

Minutes of the Meeting of the MICs Board of Directors
Wednesday, March 24, 2021 – 18h00
Via Zoom (LMH Lead Site)

ANSON GENERAL HOSPITAL	
x	Danielle Delaurier – Chair
x	Ann Zsigmond
x	Bill Allan – Treasurer
x	Darcy Cybolsky – Municipal Representative
BINGHAM MEMORIAL HOSPITAL	
regrets	Bob Dennis – Chair
x	Oswald Silverson – Vice-Chair
	Vacant – Treasurer
x	Jenny Gibson – Municipal Representative
LADY MINTO HOSPITAL	
x	Pat Dorff – Chair
	Vacant – Vice-Chair
	Vacant – Treasurer
regrets	Desmond O’Connor – Municipal Representative
MICs GROUP OF HEALTH SERVICES	
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
GUESTS	
x	Suzanne Gadoury – MICs Executive Assistant (<i>Recording Secretary</i>)
x	Gail Waghorn – MICs Chief Financial Officer

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.

Motion: A. Zsigmond

Moved by: J. Gibson

Seconded by:

Be it resolved,

THAT the MICs Board of Directors approve the board agenda as presented.

Carried.

3.0 Trustee Education / Presentations

- N/A

4.0 Approval of Minutes (P. Dorff)

- 4.1 Minutes of the MICs Board of Directors meeting held February 24, 2021 were provided for information.

Motion:

Moved by: B. Allan

Seconded by: O. Silverson

Be it resolved,

THAT the MICs Board of Directors approve the minutes of the meeting held February 24, 2021 as presented.

Carried.

5.0 Follow-Up Items

5.1 Review of the 2020-2021 Board Work Plan

- The Board Work Plan was reviewed for the month of March.
- The 2021-2022 QIP is on hold and we did not submit one
- The LSAAAs and HSAAs are being approved today.

6.0 MICs Finance

6.1 January 2021 Operating Statements – G. Waghorn

- Chief Financial Officer gave an update of the operating statements for all sites
- Finance notes were provided to board members previously
- Not seeing any new trends since Q3; all sites are operating at surpluses
- Ending the year with significant surpluses at each site
- Received a lot of COVID-related funding for LTC; will have to determine if any of those funds will need to be returned after reconciliation

BMH

- BMH is operating at a surplus of \$161,607 at end of January 2021
- Total Operating Revenue = \$7,253,813
- Total Operating Expenses = \$7,092,207

AGH

- AGH is operating at a surplus of \$67,377 at end of January 2021
- Total Operating Revenue = \$8,478,589
- Total Operating Expenses = \$8,411,211

SCM

- SCM is operating at a deficit of (\$190,424) at end of January 2021
- Total Operating Revenue = \$5,417,177
- Total Operating Expenses = \$5,607,601

LMH

- LMH is operating at a surplus of \$84,880 at end of January 2021
- Total Operating Revenue = \$13,253,720
- Total Operating Expenses = \$13,168,650

VM

- VM is operating at a deficit of (\$37,209) at end of January 2021
- Total Operating Revenue = \$2,717,591
- Total Operating Expenses = \$2,754,800

Motion to approve January 2021 Operating Statements

Moved by: D. Delaurier

Seconded by: D. Cybolsky

Be it resolved,

THAT, the MICs Board of Directors approve the January 2021 Operating Statements for Bingham Memorial Hospital, Anson General Hospital, South Centennial Manor, Lady Minto Hospital and Villa Minto as presented.

Carried.

6.1 Capital Report

- The document was provided for information.
- The report covered major capital projects for all sites.
- The detailed capital report on infrastructure was presented at the last board meeting.

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:
- VM outbreak was declared over March 16th
- COVID-19 update:
 - LTC residents have received their second dose and high priority staff will be vaccinated within 16-week intervals.
 - Busy coordinating vaccinations for the elderly, ALC patients and some of our frontline staff over the next few weeks in conjunction with the Porcupine Health Unit.
 - Working on surge planning at provincial and regional level in preparation to accept transfers from neighboring hospitals.
 - Continue to run and staff three testing centres 2 days per week in Cochrane and Iroquois Falls, and 1 day in Matheson.
 - 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.
 - Daily searching and procuring of Personal Protective Equipment including purchasing the Antigen Testing equipment for our LTC homes as per Directive 3.
- Ministry approved our SCM 96-bed application which accounts for 27 extra beds; next steps are contingent on securing the land behind AGH; secure a line of credit; develop a campaign plan, public consultation over the summer; engage with architect who will work on drawing and sketches; finalize the development agreement between the ministry and SCM; possibly put shovel in the ground sometime in October; looking at a 24-month build
- Received \$55K in capital funding for the SCM roof repair from the NELHIN.
- Physician Recruitment Committee, renamed “The Worker Bees”, continues to meet on a weekly basis including making a delegation at Cochrane’s town council meeting on March 9th; waiting to hear whether they will contribute \$20,000 towards the hiring of a physician recruiter; planning a delegation to IF town council.
- ONE Initiative (Expanse) workshops continue in March; planning timeline calls for signing Memorandum of Understanding in April 2021. Looking for board approval at the April board meeting.
- Capital projects have resumed after lockdown; received an extension to defer the grant until 2021-2022

- Received a grant from the Royal Canadian Legion for BMH last month and \$5,200 for AGH this month.
- Board Members were invited to ask questions.

7.2 Chief Nursing Officer Report: (I. Boucher)

- The CNO reported on the following items:
 - Refreshed our policy on acute care visits; it was posted on our Facebook page and website and calling families to inform them of the new process; ALC visitors will have to provide a negative test result on a weekly basis; patients will need to identify two designated care partners who will be the only ones allowed to visit
 - Reviewed the results of the governance self-assessment survey; 90% are green and 10% are red for a total of 9 red flags
 - Will be able to add evidence in the spreadsheet which will help board members prepare for the actual onsite survey; will review at the May board meeting and add more evidence; will be reviewing this on a more regular basis in the fall
 - Nursing recruitment is ongoing; we have some good strategies to consider
 - We have two Pharmacy Tech students, one of whom has completed his placement and the other will soon; we are keeping them on while they complete their Structured Practical Training which is a requirement under the College of Pharmacies before they get registered; gave the first student an offer of employment in the meantime to provide support to the pharmacy department and will consider doing the same for the second student.
 - New Director of Care for BMH/Rosedale started in late February.
 - Need to continue monitoring our occupancy rates in all of our sites; required to maintain 10% to 15% capacity as per the ministry guidelines in order to potentially admit COVID patients
 - ALC rates are fairly stable and are unchanged since the last reporting period; ALC beds are all occupied therefore we are at capacity however there is a small overflow in the acute care at BMH that we are keeping an eye on
 - Oncology program is thriving at LMH and remains very strong
 - Telehealth visits have been steadily increasing
 - Clinics have been active and being offered safely
- Board members were invited to ask questions.

8.0 **Medical Staff (Dr. S. Tremblay)**

8.1 Chief of Staff Report:

- Dr. Tremblay provided a verbal update on the following:
 - Not aware of any new family physicians in the works at this time
 - Seeing more interest in full-time general surgeon position; one surgeon is coming next week to try it out and four locum general surgeons who will be providing surgical procedures at LMH
 - AGH and BMH are working with the EDLP (Emergency Department Locum Program) to provide urgent ER coverage; this program is for hospitals that are facing challenges; received positive feedback from those who have already provided ER coverage; there is always the possibility that some of them will return and eventually decide to stay on permanently
 - Dr. Wu has announced his upcoming retirement
 - Due to our physician shortage and COVID, we will be unable to accept 1st and 2nd year NOSM medical learners to our hospitals for a while; this will not apply to the residents and older students

- LMH is at full capacity; need to keep bed capacity as mandated by the ministry
- General Surgery program is up and running
- Vaccine doses are being offered to people of varying ages throughout the province; strategy is to vaccinate more people and waiting longer for the second dose as the evidence confirms that the first dose provides protection after 14 days
- MAC meeting minutes for the March and April meetings will be provided next month
- Weekly COVID testing will still be required to visit LTC residents even though they are vaccinated because there is not enough evidence yet to show that they can't contract COVID and get mild symptoms and transmit the virus to others
- There is new research being done every day

9.0 LHIN / MOHLTC Business (P. Chatelain)

9.1 N/A

10.0 MICs Quality Committee (I. Boucher)

10.1 Sentinel Events/Near Misses Report (rename "Critical Incidents")

- The report presented covered Q2 and Q3 for 2020-2021
- Hospital Critical Incidents: 2 falls resulting in fractures in Q2
- LTC Critical Incidents: 2 incidents at Villa Minto for Q2 and Q3
- Total Number of Incidents: as reported in RL6; nothing alarming
- Type of Incidents: the most common is falls in both acute and LTC
- Total Number of Near Misses/Good Catches: allows us to see trends and develop strategies; encourage a culture of reporting
- Board members were invited to ask questions.

10.2 Corporate Scorecard

- Q3 data was provided in the report
- We are mostly in the good and optimal ranges for most indicators but there are a few that we were not able to fully mobilize due to the pandemic
- We will most likely not be able to address the palliative care needs for acute and LTC and will remove them from this report
- Medication Reconciliation at Discharge: seeing a trend at LMH which is below target; will be looking at this as we're preparing for accreditation as it is an ROP (Required Organizational Practice)
- Hand Hygiene Compliance Before (Hospital): the percentage decreased a bit at LMH which is unusual; since the start of the pandemic, we have been auditing visitors as well; we're making sure that everyone who enters a patient's room washes their hands; will be focussing our efforts on visitors' hand hygiene

10.3 Quality Minutes

- The minutes of the Quality Committee meeting held January 13, 2021 were provided for information

11.0 Site Business (P. Dorff)

11.1 Anson General Hospital:

- Hospital Service Accountability Agreement
- LTC Home Service Accountability Agreement

Moved by: A. Zsigmond

Seconded by: B. Allan

Be it resolved,

THAT the AGH Board of Directors approve the 2021-2022 Hospital Service Accountability Amending Agreement for Anson General Hospital and the Long-Term Care Service Accountability Amending Agreement for South Centennial Manor as presented.

Carried.

11.2 Bingham Memorial Hospital:

- Hospital Service Accountability Agreement

Moved by: O. Silverson

Seconded by: J. Gibson

Be it resolved,

THAT the BMH Board of Directors approve the 2021-2022 Hospital Service Accountability Amending Agreement for Bingham Memorial Hospital as presented.

Carried.

11.3 Lady Minto Hospital:

- Hospital Service Accountability Agreement
- LTC Home Service Accountability Agreement

Moved by: P. Dorff

Seconded by: D. O'Connor (via email)

Be it resolved,

THAT the LMH Board of Directors approve the 2021-2022 Hospital Service Accountability Amending Agreement for Lady Minto Hospital and the Long-Term Care Service Accountability Amending Agreement for Villa Minto as presented.

Carried.

12.0 Partnership Business (Bob Dennis)

12.1 February 2021 Board Effectiveness Survey Results

- 8 out of 10 surveys were submitted.

12.2 March Board Effectiveness Survey

- The survey was emailed to the board members following the meeting.

12.3 Seed Money for Physician Recruitment Committee – P. Chatelain

- The MICs Audit and Finance Committee recommends approving funding for the Physician Recruitment sub-committee at their February meeting.
- The importance of physician recruitment is very much a part of the board's responsibilities
- The AGH board chair is part of the Worker Bees group as the board representative and reports back to the MICs Board of Directors
- This group consists of volunteers who have stepped up to recruit much needed physicians for our three communities.

▪ Moved by: A. Zsigmond

Seconded by: D. Cybolsky

Be it resolved,

THAT the MICs Board of Directors approve giving the Physician Recruitment sub-committee one time seed money of \$20,000 for 2020-2021 as MICs' share to hire a physician recruiter as recommended by the MICs Audit and Finance Committee as presented.

Carried.

13.0 In Camera

13.1 Motion to go in camera

Moved by: J. Gibson

Seconded by: D. Delaurier

13.2 Discussion of physician privileges

13.3 Motion to go out of in-camera

Moved by: B. Allan

Seconded by: D. Delaurier

13.4 Approval of physician privileges

Motion to approve the appointment of Dr. Farhan Siddiqui as locum tenens in the Emergency Department

Moved by: A. Zsigmond

Seconded by: B. Allan

Be it resolved,

THAT the MICs Board of Directors approve the appointment of Dr. Farhan Siddiqui as locum tenens in the E.R./critical care department as recommended by the Medical Advisory Committee as presented

Carried.

Motion to approve the appointments of the ELDP physicians

Moved by: D. Delaurier

Seconded by: O. Silverson

Be it resolved,

THAT the MICs Board of Directors approve the appointments of ELDP physicians: Dr. Robin Cardamore, Dr. Jeffrey Fuss and Dr. David Provan as locum tenens in the Emergency Department as presented

Carried.

Motion to approve the appointment of Dr. Senthuran Tharmalingam as locum tenens in the General Surgery Department

Moved by: J. Gibson

Seconded by: A. Zsigmond

Be it resolved,

THAT the MICs Board of Directors approve the appointment of Dr. Senthuran Tharmalingam as locum tenens in the General Surgery department as recommended by the Medical Advisory Committee as presented

Carried.

14.0 MICs News (P. Dorff)

- The March 2021 MICs Newsletter was provided for information.

15.0 Next Meeting Date (P. Dorff)

- Wednesday, April 28, 2021 at 6:00 p.m. (BMH Lead Site) via Zoom

16.0 Upcoming Meeting Dates

- As per agenda.

17.0 Adjournment (P. Dorff)

- There being no further business, the meeting adjourned at 7:34 p.m.

CHAIR, Bingham Memorial Hospital

CHAIR, Anson General Hospital

CHAIR, Lady Minto Hospital

SECRETARY, MICs CEO