

Minutes of the Meeting of the MICs Board of Directors
Wednesday, October 27, 2021 – 18h00
Via Zoom (AGH 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
x	Jenny Gibson – Municipal Representative
LADY MINTO HOSPITAL	
x	Pat Dorff – Chair
x	Susan Nelson – Vice-Chair
	Vacant – Treasurer
R	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

1.0 Call to Order & Chairs Remarks (D. Delaurier)

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 (D. Delaurier)

The agenda was reviewed.
 Item 9.2 “Legal Opinion Update” was added to the agenda.

Motion:

Moved by: B. Dennis
 Seconded by: J. Gibson

Be it resolved,

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

Carried.

3.0 Trustee Education / Presentations (P. Chatelain)

- Credentialing 101

- The presentation was provided for information
- The term “privileges” is used because Professional Staff are given the privilege of using hospital resources in return for providing care to hospital patients. It also allows them to perform certain kinds of clinical procedures, access certain hospital staff, facilities, equipment, systems and supports.
- The board ultimately makes any decisions about Professional Staff privileges: categories and scope of privileges; appointment; reappointment; changes to privileges and suspension, restriction or revocation of privileges.
- While the preparation and coordination of materials may be done by hospital staff or board sub-committees, the final decisions must be made by the board alone and cannot be delegated.
- The board is responsible for ensuring an effective and fair credentialing process. While it does not need to receive all the details for every applicant, it must be assured that the processes meet legal requirements.
- The board was invited to ask questions.

4.0 Approval of Minutes (D. Delaurier)

- 4.1 Minutes of the MICs Board of Directors meeting held September 22, 2021 were provided for information.

Motion:

Moved by: P. Dorff

Seconded by: O. Silverson

Be it resolved,

THAT the MICs Board of Directors approve the minutes of the meeting held September 22, 2021 as presented.

Carried.

5.0 Follow-Up Items

- 5.1 Review of the 2021-2022 Board Work Plan (P. Chatelain)
- The Board Orientation took place on October 21st via Zoom
 - Credentialing 101, strategic planning update and HIRF and capital budget review are being presented today

6.0 MICs Finance (G. Waghorn)

6.1 August 2021 Operating Statements

- Gail presented a high level of the statements; will be doing a detailed Q2 review next month at the finance committee meeting
- There have been some small fluctuations but no big changes since last report

BMH:

- Operating at a small deficit of (\$13,990) at the end of August
- Total Operating Revenue: \$3,851,744
- Total Operating Expenses: \$3,865,735

AGH:

- Operating surplus of \$283,799 due to the \$500,000 additional funding from the MOH
- Total Operating Revenue: \$4,694,197
- Total Operating Expenses: \$4,410,399

SCM:

- Total Revenue: \$2,493,935
- Total operational deficit: (\$326,543)
- Continue to struggle with staffing costs
- Receiving less COVID funding

LMH:

- Operating deficit of (\$316,992)
- Total Operating Revenue: \$6,697,831
- Total Operating Expenses: \$7,014,823

VM:

- Total Revenue: \$1,083,881
- Total operational deficit: (\$354,637)

Motion to approve August 2021 Operating Statements

Moved by: J. Gibson

Seconded by: A. Zsigmond

Be it resolved,

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

Carried.

6.2 HIRF and Capital Budget Update

- This report is presented to the board each quarter

BMH:

- The water distribution project is ongoing; \$100,000 is ECP funded and is currently over budget by \$54,000
- The Rosedale extension's estimated cost is \$375,000; a P.O. was issued for engineering
- The door operator upgrade on the passenger elevator is in progress and is capital funded
- We are waiting for approval on our ECP application for exterior doors and window replacement
- Waiting for approval to replace the medical vacuum pumps and update to current standard; engineering in progress
- The passenger elevator hydraulic motor pump project is in progress with an estimated cost of \$22,000; the pump had to be ordered as there was only one motor available.

AGH:

- Freight elevator – electrical and fire alarm installation in progress; delay in fabrication due to unavailable materials
- Waiting for approval of ECP application for passenger elevator modernization
- Engineering to be done on passenger elevator modernization

SCM:

- Two of the three humidifiers failed and are past end of life; recommended to replace all three due to the new changes in cooling and air temperature requirements

LMH:

- Lab Phase II is on hold; possibly an October tender
- Garage extension (part of O2 Concentrator project) is completed
- Waiting for approval of ECP funding for AHU #3 replacement
- Waiting for approval of ECP funding to replace asphalt on roadways and parking lots
- Pharmacy Upgrade – engineering and design have been started in order to have a completion date of Dec. 2021; upgrade will meet NAPRA requirements
- Waiting for approval and funding from Surgical Innovation Fund – scrub sink, medical gas columns, electrical panels and isolation transformers; possible upgrade of dumbwaiters

VM:

- Medication room/Nursing station renovations: starting detailed design for construction estimates
- Kitchen renovation engineer and design: offsite preparation seem to be the best option; ongoing feasibility study
- Pharmacy upgrade: pharmacy and Chemo Prep Room will be expanding into Health Records; ongoing
- The board members were invited to ask questions.

7.0 Presentations/Reports (D. Delaurier)**7.1 Chief Executive Officer Report: (P. Chatelain)**

- The CEO provided the following overview:
 - COVID-19 update:
 - ✓ Zero case count reported in our PHU region; the curve is bending
 - ✓ We have implemented our policy on vaccines for the MICs Group of Health Services (non-mandatory) and the Ministry of Long-Term Care policy for LTC (mandatory).
 - ✓ We continue to run and staff three Testing centers; 2 days per week in Cochrane and in Iroquois Falls, and 1 day in Matheson.
 - ✓ We have received COVID-19 funding allocations including Infection Control monies for LTC but they are soon coming to an end.
 - The land transfer to AGH and site survey have now been completed. The Ministry has been notified. An updated Financial Budget, including financing and fundraising plans will have to be submitted for their review before their public consultation. Then a Development Agreement will be issued.
 - Physician and Nursing Recruitment continue to be our greatest challenge. With the recent retirements and departures over the summer, we are in dire needs. 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 job ad has been placed in the newspaper and website.
 - The VM AHU #1 has a 4-week delay due to materials being unavailable. The pharmacy expansion is slowly underway with a completion date of December 2021. We did receive a very generous donation towards this project. 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 did receive over \$2.3M in HIRF and ECP funding early this month, but have

asked the Ministry for an extension as some of these projects require paving and asphalt. Our request was denied but we are able to divert this money to other projects.

- The Moose FM radio-thon fundraising will go towards the purchase of an anesthetic gas machine for the OR program
- Board Members were invited to ask questions.

7.2 Chief Nursing Officer Report: (I. Boucher)

- The CNO provided the following overview:
 - Internally, we have an 87% fully vaccinated rate for MICs and 94% for first dose
 - We don't have any COVID cases in our area but Sudbury is in a different position
 - The Emergency department Total ER visits for Q1 were provided for information as well as the CTAS levels and wait times, length of stay in emergency for high urgency patients not admitted to hospital and all patients admitted to hospital
 - CTAS levels 4 & 5 which are less urgent and non-urgent are the bulk of our ER visits
 - Experiencing some challenges with our wait times for low urgency patients who are not admitted to hospital; the provincial target is 4 hours; we have a few sites that have exceeded that target due to transportation, diagnostic testing or activity in the Emergency department
 - Doing fairly well with wait times for CTAS levels 1 & 2 who are not admitted; the provincial target for this indicator is 8 hours
 - Numbers for length of stay for admitted patients are good
 - Continue to experience pressures with respect to capacity to admit; seeing a rise in our occupancy rates in all three hospitals in the last few months
 - We have resumed endoscopies at AGH
 - Monitoring to ensure we have adequate staff to keep providing this service
 - We continue to recruit for all our sites for RNs and RPNs; we have full-time vacant positions in some of our sites but no applicants
 - We were approved by the ministry for the CCPN program that provides a \$10,000 incentive for one year; we advertised for two CCPN positions; in order to be eligible for this program, a nurse must not have worked for the last 6 months and must be able to start by November 15th
 - We have two agency nurses providing services at AGH which allowed us to provide ACLS training to our staff, ER training and give nurses vacation time
 - Accreditation - reviewing governance action plan later in the meeting; we don't have a schedule yet for the online survey; received feedback from TDH that underwent accreditation recently – they were asked about their ethical framework, patient involvement, strategic planning, quality framework and integrated risk management; this will be reviewed to prepare for our accreditation
 - Flu season has started; we have started our immunization campaign within MICs
- 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:
 - Our physicians and nurses are working very hard as they are working short-staffed; down to two physicians and one NP at LMH; need to recruit at least three physicians to work comfortably again
 - We have some leads for physician recruitment in Cochrane for the new year; we have been meeting some physicians through Zoom; we have two physicians who

will be doing both office and ER in the next two months and at least one is thinking of relocating to the North sometime soon

- We are seeing some EDLP locums returning to AGH with hopes that they return as permanent locums and we're seeing more ER locums from TDH taking shifts
- As some of the locums are having difficulty looking after ER and in-patients after hours and on weekends, MICs is looking at hiring someone to do in-patient rounding thus alleviating the pressure on the ER physician; this is normally done by the patient's family physician but we are now have many orphan patients due to physician retirements
- We have been experiencing over capacity at some of our hospitals as a result of HSN being over capacity; our patients have to wait longer for transfers and we have been asked to repatriate sooner to alleviate the capacity pressures
- A board member asked if we could fast track the IMGs
- There are different quality of IMGs; there are some 3rd year medical students who are just as strong depending on their training but they still require a supervisor
- One IMG was interested in coming to Cochrane but needed a supervisor; it would be very challenging for our physicians as they are already overwhelmed and can't take on the extra responsibility

8.2 Medical Advisory Committee Minutes:

- Minutes of the MAC meeting held September 15, 2021 were provided for information.

9.0 **ONTARIO NORTH / MOHLTC Business** (P. Chatelain)

9.1 The OHA response letter to Premier Ford regarding healthcare worker vaccination was provided for information

- The letter is a group response from a number of hospitals
- There was an OHA update today; premier has some reservations regarding mandating vaccination in acute care
- The OHA is pressuring the ministry in making a decision soon

9.2 Legal Opinion Update

- The Board of Directors and Executive Team received a letter from an employee regarding the provincial vaccination mandate and requested a legal opinion
- The lawyer stated that the letter is based on templates being circulated in anti-vaxxer circles and, in short, has no merit.
- It is based on assumptions of the law that are wholly inaccurate e.g. "The 1960 Canadian Bill of Rights affirms that the Canadian nation is founded upon principles that acknowledge the supremacy of God." These inaccurate statements are contained throughout this letter. Her "God-given right" to put others at risk by refusing health and safety requirements is not protected by any federal and provincial privacy law. No one is forcing any medical treatment upon her. She has a choice between getting the vaccine and keeping her job or be terminated.
- The letter is a blatant attempt to intimidate the employer when the organization is simply implementing a provincial mandate on safety in the workplace. No one at MICs is at any legal risk in following the provincial mandate. This letter does not change the legal situation in any way.
- MICs has every right and obligation to protect its staff, residents and patients.

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

- N/A

11.0 Physician & HR Recruitment (P. Chatelain)

- N/A

12.0 Indigenous and French Language Issues (P. Chatelain)

- The FLS Report Highlight North East 2019-2020 was provided for information.

13.0 Site Business (D. Delaurier)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 September 2021 Board Effectiveness Survey Results

- 10 out of 12 surveys were submitted.

14.2 October 2021 Board Effectiveness Survey

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

14.3 Strategic Planning Update – P. Chatelain

- The performance measures for Q1 were provided for information.

14.4 Accreditation – I. Boucher

- The government action plan was provided for information.
- This plan will be brought to the Ad Hoc committee for discussion
- Item 2.3 – recommend member of PFAC attend the Quality Committee meetings quarterly; there are two individuals who would be interested in participating
- Item 10.5 – recommend sharing a patient story to the Quality Committee on a quarterly basis

15.0 In Camera

15.1 Motion to go in camera

Moved by: P. Dorff

Seconded by: J. Gibson

15.2 Physician privileges

15.3 Motion to go out of in-camera

Moved by: A. Zsigmond

Seconded by: B. Dennis

15.4 Approval of physician privileges

Motion to approve hospital privileges for EDLP physicians Dr. Christopher Poss, Dr. Marie Turcotte, Dr. Fady Youssef, Dr. Linn Milligan and Dr. Thomas Campbell in the ER/Critical Care Department

Moved by: A. Zsigmond

Seconded by: J. Gibson

Be it resolved,

THAT the MICs Board of Directors approve Locum Tenens privileges for EDLP physicians Dr. Christopher Poss, Dr. Marie Turcotte, Dr. Fady Youssef, Dr. Linn Milligan and Dr. Thomas Campbell in the ER/Critical Care Department as recommended by the MICs Medical Advisory Committee

Carried.

Motion to approve the appointments of Dr. Kyle Harper in the locum tenens category as recommended by the MICs Medical Advisory Committee

Moved by: O. Silverson

Seconded by: F. Morrissette

Be it resolved,

THAT the MICs Board of Directors approve hospital privileges for Dr. Kyle Harper in the locum tenens category as recommended by the MICs Medical Advisory Committee as presented.

Carried.

16.0 MICs News (D. Delaurier)

- The October 2021 MICs Newsletter was provided for information.

17.0 Next Meeting Date (D. Delaurier)

- Wednesday, November 24, 2021 at 6:00 p.m. (LMH Lead Site)

18.0 Upcoming Meeting Dates

- As per agenda

19.0 Adjournment (D. Delaurier)

- There being no further business, the meeting adjourned at 7:51 p.m.

CHAIR, Bingham Memorial Hospital

CHAIR, Anson General Hospital

CHAIR, Lady Minto Hospital

SECRETARY, MICs CEO