee, the November 2, 2023 A&F minutes, and the F23 Period 8 Results, as presented. CARRIED.

6.3 <u>Community Engagement:</u>

- CEC meeting held on December 21, 2023
 - Next meeting scheduled for March 21, 2024
 - o CEO joined the meeting to present information around recruitment and retention

MOVED AND DULY SECONDED

MOTION: To accept the verbal update of the Community Engagement Committee, and September 21, 2023 CEC minutes, as presented. CARRIED.

6.4 Resources:

- Resources meeting held on December 4, 2023
 - Next meeting scheduled for February 1, 2024
 - o 2023-11-02-Resources minutes circulated; no discussion

MOVED AND DULY SECONDED

MOTION: To accept the verbal update of the Resources Committee and the November 2, 2023 Resources minutes, as presented. CARRIED.

6.5 <u>Joint Hospital & Foundation:</u>

- JH/F meeting held on December 6, 2023
 - o Relationship between AMGH, SHH, AMGHF & SHHF is building very nicely
 - Great communication resource between the governing tables
 - MOU between the Hospitals and the Foundation is in development
 - Foundations are increasingly busy with demands and working to get donors; participation and engagement is increasing
 - Appreciation extended to our Foundations for the funds raised to purchase capital equipment

	MOVED AND DULY SECONDED						
	MOTION: To accept the verbal update of the Joint Hospital & Foundation Committee, and the September 6, 2023 JH/F minutes, as presented. CARRIED.						
6.6	Quality Assurance:						
	Next quarterly meeting is scheduled for January 24, 2024 to review Q3 results; no discussion						
	MOVED AND DULY SECONDED						
	MOTION: To accept the verbal update of the Quality Assurance Committee, as presented. CARRIED.						
6.7	Recruitment & Retention:						
	R&R meeting held on November 7, 2023						
	 Next meeting is scheduled for February 6, 2024; no discussion 						
	MOVED AND DULY SECONDED						
	MOTION: To accept the verbal update of the Recruitment & Retention Committee, as presented. CARRIED.						
7	New and Other Business						
7.1	South Huron Foundation / HHS Board Representative:						
	2023-12-19-Memo re SHHF & HHS Board Rep Vote circulated						
	SHHF has put forward a proposal to remove voting rights of the HHS Board Representative on the						
	SHHF Board This is in alignment with AMGHF process; an HHS Board member does sit on the AMGHF,						
	but does not carry a vote; reduces perception of influence and conflict of interest						
	 Joint Hospital & Foundation Committee provides an appropriate avenue for discussion among these 						
	teams						
	 Pending final decision of SHHF to be made in Jan 2024 						
	CEO will continue to provide operational information to the Foundation Boards						
8	In-Camera Session						
9	Round Table						
9.1	Meeting Feedback:						
	Everyone is encouraged to complete the Board Effectiveness, Peer Evaluations, and Skills Matrix						
	Appreciation extended for the thorough reports and board packages						
	Appreciation extended for the collegial atmosphere of the board meetings Panel graph and leaking to graph and in panel graph and gra						
	Board members looking to resume in-person meetings; anticipating resumption of an in-person/hybrid wirtual meeting environment in February						
	 virtual meeting environment in February Board encouraged to learn from what other hospital partnerships are doing 						
	 Expressed the need for long term solutions for current issues in healthcare 						
	 Caring, efficiency, progress, leadership, transparency, information, details, inclusion, value, creativity 						
9.2	Jessica's House:						
	Would like to increase awareness to SHH around the services that Jessica's House provides						
10	Board Evaluations						
11	Next Meeting & Adjournment Regrets to alana.ross@amgh.						
	Date	Time	Location				
	February 8, 2024	4:00pm-6:00pm	SHH Boardroom / MS Teams available				
	Motion to Adjourn M	Motion to Adjourn Meeting:					
		MOVED AND DULY SECONDED					
.		n the January 11, 2024 HHS	Common Board meeting at 5:33pm. CARRIED.				
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