

Minutes of the Meeting of the MICs Board of Directors

Wednesday, January 24, 2024 – 18h00

Via Teams (BMH Lead Site)

ANSON GENERAL HOSPITAL	
X	Danielle Delaurier – Chair
X	Ann Zsigmond – Vice-Chair
X	Fern Morrissette – Treasurer
X	Ben Lefebvre – Municipal Representative
BINGHAM MEMORIAL HOSPITAL	
X	Oswald Silverson – Chair
X	Melissa Laderoute – Vice-Chair
X	Christina Jessup – Treasurer
X	Dave Dymont – Municipal Representative (depart at 1:21)
LADY MINTO HOSPITAL	
X	Pat Dorff – Chair
X	Derek Archibald – Vice-Chair
X	Denis Clement – Treasurer
X	Sylvie Charron-Lemieux – Municipal Representative
MICs GROUP OF HEALTH SERVICES	
X	Paul Chatelain – MICs Chief Executive Officer
R	Isabelle Boucher – MICs Chief Nursing Officer
R	Dr. Joey Tremblay – MICs Chief of Staff
X	Dr. Auri Bruno-Petrina – MICs President of Medical Staff
GUESTS	
X	Tiffany Smith – MICs Executive Assistant (<i>Recording Secretary</i>)
X	Gail Waghorn – MICs Chief Financial Officer

1.0 Call to Order & Chairs Remarks (O. Silverson)

- 1.1 Land Acknowledgement: We would like to acknowledge that we are hosting this meeting from the traditional territory of the Cree, Ojibwe, Ojicree, Algonquin and Métis Peoples of Apitipi Anicinapek Nation and Taykwa Tagamou Nation, located in Treaty 9 Territory. Miigwetch to all indigenous and Métis partners for sharing their land with us.
- 1.2 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 (O. Silverson)

The agenda was reviewed.

Motion:

Moved by: S. Charron-Lemieux

Seconded by: P. Dorff

Be it resolved,

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

Carried.

3.0 Trustee Education / Presentations (CEO)**3.1 ONE Initiative Bulletin**

- The CEO reviewed the bulletin provided on the ONE Project. We are on schedule to go live in May 2024.
- We are adhering to the budget as planned.
- A patient portal to EMR may come with future enhancements but is not part of the initial project.

3.2 ONE Project Newsletter

- The ONE Project newsletter was provided for information.

4.0 Approval of Minutes (O. Silverson)

4.1 Minutes of the MICs Board of Directors meeting held November 22, 2023, were provided for information.

Motion:

Moved by: S. Charron-Lemieux

Seconded by: D. Delaurier

Be it resolved,

THAT the MICs Board of Directors approve the minutes of the meeting held November 22, 2023 as presented.

Carried.

5.0 Follow-Up Items (CEO)**5.1 Review of the 2023-2024 Board Work Plan**

- The Board Work Plan was reviewed for the month of January
- Board Peer and Board Chair Assessments will be distributed following the meeting
- CoS Goals and objectives from the performance review are with the Board Chairs for follow-up.
- Will review the QIP and Corporate Scorecard tonight

5.2 Review of Board Self-Assessment Tool Results

- Discussed the results of the OHA Board Self-Assessment Survey
- CEO acknowledged the key areas identified for improvement:
 - 1.16 The board has a sound plan for the Chief of Staff's development and

- succession.
- 5.5 Board materials arrive sufficiently in advance to allow for board members to prepare properly for the meetings.
- 5.11 Virtual meetings allow directors to contribute as effectively as in-person meeting to decision making.
- 5.9 The Board's meetings without management focus on the governance process and support from management.
- Board Members were invited to ask questions
- Action plan to be discussed at the upcoming Ad Hoc Meeting

6.0 MICs Finance (CFO)

6.1 November 2023 Operating Statements

- The CFO gave an update of the financial statements for all sites, period ending November 2023
- Q3 will be reported to MOH on January 31, 2024

BMH

- In an operating deficit of (\$789,410) at the end of November
- Operating Revenue: \$6,265,307
- Operating Expenses: \$7,054,718

AGH

- In an operating deficit position of \$435,888 at the end of November
- Operating Revenue: \$8,886,499
- Operating Expenses: \$9,322,386

SCM

- In an operating deficit of (\$98,976) at the end of November
- Operating Revenue: \$5,131,053
- Operating Expenses: \$5,032,076

LMH

- In an operating deficit of (\$1,474,719) at the end of November
- Operating Revenue: \$11,852,050
- Operating Expenses: \$13,326,769

VM

- In an operating deficit of (\$39,085) at the end of November
- Operating Revenue: \$2,570,161
- Operating Expenses: \$2,531,076
- Board Members were invited to ask questions

Motion to approve November 2023 Operating Statements

Moved by: P. Dorff

Seconded by: F. Morrissette

Be it resolved,

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

Carried.

6.2 Capital Infrastructure Budget Update

- The CFO provided an update on the Capital Building Infrastructure Projects report provided from our Building Services department.
- 2022-2023/2023-2024 Capital Projects Report presents the status of all the projects including those that have carried over into the 2022-2023 year due to the time frame it takes from the starting point of grant approval to the date of project completion.
- Board Members were invited to ask questions

6.3 Cash Flow Update

- CFO provided an update on the cash flow and investment statement.
- We continue to monitor the cash flow and will submit another cash advance request for 2024-2025 in February to help finance operations during the performance improvement plan process.

6.4 Legion Grant

- The 2023 Charitable Foundation Grants were approved. BMH will receive \$12,309.00 to purchase an Arjo Alenti Tub Chair Lift and AGH will receive \$10,000 for the purchase of a Vital Signs Monitor.

7.0 **Presentations/Reports** (O. Silverson)

7.1 Chief Executive Officer Report: (CEO)

- Our cash flow challenges continue. We have received two cash advances now. Meetings continue with the Ministry and OHA, but details on funding are not imminent.
- The architect has completed and submitted the working drawings at 90%. We are working on the SCM Redevelopment Campaign to raise \$8M over 5 years. We are still waiting for any new funding announcements to the Construction Funding Subsidy. I will be attending another delegation with the Minister of Long Term Care and the Mayor of Iroquois Falls at the ROMA conference on January 22, 2024.
- A very serious critical incident occurred at SCM in December which resulted in an OPP investigation and Ministry Inspection. The results of the report is still pending.
- The AGH Automatic Transfer Switch continues. BMH Rosedale Expansion and the Window/Door project are now complete. The Pharmacy Upgrade is near completion. The following projects are in progress at LMH; Replacement of Flooring, Door Fob/Alarm System, Cabinet Unit Heaters Replacement, and the Parking Lot Lighting (receptacles). The SCM roof is nearing completion with capping remaining.
- Our CT scanner proposal has been endorsed by Ontario Health North and is now with the Ministry of Health (HARP) division for final approval.
- We have hired our new Chief Financial Officer, Derek Wilson, who will commence on April 1, 2024.
- The annual Moose FM Radiothon raised \$14,450. The proceeds will go towards the purchase of 3 portable ultrasound machines.
- We have signed a contract with a private physiotherapy company (Lyrette Physio) to care for outpatients. MICs will still continue with inpatients, residents and outpatient bundled care (post hip and knee replacements). The communication will be going out shortly.
- Board Members were invited to ask questions.

7.2 Chief Nursing Officer Report: (CNO)

LMH

- Emergency Department:

-
- New staffing pattern effective January 8, 2024 eliminating second RN on nights in ER that was implemented April 1, 2023 in conjunction with POCT implementation.
 - New overhead lighting ordered for trauma room.
 - Oncology Department:
 - Site visit from Sudbury Cancer Center went very well and minor policy revisions completed after visit.
 - AGH oncology nurse required to attend regularly as per site visit report, monthly or bimonthly to maintain competence.
 - Program has been very busy and Mondays will be designated for non-chemo infusions and catching up on deskwork to decrease backlog.
 - Pharmacy clerk to learn and take over Cancer Care Ontario e-billing.
 - Unit 4:
 - RN full time staffing pool more stable with return from Mat leave, but struggling with RPN staffing with resignation (moving) of several RPNs. Second agency RPN coming to LMH and will require a third from the area to help cover missing shifts.
 - Telemetry units still not operational, GE stated they are working on a solution.
 - Operating Room:
 - No applicants received for the posted OR RN relief position.
 - MDR:
 - Maintenance looking at option to install second washer disinfector no longer utilized at AGH as a spare.

AGH

- Staffing:
 - Continue to utilize Agency staff to support increase in RN staffing shortage (an additional FT RN vacancy anticipated in the New Year due to internal movement).
 - RPN pool has had some movement but staffing remains stable.
 - RAI hours will no longer be scheduled as Home and Community Care completing assessments (duplication and no longer needed).
- Education:
 - Meditech Expanse training has started for super-users and trainers.
 - GE onsite in December to provide new infant warmer training.
- Census:
 - Seeing an increase in the number of ER visits and admissions to acute in Q2 and Q3.
 - Discharges on CCC to LTC leading to lower census.
- Specialty Clinics:
 - Endoscopy program continues to remain on hold.
- Construction:
 - Exterior windows in active TV lounge (soon-to be spiritual room) were replaced.
 - AGH Auxiliary donated custom blinds for spiritual room installed before Christmas; further funding provided for other items.
- Projects:

- Pressure Injury Quality Improvement Initiative remains ongoing- Stryker to provide on-site education in the New
- Year; repeat pressure injury prevalence audit put on-hold during the late summer/Fall due to staffing.

BMH

- Acute Census has remained < 5 patients generally, with slight increase over the holidays. ALC census has remained zero up until recent weeks when ALC-rehab was admitted.
- Staffing:
 - remains tight with very limited PT workers on all schedules; reduced use of agency RNs is expected to be only short term with anticipated maternity leave and one maternity leave expected to return is not now. 3 maternity leaves in the PT PSW pool as well.
 - Due to low census and budgetary constraints, reduction of one RPN on acute care during the night shift. Implemented strategy to utilize all RPNs across both LTC and acute care again.
- Capital purchases:
 - The purchase of the new ultrasound machine for BMH ER (point of care) is on hold.
 - LTC: Five new beds and mattresses expected to arrive in January.
- Special projects:
 - Working to finalize the hypothermia policy.
 - New admissions flow via RNAO and electronic charting in PCC in LTC has a go live date in March 2024 and is a large project the three homes are working together on.
 - Ongoing Meditech One/Expanse for go live in May 2024 with staff required for education and work flow occurred in December, and again end of Jan/early Feb.
- Infection Prevention and Control (IPAC) (submitted by Kelly Baxter)
 - IPAC welcomed Maegan Michaud to the role of LTC IPAC/Quality Leader and she will oversee IPAC at SCM and VM
 - Team member Influenza and COVID vaccines were offered in-house there was low uptake for both COVID and influenza. Many people have had the actual COVID illness reducing the ability get the vaccine.
 - All residents and CCC patients were offered influenza, COVID and RSV vaccine.
 - SCM had a COVID outbreak lasting 23 days. It affected 42 residents and 20 team members.
 - IPAC policies were updated as updated best practices/guidelines were made available with the IPAC committee reviewing and approving at IPAC committee meetings.
 - The IPAC goals and objectives were generated and approved for the next 2 years
- Pharmacy Services (submitted by Khaleel Sakeer)
 - **Pharmacy Upgrade:** Major pharmacy upgrade (Compounding area) underway. Phase 1 of the project is almost complete. Pharmacy staff to move into new space in coming weeks. This will ensure we are compliant with NAPRA (National Association of Pharmacy Regulatory Authorities) standards.
 - **Meditech Expanse:** completed MedPower training pharmacist session.

- **OCP annual assessment requirement:** completed After Hours Pharmacy Access PHA-075 and Ninety Days Medication Review PHA-095 policies
- **Pharmacy & Therapeutics Committee:** working on Management Prescribing and Administration of Sublocade policy and Transfer of Medications between MICs Sites policies. A new list of medications added to our formulary list, as per regional recommendation to have access to order sets.
- **Antimicrobial Stewardship committee (26-09-2022):** Two polices approved at MAC (Antimicrobial Stewardship: Preserving our Antibiotic Resources at MICs and Antibiotic -Formulary Automatic Substitution.
- **Care Transitions/Hospice Services (submitted by Rebecca Swartz)**
 - Discharge Referrals (Q3 2023/24):
 - AGH: 48 BMH: 2 LMH: 6
 - A total of 47 (met criteria) post-discharge phone calls were made
- **Change Management (submitted by Dana Rugless)**
 - Payroll Parallel Testing is currently underway with approximately 70% complete. There is plans for a total of 3 parallel tests to ensure that the system operates within our current workflow for payroll. Rejeanne has been doing an exceptional job at leading our payroll team through testing.
 - The MICs ONE Testing & Training Team has been planning for our site-specific parallel testing, scheduled between January 22-February 9, 2024. The team has been accessing recent charts to develop scripts to test our current workflow within MEDITECH Expanse 2.2.
 - Shavone has been coordinating the Train-the-Trainer sessions this month, in preparation for Super User and End User training in the next few months. The Regional Training Team produced a number of educational material to aid in the training process.
 - Change impacts to our current workflows are being reviewed and updated based on feedback from training.
 - Dan Demers has reported that the majority of the needed devices for implementing MEDITECH Expanse 2.2 are in and almost ready to be tested.
- Board Members were invited to ask questions

8.0 Medical Staff (MICs Chief of Staff)

8.1 Chief of Staff Report

- MICs Chief of Staff provided the following report.
 - Recruitment:
 - No new full-time physicians since the last meeting in November.
 - We still need 1-3 physicians in each community.
 - Many new and future grads of July 1, 2024, interested in locuming in the ER and/or as a hospitalist.
 - New graduate locum positions hold the potential to attract future recruits
 - Emergency Departments:
 - ER's remain stable with the support of EDLP physician program at AGH (50%), BMH and LMH have 1-2 locums per month while the rest are local MD's.

- CTSLPE stipend program ends March 31, 2024. Lady Minto benefited from the program especially during the summer months. LMH has a health pool of ER locums for this upcoming summer and hopefully their high interest in our ERs continue when the stipend is terminated on April 1, 2024.
 - Operating Room:
 - LMH OR is running well and is supported by Kapuskasing or locums when Dr. Klassen is away. In return, Dr. Klassen supports and works in Kapuskasing when they need a locum.
 - We need to ensure we have a healthy pool of local RNs to maintain a healthy OR program.
 - NOSM/Students/Residents:
 - Two second-year NOSM students starting with Dr. Bruno for “110 ICE” from February 5 – March 3, 2024.
 - Resident Brian McPherrin, son of Drs. Rita Affleck and Larry McPherrin, will be doing a one month ER/Anesthesia placement with Dr. Tremblay from February 12th to March 10, 2024. Another resident will be doing a placement with Dr. Bruno at AGH as well during this time.
 - Respiratory illnesses still at a high prevalence in ER/Ward.
 - Will provide an update on the pilot program of Mental Health Crisis Services by OTN in partnership with TADH at our next meeting.
 - No hospital privileges to review in camera this month.
 - Board Members were invited to ask questions by emailing Dr. Tremblay

8.2 Medical Advisory Committee Minutes

- Minutes of the MAC meeting on November 15, 2023, were provided for information.
- Board Members were invited to ask questions.

9.0 **Ontario Health North / MOHLTC Business (CEO)**

9.1 N/A

10.0 **MICs Quality Committee (CEO for CNO)**

10.1 2024/2025 Quality Improvement Plan

- Excellent Care for All Act requires hospitals to submit a QIP on an annual basis. This is generated after reviewing the guidance documents and looking at what the proposed indicators are for the year. Stakeholder engagement also develops what the plan will look like. This is due April 1, 2024.
- Quality Improvement Plan proposed indicators for 2024-2025 were reviewed for Hospitals, Interprofessional and Primary Care, and Long-Term Care.
- Next Steps are to present the draft plans for review to the Quality Committee, and then present them to the Board for approval.
- Board Members were invited to ask questions.

10.2 2023-2024 Corporate Scorecard

- Corporate Scorecard was reviewed for Q2.
- CEO will inquire to see if data is available to provide the total number of complaints reported.
- Board members were invited to ask questions.

10.3 Minutes of the Quality Meeting held September 13, 2023

- Minutes of the September 13, 2023 Quality Committee meeting were provided for information.

- Board Members were invited to ask questions.

11.0 Physician & HR Recruitment (CEO)

11.1 Recruitment Fair

- CEO submitted a request to the Worker Bee committee requesting financial support to have two MICs employees attend the recruitment fair. The request was denied by council.

Motion: approve to fund up to two individuals from MICs Group of Health Services to attend the Alberta Recruitment Fair.

Moved by: D. Clement

Seconded by: B. Lefebvre

Be it resolved,

THAT the MICs Board of Directors approve to fund up to two individuals from MICs Group of Health Services to attend the Alberta Recruitment Fair.

11.2 Worker Bee Update

- Worker Bee has submitted another recruitment ad in the Enterprise.

12.0 Indigenous and French Language Issues (CEO)

12.1 Évaluation des organismes désignés en vertu de la Loi sur les services en français

- We have received notice confirming that Villa Minto remains compliant with the designation requirements outlined in the *French Language Services Act*.

13.0 Site Business (O. Silverson)

12.2 Anson General Hospital:

- SCM Redevelopment
 - CEO provided an update on the status of the SCM Project; hoping for funding approval within the next month.

12.2 Bingham Memorial Hospital:

- N/A

12.3 Lady Minto Hospital:

- N/A

14.0 Partnership Business (O. Silverson)

14.1 November 2023 Board Effectiveness Survey Results

- Twelve out of 12 surveys were submitted

14.2 January Board Effectiveness Survey

- The survey will be emailed to the Board members following the meeting

15.0 In Camera

15.1 Motion to go in-camera

Moved by: A. Zsigmond
Seconded by: D. Delaurier

15.2 Operating Budgets

15.3 Motion to go out of in-camera

Moved by: D. Delaurier
Seconded by: A. Zsigmond

16.0 MICs News (O. Silverson)

- The December 2023 and January 2024 MICs Newsletters were provided for information

17.0 Next Meeting Date (O. Silverson)

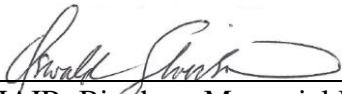
- Wednesday, February 28, 2024 at 6:00 p.m. (AGH Lead Site) via Teams

18.0 Upcoming Meeting Dates

- As per agenda

19.0 Adjournment (O. Silverson)

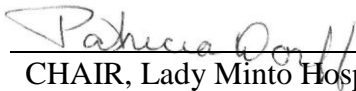
- There being no further business, the meeting adjourned at 8:54 p.m.



CHAIR, Bingham Memorial Hospital



CHAIR, Anson General Hospital



CHAIR, Lady Minto Hospital



SECRETARY, MICs CEO