



Board of Directors Regular Board Meeting  
 October 26, 2022  
**MINUTES**

Present: Beth Fairfield ©, Lorraine Gauthier Stromberg, VC; Sally Burns, Stacey O’Sullivan, Kirt Pfeifer, 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: Tom Hainey

Recorder: Bonnie Clairmont (from Zoom recording) Approved: Nov. 30/22

	Action Req’d/Date
<p>J. VanSlyke noted that we are recording today’s meeting in B. Clairmont’s absence. All board members and staff consented to the taping of the meeting.</p> <p>J. VanSlyke shared that J. Dickson has resigned from the board.</p> <p><b>1.1 <u>Call to Order</u></b>            Beth Fairfield, Chair called the meeting to order at 5:01 pm.</p> <p><b>1.2 <u>Declaration of Conflict of Interest</u></b> – None declared.</p>	
<p><b>1.3 <u>Agenda</u></b>            The agenda was reviewed and accepted as presented.</p> <p><b>MOTION: L. Gauthier Stromberg/ K. Pfeifer</b>            “That the Board approve the agenda of October 26, 2022 as presented.”  <span style="float: right;"><b>CARRIED 2022-085</b></span></p>	
<p><b>2. <u>Consent Agenda</u></b>            The Regular Board Meeting Minutes of September 28 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 2022-086</b></p> <ul style="list-style-type: none"> <li>• S. Burns asked about the Electronic Scheduling and how will it be better for the hospital and costs involved.</li> <li>• J. VanSlyke shared that currently each department manually creates its own schedule on paper.</li> <li>• This has resulted in errors, grievances and upset staff since it is not easily accessible.</li> <li>• Scheduling has been discussed for the past two years and management</li> </ul>	

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<p>identified it as a high priority to focus on this fiscal year.</p> <ul style="list-style-type: none"> <li>• We received demonstrations and quotes from three vendors.</li> <li>• The cost is a one-time implementation cost of up to \$65K and approximately \$15K annually for back-up and support.</li> <li>• We will do a financial analysis to compare costs against error which resulted in grievance pay-outs.</li> <li>• Dr. Van Der Loo commented that after watching staff do scheduling for the past 17 years, electronic scheduling will save our highly valuable nursing staff time from having to step away from their regular tasks to do scheduling.</li> <li>• J. Learning noted that currently full-time staff are doing scheduling off the side of their desk. Call-ins could take up to one hour of RN or RPN's time when they should be working with patients.</li> <li>• The new technology would do automated call-outs.</li> </ul>	
<p><b>3. <u>Good News Story/Quality Improvement Highlight:</u></b></p> <ul style="list-style-type: none"> <li>• <b><i>SMILE APP used in LTC</i></b> <ul style="list-style-type: none"> <li>• S. Wood shared a report on the new family engagement software launched this month.</li> <li>• Similar to SeeSaw app used by schools.</li> <li>• Resident families, especially those that don't live near, are very happy to connect with their loved ones through this app. They are able to see what recreation activities are happening, see menu and have communication with the long-term care home.</li> <li>• J. VanSlyke noted that this app is free to us as it was paid as part of our pharmacy contract.</li> </ul> </li> </ul>	
<p><b>4. <u>Reports</u></b> – Provided in October 26, 2022 agenda package.</p> <p><b>4.1 <u>Report from Board Chair:</u></b></p> <ul style="list-style-type: none"> <li>• B. Fairfield acknowledged the resignation of B. Beyak Freamo as CFO and wished her the best in her new ventures.</li> <li>• She also reiterated that J. Dickson has resigned from the board and acknowledged his years of support to the hospital board.</li> </ul>	
<p><b>4.2 <u>Chief Executive Officer Report by J. VanSlyke:</u></b>                  J. VanSlyke recapped some highlights from her report including:</p> <p><b>Systems Integration</b></p> <ul style="list-style-type: none"> <li>• <u>NW Digital Council</u> <ul style="list-style-type: none"> <li>- Current MediTech is obsolete and the region is moving to Meditech Expanse.</li> <li>- Finalizing scope, recommending LTC to move to Expanse as well if we don't have Point Click Care.</li> </ul> </li> </ul>	

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<ul style="list-style-type: none"> <li>• <u>NW Regional CEO Group</u> <ul style="list-style-type: none"> <li>• Met in-person on October 13<sup>th</sup> and 14<sup>th</sup>.</li> <li>• Group advocacy regarding Health and Human Resources shared with Ontario Hospital Association</li> <li>• Topics included Double Time, Regional Mental Health and Addictions Team (RMHAT), vaccine policies, OHA Benefits plan, Health and Human Resources, Regional Lab plans, and Regional Leadership Training.</li> </ul> </li> <li>• <u>Rainy River District Ontario Health Team (RRDOHT)</u> <ul style="list-style-type: none"> <li>- Logo will keep the heart based on majority feedback. AGH and AFHT Boards' feedback were shared; Atikokan boards were the only ones opposed.</li> <li>- still working on a date for the in-person governance conversation.</li> </ul> </li> </ul> <p><b>Pandemic Update</b></p> <ul style="list-style-type: none"> <li>• We had an ECW COVID-19 Outbreak from September 29<sup>th</sup> to October 14<sup>th</sup>. There was an unannounced Ministry of Health and Long-Term Care inspection visit focused on Infection Prevention and Control measures during the outbreak and we passed the inspection with no non-compliance conditions. ECW did really well! There was no spread of the virus while the outbreak was on.</li> <li>• J. VanSlyke shared that one LTC employee had stayed up reviewing the Infection Control protocols in case she was called upon. This was helpful as she was able to confidently address questions from inspectors.</li> </ul>	
<p><b>H-SAA (Hospital Contract) Operational Update</b></p> <ul style="list-style-type: none"> <li>• <u>Physician Recruitment</u> <ul style="list-style-type: none"> <li>- Dr. Ahmad signed on. She has been under Dr. Minor and Dr. Van Der Loo's special license supervision and has done very well.</li> <li>- We are still looking to fill one more vacancy.</li> <li>- Dr. Rodrigues is now back from her leave as of October 24<sup>th</sup></li> <li>- Bridget Davidson (physician recruiter) is working with Dr. Spencer to finalize promotional materials.</li> <li>- Jorge VanSlyke is now the Chair for Health Professionals Recruitment and Retention Committee</li> </ul> </li> </ul>	
<ul style="list-style-type: none"> <li>• <u>Human Resources</u> <ul style="list-style-type: none"> <li>- CFO resigned effective October 28<sup>th</sup>. We have an interim contract with Brent Maranzan from 807 Management Services to provide financial oversight for AGH as we recruit for permanent, full-time CFO.</li> </ul> </li> </ul>	

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<ul style="list-style-type: none"> <li>- Health and Wellness is organizing a pumpkin-carving competition with ECW residents as judges.</li> <li>- We currently have one Agency staff RPN.</li> <li>- Christmas Party is booked for December 3<sup>rd</sup> at the Community Centre. Please save the date!</li> </ul>	
<ul style="list-style-type: none"> <li>• <u>Infrastructure / Maintenance</u> <ul style="list-style-type: none"> <li>• LTC HVAC project is almost completed. It will be mostly done by end of December 2022. There are some parts / fixtures coming in on January 2023 but they are minor installations.</li> <li>• We have had regular meetings with the contractors and the project has been underway with minor interference with the residents.</li> <li>• We are still working on the sprinkler costing.</li> </ul> </li> <li>• <u>Accreditation 2023</u> <ul style="list-style-type: none"> <li>- One-on-one meetings with Standard leads are completed. We reviewed Required Organizational Practices (ROPs) and High Priorities.</li> <li>- We have 13 standards that will be accessed. Still an on-going project</li> <li>- In order to get Exemplary Status, we need to have 100% of Required Operating Practices met, 95% of high priorities met and 95% of normal priorities met.</li> </ul> </li> <li>• <u>Patient and Family Advisory Council</u> <ul style="list-style-type: none"> <li>• Meeting in early November.</li> </ul> </li> </ul> <p><b>Atikokan Family Health Team Operational Update</b></p> <ul style="list-style-type: none"> <li>• Endorsement meetings were completed with Ontario Health North. We may be receiving the endorsement in two weeks.</li> <li>• Once received, we can then submit to the Primary Care Branch of the Ministry.</li> <li>• We have a new NP! Alexa Legree will be starting on November 1st. She just moved to the community with her family. J. VanSlyke is also meeting with another potential NP that is working out of Thunder Bay.</li> <li>• We have a job posting for a full-time, permanent Administrative Assistant closing on the 28<sup>th</sup> (or will be open until filled)</li> <li>• We have a job posting for a full-time, permanent Mental Health Clinician closing on November 4<sup>th</sup>.</li> <li>• Our Program Assistant is slated to be back on November 14<sup>th</sup>.</li> <li>• S. Burns asked how the new director was doing. J. VanSlyke that he is new to primary care, but is learning. She also asked about B. Maranzan's</li> </ul>	

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<p>financial background. J. VanSlyke noted that he has this own company 807 Management and is serving as CFO at the Geraldton office so he is familiar with financials and budgets. He helped AGH get our 22 new LTC beds approved.</p> <p><b>M-SAA (Mental Health and Addictions Contract) Operational Update</b></p> <ul style="list-style-type: none"> <li>• Alan Gauthier-Poelman started in his new role as Manager of Mental Health and Addictions Services on October 17<sup>th</sup>.</li> <li>• MHA is getting ready to Go Live with Ocean E-referral in November. This is a new platform funded by the government and encouraged by Ontario Health. This platform will be easy to use and be more consistent for referrals.</li> <li>• Transition House has 1 client and we have hired a part-time employee to support this program</li> </ul>	
<p><b><u>Chief Nursing Officer Report Prepared by J. Learning:</u></b></p> <p><b>Nursing:</b>  <b>Meditech:</b> We had the entire Meditech team here for a day to spend time with all the various departments that use Meditech. Everyone found it very informative and helpful. We are planning to upgrade the system in a few years to Meditech Expanse which should improve the flow of how patient information is accessed. Cindy Fedell, Regional Chief Information Officer also attended and gave an overview on Meditech Expanse.</p> <p><b>Staffing:</b> Our staffing seems to have stabilized a bit over the last little while and we are able to cover most shifts. The commitment and dedication of the nursing staff to help cover shifts has been tremendous and very much appreciated. She reported that vacations that were requested in their annual vacation request in the spring have been honored. About 70% of new time off requests have been granted.</p> <p><b>Diagnostic Imaging:</b>                      All X-Ray equipment and ultrasound machines are now under the service of BCL which has a branch office in Thunder Bay, and that will save us lots of money on service calls. Previously we were using GE which cost us \$5,000 each time for service. Replacement PACS workstation monitors price has increased to \$15,000; we are looking for cheaper options.</p> <p>E-Referral training is being done on a one-on-one basis with each staff member – go-live set for sometime in November. This means the physicians can order diagnostic tests through their computer at the clinic and the referrals will be sent electronically to the department.</p>	

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<p><b>Rehabilitation Department:</b></p> <p>The department currently has a full time permanent Occupational Therapist, Physiotherapist and Rehab Clerk. They have a full time Temp Kinesiologist and a full time Rehab Assistant. The Family Health Team has funded a full-time temporary Rehab Aide who has been extended to March 31, 2023. They are working on trying to get full time permanent funding for a permanent Kinesiology position. All of this staff has significantly helped to reduce wait-times. Our Kinesiologist is offering group sessions which also helps to reduce the wait list.</p> <p>P3, P4, P5 (lower acuity) decreased in wait times average of 5 weeks (36) days since May 2022. Rehab getting 20-50 new referrals a month and able to see approx. 20-30 individually, therefore reduction is based on more group programs being run by our Kinesiologist.</p> <ul style="list-style-type: none"> <li>• S. Burns asked why the Kinesiologist was a temp full-time position. J. Learning shared that Rehab was able to get a grant which allowed us to have a Kinesiologist for one year. She will return to her role as a Rehab Aide when the contract expires. This role has been beneficial in taking pressure off of the OT and PT.</li> <li>• J. VanSlyke shared that she is in discussion with the Primary Care Branch for the Family Health Team to see if there is an opportunity to have OT/PT support 2 days/week to support the wait list for the community.</li> </ul> <p><b>LTC Board Report</b></p> <p><b>SMILE</b></p> <ul style="list-style-type: none"> <li>• We recently launched our new SMILE app to families of residents as discussed under “Good News Story”. This has been well received by families near and far and is really keeping us all connected.</li> </ul> <p><b>Vaccine Rollout</b></p> <ul style="list-style-type: none"> <li>• Residents were given their COVID-19 boosters as well as their flu shots over the last few weeks. Residents recently recovering from COVID will receive their booster doses 3 months from their illness.</li> <li>• 17/25 residents received their COVID-19 boosters</li> <li>• 20/25 residents received their flu shots on October 20<sup>th</sup> (we will be giving more this week)</li> <li>• Vaccines for staff will be offered this Wednesday October 26<sup>th</sup>.</li> </ul>	

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<p><b>COVID Outbreak</b></p> <ul style="list-style-type: none"> <li>• ECW declared a COVID-19 outbreak on September 29<sup>th</sup>. The outbreak took place over 15 days and was declared over on October 14<sup>th</sup>.</li> <li>• During this time increased Infection Control measures were put in place as well as temporary restrictions. General visitors were not permitted; only designated caregivers, outings were temporarily suspended and group activities were limited.</li> </ul> <p><b>COVID Rules Changing</b></p> <ul style="list-style-type: none"> <li>• The Ministry released some new guidance documents and amendments to some existing restrictions in LTC that took effect October 14<sup>th</sup>.</li> <li>• Some of these changes included:               <ul style="list-style-type: none"> <li>○ Residents no longer requiring PCR testing after an outing (only if symptomatic)</li> <li>○ Resumption of regular visiting – removing the limit of 4 visitors at time for residents</li> <li>○ Masking of visitors continues in common areas; however, visitors are now allowed to unmask in the resident room</li> <li>○ Residents who are deemed “close contacts” of a positive case, no longer need to isolate for 5 days unless they become symptomatic.</li> </ul> </li> <li>• The Ministry noted that they recognize that while these updates signal continued efforts to move towards a state of learning to live with COVID-19, they want to highlight the importance of continuing to follow protective measures, such as staying up to date with vaccinations, screening / self-monitoring for symptoms, and adhering to infection prevention and control (IPAC) protocols.</li> </ul> <p><b>Ministry Inspection</b></p> <ul style="list-style-type: none"> <li>• On October 4<sup>th</sup> &amp; 5<sup>th</sup>, during our COVID-19 outbreak, we received a visit from an inspector from the Ministry of Long-Term Care. The purpose of the visit was to focus on Infection Prevention &amp; Control (IPAC) measures in the home to ensure we are compliant with Ministry mandates. Visits from the Ministry of Long-Term Care can happen at any time, and are always unannounced.</li> <li>• We are happy to report that there were no findings of non-compliance issued and the inspector was very impressed with what measures we had in place and the cooperation from our team. Thank you to all our ECW staff and congratulations!</li> <li>• J. Learning noted that C. Maki, the Occupational Health Wellness and Safety Coordinator handled her first inspection very well.</li> </ul>	

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<ul style="list-style-type: none"> <li>C. Maki shared that we have offered two vaccine clinics to staff now for the flu shot and Covid booster. Staff have been signing up for both shots. She also reported that there were no employee injuries to report.</li> </ul> <p><b>Bed Census/Occupancy Rate</b></p> <ul style="list-style-type: none"> <li>Our current census for ECW is 25. We currently have one vacant bed. This vacancy is due to the fact that there is no bed match to anyone who is currently on the wait list. This is a very rare, if ever, occurrence for ECW. We are working at a solution to ensure that this gets filled as soon as possible.</li> <li>B. Fairfield asked about the LTC bed vacancy. J. Learning shared that the wait list is small currently had was all males, and our vacancy was in a double female room. S. Wood is working on a plan to move patients to fill the vacancy.</li> </ul>																	
<p><b>CFO Report</b> shared by J. VanSlyke  <u>Financial Summary as at September 30, 2022</u></p> <table border="1" data-bbox="212 989 1287 1377"> <tbody> <tr> <td>Revenue</td> <td>\$ \$5,568,902</td> </tr> <tr> <td>Expenses</td> <td>\$5,585,537</td> </tr> <tr> <td>Surplus/(Deficit) from Hospital Operations</td> <td>(\$16,635)</td> </tr> <tr> <td>Unrealized gain on investments</td> <td>(\$41,906)</td> </tr> <tr> <td>Amortization</td> <td>(\$36,979)</td> </tr> <tr> <td>Total Surplus/(Deficit) from Fund Type 1</td> <td>(\$95,520)</td> </tr> <tr> <td>Surplus/(Deficit) from Other Votes</td> <td>0</td> </tr> <tr> <td>Overall Surplus/(Deficit)</td> <td>(\$95,520)</td> </tr> </tbody> </table> <ul style="list-style-type: none"> <li>J. VanSlyke noted that the deficit before Amortization was \$16,635 and we are ending quarter two with an overall deficit of \$95,520, which is better than quarter one.</li> <li>Referring to the Operating Statement she noted that although our income was higher due to increased one-time payments for Covid reimbursements, and grants, our salaries and wages along with employee benefits were much higher than budgeted.</li> <li>J. VanSlyke shared that we are not the only hospital running in a deficit. The Ministry has asked hospitals to report by the end of October what deficit they are predicting for year end. Most hospitals are dealing with having to hire Agency nurses which significantly increases staffing expenses.</li> </ul>	Revenue	\$ \$5,568,902	Expenses	\$5,585,537	Surplus/(Deficit) from Hospital Operations	(\$16,635)	Unrealized gain on investments	(\$41,906)	Amortization	(\$36,979)	Total Surplus/(Deficit) from Fund Type 1	(\$95,520)	Surplus/(Deficit) from Other Votes	0	Overall Surplus/(Deficit)	(\$95,520)	
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<p><b>Chief of Staff Report by Dr. S. Van Der Loo:</b></p> <ul style="list-style-type: none"> <li>• The government recently announced a new program for small and rural hospitals which provides real time ER support that small hospitals that access. This allows physicians to speak with experienced ER physicians over OTN.</li> <li>• This is a pilot project and we just received word that they are expanding who they are offering it to, so we hope to be able to have this program in place by December.</li> <li>• This will also help for recruiting new physicians to our community as well as assist locums and current staff when dealing with difficult cases.</li> </ul> <p><b>MOTION: S. O’Sullivan/K. Pfeifer</b>                      “That the Board approve all reports as presented.” <b>CARRIED 2202-087</b></p>	
<p><b>5. In-Camera Session</b></p> <p><b>MOTION: S. O’Sullivan/S. Burns</b>                      “That the Board moves to an in-camera session of the meeting at 5:42 pm.”  <b>CARRIED 2022-088</b></p> <p><b>6. Return to Open Session</b></p> <p><b>MOTION: S. Burns/T. Hailey</b>                      “That the Board returns to open session of the meeting at 7:23 pm.”  <b>CARRIED 2022-089</b></p> <p><b>MOTION: L. Gauthier Stromberg/K. Pfeifer</b>                      “That the In-Camera Agenda (reviewed In-Camera) of October 26, 2022 be approved as presented.”  <b>CARRIED 2022-090</b></p>	
<p><b>MOTION: L. Gauthier Stromberg/S. O’Sullivan</b>                      “That the Consent Agenda (reviewed In-Camera) including the In-Camera Minutes of September 28, 2022, MAC Meeting Minutes of October 19, 2022, Quality Committee of the Board Meeting Minutes of August 31, 2022 and Governance &amp; Nominating Committee Meeting Minutes of September 28, 2022 be approved as presented.”  <b>CARRIED 2022-091</b></p>	
<p><b>Credentialing (from October 19, 2022 Medical Advisory Committee meeting)</b></p> <p><b>MOTION: S. Burns/L. Gauthier Stromberg</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 2022-092</b></p>	

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<p><b>MOTION: S. O’Sullivan/K. Pfeifer</b>                      “That the board approve the Incident Report for Q2 as well as the Year to Date Report.”</p> <p style="text-align: right;"><b>CARRIED 2022-093</b></p> <p><b>MOTION: S. O’Sullivan/L. Gauthier Stromberg</b>                      “That the board approve the Risk Report for October, 2022 as presented.”</p> <p style="text-align: right;"><b>CARRIED 2022-094</b></p>	
<p><b>7. <u>DATE OF NEXT MEETING:</u></b> The next meeting will be held on Wednesday, November 30, 2022 at 5 pm.</p>	
<p><b>8. <u>ADJOURNMENT</u></b></p> <p>With no further business, the meeting was adjourned at 7:26 pm on a motion by L. Gauthier Stromberg/S. Burns</p> <p style="text-align: right;"><b>CARRIED 2022-095</b></p>	
<p>_____</p> <p>Beth Fairfield, Board Chair</p> <p style="margin-left: 200px;">_____</p> <p style="margin-left: 200px;">Jorge VanSlyke, CEO</p>	