



Board of Directors Regular Board Meeting  
November 30, 2022  
**MINUTES**

Present: Beth Fairfield ©, Stacey O’Sullivan, Kirt Pfeifer, Tom Hainey, Jorge VanSlyke, CEO; Jennifer Learning, CNO; Dr. Sara Van Der Loo, COS; Dr. Joanne Spencer, President of Medical Staff

Guest: Mike McKinnon, Atikokan Progress

Regrets: Lorraine Gauthier Stromberg

Recorder: Bonnie Clairmont Approved: Jan. 25, 2023

	Action Req’d/Date
<p><b>1.1 Call to Order</b> Beth Fairfield, Chair called the meeting to order at 5:04 pm.</p> <p><b>1.2 Declaration of Conflict of Interest</b> – None declared.</p>	
<p><b>1.3 Agenda</b> The agenda was reviewed and accepted as presented.</p> <p><b>MOTION: S. O’Sullivan/ K. Pfeifer</b> “That the Board approve the agenda of November 30, 2022 as presented.” <b>CARRIED 2022-096</b></p>	
<p><b>2. Consent Agenda</b> The Regular Board Meeting Minutes of October 26, 2022 were reviewed and accepted as presented.</p> <p><b>MOTION: S. O’Sullivan/K. Pfeifer</b> “That the Consent Agenda be approved as presented.” <b>CARRIED 2022-097</b></p>	
<p><b>3. Patient Safety:</b> A member of the Patient and Family Advisory Council shared about a recent stay he had at the hospital. He came in very sick, dehydrated and felt like he was dying. He noted that from the time of his arrival the RNs quickly put him at ease. He was administered the necessary medications he needed and released the next day. All of the hospital staff were friendly and attentive to his needs and checked on him regularly. Kudos to RNs Trisha, Keira and Taylor for their excellent care as well as the housekeeping and dietary staff he encountered on his stay.</p> <p>J. VanSlyke noted that for future meetings the Patient and Family Advisory Committee representative will share reports on patient stories.</p>	

	Action Req'd/Date
<p><b>4. <u>Good News Story/Quality Improvement Highlight:</u></b></p> <ul style="list-style-type: none"> <li>• <b><i>Memory Pillow Program</i></b> <ul style="list-style-type: none"> <li>• B. Clairmont shared information on the Memory Pillow Program, which was an initiative taken on by RPN K. Bain. The Extended Care Wing holds 50/50 draws periodically throughout the year to raise money for the program. Pillows are created by K. Bain from a piece of clothing of a resident that has passed away. So far with all of the contributions we have been able to send off 22 pillows with a small gift basket to the family of a resident that has passed. The families have been very thankful for the pillow and touched by the kind gesture shown to their family.</li> <li>• J. VanSlyke has shared this initiative with the region and encourages other such initiatives from front line staff.</li> </ul> </li> </ul>	
<p><b>5. <u>Reports</u></b> – Provided in November 30, 2022 agenda package.</p> <p><b>5.1 <u>Report from Board Chair:</u></b></p> <ul style="list-style-type: none"> <li>• B. Fairfield shared that items she was going to report on are covered by the CEO report.</li> </ul>	
<p><b>5.2 <u>Chief Executive Officer Report by J. VanSlyke:</u></b></p> <p>J. VanSlyke recapped some highlights from her report including:</p> <p><b>Systems Integration</b></p> <ul style="list-style-type: none"> <li>• <u>Kenora – Rainy River Regional Lab Program (KRRRLP)</u> <ul style="list-style-type: none"> <li>○ Dr. Martha Lyon and Karen Parker are supporting the KRRRLP board to ensure there is continuity of services in our district after the MacDonald brothers retire in December.</li> </ul> </li> <li>• <u>NW Digital Council</u> <ul style="list-style-type: none"> <li>○ Still finalizing scope, Mental Health and Addictions are going to be included with the possibility of adding primary care’s EMR (Atikokan Clinic and Family Health Team). A discussion will have to take place between the Digital Council leads and the local physicians as they are the custodians of patients’ health information. This will be a huge focus in the next few years.</li> </ul> </li> <li>• <u>NW Regional CEO Group</u> <ul style="list-style-type: none"> <li>○ Health and Human Resources is still the primary agenda</li> <li>○ Looking at a regional approach to leadership education / model</li> </ul> </li> </ul>	

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<ul style="list-style-type: none"> <li>○ Engaged with Dr. Karima Velji, Chief of Nursing and Professional Practice and Assistant Deputy Minister, to share concrete suggestions / solutions to nursing shortage that will reflect the reality in the North. Some requests from nursing staff that are unique to rural communities include compensation for travel, housing and travel time.</li> <li>● <u>Rainy River District Ontario Health Team (RRDOHT)</u> <ul style="list-style-type: none"> <li>○ Looking at proposals for district-wide transportation for patients and First Nation clients and increased connectivity via the internet to strengthen access in our District. There are nine organizations involved.</li> <li>○ Almost all RRDOHT partners have implemented the e-referral. This should ensure that we are supporting this strategy as a District. E-referral changes how clinicians receive referrals from fax to electronic system – Diagnostic Imaging, Mental Health and Addictions, and Wound Care for AGH. Rehabilitation is in the process of onboarding.</li> </ul> </li> <li>● <u>Small Rural and Northern Provincial Leadership Council</u> <ul style="list-style-type: none"> <li>○ Next meeting is on December 13<sup>th</sup>.</li> <li>○ The frozen executive wages under the Regulation 406/18 of the Broader Public Sector Executive Compensation Act 2014 is still a contentious issue that has now ballooned into wage compression between frontline staff and management and recruitment challenges.</li> <li>○ Health and Human Resources also a main topic. Not just nursing but other hard to recruit positions.</li> <li>○ The Supreme Court has deemed Bill 124 unconstitutional.</li> </ul> </li> </ul> <p><b>Pandemic Update</b></p> <ul style="list-style-type: none"> <li>● Staff switched from active screening to passive screening. This means that staff are encouraged to self-check but are no longer required to complete the screening in the lobby prior to starting work.</li> <li>● Masking in the workplace and testing every 48 hours are still required.</li> <li>● Self-tested is now being promoted in the Extended Care Wing. Staff are assisting those that need it.</li> </ul>	
<p><b>H-SAA (Hospital Contract) Operational Update</b></p> <ul style="list-style-type: none"> <li>● <u>Human Resources</u> <ul style="list-style-type: none"> <li>- A job offer has been extended for the CFO position.</li> <li>- Nursing Model is currently being evaluated.</li> <li>- One Agency RPN contract will expire in December 2022.</li> </ul> </li> </ul>	

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<ul style="list-style-type: none"> <li>- Staffing overview:                             <ul style="list-style-type: none"> <li>o Rehabilitation has two temporary additions to staffin,g but is still struggling to meet the overwhelming demand for rehabilitation services.</li> <li>o Nursing can still use part-time and casual staff, especially for PSW. We can be a sick call away from critical staffing.</li> <li>o Diagnostic Imaging and Laboratory clinicians require back-up support (currently only one ultrasound tech and should we lose and MLT, recruiting for replacement will be a challenge with the national shortage.)</li> <li>o Support Services (Food Services, Housekeeping) could use more casual staff.</li> <li>o Mental Health and Addictions – all positions are filled but will need to build back-up support for the transition house.</li> <li>o Business Office – currently increasing part-time / casual support with the increased invoices (payables) and needing coverage for an upcoming medical leave.</li> <li>o Maintenance, MDR, Procurement, IT, HR currently stable</li> <li>o Management – finding ways to manage job demands, multiple roles, supporting self and others.</li> </ul> </li> </ul>	
<ul style="list-style-type: none"> <li>• <u>Infrastructure / Maintenance</u> <ul style="list-style-type: none"> <li>- LTC HVAC project to be done by end of December 2022 with some parts / fixtures coming in on January 2023; but they are minor installations.</li> <li>- Sprinkler design is complete but still waiting on costing to proceed. AGH has been approved for approximately \$800,000 to cover the cost of the sprinkler project through the Hospital Infrastructure Improvement Fund (HIRF).</li> <li>- Service Wing HVAC design is ongoing. Next step is design approval then pricing.</li> <li>- Requested 2 quotes for Master Design Review, will be looking for one more. Master plan was created in 2011. It needs to be reviewed and prioritized.</li> <li>- Changes in long-term care accommodation: we are now using the two swing beds and created two private spaces. Our shared accommodations are now down to 2.</li> </ul> </li> <li>• <u>Committees</u> <ul style="list-style-type: none"> <li>• <u>Health Professionals Recruitment and Retention Committee</u> <ul style="list-style-type: none"> <li>- Meeting in November deferred to January 2023.</li> <li>- Currently focusing efforts on recruitment materials and forms of incentives.</li> </ul> </li> </ul> </li> </ul>	

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<ul style="list-style-type: none"> <li>● <u>Patient and Family Advisory Council</u> <ul style="list-style-type: none"> <li>- Discussed the possibility of a PFAC member representative either attending regular board meetings to share reports or have a board representative to PFAC. Board decided to have a PFAC member attend regular board meetings.</li> <li>- Election of PFAC co-chair – L. Belanger accepted the role</li> <li>- PFAC formally approved the top 3 focus items for next 2 years: Health Navigator, Recruitment, and Community Resource Mapping.</li> <li>- Round Table: PFAC member shared an excellent experience/stay at AGH; AGH is working on capturing compliments, not just complaints;</li> <li>- It was suggested to have PFAC link for community members to join PFAC on AGH, AFHT, AMA websites.</li> </ul> </li>   <li>● <u>Projects</u> <ul style="list-style-type: none"> <li>● <u>Accreditation 2023</u> <ul style="list-style-type: none"> <li>- One-on-one meetings with standard leads are completed. Master list for Required Organizational Practices, High Priorities, and Normal Priorities are being populated.</li> <li>- To get an Exemplary Standing, AGH needs to meet all Required Operating Practices (ROPs), and achieve 95% of all High Priority (HP) and Normal Priorities (NP) standards.</li> </ul> </li>   <li>● <u>Electronic Scheduling</u> <ul style="list-style-type: none"> <li>● The Committee has evaluated three vendors and conducted environmental scan on what is being used in the Northwest and has decided to go with Staff Schedule Care.</li> <li>● This system will automate scheduling and will allow us to also automate call-outs, which will save the RNs hours to allow them to focus on patient care.</li> <li>● References are currently being checked prior to contract signing.</li> <li>● Anticipating implementation work to commence in April 2023 for a Go Live date of April 2023.</li> <li>● The new scheduling process will take about 2 years to implement and we will have super users for the program.</li> </ul> </li>   <li>● <b>M-SAA (Mental Health and Addictions Contract) Operational Update</b> <ul style="list-style-type: none"> <li>● MHA can now receive E-referrals</li> <li>● MHA is providing .2 services at the AFHT for clientele under 16 years old until the newly hired MHW starts on January 3, 2023.</li> <li>● Focusing on Accreditation Canada at this time.</li> </ul> </li> </ul> </li> </ul>	

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<p><b>Atikokan Family Health Team Operational Update</b></p> <ul style="list-style-type: none"> <li>• Ontario Health North has endorsed the integration. Revising the proposal prior to Primary Care submission based on feedback from OH North.</li> <li>• The NP has now started seeing patients in the community.</li> <li>• New Mental Health Worker will start on January 3, 2022</li> <li>• Program Assistant is now back at the AFHT</li> <li>• Still recruiting for Administrative Assistant.</li> </ul>	
<p><b><u>Chief Nursing Officer Report Prepared by J. Learning:</u></b></p> <p><b>Nursing:</b></p> <p>We are getting ready for accreditation which is happening in the spring of 2023. We are reviewing policies and making improvements or creating new ones as we work through the standards for ECW, Acute care and the Emergency room.</p> <p>We continue to struggle with lack of RPNs. Our agency RPN is finished the middle of December and I am deciding whether or not to bring in another agency nurse.</p> <p>We are working on creating a package which helps staff identity and deal with violence in the workplace. The package includes an assessment tool which determines risk of violent behaviour, flagging violent patients so staff know who might put them at risk, an updated code a security plan for staff and patients.</p> <p>As part of Bill 7 we now have a handout that is given to every patient admitted which outlines how our discharge works and who helps organize patient discharge.</p> <p><b>Diagnostic Imaging:</b></p> <p>The department is recruiting a part time x-ray tech with a planned start date for late in January.</p> <p>The department is getting new computers and the PACS system (which loads the x-rays) is no longer supported by Microsoft so we are working on upgrading this system also.</p> <p>We changed from one supplier for service work to a different supplier. The new supplier is available out of Thunder Bay whereas the old service company had to come here from Toronto. There is an issue with the computers for the x-ray machine and they were able to come right away to try to fix it.</p>	

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<p><b>Laboratory:</b></p> <p>We have completed the High Sensitivity Troponin validation and are ready to go live when the order set committee is ready.</p> <p>We have received new glucometers and we will begin validation studies. Still waiting to see how much the interface software will cost so the glucometers can speak to Meditech. We anticipate it will be quite expensive.</p> <p>The validation for the blood culture incubator has begun. This will speed up the process of starting patients on antibiotics to fight their infections.</p> <p>The out-patient lab department has been very busy lately so patients may have to wait a bit before they receive an appointment time.</p> <p>There are more people getting covid tests again – extremely early appearance of Influenza A + Covid + RSV. The lab highly recommends that people wear masks out in public as there is a lot of respiratory illness going around in our community.</p> <p><b>Rehabilitation Department:</b></p> <p>The department has been doing very well and continues to be well staffed. We are hoping to secure a permanent full-time kinesiologist next fiscal if funds are available.</p> <p>Since we have a full-time kinesiologist and two registered aides, our waitlist has moved from 209 to 156, with an average of 30 – 40 new referrals per month.</p> <p><b>Long-Term Care:</b></p> <p>We have three PSW students starting their placements with us for the month of November/December. We are still looking to recruit permanent part-time PSWs as well.</p> <p>Our Adopt a Resident campaign has started up again. This campaign is done every Christmas where community members are invited to donate a gift to one of our residents to bring some extra holiday cheer. Our Recreation department is in charge of this and individuals who want to participate reach out to our Recreation Coordinator, Kara.</p> <p>Residents and staff have been provided their flu shots in preparation for flu season. We continue to encourage anyone who has any respiratory symptoms to not visit Extended Care Wing until they are feeling well.</p>	

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<p><b>Infection Control/Risk Management:</b>                      RL6 to Surge Risk Management – We are currently creating a new incident reporting system that will go live in Dec/Jan. This new system is more cost effective, and will improve our ability to capture more specific data to our facility. We will be able to set our own specific indicators and the forms will be unique to our facility as well.</p> <p>We are finalizing the placement of the new isolation signs that were able to be purchased with IPAC Hub grant monies. There will be a new policy/procedure accompanying the signs and we will be completing staff in-services in the next 1-2 weeks. The signs are clearer to both staff, and the visiting public. We are also continuing to update infection control policies and procedures and working on a new way to collect hand hygiene audits that will be easier to analyze. C. Maki is working through the Infection Control Course through Queen’s University in preparation to take her CIC Exam to become a Certified Infection Control Practitioner.</p> <p><b>Occupational Health:</b>                      Covid numbers are down presently. We have approximately 40 staff who have received the latest Covid Booster and approximately 70 staff (which is about average) have received the Influenza vaccine. We have been working on updating policies and procedures (Blood Borne Pathogen Disease Surveillance Program).</p> <p><b>Housekeeping/Laundry:</b>                      S. Wood has purchased a new label machine for resident clothing. This will help keeping belongings in the right place. We are also looking at different workflows to improve laundry services as there have been numerous laundry shortages. The Permanent PT vacancy has been filled and we will be posting the Temp. PT vacancy.</p> <p><b>Chief Financial Officer Report Prepared by B. Maranzan:</b>                      J. VanSlyke introduced Brent Maranzan to the board. B. Maranzan is from 807 Management and has been hired as interim CFO. He has over 20 years of hospital finance and planning experience and worked closely with the hospital previously through the North West Health Alliance. This is his third interim CFO role in the last two years in the region. B. Maranzan reported on the hospital financials as of October 31, 2022</p>			
<table border="1"> <tr> <td>Revenue</td> <td>\$6,430,445</td> </tr> </table>	Revenue	\$6,430,445	
Revenue	\$6,430,445		
<table border="1"> <tr> <td>Expenses</td> <td>\$6,554,948</td> </tr> </table>	Expenses	\$6,554,948	
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<table border="1"> <tr> <td>Surplus/(Deficit) from Hospital Operations</td> <td>(\$ 124,504)</td> </tr> </table>	Surplus/(Deficit) from Hospital Operations	(\$ 124,504)	
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	Action Req'd/Date
<p>Salaries and Wages as well as Employee Benefits continue to be over budget due to staff shortages, overtime and agency nurse costs.</p> <p>We have received \$800,000 through the Health Infrastructure Renewal Fund for the HVAC sprinkler needs.</p> <p><b>AGH Foundation Report</b></p> <ul style="list-style-type: none"> <li>- Sending out Christmas Campaign Letters (included in November 30<sup>th</sup> Atikokan Progress)</li> <li>- Plaque being made to honor service of Dr. Walter Kristjanson to community; to be put on wall in hallway leading to Acute Care Wing             <ul style="list-style-type: none"> <li>o When plaque is ready, an unveiling will be planned with family and media.</li> </ul> </li> <li>- Foundation members have scheduled a Christmas Gathering with Extended Care Wing residents with coffee, tea and dainties for December 3<sup>rd</sup>.</li> <li>- So far this fiscal year the Foundation has purchased:             <ul style="list-style-type: none"> <li>o Chairs for the Rehab chronic pain program @ \$2,007</li> <li>o Hematology Analyzer for Lab @ \$30,594</li> <li>o OTN Clinical Cart @\$24,555</li> <li>o Dainties/Fruit Trays for AGH Staff @ \$555</li> <li>o Bariatric Plinth for Rehab @ \$2,208</li> </ul> </li> <li>- The Foundation also committed to purchasing the following from the hospital's wish list:             <ul style="list-style-type: none"> <li>o A/C Unit for Ultra Sound room @ \$10,000</li> <li>o 1 PACS monitor for DI @ \$8,000</li> <li>o 1 Laundry cart for ECW personal clothing @ \$5,000</li> <li>o Rehab Push/Pull Dynamometer Kit @ \$2,250</li> <li>o 4 – 36" Med Sleds for Emergency Preparedness.</li> </ul> </li> </ul>	
<p><b><u>Chief of Staff Report by Dr. S. Van Der Loo:</u></b></p> <ul style="list-style-type: none"> <li>• Dr. S. Van Der Loo reported that the AGH Physician Group has been added to the pilot project that the government recently announced. This is a new program for small and rural hospitals which provides real time ER support that small hospitals can access. This allows physicians to speak with experienced ER physicians over OTN.</li> <li>• We will be going live on this project on December 7<sup>th</sup>.</li> <li>• Staffing is stable and the call schedule is filled to March, 2023. We are currently in a good position with the return of Dr. Rodrigues from maternity leave and the signing on of Dr. Ahmad.</li> <li>• There have been few regional meetings.</li> <li>• She is part of the Rainy River District OHT Primary Care Team which has recently been formed and is working on setting priorities.</li> </ul> <p><b>MOTION: S. O'Sullivan/K. Pfeifer</b>  <b>"That the Board approve all reports as presented."      CARRIED      2202-098</b></p>	

	Action Req'd/Date
<p><b>5. In-Camera Session</b></p> <p><b>MOTION: S. O’Sullivan/K. Pfeifer</b>                      “That the Board moves to an in-camera session of the meeting at 5:55 pm.”  <b>CARRIED 2022-099</b></p> <p><b>6. Return to Open Session</b></p> <p><b>MOTION: S. O’Sullivan/K. Pfeifer</b>                      “That the Board returns to open session of the meeting at 7:44 pm.”  <b>CARRIED 2022-100</b></p> <p><b>MOTION: T. Hainey/S. O’Sullivan</b>                      “That the In-Camera Agenda (reviewed In-Camera) of November 30, 2022 be approved as presented.”  <b>CARRIED 2022-101</b></p>	
<p><b>MOTION: T. Hainey/K. Pfeifer</b>                      “That the Consent Agenda (reviewed In-Camera) including the In-Camera Minutes of October 26, 2022, MAC Meeting Minutes of November 23, 2022, Fiscal Advisory Committee Minutes of August 18, 2022 and Finance Committee Meeting Minutes of August 31, 2022 be approved as presented.”  <b>CARRIED 2022-102</b></p>	
<p><b>Credentialing (from November 23, 2022 Medical Advisory Committee meeting)</b></p> <p><b>MOTION: S. O’Sullivan/K. Pfeifer</b>                      “That the list of professional staff, as presented, be approved for appointment and re-appointment for the remainder of the calendar year 2022.”  <b>CARRIED 2022-103</b></p>	
<p><b>MOTION: K. Pfeifer/T. Hainey</b>                      “That the Board approve the Priority Focus for the Remaining 2022-2024 Plan”.  <b>CARRIED 2022-104</b></p> <p><b>MOTION: K. Pfeifer/T. Hainey</b>                      “That the AGH Scorecard for Q2 be accepted as presented.”  <b>CARRIED 2022-105</b></p> <p><b>MOTION: K. Pfeifer/S. O’Sullivan</b>                      “That the Board approve that a Patient &amp; Family Advisory Council (PFAC) representative attend the regular board meetings.”  <b>CARRIED 2022-106</b></p>	

	Action Req'd/Date
<p><b>7. <u>DATE OF NEXT MEETING:</u></b> There are no board meetings in December. The next meeting will be held on Wednesday, January 25, 2023 at 5 pm.</p>	
<p><b>8. <u>ADJOURNMENT</u></b>                      With no further business, the meeting was adjourned at 8:00 pm on a motion by T. Hailey/S. O'Sullivan <b>CARRIED 2022-107</b></p>	
<p>_____</p> <p>Beth Fairfield, Board Chair</p> <p>_____</p> <p>Jorge VanSlyke, CEO</p>	