

WDMH Board of Directors Minutes
Tuesday, November 26, 2024 @ 5:00 p.m.
Dillabough Board room

Present:	Louise Arsenault, Annik Blanchard, Cholly Boland, Janie Desroches, Dr. Brian Devin, Andrea Jewell, Michelle Perry (via Teams), Eric Stevens, Brenda Toonders, David Wattie, Tamara Williams,
Guests:	Sean Burnette (WDMH)
Regrets:	Michelle Blouin, Trisha Elliot, Bruce Millar, Jennifer Milburn, Dr. Geoffrey Peters, Tyson Roffey, Bill Woods
Resource:	Lori-Anne Van Moorsel

No.	Item
1.0	Call to Order In J. Milburn's absence, A Blanchard called the meeting to order at 5:01 p.m. A land acknowledgment was conducted by C Boland.
2.0	Declaration of Conflict of Interest None declared.
3.0	Agenda Check-In The November 26, 2024, Board of Directors agenda was approved by consensus with addition of item 10.4 Atlas Alliance Agreement.
4.0	Review of Minutes: Moved by D Wattie, seconded by K Goulet, that the September 24, 2024 meeting minutes be approved as presented with minor revisions. All in favour. <div style="text-align: right;"><u>Carried</u></div>
5.0	Business Arising None.
6.0	Board Education - Accreditation Janie Desroches, Vice President of Clinical Services and Chief Nursing Executive presented to inform the Board of Directors on the upcoming Accreditation process in November 2025. <ul style="list-style-type: none"> • Accreditation is a valuable process to review all hospital services with a focus on quality and safety. • 8 dimensions of quality reviewed include Safety, Client-Centred Services, Work Life Balance, Efficiency, Appropriateness, Accessibility, Population Focus and Continuity. • A Required Organizational Practice (ROP) is an essential practice that organizations must have in place to enhance patient safety and minimize risk. • Visit from the surveyors will include tracer activities to review material, conduct interviews and group discussions, observation and recording of observations in thirteen different areas. • Board involvement includes survey and interviews. Surveyors will evaluate whether the Board functions as an effective governing body, provides clear direction for the organization, supports the organization to achieve their mandate and their accountability for achieving results.

7.0	<p>Patient Story</p> <p>Sean Burnette, Interim Clinical Manager of Medical/Surgical & Enhanced Care Units, Rehabilitation, Complex Care, Social Work and Clinical Nutrition at WDMH shared the story of an elderly patient who presented to WDMH following a fall down the stairs at home. Case was reviewed by all involved in the patient's care.</p> <ul style="list-style-type: none"> Recommendations were made to: <ul style="list-style-type: none"> review call bell functionality (although determined that patient did not attempt to use call bell) optimize purposeful rounding with all nursing staff review/revise policy documentation optimize bed alarm connectivity with call manager system
8.0	<p>Board Reports</p>
8.1	<p>Quality Committee Report</p> <p>The November 2024 Quality Committee Report was received for information. E Stevens highlighted the education as informative and appreciated the patient story from food services.</p> <p>J Desroches also reviewed the Senior Friendly Hospital Plan noting that as our population ages and lives longer, there is an increase in their use of healthcare. The Senior Friendly Hospital plan focuses on identifying risks, optimizing patient mobility and identifying gaps in services. Many of the items on the plan have been completed or in progress.</p> <p>Moved by D Wattie, seconded by A Jewell, that the Senior Friendly Hospital plan be approved as distributed. All in favour.</p> <p style="text-align: right;"><u>Carried</u></p>
8.2	<p>Medical Advisory Committee Report</p> <p>Our new Dermatology clinic began early October and has already accumulated a six month wait list. B Devin is hopeful our dermatologist will provide additional clinic days.</p> <p>The professional staff are eagerly anticipating the arrival of our new CT Scanner but also very concerned about the downtime installation will inevitably cause.</p> <p>CritiCall Ontario who assists the hospital in gaining access to emergent specialists' services is reducing service to our area and The Ottawa Hospital has begun to act as coordinator for orthopaedic services.</p> <p>Ontario Breast Screening Program (OBSP) has fully expanded the offering of Mammograms to 40-49 age group on a self-referral basis. This will increase screening at WDMH.</p> <p>There is a noticeable increase in chart deficiencies which B Devin intends to address.</p> <p><u>New Services</u></p> <p>GLA:D rehabilitation is rehab for non-surgical hip and knee osteoarthritis patients to identify candidates for research.</p> <p>Remote Care Monitoring allows COPD, CHF, Diabetes and potentially some post-surgical patients to be monitored at home by a nurse. This program was introduced by Montfort in collaboration with the community paramedics and is being investigated in conjunction with the Great River Health Team. It is well received by the community.</p>

	<p><i>Kids come first</i> for low-risk surgeries to alleviate pressures in wait times for pediatric surgery. Currently reviewing feasibility of participating which will likely not take place for another year.</p> <p><i>Essential Caregivers</i> is a regional initiative with the Great River Ontario Health Team to incorporate caregivers as part of the care team. They will receive training on fall prevention, feeding and other safety aspects.</p>
8.3	<p><u>Professional Staff Appointments</u> Moved by T. Williams, seconded by E. Stevens that the following professional staff appointments be approved as presented. All in Favour.</p> <p style="text-align: right;"><u>Carried</u></p> <p>Ms Yanick Gauthier, Associate Midwife with Admitting Privileges, Department of Obstetrics – Midwifery</p> <p>Dr Salima Hassanaly, Term without Admitting Privileges, Department of Surgery – Ophthalmology</p> <p>Dr Mehdi Hegagi, Term with Admitting Privileges, Department of Family Medicine</p> <p>Dr Kala Hickey, Locum with Admitting Privileges, Department of Surgery – General</p> <p>Dr Oscar Osorio-Cruz, Term without Admitting Privileges, Department of Medical Imaging</p> <p>Dr Jana Sheinis-Pickovsky, Term without Admitting Privileges, Department of Medical Imaging</p> <p>Ms Laurence Tsorba, Associate Midwife with Admitting Privileges, Department of Obstetrics – Midwifery</p> <p>Dr Maria Brun-Vergara, Term without Admitting Privileges, Department of Medical Imaging</p> <p>Dr Augusto da Mota Goncalves Filho, Term without Admitting Privileges, Department of Medical Imaging</p> <p>Dr Fatma Eldehimi, Term without Admitting Privileges, Department of Medical Imaging</p> <p>Dr Ramy Mansour, Term without Admitting Privileges, Department of Medical Imaging</p> <p>Dr Oscar Osorio-Cruz, Term without Admitting Privileges, Department of Medical Imaging</p> <p>Dr Maryam Vakili, Term without Admitting Privileges, Department of Medical Imaging</p> <p><u>Changes to Credentialed Staff Privileges for Approval:</u></p> <p>Dr Laurie MacLean <i>From</i> Term with admitting privileges, Department of Surgery – ENT, restricted to own patients with <i>unanticipated</i> requirement for admission following surgical procedure <i>To</i> Term with admitting privileges, Department of Surgery – ENT</p>

		<p>Moved by E. Stevens seconded by A. Jewell that the above changes to professional staff appointment be approved as presented. All in Favour.</p> <p style="text-align: right;"><u>Carried</u></p> <p>Dr Bassem Migally From: Associate without Admitting Privileges, Department of Anesthesia To: Active without Admitting Privileges, Department of Anesthesia</p> <p>Moved by E. Stevens seconded by K. Goulet that the above changes to professional staff appointment be approved as presented. All in Favour.</p> <p style="text-align: right;"><u>Carried</u></p> <p>It was also noted, for information, the following credentialed staff privileges will conclude.</p> <p>Ms Ashley Broadbent, Active Midwife, Department of Obstetrics</p>
	8.4	<p>Medical Staff Organization</p> <p>C Boland shared that 7 hospitals in the Kingston area will be going live with Cerner on December 8th. There is a potential impact to our hospital in limiting access to regional services should there be an influx of transfers out of these hospitals. He also noted that the OMA announced a 10% increase in OHIP payments.</p>
9.0	Finance Report	
	9.1	<p>Financial Statements</p> <p>In M Blouin's absence, C Boland presented the Finance Report.</p> <p>WDMH is currently at \$1.76 million deficit which is favourable by \$1.25 million from the budget. Factors contributing to net positive variance of \$1.25 million were an increase in revenue in base funding (\$978,000), an increase from OHIP patient services billing fees (\$539,000) and an increase in private and semi-private patient room charges (\$68,000). These charges were due to improvement of room availability.</p> <p>Financial deterioration summary was shared in the meeting package highlighting that structural deficit preceded COVID and Bill 124. WDMH managed for several years to meet budget due to cost savings however there is no longer any savings to be found.</p> <p>C Boland noted:</p> <ul style="list-style-type: none"> • Collectively, the provincial hospital debt is approximately one billion dollars • Notification has been received by the ministry for the second payment of Bill 124 and is expected to be similar to first payment. • J Milburn continues to contact the Minister of Health's office to obtain a meeting to address the Board's concerns • Deputy Minister of Health is making plans to speak with hospital leadership throughout the province to grasp financial issues • C Boland plans to attend the Ontario Pre-Budget Consultation Hearing in Ottawa in January and present financial constraints on behalf of our area's rural hospitals. <p>In follow up from September meeting, Annik queried the new Benefits provider and whether the transition has been smooth. Transition to Blue Cross has gone exceptionally well and WDMH expects to see cost savings to the hospital as well as the staff's premiums.</p>

10.0	Report of the CEO
10.1	<p>Strategic Priorities Update</p> <p>Full report is provided with the meeting package. Highlights include:</p> <ul style="list-style-type: none"> • Currently vigilant regarding respiratory season. Other hospitals have introduced compulsory masking. WDMH has not mandated however it is strongly encouraged. Increase of walking pneumonia in the community as well. • Mock Code White took place which evolved to a Code Purple and Code Silver. The Ontario Provincial Police participated. • 2-day leadership course took place as well as a 1-day racism training day. • Anticipated cost of Clinical reconfiguration is \$50, 000 and is expected to be recovered within only a few months of reduced overtime expenses.
10.2	<p>Cybersecurity Update</p> <p>Atlas Alliance has engaged with cybersecurity experts and WDMH will benefit from this expertise.</p>
10.3	<p>WDMH Staff Retention Survey Results</p> <p><u>Staff</u></p> <p>C Boland presented on behalf of M Blouin. Full presentation shared in the meeting package</p> <ul style="list-style-type: none"> • Staff vacancies at the hospital continue to be low with only 4 regular staff opening as well as Temporary and Casual vacancies • Overall Employee Satisfaction is 79% which is up from 62% in 2021 • Recruitment and Retention Committee have recommended the following: <ul style="list-style-type: none"> ○ Areas to maintain satisfaction: Pride, Respect, Education/Training, One Team ○ Areas to improve satisfaction: Addressing Issues, Feedback, Appreciation, Communication <p><u>Professional Staff</u></p> <p>B Devin presented results for the Professional Staff. Full presentation shared in the meeting package.</p> <ul style="list-style-type: none"> • 21 credentialed staff responded – question regarding low response rate and explanation provided regarding Regular/Active staff vs. itinerant and regional affiliate staff • Similar survey questions were posed of the Medical Staff as were shared with the staff • Strengths identified: Teamwork, Sense of belonging, feelings of pride and safety at WDMH, Communication and Respect, Learning and Development • Opportunities for improvement: continue to expand education offerings, risk of violence in ER, call room upgrades, celebrate accomplishments, take more action/crucial conversations and increased/improved feedback. <p>Suggestions for next survey: include question regarding status (i.e. Term/Locum/Active). It was noted that the changing demographic may require an increase in Performance review/touch base.</p>
10.4	<p>Atlas Alliance Agreement</p> <p>C Boland explained updates made to the agreement to include new members joining the Atlas Alliance in the third wave.</p> <p>C Boland also shared M. Blouin’s determination to collaborate with our regional Atlas Alliance partners and negotiate a retroactive discount of \$800,000 for all hospitals who have previously joined the Atlas Alliance.</p>

		<p>Moved by B. Toonders seconded by E. Stevens that the above amendments to the Atlas Alliance Agreement be approved as presented. All in Favour.</p> <p style="text-align: right;"><u>Carried</u></p>
11.0	<p>WDMH Foundation Report In T Elliott's absence, C Boland reported:</p> <ul style="list-style-type: none"> • Foundation has had a good year however postal strike is reducing ability to campaign for Holiday events. • Catch the Ace will begin again on December 1st. • Kristen Casselman has resigned from her Executive Director position and her last day of work will be November 29, 2024. Recruitment underway for a replacement. 	
12.0	<p>WDMH Auxiliary Report L Arsenault shared some of the upcoming highlights of the Auxiliary's planned events. Two raffles are winding down as we approach the Christmas season. New volunteers are needed to support the Gift Shoppe. Question regarding whether this need can be posted/advertised. This will be investigated.</p>	
13.0	<p>Report of the RHI Board The Dundas Manor is currently in outbreak with a human coronavirus but is reported to be under control. Construction continues to go well and ahead of schedule.</p>	
14.0	Governance	
	15.1	<p>Executive Committee Minutes The November Executive Committee minutes were received for information. One minor revision was noted.</p> <p>A small committee formed in November to review the Board Policies. Some valuable input was received which will be incorporated and shared for approval by the Board.</p>
	15.2	<p>Board Evaluation Results Evaluation results have been circulated with the agenda for the September 2024 Board meeting.</p>
16.0	<p>Communications & PR Considerations One item for consideration is employee satisfaction results.</p>	
17.0	<p>Next Meeting: Regular Board Meeting: Tuesday February 25, 2025 @ 5:00pm in Dillabough Boardroom. Considerations for inclement weather were discussed.</p> <p>A Blanchard and C Boland noted the following:</p> <ul style="list-style-type: none"> • Reminder for Board members contribution through GoFundMe for Staff gifts at the Annual Christmas Breakfast • All Boards (WDMH, RHI, Foundation, Auxiliary), Patient & Family Engagement Committee and tenants of the hospital will be invited to a holiday dinner to be held third week of January. More details to follow. 	
18.0	<p>Adjournment A. Blanchard called the meeting to a close at 7:12 p.m.</p>	