

**MINUTES OF THE ALLIED BOARDS OF DIRECTORS
MEETING HELD ON
TUESDAY, NOVEMBER 22, 2022 AT 6:30 PM
AGH OCTAGON ROOM – 95 SPRING STREET, ALMONTE**

PRESENT:

√	F. Bird	√	T. Moffa
√	A. Champagne	√	D. Perley
√	C. A. Esnard - Chair	√	R. Probert
√	J. Fournier	√	G. Smith
√	L. Gardiner	√	M. Vermette
√	L. Hachey	√	M. Wilson Trider
√	L. Heslop	√	B. Young
√	B. Lowry Bagshaw		

REGRETS:

X	G. Buckley	X	J. Milko
X	R. Larkin	X	D. Oosterhoff
X	G. McKillop	X	C. Snyder

STAFF:

√	S. Cousineau
√	K. Harbord
√	T. McLelland
√	R. Shaw

GUESTS:

√	L. McGreevy, CPDMH Foundation Board Chair
√	A. Roberts, AGH Foundation Managing Director
√	R. Arseneau, CPDMH Foundation Executive Director

Board Discussion: State of Emergency; Inside Canada's ER Crisis – MACLEAN'S Article

The Chair referred to the MACLEAN's article included in the package and invited Dr. Champagne to share her perspective. Dr. Champagne provided the following comments:

- Indicated that this is a system issue
- There is a shortage of staff in many departments. Physicians are providing service in several areas and there has been a change in their coverage model as the number of physicians has decreased.
- Overcrowding in the Emergency Department with walk-ins, ambulances, transfers.
- Becoming more difficult to discharge when needed
- Occupancy has increased during the pandemic. Isolation concerns have blocked beds and patients stay in Emergency Departments as they await a bed to become available.
- Working conditions are declining as abuse from the community, including rudeness, raised voices and impatience increases. Wait times are longer, acuity is higher and COVID is causing absenteeism from work (all departments) which causes stress for all.
- Closing an Emergency Department was never thought of as an option prior
- Quotes from staff were gathered by from A. Champagne and were read, giving the Directors a glimpse into staff perspective

The Interim VP Patient/Resident Services and CNE provided insight into the nursing perspective and provided the following comments:

- Similar comments as from the physicians
- Teams show up every day, despite the challenges
- Small departments causes challenges with confidentiality as most patients are known to staff
- Emergency Nursing does not have a large turnover rate, the challenge is with med/surg nurses who wish to

specialize and leave to do so

- Abuse from patients has increased – larger hospitals have security and or call the police and charges are laid. Management is supporting staff as best as possible. Most patients are good but it only takes a couple of people to cause stress and unhappiness in the workplace
- COVID sickness amongst staff is causing closures

The VP of Human Resources added the Human Resource perspective. S. Cousineau provided the following comments:

- Experiencing these concerns in healthcare everywhere – not just AGH/CPDMH
- Level of pressure has increased and hiring of agency nurses to fill the gaps is more common
- Currently there are 17 FT/PT nursing positions open – 1 single vacancy in a small hospital has a huge impact
- AGH and CPDMH have applied for incentive programs – some apply to small hospitals and some do not
- AGH and CPDMH have invested in marketing and advertising
- Positive culture and team dynamic. Huron Learning has helped leaders continue to engage with staff and to bring forward suggestions

Board Directors thanked A. Champagne, L. Hachey and S. Cousineau for addressing the article and shared their thoughts. They expressed that the quotes from staff were disheartening and really hit home. Questions were raised regarding support for staff, advocates for healthcare issues and education to the community. The following answers were given:

- All VP's, COS's and the CEO meet with various Regional groups. The CEO also engages with the OHA and the local MPP.
- Emergency departments may not always look busy but various factors can affect how long a patient has to wait. Triage explanations and alternate options to the Emergency Department has been provided on posters and on the TV in the waiting rooms and on the websites.
- Staff are being supported and offered peer support as well have access to the EAP program. Staff appreciation events like the Board BBQ are well received and help with staff morale.

1.0	Call to Order
	The Chair called the meeting to order at 7:25 pm.
2.0	Declaration of Conflict of Interest
	No conflicts were declared.
3.0	Reminder to Consider Ethical Issues
	Directors were reminded to consider ethical issues.
4.0	Approval of Agenda
	IT WAS MOVED AND SECONDED THAT THE AGENDA BE APPROVED.
	<u>MOTION CARRIED</u>
5.0	Chair's Remarks
	The Chair addressed the following: <ul style="list-style-type: none"> • Reminded Directors of the meeting evaluation survey to be completed after the meeting and that the Governance Survey was also sent out with a deadline of this Friday. • Thanked Directors who attended the ground breaking ceremony at CPDMH and looking forward to the same at AGH with the CT Scan. • Asked that phones be silenced and put away to ensure that all Directors are able to fully participate

	<p>in the meeting.</p> <ul style="list-style-type: none"> • Indicated awareness of questions about expectations for philanthropy in the new Allied Boards structure. Informed that Directors should donate to organizations that are meaningful to them and that there is no expectation or requirement for donations to both hospital foundations. Directors were reminded that donations to the foundation by the hospitals' governance leaders sends a powerful message to the community. • Congratulated Chelsea Snyder on being recognized as a Royal Bank of Canada 2022 Convention Award Achiever, which is one of the top honors in the bank. The recognition was given based on leadership, business growth, employee engagement and community involvement. • Informed Directors that T. McLelland has sent an updated calendar invitation regarding the Board Retreat on December 3rd. Location is the Octagon Room and time is 9 am to 3 pm. • Invited Al Roberts to provide additional information regarding the AGH Foundation: A. Roberts noted that a Donor Reception is scheduled for the next day with a focus on the CT Scanner. • Invited L. McGreevy to provide additional information regarding the CPDMH Foundation thanking the donors who have matched the Team Vital Campaign which has been moving along very well. It was noted that Sam Laprade is hosting a live event at CPDMH to promote the campaign as well. L. McGreevy mentioned that the Foundation will be having a Holiday event of which all Board Directors will be receiving an invitation to.
6.0	Consent Agenda Matters
	<p>IT WAS MOVED AND SECONDED THAT THE FOLLOWING ITEMS CONTAINED IN THE CONSENT AGENDA BE APPROVED:</p> <ul style="list-style-type: none"> a. Minutes of the Allied Boards of Directors meeting held September 27, 2022 b. AGH Financial Statements for the six month period ended September 30, 2022 c. CPDMH Financial Statements for the six month period ended September 30, 2022 d. Updated Policy # IV-8 Asset Protection e. Updated Policies: Policy V-A-1 Board Director Roles & Responsibilities, Policy V-A-4 Board Standing and Special Committees, Policy V-A-10 Community Representatives on Board Committees, Policy V-1 Board Recruitment, Policy V-B-2 Identification and Selection of Officers and Committee Chairs, Policy II-4 CEO Evaluation & Policy II-5 COS Evaluation <p style="text-align: right;"><u>MOTION CARRIED</u></p>
7.0	Business Arising from the Minutes
	There was no business arising from the minutes.
8.0	Matters Requiring Decision
	8.1 Operating Line of Credit ED Project (CPDMH)
	<p>L. Gardiner reviewed the Memo included in the package and asked if there were any questions. No concerns were raised.</p> <p>IT WAS MOVED AND SECONDED THAT AUTHORIZATION OF THE CEO AND CFO TO SIGN A NEW OPERATING LINE OF CREDIT FACILITY ON BEHALF OF THE CARLETON PLACE & DISTRICT MEMORIAL HOSPITAL FOR AN AMOUNT OF \$10,000,000 WITH THE BANK OF NOVA SCOTIA THE BE APPROVED.</p> <p style="text-align: right;"><u>MOTION CARRIED</u></p>
	8.2 Borrowing Resolution (CPDMH)
	L. Gardiner referred to the Memo included in the package and noted that with the increase in the Operating Line of Credit, a revised borrowing resolution is required. No concerns were raised.

IT WAS MOVED AND SECONDED THAT AUTHORIZATION ANY TWO OF THE CHAIR, VICE-CHAIR, CEO AND CFO TO BORROW ON BEHALF OF THE CARLETON PLACE & DISTRICT MEMORIAL HOSPITAL, AN AMOUNT NOT TO EXCEED \$11,555,000 FOR THE PERIOD OF NOVEMBER 8, 2022 – APRIL 1, 2023, AT ANY ONE TIME TO MEET CURRENT EXPENDITURES OF THE CORPORATION UNTIL CURRENT REVENUE HAS BEEN RECEIVED, OR TO FUND CAPITAL EQUIPMENT PURCHASES AND THE EMERGENCY DEPARTMENT REDEVELOPMENT PROJECT BY UTILIZING ANY OF: OPERATING CREDIT LINES, LETTER OF CREDIT, PROMISSORY NOTE, SCOTIA LEASING DOCUMENTS, OR SCOTIA BUSINESS CARD AGREEMENT BE APPROVED.

MOTION CARRIED

8.3 Governance & Nominating Committee Report

• Policy II-11 Recognition for Exemplary Service

C.A. Esnard referred to the Governance & Nominating Committee minutes included in the package and noted the recommendation to approve Policy II-11 Recognition for Exemplary Service. It was noted that this is an update for CPDMH and new for AGH. No concerns were raised.

IT WAS MOVED AND SECONDED THAT POLICY II-11 RECOGNITION FOR EXEMPLARY SERVICE BE APPROVED.

MOTION CARRIED

9.0 Matters for Discussion

9.1 Corporate Goals Update

M. Wilson Trider provided an update on the Corporate Goals which were approved by the Boards earlier in the year. The items which were not currently meeting the requirement were reviewed.

9.2 Clinical Services Plan Update

The CEO provided an update on the Clinical Services Plan indicating that there is some overlap with the corporate goals. A list of completed items was reviewed. Directors were invited to send the CEO any questions should they arise at a later date.

9.3 Quality Improvement Plan (QIP) Update

The CEO provided an update on the Quality Improvement Plan and reported that in the past the Boards have requested that the mid-year update to the Boards highlight any barriers or challenges with achieving the pay for performance initiatives in particular.

9.4 Report of the CPDMH Chief of Staff

The Chair noted that the CPDMH Chief of Staff Report was included in the package. No questions were raised.

9.5 Report of the CEO & Senior Team

M. Wilson Trider noted that the Report was included in the package. The CEO informed that the funding for WIFI has been received for both hospitals and communication to the staff has been sent. Work has begun and it is expected to be complete by the end of the year. K. Harbord was recognized for the work she did to secure this funding.

M. Wilson Trider reported that funding has been announced to address new hospital measures for wait time reduction and one-time funding for Pandemic costs but no amount has yet been released.

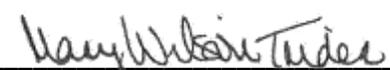
The CEO informed the Directors that the HIROC Board is looking for new members and invited interested Directors to reach out and information will be provided.

	<p>The CEO reported that Janice Steele who is a LCPS Superintendent will be joining the Board Retreat session on Strategic Planning with the Board Chair's permission. J. Steele has expressed interest in participating in the development of the MRHA strategic plan to enhance ongoing learning in the Bachelor of Applied Business – Emergency Services program.</p> <p>M. Wilson Trider informed the Directors that Ms. McLelland will be taking photos of the Directors at the Retreat to compile into a Christmas Card for staff. The Cafeteria will be decorated and props will be available for use. Directors were encouraged to wear holiday attire.</p>
	<p>9.6 Quality of Care – Near Miss of the Month & Quality of Care - Patient Compliment/Concern</p> <p>The Interim Vice President Patient & Resident Services and Chief Nursing Executive (the "CNE") L. Hachey noted that there was not a Near Miss of the Month to discuss</p>
	<p>9.7 Quality of Care - Patient Compliment/Concern</p> <p>L. Hachey shared a concern received from an emergency department patient who felt embarrassed and disrespected. The patient felt they needed a tetanus shot and was informed that it was an expensive hospital visit and that they could have gone to a walk-in-clinic. It was noted that there were no local walk-in-clinics available. The physician was made aware of the concern and felt remorseful and an apology was given to the patient.</p> <p>L. Hachey shared positive feedback received from an emergency department patient who expressed that they received exceptional care for their newborn baby who wasn't eating. They felt staff were professional and compassionate, thorough and monitored them throughout the evening. They were eventually sent to TOH, transport was arranged and communication was very clear. The Emergency Department team were provided with the accolades.</p>
10.0	Matters for Information
	The Chair noted that the Board Workplan was included for information.
11.0	Other Business/Next Meeting
	There was no other business to discuss. The next meeting will be held on January 24, 2022.
	L. McGreevy and A. Roberts left the meeting.
12.0	Termination of Closed Session
	The Chair noted that the closed session has been terminated.
13.0	In-Camera Business
	<p>IT WAS MOVED AND SECONDED THAT THE MEETING MOVE IN-CAMERA.</p> <p style="text-align: right;"><u>MOTION CARRIED</u></p>

Approved Minutes signed by:



 C. A. Esnard, Board Chair



 M. Wilson Trider, Secretary