



Board of Directors Regular Board Meeting
 April 28, 2021
MINUTES

Present: Marlene Davidson ©, Sally Burns-VC, Lorraine Gauthier Stromberg, Beth Fairfield, Brad Ricci, Stacey O’Sullivan, Jorge VanSlyke, CEO; Jennifer Learning, CNO; Dr. Sara Van Der Loo, COS; Brittany Beyak-Freamo, CFO; Stacey Wood, Director of Care, LTC

Guest: Mike McKinnon, Atikokan Progress

Regrets: Jeremy Dickson

Recorder: Bonnie Clairmont Approved: May 26, 2021

	Action Req’d/Date
<p>Presentation by L. Thibodeau, Dietary: L. Thibodeau is a registered dietitian who is filling a maternity leave. She highlighted the following about the dietary department:</p> <ul style="list-style-type: none"> - Dietary staff consists of 1 lead hand, 3 full time, 6 part time and 3 casual staff - Provides 3 meals and two snacks, 7 days/week - Provides Meals on Wheels to 18 community members - Has provided 39,205 meals over the last year. - During the pandemic, they have made modifications to Meals on Wheels; facilitated in-room dining on the Extended Care Wing and reduced the number of food deliveries. - Some goals and projects for the upcoming year include establishing a working relationship with Riverside Healthcare; reviewing job routines, improving mealtime experience on Extended Care Wing, exploring culturally sensitive menu options. <p>1.1 Call to Order Marlene Davidson called the meeting to order at 5:25 pm.</p> <p>1.2 Declaration of Conflict of Interest - None declared.</p>	
<p>1.3 Agenda The agenda was reviewed and accepted as presented.</p> <p>MOTION: B. Ricci/B. Fairfield “That the Board approve the agenda of April 28, 2021 as presented.”</p> <p style="text-align: right;">CARRIED 2021-039</p>	
<p>2. Consent Agenda The Regular Board Meeting Minutes of March 31, 2021 were reviewed and accepted as presented.</p>	

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<p>MOTION: B. Ricci/L. Gauthier Stromberg “That the Board approve the minutes as per 2.1 as circulated” CARRIED 2021-040</p>	
<p>3. Good News Story: J. Learning shared that the Lab has recently started doing Magnesium testing on-site. Previously this test was sent away and generally took 1 – 3 days to get results; which we can now get in under an hour. The physicians requested to be able to perform this test on-site and the laboratory director approved adding this test to our lab license. Since magnesium is an electrolyte, abnormal levels may cause weakness, twitching, confusion, arrhythmias and seizures. B. Clairmont reported on behalf of Community Counselling a success they have had with the STOP program for smoking cessation. Their client requested nicotine replacement therapy and from the first day they put on the patch, they never smoked another cigarette. Today they are free of nicotine as well as the nicotine replacement therapy aids. Dr. Van Der Loo also noted that this program is also available at the Family Health Team and has also proven successful. B. Ricci shared that he had heard from a local resident that was hospitalized out of town and then returned to Atikokan and couldn't say enough good about the care they received here.</p>	
<p>4. Reports – Provided in April 28, 2021 agenda package.</p> <p>4.1 Report from Board Chair: M. Davidson recognized the generosity of individuals that willingly give their time and energy to our hospital. She highlighted the work of the Hospital Foundation, Patient & Family Advisory Council, and the people that come to the hospital to make life for our patients a little bit better. She also thanked and recognized our volunteer board of directors who have adapted to virtual meetings and for their contributions to our meeting items. She thanked the Atikokan Progress editor for his commitment to the reporting and support he gives the hospital.</p> <p>4.2 Report from the Chief Executive Officer: J. VanSlyke reported on activities being undertaken by the Rainy River District Ontario Health Team, the NW Regional Integrated Care Working Group, the NW Regional CEO Group and the Small Rural and Northern Provincial Leadership Council.</p> <p>Pandemic Update:</p> <ul style="list-style-type: none"> - Province is under Stay at Home Order until May 20 - AGH ER is now assisting with swabbing symptomatic patients on weekends and holidays. - Nursing staff were asked if they would be willing to be re-deployed to Southern Ontario. No expression of interest yet. - We have expressed capacity to care for transferred patients. - As part of staff wellness, the massage chair investment was a huge success. 	

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<p>Operational Update:</p> <ul style="list-style-type: none"> - Working on service contracts for Ambulance Bay, IT services and Assessment Centre Agreement with Family Health Team. - Discussing project partnership with Atikokan Lion’s Club re: spring planting. - Code Red review initiated - Centralized reporting commenced - Incorporating QIRM as a standing agenda for committees and department meetings. This will then be reported through Maintenance Care. - CareQ implementation will eliminate the call out list. - Health Professionals Recruitment & Retention (HPRR) committee is switching to fixed annual contract with Lisa Peterson for physician recruitment - A strategic planning exercise for the HPRR Committee will be held in May - Community Counselling & Addiction Services is moving ahead with the re-location to 100 Main St. - At the Transition House we are exploring a staff-as-needed model by building our casual pool through possible partnership with Shelter of Hope and Native Friendship Centre. If we can build a strong casual pool, we can staff transition house as needed and it will allow us to expand our eligibility criteria - Leadership: Met with three organizations that can provide leadership development and coaching for the AGH leadership team. This will be a significant investment and a longer commitment (up to 18 months). - Staff Celebrations: Lab Week from April 11-17; Administrative Professional Day April 21; Service Awards for long term employees – April 22, 2021 <p>Infrastructure Update</p> <ul style="list-style-type: none"> - LTC HVAC upgrade and sprinkler approved for 1.8 million - Waiting for specific requirements but prior to approval, RVI had already submitted a phased approach to HVAC with estimated cost. We will review the requirements and proceed as soon as possible. 	

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<p>4.3 Report from the Chief Nursing Officer: J. Learning shared:</p> <p><u>Nursing:</u></p> <ul style="list-style-type: none"> - The nursing staff in the ER now have a medical directive so they can swab patients during the weekend or on holidays. This would apply to community members that have symptoms of Covid-19; or had a positive rapid antigen test and now need a PCR test to confirm it; or someone who public health has identified as a contact of a positive case. The Assessment Center will continue to provide this service during the week, but we found that there was a need for it on the weekends, so we have implemented this directive. - The Safe room is being built in our old OR room. Having a safe room has become necessary in isolated hospitals. This is a room that can be used when someone comes to the ER who is violent or needs a safe space to decompress. We have also hired a casual security guard to help with patients who may become violent. - Working with a group of health care providers in the Rainy River District to identify gaps in mental health services for all ages across the district including the four towns and the ten First Nations. We have had two, 3-hour facilitated sessions so we can identify all the services and gaps and then come up with strategies to start to fix the gaps. - Hired two casual RNs and a temporary part time RN to help with vacation relief over the summer. - There is a Regional Task force working together to try to create better transfer situations for patients and the hospital staff. Progress is being made and we continue to meet regularly with EMS, Ornge and Thunder Bay Regional to hopefully improve patient transfer experiences. <p><u>Rehab:</u></p> <ul style="list-style-type: none"> - There continues to be a very long waitlist for anyone who has a chronic condition and is wanting a referral for physiotherapy or occupational therapy. The average wait is anywhere from 6 months to one and a half years, so they are now offering patients who call looking for rehab services alternative options such as private clinics in Fort Frances and Thunder Bay. <p><u>Diagnostics:</u></p> <ul style="list-style-type: none"> - Our Diagnostics manager is currently off work until at least the middle of May so our community is not able to offer ultrasounds until their return to work. 	

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<p>4.4 Report from the Chief Financial Officer: B. Beyak-Freamo shared:</p> <ul style="list-style-type: none"> - Overall we ended the year in a surplus position with our cash flows staying strong - We have not had to utilize our line of credit since October - We are still waiting on payment from the MOH for the Phase 1 New Build Settlement Submission. This was set up as receivable at the end of the year. - We received official notification that we will be receiving \$1.86 million as part of the Investing in Canada Infrastructure Project (ICIP) funding. This is great news as this project will pay for the upgrades to our HVAC system and our sprinkler system. These projects will likely begin in the summer. The stipulations of the grant are that the project must be started by July 2021 and must be completed by December 2022 (since we are in a rural area). - It has been confirmed that COVID-19 funding will continue until June 2021. - To date we have received full reimbursement up to November 30, 2020 for both capital and incremental operating expenses. <p style="text-align: center;">Financial Summary as at March 31, 2021</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%;">Revenue</td> <td style="width: 50%; text-align: right;">\$10,844,727</td> </tr> <tr> <td>Expenses</td> <td style="text-align: right;">\$10,604,451</td> </tr> <tr> <td>Surplus/(Deficit) from Hospital Operations</td> <td style="text-align: right;">\$280,276</td> </tr> <tr> <td>Amortization</td> <td style="text-align: right;">(\$74,344)</td> </tr> <tr> <td>Total Surplus/(Deficit) from Fund Type 1</td> <td style="text-align: right;">\$205,932</td> </tr> <tr> <td>Surplus/(Deficit) from Other Votes</td> <td style="text-align: right;">\$61,871</td> </tr> <tr> <td>Overall Surplus/(Deficit)*</td> <td style="text-align: right;">\$267,803</td> </tr> </table>		Revenue	\$10,844,727	Expenses	\$10,604,451	Surplus/(Deficit) from Hospital Operations	\$280,276	Amortization	(\$74,344)	Total Surplus/(Deficit) from Fund Type 1	\$205,932	Surplus/(Deficit) from Other Votes	\$61,871	Overall Surplus/(Deficit)*	\$267,803	
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<p>4.5 Report from AGH Foundation: B. Beyak-Freamo shared:</p> <ul style="list-style-type: none"> - The online lottery continues to be a huge success. The current stay at home order has put a damper on plans to sell at the post office and Foodland but online sales are still going strong. - The new donor board and track lighting has been installed in the main lobby; the board is hoping to update this once Covid restrictions are lifted - The board is reviewing capital projects or items that they can use the lottery money to purchase - In memoriam donation forms and envelopes have been distributed to various businesses in town for people to be able to mail cheques to the hospital for donations. 																

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<p>4.6 Report from the Chief of Staff: Dr. S. Van Der Loo shared:</p> <p>Pandemic Planning</p> <ul style="list-style-type: none"> - We continue to prepare and update our policies and procedures for the care of COVID patients. - We anticipate that the most likely need at this point in the pandemic may be the need to accept patients in transfer to off-load other overloaded hospitals. - We as physicians continue to be actively involved in the vaccination rollout. We strongly encourage everyone to get vaccinated with the first vaccine that is offered to them at their first opportunity! <p>Regional Committee Meetings</p> <ul style="list-style-type: none"> - Continue to meet monthly with the Regional Chief of Staff group. Support for regional hospitals and communities undergoing outbreaks of COVID as well as ongoing planning for regional programs such as centralized referral processes. - Northern Emergency department group also meet monthly – recent discussions around pilots for virtual Emergency Department visits. 	
<p>4.7 Report from Director of Long Term Care: S. Wood reported:</p> <ul style="list-style-type: none"> - The provincial stay-at-home order has not caused any changes to our current visitor restrictions at this time. The Long-Term Care Unit continues with visitor restrictions for lockdown which restricts general visitors, but continues to allow our essential caregivers to visit (one at a time per resident), as per Ministry directives. All visitors continue to be actively screened and take a Rapid Antigen Test prior to their visit. - We are actively trying to recruit some temporary part-time RPNs as well as permanent casual PSWs to fill current vacancies and help with summer relief. - An inspector from the Ministry of Health and Long-Term Care visited our home. The purpose of their visit was to conduct an onsite inspection of our Infection Prevention and Control (IPAC) Protocols as well as to look into some of our critical incidents that were reported this past year. The inspector was greatly appreciative of how helpful and cooperative our staff were and had no concerns with any of our current IPAC practices. A full report of the visit will be provided within the next 2 – 4 weeks. 	

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<p>4.8 Committee Reports: S. O’Sullivan reported that she had attended the Quality Improvement and Risk Management (QIRM) meeting earlier this month. The committee reviewed the terms of reference; identified that QIRM should be a standing agenda item for all department meetings; the Emergency Management Group will be re-activated and separate meetings have been scheduled to look at the hospital’s Code Red policy.</p>	
<p>4.9 4th Quarter Scorecard: J. VanSlyke reviewed the hospital’s scorecard to the end of March and responded to board questions on the information shared.</p> <p>MOTION: B. Fairfield/L. Gauthier Stromberg “That the Board approve all reports as presented.” CARRIED 2021-041</p>	
<p>5. In-Camera Session</p> <p>MOTION: S. Burns/B. Ricci “That the Board moves to an in-camera session of the meeting at 6:17 pm.” CARRIED 2021-042</p> <p>6. Return to Open Session</p> <p>MOTION: L. Gauthier Stromberg/S. Burns “That the Board returns to open session of the meeting at 7:42 pm.” CARRIED 2021-043</p> <p>MOTION: L. Gauthier Stromberg/S. O’Sullivan “That the In-Camera Agenda (reviewed In-Camera) of April 28, 2021 be approved as presented.” CARRIED 2021-44</p>	
<p>MOTION: L. Gauthier Stromberg/S. O’Sullivan “That the Consent Agenda (reviewed In-Camera) including the In-Camera Minutes of March 31, 2021 and MAC Meeting Minutes of March 17, 2021 be approved as presented.” CARRIED 2021-45</p> <p>MOTION: L. Gauthier Stromberg/S. O’Sullivan “That the list of professional staff, as presented, be approved for appointment and re-appointment for the remainder of the calendar year 2021.” CARRIED 2021-46</p> <p>MOTION: B. Fairfield/S. Burns “That the Risk Report Summary for April, 2021 be accepted as presented.” CARRIED 2021-047</p> <p>MOTION: B. Ricci/S. O’Sullivan “That AGH be approved to undergo the process of changing our organization’s name to be more inclusive.” CARRIED 2021-048</p>	

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<p>MOTION: L. Gauthier Stromberg/B. Fairfield “That Dr. Sara Van Der Loo be approved as Chief of Staff of Atikokan General Hospital for the next three year period.” CARRIED 2021-049</p> <p>MOTION: S. O’Sullivan/B. Fairfield “That a customized survey to be completed by the board of directors will be created by the CEO and shared with hospital board members.” CARRIED 2021-050</p>	
<p>7. DATE OF NEXT MEETING: The next regular board meeting is on Wednesday, May 26, 2021 at 5 pm via Zoom.</p>	
<p>8. <u>ADJOURNMENT</u> With no further business, the meeting was adjourned at 7:45 pm on a motion by S. Burns/B. Ricci CARRIED 2021-051</p>	
<p>_____</p> <p>Marlene Davidson, Board Chair</p> <p>_____</p> <p>Jorge VanSlyke, CEO</p>	