

Minutes of the Meeting of the MICs Board of Directors
Wednesday, March 23, 2022 – 18h00
Via Zoom (LMH Lead Site)

ANSON GENERAL HOSPITAL	
x	Danielle Delaurier – Chair
R	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
R	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
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
x	Melissa Laderoute – BMH Board Candidate
x	Joyce Rickard – Director of Care – Executive Lead of Long-Term Care
R	Laurie Bouvier – MICs Infection Prevention and Control 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:

Moved by: F. Morrissette

Seconded by: O. Silverson

Be it resolved,

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

Carried.

3.0 Trustee Education / Presentations

3.1 Trustee Education/Presentations

- The Director of Care presented the COVID Outbreak Debrief for South Centennial Manor for the period of January 17th to February 18th
- The first case started on the 17th where a resident was tested positive followed by four more the next day; the PHU was advised and an outbreak was declared
- Critical care report was submitted to the MOHLTC and IPAC measures put in place
- housekeeping increased cleaning and environmental audits; signage was posted on all doors coming into the manor; all activities were stopped; dining room was closed; families were notified; organized COVID testing for staff; visitation was paused
- Two COVID ward rooms were created, one for males and one for females
- As there were no new cases after 10 days, the outbreak was declared over on Feb. 11th
- A debrief was held on Feb. 18th for support services, nursing, Mat Man, maintenance, IPAC and PHU to discuss what went well and what could have gone better.
- A presentation will be made to the Resident Council at a later date
- MOHLTC inspection last week resulted in a few recommendations but nothing out of the ordinary

4.0 Approval of Minutes (P. Dorff)

- 4.1 Minutes of the MICs Board of Directors meeting held February 23, 2022 were provided for information.

Motion:

Moved by: B. Dennis

Seconded by: D. O'Connor

Be it resolved,

THAT the MICs Board of Directors approve the minutes of the meeting held February 23, 2022 as presented.

Carried.

5.0 Follow-Up Items

5.1 Review of the 2021-2022 Board Work Plan

- The Board Work Plan was reviewed for the month of March.
- All items are being presented today

6.0 MICs Finance

6.1 January 2022 Operating Statements – G. Waghorn

- The CFO presented the operating statements for all three sites
- We are currently preparing for the year end audit
- There are no significant changes from last month
- There could be some adjustments made by the ministry for COVID funding

BMH

- BMH is operating at a surplus of \$146,564 at end of January 2022
- Total Operating Revenue = \$7,760,242
- Total Operating Expenses = \$7,613,678

AGH

- AGH is operating at a surplus of \$1,069,068 at end of January 2022
- Total Operating Revenue = \$10,337,156

- Total Operating Expenses = \$9,268,038

SCM

- SCM is operating at a deficit of (\$191,068) at end of January 2022
- Total Operating Revenue = \$5,339,208
- Total Operating Expenses = \$5,530,276

LMH

- LMH is operating at a deficit of (\$118,449) at end of January 2022
- Total Operating Revenue = \$13,565,266
- Total Operating Expenses = \$13,683,715

VM

- VM is operating at a deficit of (\$81,995) at end of January 2022
- Total Operating Revenue = \$2,716,716
- Total Operating Expenses = \$2,798,711
- Board members were invited to ask questions.

Motion to approve January 2022 Operating Statements

Moved by: D. O'Connor

Seconded by: B. Dennis

Be it resolved,

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

Carried.

6.2 Approval of Operating Budget – G. Waghorn

- The CFO presented the 2022-2023 budgets for all sites.
- This is the second year that the ministry did not ask for an operating budget submission but we still need to get it approved

BMH

Revenues:

- The projected budgeted operating deficit of \$(539,081)
- Assumed a 2% Base - Increase in MOH funding = \$135,555
- Increase in budgeted ALC days and related revenue
- Recovery for the regional lab position

Expenses:

- Salaries
 - Budget increase by \$299,868
 - Increase of 1% in all salary groupings except executive salaries which are still frozen
- Added HR support - split between all 3 sites
- A/P purchaser split between MICs was fixed
- EH Nurse added, split between MICs
- Increased management time in support services (shared MICs management position + share of onsite supervisor time)
 - Increase in hours for Rosedale RPNs - direct resident care
 - Increased hours in lab however, note BMH is carrying a Regional position that we are reimbursed for
 - 0.2 FTE added for Ultrasound
 - Dietitian budget changed to reflect actual practice pattern

- Medical Staff Remuneration - increased to reflect compensation arrangement for Dr. Gray
 - Employee Benefits calculated out at 30% of salaries this year
 - Other Supplies increased by \$37,450 to incorporate estimates for increases in insurance and overall inflationary impact
 - Drug budget left as is because it was not fully utilized in 21/22

AGH

- The projected budgeted operating deficit is \$(861,062)
 - Revenues:
 - Assumed a 2% base; increase in MOH funding = \$196,73
 - OHIP and other patient revenue – increase in revenue by \$1,066,635; we took over administration of the AGH AFA ER contract; net impact to bottom line is zero (revenue = expense)
 - Recovery for Regional lab position
- Salaries:
 - Budget increase by \$535,963
 - Increase of 1% in all salary groupings except executive salaries which are still frozen
 - EH Nurse added, split between MICs
 - Reception hours are increased to accommodate pandemic hours
 - Medical Records- more dedicated in-house
 - Added HR support- split between all 3 sites
 - Increased management time in support services (shared MICs management position + share of onsite supervisor time)
 - Added hours for an RPN position in Emergency
 - Increased hours in lab however, note AGH is carrying a Regional position that we are reimbursed for
 - Dietitian budget changed to reflect actual practice pattern
 - X-Ray- increase of 1 FTE overall- ultrasound, replacement, cover callback
- Medical Staff Remuneration- budget increase of \$1,188,135 reflects AGH AFA contract (see comment above)
- Employee Benefits calculated out at 34% of salaries this year
- Other Supplies increased by \$119,950 to incorporate estimates for increases in insurance and overall inflationary impact
- Built in an increase in drug costs, mostly inflationary

LMH

The projected budgeted operating deficit for LMH = \$(994,108)

Revenues:

- Assumed a 2% Base - Increase in MOH funding = \$233,918
- Overall revenue budget had very little change from prior year
- Increase in Cancer Care Ontario drug recovery related to higher drugs costs associated with the program
- OHIP and other patient revenue - changed the amount associated with the LMH AFA ER contract, net impact to bottom line is zero (revenue = expenses)

Expenses:

- Salaries
 - Budget increase by \$133,915
 - Increase of 1% in all salary groupings except executive salaries which are still frozen

- Additional hours in reception to reflect clinic scheduler position
- Added HR support- split between all 3 sites
- A/P purchaser split between MICs was fixed
- EH Nurse added, split between MICs
- Decrease in management time in support services (shared MICs management position implemented)
- Additional time in lab to reflect current need and staffing plan
- Medical Staff Remuneration- increased to reflect adjustment to LM AFA ER agreement (see comment in revenue section)
- Employee Benefits calculated out at 34% of salaries this year
- Other Supplies decreased by \$100,000 overall
 - Increased lab supply budget
 - IT budget reduced to reflect actual planning
 - Anticipated increase in insurance
 - Overall inflationary adjustment where necessary
 - Medical and Surgical budget adjusted for utilization
 - Drug budget was adjusted to reflect change in practice and potential utilization

Moved by: O. Silverson

Seconded by: B. Dennis

Be it resolved,

THAT, the MICs Board of Directors approve the 2022-2023 Operating Budgets for Bingham Memorial Hospital, Anson General Hospital, South Centennial Manor, Lady Minto Hospital and Villa Minto as presented.

Carried.

6.3 February 2022 Capital Report – G. Waghorn

- Highlights this month are BMH water line replacement has started and the AGH Passenger Elevator has been awarded. Negative air units for AGH and BMH are moving forward and these projects will be carried over into next year's capital. LMH ER Negative Air requires more engineering and a phased construction approach as the new cost will be approximately \$170,000. This has been carried over into next year's capital budget as the ER will require added construction to accommodate the new design.
- All LMH Honeywell Energy Renewal change orders are interrupted due to materials being delayed. However, the MOH may possibly extend the ECP Grant which would provide the much needed time and funds to complete the projects. Delay with delivery and unavailability of materials continues. Contractors are still difficult to obtain.
- We were advised today that some of the HIRF funding has been extended.
- Board members were invited to ask questions. The CFO will provide additional information to answer the board's questions. It was requested to have the LMH Maintenance Manager attend the April board meeting to speak on capital reports.

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:

- We have extended our deadline for 3rd dose vaccine (policy) for LTC staff and Essential Care Givers from March 14 to March 31, 2022 as the Ministry of Long-Term Care has revoked Directive #6.
- Most of our LTC residents have received their fourth vaccine and most of the staff have received their booster shot.
- We continue to run and staff three testing centers; 2 days per week in Cochrane and in Iroquois Falls, and 1 day in Matheson and have been funded to continue into 2022-2023.
- We have submitted the SCM Redevelopment Financial Budget to the external auditors for their review. The financials and a communication plan will then be submitted to the Ministry of Long-Term Care for their review.
- Capital Projects are coming in over budget and some may need to be deferred due to cost. Other projects are being delayed due to material and contractor unavailability. Significant delayed projects include Lab Phase II at LMH, Air Handling Unit for VM. The work on the freight elevator at AGH has begun as well as the Medical vacuum system upgrade at BMH. The Ministry of Health is asking hospitals for the status on the projects that are delayed. We have received an extension for the HIRF funding grants.
- We gave notice to Marsh that we will be ending our contract with them and joining HIROC.
- The Honourable Greg Rickford will be in Cochrane tomorrow and in I.F. on Friday to make some funding announcements.
- Board Members were invited to ask questions.

7.2 Chief Nursing Officer Report: (I. Boucher)

- The CNO reported on the following items:
 - Continue to manage the COVID-19 pandemic; looking at the activity within our area. The positivity rate is higher than the rest of the province; we are having conversations regarding the recovery phase.
 - Recruitment and retention efforts are ongoing. Have been seeing applicants come in but we are still reliant on the support of agency nurses.
 - Getting ready for year-end inventory in Pharmacy and onsite visit by Ontario College of Pharmacists.
 - Reviewing process and opportunity to conduct mock tracers as we prepare for Accreditation on-site survey.
 - Making progress with the ONE clinical working groups
 - Looking to introduce new infusion pumps within MICs; smart pump delivers safe infusion for patients
- 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:
 - No new updates regarding physician recruitment; working on current leads
 - Continue to be very overworked everywhere but especially in Cochrane
 - We continue to utilize EDLP locums at AGH
 - Introducing Point of Care Testing (POCT) at LMH; will be rolled out in May, June, July; this will reduce lab call-backs and associated costs
 - COVID cases in our district are the same as last month; they haven't gone down; we have double the cases in our PHU than the rest of the province; we are not

- seeing any significant hospitalizations or patients being sent to ICU
 - Surgical program is almost working at full capacity
 - AGH is seeing a slight delay in endoscopies due to staff shortages; hoping to resume in May
- Board members were invited to ask questions.

8.2 Medical Advisory Committee Minutes

- Minutes of the MAC meeting held January 19, 2022 were provided for information.

9.0 **Ontario Health North / MOHLTC Business** (P. Chatelain)

9.1 N/A

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

10.1 The minutes of the Quality Committee meeting held January 12, 2022 were provided for information

10.2 Critical Incidents Report

- The report presented covered Q2 and Q3 for 2021-2022
- Hospital Critical Incidents: 1 fall resulting in injury in Q2
- LTC Critical Incidents by Site: 1 incident at SCM for Q3 and 1 incident at Villa Minto for Q2 and Q3
- LTC Critical Incidents by Category: two abuse/neglect causing harm or risk of harm to the resident reported in these reporting periods (resident to resident); one incident of improper/incompetent treatment of a resident that results in harm or risk to a resident
- Board members were invited to ask questions.

10.3 Corporate Scorecard

- Q3 data was provided in the report; it was presented to the Quality Committee meeting earlier this month
- These are key performance measures that are tied into various agreements or plans
- Our overall performance for Q3 is very good; only 2 indicators are underperforming
- Patient Experience (ER): AGH (98%), BMH (89%), LMH (67%)
- Medication Reconciliation at Discharge: all three sites are in the red
- There are four indicators in the scorecard that will be included in the Quality Improvement Plan

10.4 Approval of 2022-2023 Quality Improvement Plan

- HealthQualityOntario paused the QIP program for 2020-2021 so that hospitals could focus on the management of the pandemic and we did not need to submit a plan
- Last fall, we were notified that we should be developing and submitting a plan for 2021-2022 fiscal year which was done; it was approved by the board in January
- We have received the guidance documents in preparation for the 2022-2023 QIP
- There is no progress report due this year
- The narrative that was submitted speaks to whether or not we have met our targets
- There are no mandatory indicators in this year's plan
- There are only four priority indicators identified for hospitals on the plan:
 - Improve care transitions for patients by sharing the discharge summaries with their primary care providers
 - Improve the patient experience in the in-patient department by providing information about managing their health after discharge

- Prevent adverse medication events by endeavouring to complete medication reconciliation on all discharged patients
- Support the culture of reporting workplace violence by having a discussion during our Leadership Walkrounds
- We will not be submitting a formal work plan for long-term care
- A few corrections were made to the document since it was provided to the board
- Our goal is to reduce number of workplace violence incidents by 10%

Moved by: B. Dennis

Seconded by: F. Morrissette

Be it resolved,

THAT the MICs Board of Directors approve the 2022-2023 Quality Improvement Plans for Anson General Hospital, Bingham Memorial Hospital and Lady Minto Hospital as presented.

Carried.

11.0 Physician & HR Recruitment

11.1 N/A

12.0 Indigenous and French Language Issues

12.1 N/A

13.0 Site Business (P. Dorff)

13.1 Anson General Hospital:

13.11 Hospital Service Accountability Agreement & LTC Service Accountability Agreement

Moved by: F. Morrissette

Seconded by: D. Delaurier

Be it resolved,

THAT the AGH Board of Directors approve the 2022-2023 Hospital Service Accountability Extension Agreement for Anson General Hospital and the Long-Term Care Service Accountability Extension Agreement for South Centennial Manor as presented.

Carried.

13.2 Bingham Memorial Hospital:

13.21 Hospital Service Accountability Agreement

Moved by: B. Dennis

Seconded by: O. Silverson

Be it resolved,

THAT the BMH Board of Directors approve the 2022-2023 Hospital Service Accountability Extension Agreement for Bingham Memorial Hospital as presented.

Carried.

13.22 Approval of New Board Member

Moved by: O. Silverson
Seconded by: J. Gibson (via email vote)

Be it resolved,

THAT the BMH Board of Directors approve the appointment of Melissa Laderoute to the BMH Board of Directors for a three-year term as presented.

Carried.

13.3 Lady Minto Hospital:

13.31 Hospital Service Accountability Agreement and LTC Home Service Accountability Agreement

Moved by: D. O'Connor
Seconded by: P. Dorff

Be it resolved,

THAT the LMH Board of Directors approve the 2022-2023 Hospital Service Accountability Extension Agreement for Lady Minto Hospital and the Long-Term Care Service Accountability Extension Agreement for Villa Minto as presented.

Carried.

14.0 Partnership Business (Bob Dennis)

14.1 February 2022 Board Effectiveness Survey Results

- 11 out of 12 surveys were submitted.

14.2 March Board Effectiveness Survey

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

14.3 Ratification of SEIU Agreement

- There are no financial implications; worked mostly on language and scheduling; came up with a local contract
- The board will be provided with a summary of the agreement changes at the next meeting in order to approve the ratification

15.0 In Camera

15.1 Motion to go in camera

Moved by: B. Dennis
Seconded by: D. Delaurier

15.2 Worker Bees' Request for Funding

15.3 Discussion of Medical Staff hospital privileges

15.4 Motion to go out of in-camera

Moved by: B. Denis
Seconded by: F. Morrissette

15.5 Motion to approve the Worker Bees' Request for Funding

The board is not comfortable approving this request at this time.
The hospital has already paid over \$300,000 in physician recruitment
MICs will pay for a booth at the Rural and Northern Physician Recruitment Fair in Ottawa for the recruiter to attend at a cost of \$3,200

The request will be deferred.

Given the surplus situation and without any formal budget, we want a commitment from other municipalities before we consider the funding request.

Paul will write a letter to the worker Bees on behalf of the board chairs to advise them of their decision.

15.5 Motion to approve hospital privileges

- The Medical Advisory Committee has reviewed their applications and have recommended the approval of their hospital privileges

Moved by: D. Delaurier

Seconded by: F. Morrissette

Be it resolved,

THAT the MICs Board of Directors approve the appointment of ELDP physician: Dr. Tarek Loubani as locum tenens in the Emergency Department and Katherine Kwietnioski in the courtesy category as a midwife as recommended by the MAC as presented.

Carried.

16.0 MICs News (P. Dorff)

- March 2022 MICs Newsletter was provided for information.

17.0 Next Meeting Date (P. Dorff)

- Wednesday, April 27, 2022 at 6:00 p.m. (BMH Lead Site) via Zoom

18.0 Upcoming Meeting Dates

- As per agenda.

19.0 Adjournment (P. Dorff)

- There being no further business, the meeting adjourned at 8:40 p.m.

CHAIR, Bingham Memorial Hospital

CHAIR, Anson General Hospital

CHAIR, Lady Minto Hospital

SECRETARY, MICs CEO