

Minutes of the Meeting of the MICs Board of Directors
Wednesday, September 22, 2021 – 18h00
Via Zoom (BMH Lead Site)

ANSON GENERAL HOSPITAL	
x	Danielle Delaurier – Chair
x	Ann Zsigmond – Vice-Chair
x	Fern Morrissette – Treasurer
x	Darcy Cybolsky – Municipal Representative
BINGHAM MEMORIAL HOSPITAL	
x	Bob Dennis – Chair
x	Oswald Silverson – Vice-Chair
	Vacant – Treasurer
R	Jenny Gibson – Municipal Representative
LADY MINTO HOSPITAL	
x	Pat Dorff – Chair
x	Susan Nelson – Vice-Chair
	Vacant – Treasurer
x	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
R	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
x	Dr. Cheri Bethune – Worker Bee Member

1.0 Call to Order & Chairs Remarks (B. Dennis)

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

2.0 Approval of Agenda (B. Dennis)

The agenda was reviewed.

Item 14.4 “Ratification of ONA Agreement” was added.

Item 6.3 “Approval of capital budgets” was removed as this was approved in May

Motion:

Moved by: D. Delaurier

Seconded by: O. Silverson

Be it resolved,

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

Carried.

3.0 Trustee Education / Presentations (C. Bethune)

- Worker Bees – Strengthening Primary Care
- Dr. Bethune introduced herself and gave a presentation on primary care
- The main message was: “What can the MICs Board of Directors do to help”
- A number of suggestions were given
- Board members were invited to ask questions
- Discussed the fiscal responsibility of the board; expectation is that the hospital will fund physician recruitment and retention and offer incentives such as housing
- Board members feel that we are already doing everything that is stated in the presentation
- The intent is to illustrate how to integrate the FHT, the hospital and LTC facility and how crucial it is to work collaboratively
- The board members will meet with the Worker Bees via Zoom to discuss these issues
- The CEO stated that MICs has already given the Worker Bees \$20,000 for physician recruitment; our budgets are stretched thin fighting COVID-19; we are all trying to achieve the same goal

4.0 Approval of Minutes (B. Dennis)

- 4.1 Minutes of the MICs Board of Directors meeting held June 23, 2021 were provided for information.

Motion:

Moved by: A. Zsigmond

Seconded by: P. Dorff

Be it resolved,

THAT the MICs Board of Directors approve the minutes of the meeting held June 23, 2021 as presented.

Carried.

5.0 Follow-Up Items

- 5.1 Review of the 2021-2022 Board Work Plan (P. Chatelain)

- A Board Orientation will be scheduled in October
- The Board Work Plan was reviewed
- The Sentinel Events/Near Misses & Adverse Events report summary and Corporate Scorecard are being presented today
- The GCE board self-assessment tool will not be available this year
- Credentialing 101 will be presented to the board next month
- Board orientation session is scheduled for October 21st
- We will be providing a strategic planning update in October as well as the HIRF and capital budget review

- 5.2 Board Education and Orientation Plan (P. Chatelain)

- The 2021-2022 education plan was reviewed.
- Education is provided every second month.
- Board members can request changes to the plan.

6.0 MICs Finance (G. Waghorn)

- 6.1 July 2021 Operating Statements

- Each of the hospitals received a 2% increase in small hospitals base funding
- AGH received an additional \$500,000 base increase

- We are still incurring a lot of costs due to COVID
- Hospital budgets do not make provision for physician incentives
- Physician housing comes out of our capital assets; challenges are the costs to maintain the houses; we heavily subsidize the FHTs and have been doing this for a long time; all of this impacts our budget
- Gail explained how the IFFHT is a PHO; BMH is fee for service

BMH:

- As of July, we're basically sitting at a breakeven position
- Submitted an operating surplus of \$8,392 at the end of July
- Total Operating Revenue: \$3,091,983
- Total Operating Expenses: \$3,083,591

AGH:

- Is in a surplus position of \$267,763 due to the additional money received in base funding
- Total Operating Revenue: \$3,811,491
- Total Operating Expenses: \$3,543,728

SCM:

- Total Revenue: \$2,051,910
- Total deficit: (\$230,342)
- It's an ongoing struggle to balance LTC budgets

LMH:

- Submitted an operating deficit of (\$280,686) as most of our services have been operating intermittently because of COVID which impacts costs
- Total Operating Revenue: \$5,349,204
- Total Operating Expenses: \$5,629,890

VM:

- Total Revenue: \$869,784
- Deficit - operations: (\$300,597)
- Deficit - non-operations: (\$10,291)
- Total deficit: (\$310,888)
- Deficit is higher than expected due to COVID

Motion to approve July 2021 Operating Statements

Moved by: D. O'Connor

Seconded by: D. Cybolsky

Be it resolved,

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

Carried.

6.2 2021-2022 Operational Budgets

- The Chief Financial Officer gave the following overview of the 2021-2022 operational budgets; they were presented to the finance committee last week
- This was an anomaly year since the ministry did not ask us to submit our budget; they just extended our HSAA agreement
- Going forward, we will be presenting the operating budgets for approval to the board

in March of each year so they are ready for submission to the ministry

- LTC budgets are not submitted to the ministry

BMH:

- Is projecting a budget deficit of \$160,993 in 2022; we have added staff throughout the organization particularly in nursing; added additional time in the physician clinic; we subsidized a position there; there are dollars budgeted for physician recruitment at each site; everything stays status quo
- We still don't know what COVID measures will remain; this is being assessed
- There isn't much we can do at this time; will have to wait until the 2022-2023 budget to do some deficit recovery planning

AGH:

- Received 2% in base funding plus the additional \$500,000 funding; will be able to sustain a small surplus position; added some nursing hours to address staffing pressures; increased nursing administration time which impacted both AGH and BMH who share this position; added an HR position which is being evaluated

SCM:

- Updated salary costs and reviewed the staffing patterns; drop in CMI at both sites impacted the amount of revenue for nursing and personal care; we have a deficit budget of \$1,223,554 which will probably come in lower especially if the COVID prevention and containment measures continue

LMH:

- Projecting an operating deficit of \$466,754; there were some changes in the acute chronic RPN staffing patterns and an increase in surgical staffing patterns as well as additional time in ER; additional nursing staff was necessary to mitigate risk issues

VM:

- VM has historically run a deficit; we have been able to subsidize it through hospital operations; small nursing homes are impossible to operate at a breakeven position
- The board members were invited to ask questions.

Motion to approve the 2021-2022 Operating Budgets

Moved by: D. Delaurier

Seconded by: P. Dorff

Be it resolved,

THAT, the MICs Board of Directors approve the 2021-2022 Operating Budgets for Bingham Memorial Hospital, Anson General Hospital, South Centennial Manor, Lady Minto Hospital and Villa Minto as presented.

Carried.

6.3 2021-2022 Capital Budgets

- This item was removed as the capital budgets were approved in May

6.4 MICs Phone System Upgrade

- A briefing note was provided for information
- The Cisco server hardware and software is due for complete replacement/upgrade. The estimated cost is \$260,000. Cisco support/warranty needs to be renewed every 3 years at an estimated cost of \$85,000 per year. Current handsets are not affected.
- Given the need for this large scale upgrade, Bercell began to look at possible replacement systems to compare features and pricing. We are asking for Board

approval to purchase and implement a new MICs phone system.

Motion to approve the purchase of the Avaya phone system

Moved by: A. Zsigmond

Seconded by: S. Nelson

Be it resolved,

THAT, the MICs Board of Directors approve the purchase of the Avaya phone system as presented.

Carried.

6.5 Investments

- The Portfolio Valuation report ending August 31, 2021 was provided for information.
- The board members were briefed that our Investment Management Firm is ceasing operations as of Dec. 15, 2021 and a new advisor has to be in place by Oct. 31st to ensure our assets get appropriately moved over by Dec. 15th.
- We inquired whether we are required to tender for investments under the Broader Public Purchasing Guidelines and were advised that we are exempted from competitive procurements.
- Various options to select a new investment manager were discussed.
- After careful consideration of possible alternatives, MICs recommends moving its investments to Pat McConnell, CFP of RBC Wealth Management. Pat was the investment manager for AGH for about 20 years, providing excellent financial management expertise, high rates of returns and the best service of any firm we have ever dealt with.
- By approving Pat McConnell/RBC wealth management, our investments will be with a reputable and long established Certified Financial Planner who has invested in our communities and has a proven track record handling our money. At this time, this is the best strategy for MICs, especially given our tight timeframes and the need to ensure we have a proven professional handling our portfolio. It does not preclude us from running an RFP process in the future.
- Motion: approval of appointing RBC Wealth Management as our new investment firm

Moved by: D. O'Connor

Seconded by: O. Silverson

Be it resolved,

THAT, the MICs Board of Directors approve the appointment of RBC Wealth Management as our new investment firm as presented.

Carried.

6.6 ONE Financing

- We need to open a Canadian bank account and an US account with TD bank
- Gail stated that there will be some operating cost implications but this financing is specifically tied into the capital side of it
- All the hospitals involved are tapping into the RFP for financing with TD bank
- We will be getting a floating rate of prime plus .85% per annum
- We are currently meeting with the group to discuss the interest rate and foreign exchange risk and how we are going to mitigating that; they will work with us to come up with a customized solution for MICs based on what our needs are

Motion: approval of opening a Canadian dollar and US dollar bank account from Toronto Dominion (TD) for the foreign currency financing of the ONE Meditech Expanse Initiative

Moved by: D. Cybolsky

Seconded by: A. Zsigmond

Be it resolved,

THAT, the MICs Board of Directors approve the opening of a Canadian dollar and US dollar bank account from Toronto Dominion (TD) for the foreign currency financing of the ONE Meditech Expanse Initiative as presented.

Carried.

7.0 Presentations/Reports (B. Dennis)

7.1 Chief Executive Officer Report: (P. Chatelain)

- The CEO provided the following overview:
- COVID-19 update:
 - Currently have four cases in our MICs communities and Smooth Rock Falls
 - The third vaccine doses were provided to our LTC residents
 - We implemented our Directive 6 policy on vaccines for the MICs Group of Health Services; vaccination policy was posted on the MICs website and FB page
 - continue to run and staff three testing centers 2 days per week in Cochrane and Iroquois Falls, and 1 day in Matheson with increased frequency in antigen testing with the schools reopening
 - working with the Cochrane District (TaDH) on staff planning over the summer and fall due to our district staffing shortages
- CEO attended the Town of Iroquois Falls Public Meeting on August 30, 2021. The land transfer to AGH has now been completed and now needs to be rezoned. The Ministry has been notified and we are waiting on next steps.
- Physician and Nursing Recruitment is our greatest challenge. With the recent retirements and departures over the summer, we are in dire need. Many of our ED shifts at AGH are covered by locums from EDLP (Health Force Ontario) in addition to utilizing nursing agency staff.
- We applied and were successful in obtaining a grant for up to \$35K for a Foundation Coordinator.
- The LMH OR AHU #2 Replacement project was completed on time to have the OR operational on August 23, 2021. The future Chemo room expansion will occupy the Health Records location, relocating the staff to some of the admin offices. The freight elevator at AGH is a work in progress with a fall 2021 completion. The water distribution and elevator projects at BMH are also in progress.
- We have received 2% small hospital base funding allocations for 2021-2022.
- We have received COVID-19 funding allocations but they are soon coming to an end.
- Board Members were invited to ask questions.

7.2 Chief Nursing Officer Report: (I. Boucher)

- The CNO provided the following overview:
 - We are experiencing a shortage of nursing which is a global issue; we have been managing multiple absences and vacancies and the pandemic has certainly not helped the situation; some nurses throughout the province are leaving the profession to go into different fields altogether

- At the end of July, we almost had to close down the ER for three nights and had to rely on agency nurses to get us through this crisis
- Have since signed formal agreements with two nursing agencies
- One agency nurse is working full time out of AGH and has picked up shifts in Cochrane as well
- A second RN will be providing additional support next week; this will allow some of our staff to take some well-deserved vacation
- We have been unable to staff endoscopy services at AGH all summer due to nursing shortages but looking promising for October
- We had to close 8 beds at AGH but have since reopened them
- We have noticed a slight increase in our occupancy rates at all three sites
- HSN is at over capacity right now and we have been experiencing slight delays in some of the transfers that are going to other sites by a day or two; this has also had an impact on our transfers from TDH; HSN simply can't keep up
- Accreditation tasks have increased as the onsite survey visit approaches in February 2022; all of our teams are working on their action plan
- Board members were invited to ask questions.

8.0 Medical Staff (Dr. J. Tremblay)

8.1 Chief of Staff Report:

- Dr. Tremblay provided a verbal update on the following:
 - The most important thing right now is staff and patient safety
 - Physician recruitment is a priority along with safety
 - He has been working directly with MICs, the FHTs and the Worker Bees
 - As a busy physician, he is glad to be able to delegate some time consuming tasks to Abbygail
 - We are now looking to recruit two to three physicians per community which emphasizes the crisis we are facing
 - We need to be competitive in the north as it is difficult to compete with bigger communities in the south
 - Physicians are also retiring earlier because of COVID
 - They're burning out and cutting down their hours
 - We have a few promising candidates in the new year but nothing definite
 - Dr. Mara is holding four-day monthly clinics at the Minto Centre
 - McMaster University is holding its recruitment fair
 - One way to market ourselves is to welcome NOSM medical learners to our MICs communities
 - We recruited a full-time surgeon starting October 1st
 - AGH is still relying heavily on EDLP physicians; these physicians work full-time at their primary hospital and provide emergency coverage as a last resort to other hospitals that have unfilled ER shifts; they usually only come for one shift
 - We're getting more interest from TDH ER physicians to provide coverage; we received a few applications for hospital privileges
 - 2,199 cases up to date in the PHU region; there are 10 active cases, four just today
 - HSN is 102% over capacity; 32 new admissions in the hallway; most of the patients filling up the hospitals are unvaccinated
 - Board members were invited to ask questions.
 - Discussed getting a CT scan; it is costly to purchase and to maintain; however transfers to and from TDH are also costly; we should be discussing this

8.2 Medical Advisory Committee Minutes:

- Minutes of the MAC meeting held June 16, 2021 were provided for information.

9.0 LHIN / MOHLTC Business (P. Chatelain)

- N/A

10.0 MICs Quality Committee (I. Boucher)

10.1 Minutes of the Quality Committee meeting held June 9, 2021 were provided for information

10.2 Sentinel Events/Near Misses & Adverse Events

- The information is extrapolated from our RL6 incident reporting system
- The raw data is provided for acute care as well as long-term care for Q4 2020-2021 and Q1 2021-2022
- The report covers total hospital critical incidents, LTC critical incidents, total number of incidents, total number of near misses/good catches and types of incidents
- We are seeing slightly higher number of incidents
- Near misses promote a culture of risk management
- Falls remain our top incident that is reported within MICs, then safety/security
- Hospital critical incidents and LTC critical incidents have very different definitions

10.3 Corporate Scorecard

- The format of the Corporate Scorecard was revised to simplify and make it easier to read; the first page is a MICs perspective; page two shows the individual performance for Q1 2021-2022
- Professional conduct issues are reviewed to ensure they are properly categorized
- Provision of care could be providing care to our patients or delay in reaching doctor
- The quarterly Individual Performance report was divided into six categories: Efficient – Timely – Patient Centered Care – Safe – Effective - Worklife

11.0 Physician & HR Recruitment (P. Chatelain)

- Welcome to Dr. Shiraz Elkheir

12.0 Indigenous and French Language Issues (P. Chatelain)

- N/A

13.0 Site Business (B. Dennis)

13.1 Anson General Hospital:

- N/A

13.2 Bingham Memorial Hospital:

- N/A

13.3 Lady Minto Hospital:

- N/A

14.0 Partnership Business (Bob Dennis)

14.1 June 2021 Board Effectiveness Survey Results

- 12 out of 12 surveys were submitted.

14.2 September 2021 Board Effectiveness Survey

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

14.3 Accreditation

- The government action plan was provided for information.
- This generated a report; the red flags were discussed; some are high priority and these need to be addressed
- Grey shaded item is an ROP
- 2.3 recommendation is to have a PFAC member attend the Quality Committee meetings
- 10.5 recommending sharing patient stories to the Quality Committee on a quarterly basis; CNO will commit to this; suggested that a follow-up is done afterwards to see how issue was addressed

14.4 Ratification of ONA Local Agreement – P. Chatelain

- ONA Local Negotiations occurred September 15 and 16. With ONA still in the 3-year moderation period of Bill 124, there were no monetary issues addressed during this round of bargaining. Items agreed to revolved around scheduling provisions, vacation process, committee structure and housekeeping items. The Employer achieved two key objectives in this round of bargaining – introduction of prime time vacation language and removal of superior conditions for ambulance transfers. Overall, the MICs Team was very satisfied with the results and are seeking ratification of the local agreement.
- Motion: approval of the ratification of the ONA agreement

Moved by: P. Dorff

Seconded by: O. Silverson

Be it resolved,

THAT, the MICs Board of Directors approve the ratification of the ONA agreement as presented.

Carried.

15.0 In Camera

15.1 Motion to go in camera

Moved by: D. O'Connor

Seconded by: F. Morrissette

15.2 Physician privileges

15.3 Motion to go out of in-camera

Moved by: D. Delaurier

Seconded by: F. Morrissette

15.4 Approval of physician privileges

Motion to approve hospital privileges for EDLP physicians Dr. Matthew Adamson, Dr. Scott Anderson, Dr. Pankaj Chand, Dr. Bernard Dew, Dr. Brenda Burns and Dr. Steve Virani in the ER/Critical Care Department

Moved by: A. Zsigmond

Seconded by: S. Nelson

Be it resolved,

THAT the MICs Board of Directors approve Locum Tenens privileges for EDLP physicians Dr. Matthew Adamson, Dr. Scott Anderson, Dr. Pankaj Chand, Dr. Bernard

Dew, Dr. Brenda Burns and Dr. Steve Virani in the ER/Critical Care Department as recommended by the MICs Medical Advisory Committee

Carried.

Motion to approve the appointments of Dr. Emma Curran, Dr. Kirsten Desjardins-Lorimer and Dr. Jun Kim in the locum tenens category as well as Dr. Emily Mitic and Dr. Katherine Munnoch in the consulting category as recommended by the MICs Medical Advisory Committee

Moved by: D. Delaurier

Seconded by: F. Morrissette

Be it resolved,

THAT the MICs Board of Directors approve hospital privileges for Dr. Emma Curran, Dr. Kirsten Desjardins-Lorimer and Dr. Jun Kim in the locum tenens category as well as Dr. Emily Mitic and Dr. Katherine Munnoch in the consulting category as recommended by the MICs Medical Advisory Committee as presented.

Carried.

Motion to approve the change in status for Dr. Shiraz Elkheir from locum tenens to active staff in the general surgery program as recommended by the MICs Medical Advisory Committee

Moved by: D. Cybolsky

Seconded by: D. O'Connor

Be it resolved,

THAT the MICs Board of Directors approve the change in status from locum tenens to active staff for Dr. Shiraz Elkheir as recommended by the MICs Medical Advisory Committee as presented.

Carried.

16.0 MICs News (B. Dennis)

- The July, August and September 2021 MICs Newsletters were provided for information.

17.0 Next Meeting Date (B. Dennis)

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

18.0 Upcoming Meeting Dates

- As per agenda

19.0 Adjournment (B. Dennis)

- There being no further business, the meeting adjourned at 9:00 p.m.

CHAIR, Bingham Memorial Hospital

CHAIR, Anson General Hospital

CHAIR, Lady Minto Hospital

SECRETARY, MICs CEO