

**Minutes of the Meeting of the MICs Board of Directors**  
**Wednesday, November 25, 2020 – 18h00**  
**Via videoconference @ MICs Boardrooms (LMH Lead Site)**

|                                      |  |
|--------------------------------------|--|
| <b>ANSON GENERAL HOSPITAL</b>        |  |
| x                                    | Danielle Delaurier – Chair   |
| x                                    | Ann Zsigmond   |
| x                                    | Bill Allan – Treasurer   |
| x                                    | Darcy Cybolsky – Municipal Representative  |
| <b>BINGHAM MEMORIAL HOSPITAL</b>     |  |
| x                                    | Bob Dennis – Chair   |
| x                                    | Oswald Silverson – Vice-Chair  |
|                                      | Vacant – Treasurer   |
| x                                    | Jenny Gibson – Municipal Representative  |
| <b>LADY MINTO HOSPITAL</b>           |  |
| x                                    | Patricia Dorff – Chair   |
| regrets                              | Ken Graham – Vice-Chair  |
|                                      | Vacant – Treasurer   |
| regrets                              | Desmond O’Connor – Municipal Representative  |
| <b>MICs GROUP OF HEALTH SERVICES</b> |  |
| x                                    | Paul Chatelain – MICs Chief Executive Officer  |
| x                                    | Isabelle Boucher – MICs Chief Nursing Officer  |
| x                                    | Dr. Joey Tremblay – MICs Chief of Staff  |
| x                                    | Dr. Auri Bruno-Petrina – MICs President of Medical Staff (via telephone)             |
| <b>GUESTS</b>                        |  |
| x                                    | Suzanne Gadoury – MICs Executive Assistant ( <i>Recording Secretary</i> )            |
| x                                    | Gail Waghorn – MICs Chief Financial Officer / Executive Leader of Corporate Services |

**1.0 Call to Order & Chairs Remarks (P. Dorff)**

1.1 The Chair opened the meeting and welcomed everyone. She then inquired if there were any declarations of conflict of interest. There were none.

**2.0 Approval of Agenda (P. Dorff)**

The agenda was reviewed. It was requested that item 11.11 be moved to in-camera.

Motion:

Moved by: A. Zsigmond

Seconded by: D. Cybolsky

Be it resolved,

**THAT** the MICs Board of Directors approve the board agenda as amended.

Carried.

**3.0 Trustee Education / Presentations**

3.1 ONE Initiative – P. Chatelain

- The timelines for ONE were provided for information
- The Meditech team will be on hand for the full presentation in January, February and March 2021

- The MOUs are to be signed in April 2021
- Wave 2 implementation / Meditech software delivery to start in May 2021
- Wave 2 design to be completed and build started in November 2021
- First NEON site transition to ONE HIS in late October/early November 2022
- Wave 2 implementation to be completed by March 2023
- They're still working on the GAP analysis
- Paul and Gail will be participating in other MOU workshops in December and January
- The MOU packages including board presentation, board briefing note and ONE Initiative backgrounder will be provided to the board
- There will be three MOU briefing Zoom sessions to accommodate all board members
- Board members can submit their questions beforehand in order for the ONE team to prepare their answers
- Board members were invited to ask questions.

#### 4.0 Approval of Minutes (P. Dorff)

- 4.1 Minutes of the MICs Board of Directors meeting held October 28, 2020 were provided for information.

Motion:

Moved by: B. Dennis

Seconded by: D. Delaurier

Be it resolved,

**THAT** the MICs Board of Directors approve the minutes of the meeting held October 28, 2020 as presented.

Carried.

#### 5.0 Follow-Up Items

- 5.1 Review of the 2020-2021 Board Work Plan

- The ONE Initiative presentation was reviewed today.
- The Board Education & Orientation plan was reviewed today. There will be education on a monthly basis for the next few months
- The AGM will most likely be done by Zoom again this year
- Board members are asked to contact the CEO or EA to participate in education sessions/webinars/courses
- The Strategic Planning update was reviewed today.
- Will have an education session on the ONE initiative in January, February and March

#### 6.0 MICs Finance

- 6.1 September 2020 Operating Statements - (G. Waghorn)

- Gail provided a brief overview of the statements for all three sites.
- All the hospitals ended in a surplus position and experienced a decrease in OHIP revenue as well as operational costs due to decreased patient activity

##### **BMH**

- Hospital operating at a surplus of \$95,871 at the end of September; total margin as a percentage of revenue was 2.14%
- A hospital yearend surplus forecast of \$360,000 was submitted to the MOHLTC

- Operating revenue was \$388,804 over budget at the end of September
- Received increase of \$129,200 in base funding (2%) for fiscal year; base also includes \$175,503 in Transformation funding; received COVID and Pandemic pay funding of \$334,000
- OHIP and other patient revenue restricted to hospital activity was slightly over budget by \$3,426
- Differential and copayment revenue was over budget by \$45,462
- Operating expenses were \$157,527 over budget; budgeted expenditures were \$4.01 million
- COVID expenses were \$175,000
- Salaries were \$157,000 over budget
- The two largest variances were: unbudgeted COVID related salaries - \$84,000 and share of AGH lab salaries - \$41,000
- Overtime costs were \$117,107 compared to \$141,795 in 2019
- Total sick time costs to end of September were \$39,711 compared to \$36,466 in 2019
- Orientation costs were \$25,880 compared to \$28,777 in 2019
- Benefit costs were running at 36.0% of salaries
- Supply budgets are heavily skewed this fiscal year due to COVID. Some departments are under budget because of lack of activity and others are over budget because of costs related to COVID
- Medical and surgical supplies are over budget by \$28,368
- Balance sheet is good; there is a high receivable from the partnership to BMH
- Current ratio is 10.34

#### **AGH/SCM**

- Hospital operating at a surplus of \$125,438 at the end of September; total margin (consolidated) for Q2 was 2.4%; yearend forecast is projecting a hospital operating surplus of \$466,000
- Operating revenue was \$310,000 over budget at the end of September
- Our base funding included \$231,629 in transformation funding and \$462,000 for COVID and Pandemic pay costs
- The shared lab service model between AGH and BMH netted a revenue recovery of \$71,864.
- OHIP and other patient revenue was under budget by \$66,000
- Differential and co-payment revenue was under budget by \$20,617
- Operating expenses were \$83,756 under budget; budgeted expenditure were \$5.2 million
- Salaries were \$40,792 under budget at the end of the second quarter
- Major salary variances were: lab - \$70,064 under budget; administration and support services were \$127,082 unbudgeted in COVID & Assessment Center salaries
- Overtime costs were \$221,376 compared to \$181,859 in 2019
- Total sick time costs to end of September were \$40,863 compared to \$45,863 in 2019
- Orientation salary costs were \$46,274 compared to \$27,416 in 2019
- Benefit costs were running at 37% of salaries
- Medical and surgical supplies were over budget by \$28,368 related to COVID
- Current ratio is (0.36); \$2.3M liability to the partnership; yearly funding will decrease the liability, however capital expenditures will increase it

#### **SCM:**

- operating at a deficit of (\$120,627) compared to \$362,801 in 2019

- we have a lot of additional revenue for LTC due to COVID
- received \$457,532 in revenues related to COVID costs including pandemic pay
- costs have not gone up this year; they are very comparable to last year
- sick and overtime are down slightly but still very substantial

**LMH:**

- Hospital operating at a surplus of \$97,192 at the end of September; total consolidated margin as a percentage of revenue was 1.21%; yearend forecast of \$167,340 was submitted to the MOHLTC; hospital's bottom line is impacted by Villa Minto's deficit
- Operating revenue was \$686,582 over budget at the end of September
- Our base funding includes \$301,064 in Transformation funding as well as COVID and Pandemic pay funding totaling \$595,000
- Patient revenue was under budget by \$84,000
- Operating expenses were \$181,951 under budget; budgeted expenditures were \$7.2 million
- Salaries were over budget by \$37,479 at the end of the second quarter
- COVID related salary cost = \$192,234 at the end of September
- Total overtime costs were \$335,579 compared to \$292,517 in 2019
- Total sick time costs to end of September were \$69,360 compared to \$80,749 in 2019
- Orientation costs were \$57,918
- Benefit costs were running at 38% of salaries
- Other supplies and expenses were basically breakeven - \$4.611 under budget
- Medical & surgical supplies over budget by \$71,434 related to COVID (PPE costs)
- Drugs were over budget by \$43,223 (drugs for chemo program are high but offset by CCO revenue)
- Balance sheet current ratio is 12.45%
- The investment pool is keeping LMH's balance sheet strong

**VM:**

- operating at a deficit of (\$60,713)
- submitted a deficit budget; historically, the hospital has always been able to cover this deficit

Motion:

Moved by: B. Allan

Seconded by: J. Gibson

Be it resolved,

**THAT**, the MICs Board of Directors approve the September 2020 Operating Statements for Bingham Memorial Hospital, Anson General Hospital, South Centennial Manor, Lady Minto Hospital and Villa Minto as presented.

Carried.

## 6.2 HIRF & Capital Budget Update

- Chief Financial Officer gave the following overview of the 2020-2021 capital budget.
- BMH/Rosedale equipment: budget of \$308,635 vs actual \$8,543
- BMH/Rosedale building & infrastructure: budget of \$495,965 vs actual \$1,265,000
- AGH/SCM equipment: budget of \$432,829 vs actual \$34,919
- AGH/SCM building & infrastructure: budget of \$2,011,432 vs actual \$1,092,549
- LMH/VM equipment: budget of \$582,800 vs actual \$53,895

- LMH/VM building & infrastructure: budget of \$1,490,000 vs \$467,734
- We haven't purchased a lot of the equipment because of COVID; managers have been told to order their equipment by December 31, 2020
- Randy works with engineers and architects to cost out infrastructure projects and managers work with the MICs purchaser for pricing for equipment

## 7.0 Presentations/Reports (P. Dorff)

### 7.1 Chief Executive Officer Report: (P. Chatelain)

- The report was provided for information.
- The CEO provided the following overview:
- COVID-19 update:
  - Maintaining 106 cases in the region with two still active
  - LTC short-stay absences are on hold for the next 14 days. These are being re-evaluated every Monday as there are still active cases in the community. We are still encouraging indoor visitation on a pre-booked basis.
  - We continue to run and staff 3 Testing Centres 2 days per week in Cochrane and Iroquois Falls, and 1 day in Matheson. Numbers in Matheson continue to be low.
  - Working with Ontario Health North on regional planning including developing a Mobile Enhancing Support Team (MEST); providing education and communication to our physicians, team members and community members. In the case of an outbreak, everyone would work together to help out.
  - Daily searching and procuring of Personal Protective Equipment
  - We have received approximately \$30,000 per hospital in COVID-19 funding for the period of March 2020 to July 2020, which covers some capital and the testing Centres.
- We are still waiting for Ministry approval on our SCM 96-bed application.
- The Institute Quality Management in Health Care (IQMH) Laboratory Accreditation will be conducting their virtual visit for the MICs Labs from Nov. 30 to Dec. 2, 2020.
- Dr. Klassen is officially retiring as of today. The LMH board chair presented him with his MICs clock.
- The Physician Recruitment and Retention committee is meeting on December 2, 2020. Physician shortage is becoming critical.
- The ONE Initiative (Expanse) workshops will continue in December and January. A final presentation on the Memorandum of Understanding for the governance structure of NEWco will be made at the January Board meeting.
- Will be participating in the Moose FM radio-thon in December to fundraise for the purchase of a \$60,000 pulmonary function testing machine.
- Board Members were invited to ask questions.

### 7.2 Chief Nursing Officer Report: (I. Boucher)

- The CNO's report was provided for information.
  - Nursing: Currently recruiting for a new PCM AGH/BMH. Have successfully recruited a new charge nurse at AGH.
  - Pharmacy: continue to recruit for a Pharmacy Technician. Have been exploring the possibility of having Pharmacy students complete their placements with us with a goal to recruit post-graduation.
  - Preparing for Accreditation 2022. Board can expect to complete a self-assessment and Governance Functioning tool in the New Year.
  - COVID-19:
    - Surge planning: continue to maintain capacity to admit in all three hospitals

- MEST (Mobile Enhancement and Support Teams): planning at a regional level to assist in the event of an outbreak
- Testing Centers remain open in our three communities
- COVID vaccines may be available in early 2021. Priority will be LTC and Healthcare providers
- The following 2019/20 Q4 and 2020/21 Q1 stats were provided for information: Total ALC Occupancy at all three hospitals, Oncology visits, Telehealth visits and Visiting Specialist Clinics.
- One of our new initiatives involves a collaboration with Northern College to develop recruiting strategies; there have been three meetings so far
- Collaborating with OPP to establish a hospital and police committee to help develop a transfer of care protocol for mental health patients
- The ALC rate is a bit high because of low patient census
- There has been an increase in oncology patients this year.
- Many visiting specialist clinics were cancelled during the pandemic.

## **8.0 Medical Staff (Dr. J. Tremblay)**

### **8.1 Chief of Staff Report:**

- Dr. Tremblay provided a verbal report.
  - Physician recruitment continues to be a top priority
  - The Physician Recruitment Committee will be meeting on December 2<sup>nd</sup> to recap and review priorities and determine next steps
  - Dr. Klassen has retired from the surgical program but will return as a locum
  - He will provide surgical services two weeks per month while other locum surgeons will cover the remaining weeks
  - The Porcupine Health Unit has advised that we are definitely in Wave 2 of the pandemic

### **8.2 Minutes of the Medical Advisory Committee**

- Minutes of the MAC meetings held September 16, 2020 and October 28, 2020 were provided for information.

## **9.0 LHIN / MOHLTC Business (P. Chatelain)**

### **9.1 N/A**

## **10.0 MICs Quality Committee (I. Boucher)**

- N/A

## **11.0 Site Business (P. Dorff)**

### **11.1 Anson General Hospital:**

- N/A

### **11.2 Bingham Memorial Hospital:**

- N/A

### **11.3 Lady Minto Hospital:**

- N/A

## **12.0 Partnership Business (Bob Dennis)**

### **12.1 October 2020 Board Effectiveness Survey Results**

- 10 out of 12 surveys were submitted.

12.2 November 2020 Board Effectiveness Survey

- The survey was emailed via Survey Monkey.

12.3 Strategic Planning Update – I. Boucher / P. Chatelain

- The implementation of the acute care transition tool is complete – target has been met
- The care transitions tool is being used 100% of the time from AGH to SCM and will be rolled out to Rosedale and Villa Minto
- Due to the pandemic and technical issues, we have been unable to capture the number of referrals for discharge planning but Becky has been receiving verbal referrals; will be refining this performance measure and introduce a more validated tool that will help us trigger these referrals to the discharge planner
- In June 2020, an application for a 96-bed home was submitted; dialogue with the Ministry regarding financials continues; still waiting for final approval
- 100% continuum of care for LTC (histories, physicals & physician visits): due to COVID, physician visits were held virtually when required and physicals were postponed but were done by a Nurse Practitioner in September
- Number of Resident/Family Council meetings attended by representatives of the management team: unfortunately this was put on hold due to COVID however the SCM DOC attended a meeting on October 27, 2020
- Participate in one activity per LTC facility per year: the Director of HR attended the Mother's Day celebrations at each site - target met
- Completed initiatives for Better Together: policy has been finalized – target met
- #of initiatives that were successfully implemented (Better Together): Family Presence policy was finalized; target has been met
- # of Leadership Walkrounds attended: COVID has made it impossible for Executives to attend departments in person; Team Members have been advised to contact the Executive Team to discuss issues as needed
- % of patients who are safely repatriated back to our facilities (completed transfers): target met
- % of staff who have received workplace violence education: Non-Violent Crisis Intervention training is done in-house for each new hire; in-house trainers also need to renew their train-the-trainer certificates which they have not been able to do due to COVID; as a result, we have not been able to provide in-house training this year
- % Workplace Violence program completed: this has to do with our staff reviewing our own in-house program internally; there is no data at this time
- % of Ontario of College of Pharmacists (OCP) standards that have been resolved or have a mitigation strategy in place (per Accreditation year): AGH is at 67% compliance; BMH is sitting at 73%; LMH is at 48% – unmet standards relate to non-compliance with the NAPRA standards in the chemo room which requires some upgrades; we will not be in compliance until this is done
- number of unfilled vacancies > 3 months: target is less than two per month; there are currently two vacancies per site – target not met; pharmacy technician and MLT positions are still open; shortage of that skill set in all of Ontario
- Improved Worklife Pulse Survey results in next Accreditation Survey: 8.9% increase in positive responses and 8.5% decrease in negative responses – target met
- Completion of Human Resources Plan annually: 95% complete; medical recruitment section to be completed
- % Emergency Department coverage by physicians: target met for Q1 & Q2

- % of Emergency shifts covered by active physicians: work with Chief of Staff to consider recruitment of Emergency Room physicians instead of locum utilization; 10% for AGH in Q1 is due to a short term vacancy
- % of operating margin: no reporting for Q1; Q2 data not yet available
- Current ratio: no reporting for Q1; Q2 data not yet available
- % of Hospital Improvement Plan completed: no reporting for Q1; Q2 data not yet available
- Decreased length of stay in hospital for mental health patients: meeting held September 2<sup>nd</sup> to discuss police involvement for security purposes with mental health patients; currently looking at feasibility of internal security for patient watch. Met with the OPP and other community organizations on November 20<sup>th</sup> to develop a care transfer protocol. Looking to hire security guards to help with mental health patients.
- Have been meeting on a monthly basis with TDH as they were approved for further development but presently on hold due to COVID
- MICs Board of Directors approved a motion to participate in the ONE initiative and continue with planning phase of the Meditech Expanse.
- # of Executive Coffee Talks: have not had any since April due to COVID restrictions
- # of open forums: target is to have one open forum per year but haven't been able to this year due to COVID although we have increased external communications via our MICs website and Facebook page to keep the community updated on events; hoping to hold an open forum in the spring depending on restrictions
- # of meetings attended (PFAC): continue to meet on a quarterly basis; last meeting was held in November
- % of patient experience survey reviewed: all surveys were reviewed and are now implemented – target met

### 13.0 In Camera

#### 13.1 Motion to go in-camera

Moved by: A. Zsigmond

Seconded by: B. Allan

#### 13.2 I.T. Issues (D. Delaurier)

#### 13.3 Motion to go out of in-camera

Moved by: B. Allan

Seconded by: D. Delaurier

### 14.0 MICs News (P. Dorff)

- October 2020 MICs Newsletter was provided for information.

### 15.0 Next Meeting Date (P. Dorff)

- Wednesday, January 27, 2021 at 6:00 p.m. (BMH Lead Site)

### 16.0 Upcoming Meeting Dates

- As per agenda

### 17.0 Adjournment (P. Dorff)

- There being no further business, the meeting adjourned at 7:44 p.m.



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CHAIR, Bingham Memorial Hospital

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CHAIR, Anson General Hospital

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CHAIR, Lady Minto Hospital

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SECRETARY, MICs CEO