AMGH MINUTES

Commi	ttee: Board of Directors Commit	ion 6i)					
Date:	February 7 th , 2022	Time:	3:00pm-4:57pm				
Chair:	Glen McNeil	Recorder:	Alana Ross				
Present		Rowland Howe, Steve Ireland, Glen McNeil, Dr. Susan Reis, Bob Robson, Jane Sager, Jimmy					
Regrets	: David MacKechnie						
Absent							
Guests: Nicole Kucan, Mayor John Grace							
1	Call to Order / Welcome						
1.1	Mr. McNeil welcomed everyone ar	nd called the meeting to or	der at 3:00pm				
2.1	Education						
	 Governance Standards (89 v) Effectiveness of gove organization in achieved Accountability for organization surveys Key change for 2022 in Functioning Tool at less for the surveys Reviewed Governance Self-Argument (19 per per per per per per per per per per	 Effectiveness of governing body, development of clear organizational direction, support of organization in achieving its mandate, accountability, and achievement of sustainable results Accountability for organization performance in quality improvement and risk management AMGH accreditation surveys were held in 2013 and 2017; comparison Key change for 2022 includes that the governing body will complete the Governance Functioning Tool at least once during each accreditation cycle and take action based on results Reviewed Governance Self-Assessment and Governance Functioning Tool results Reviewed 'yellow flagged' items; full results included in package for review Reviewed areas of improvement Action Plan Development; template circulated Used to develop an improvement plan based on Staff Pulse Survey and Patient Safety Survey; can be used by Board to develop an plan based on governance surveys Required Organizational Practice (ROP) evidence collection plan and submission requirement Governing body ROP is accountability for quality of care provided by the organization Evidence is to be submitted to Accreditation Canada prior to the survey taking place; includes major and minor tests for compliance Common governing body documents that surveyors review include meeting agendas and minutes, reports to Board, annual report, by-laws, policies, terms of reference, governance functioning tool and action plan, Mission/Vision/Values, and ethics framework, etc. 					
3	Approvals and Updates	pprovals and Updates					
3.1	Peclaration of Conflict of Interest: Mr. McNeil asked if anyone had a conflict of interest to declare based on information contained in the package						
3.2	Agenda: • Approval / Changes • ADD 5.1 Information re Long Term Care Committee Conference Call • ADD 6.4 Include a motion for creation of a By-Law Review Committee MOVED AND DULY SECONDED MOTION: To approve the February 7 th , 2022 Board of Director's agenda, as amended. CARRIED.						
3.3	Previous Minutes: • Approval / Changes						

	o None			
	MOVED AND DULY SECONDED			
	MOVED AND DULY SECONDED MOTION: To approve the January 10 th , 2022 Board of Director's minutes. CARRIED.			
4	Consent Agenda			
4.1	Standing Reports			
i.	Report of President/CEO 2022-02-Report to Board-CEO			
ii.	Report of CNE/VP Clinical Patient Services No report			
iii.	Report of Chief of Staff 2022-02-Report to Board-Chief of Staff			
	Clarification made that Goderich and Stratford waste water is tested randomly for COVID-19; and to date,			
	no other towns in Huron Perth do so			
iv.	Report of President of Medical Staff No report			
V.	Report of Hospital Auxiliary 2022-02-Report to Board-Auxiliary			
vi.	Report of Hospital Foundation 2022-02-Report to Board-Foundation			
4.2	Verbal Updates			
i.	Report of President/CEO			
	The top three priorities during this pre-election year include Health Human Resources (HHR), Integration			
	and Access to Care O CEOs are working closely with the Ministry and OHA to advocate for funding for healthcare; OHA will			
	 CEOs are working closely with the Ministry and OHA to advocate for funding for healthcare; OHA will be asking the Government for: 			
	 1% inflationary costs and 2.5% for growth for a total of 3.5%, approximately \$735M, to be 			
	added to the global budget (not one-time funding); results are expected around Mar 31st			
	Lost revenue			
	 Continued reimbursement of pandemic expenses for F21/22 and F22/23, and 			
	■ To make the added pandemic beds permanent with attached funding; AMGH added 4, and			
	SHHA added 3; staffing continues to be a province-wide issue • Withdrawal of Directive #2			
	The lifting of Directive 2 will be a 4 phased approach, with 2 weeks in between each phase; surgical			
	procedures will be 'ramped up' with caution			
	Regarding the MRI proposal; successful organizations will be notified by Mar 31 st			
ii.	Report of CNE/VP Clinical Patient Services			
	Hand Hygiene audit, which has been on hold, will be reinstated; results flow to the Quality committee			
	Regarding Infection Control, AMGH has signed an agreement to align with OHT principles, which elevate			
	practices and standards within the region			
	 SHHA is in a significant COVID-19 outbreak, resulting in closure of 10 beds and increased pressure on the system; AMGH has provided support throughout-appreciated 			
	CPH is also in outbreak			
	AMGH continues to work on coordination of ALC patients and LTC, however, LTC is still facing significant			
	pressure, which in turn puts pressure back on the organization			
	 AMGH is working on qualifications for additional physiotherapy funding through Ontario Health West 			
iii.	Report of Chief of Staff			
	Review of graphs circulated in report re infection rate and bed occupancy Review of graphs circulated in report re infection rate and bed occupancy Review of graphs circulated in report re infection rate and bed occupancy Review of graphs circulated in report re infection rate and bed occupancy Review of graphs circulated in report re infection rate and bed occupancy Review of graphs circulated in report re infection rate and bed occupancy Review of graphs circulated in report re infection rate and bed occupancy Review of graphs circulated in report re infection rate and bed occupancy Review of graphs circulated in report re infection rate and bed occupancy Review of graphs circulated in report re infection rate and bed occupancy Review of graphs circulated in report re infection rate and bed occupancy Review of graphs circulated in report re infection rate and bed occupancy Review of graphs circulated in report re infection rate and bed occupancy Review of graphs circulated in report re infection rate and bed occupancy Review of graphs circulated in report re infection rate and bed occupancy Review of graphs circulated in report re infection rate and bed occupancy Review of graphs circulated in report re infection rate and bed occupancy Review of graphs circulated in report re infection rate and bed occupancy Review of graphs circulated in report re infection rate and bed occupancy Review of graphs circulated in report re infection rate and bed occupancy Review of graphs circulated in report re infection rate and bed occupancy Review of graphs circulated in report re infection rate and bed occupancy Review of graphs circulated in report re infection rate and bed occupancy Review of graphs circulated in report re infection rate and bed occupancy Review of graphs circulated in report re infection rate and bed occupancy Review of graphs circulated in report re infection rate and bed oc			
	 Discussed restrictions and impact on surgical cases; cancellation of 7,500 surgeries per week Unattached patients stand at 900, with no movement at this time 			
	 Discussed access to and distribution of medication for treatment of COVID-19, which is being administered 			
	firstly to immunocompromised patients			
iv.	Report of President of Medical Staff			
	Discussed physician access and use of PatientKeeper dictation system and HyperCare paging system			
	 Working on keeping locum and specialist physicians up-to-date on what is happening at AMGH 			
V.	Report of Hospital Auxiliary			
	Auxiliary is working on collecting funds internally for annual education bursaries; feels that the ask does not and to be expended at this time.			
:	need to be expanded at this time			
vi.	Report of Hospital Foundation			

	No discussion			
4.3	Committee Minutes-Previous			
i.		21-12-22		
ii.	Community Advisory No.	report		
iii.		21-12-22		
iv.		21-12-17		
V.	<u> </u>	report		
v. vi.	·	21-12-15		
-	/ \ /			
vii.	·	report		
		report		
4.4	<u>MOVED AND DULY SECONDED</u> <u>MOTION: To approve / accept the February 7th, 2022 Consent Agenda (Previous Minutes (Board Committees), Reports to Board and Verbal Updates). CARRIED.</u>			
5	Business Arising from Minutes			
5.1	Long Term Care Committee Conference Call:			
	 Verbal report given regarding LTC development in Goderich Plans are in discussion for a 6 floor LTC facility south of town, with the ability to isolate residents in future outbreaks; concern for ability to staff 160 beds 			
6	Committee Reports			
	 Monthly Financials Audit & Finance is happy with the Ministry funding at this time; balance sheet and forecast are in good position, and ongoing commitment of staff has lowered over and sick time Staffing remains a challenge MOVED AND DULY SECONDED			
ii.	MOTION: To accept the Board Financials to Dec 31st	, 2021, as presentea. CARRIED.		
".	Community Advisory: No discussion			
iii.	 No discussion Executive & Resources: OHT; verbal report given re January's meeting Huron County Discrimination Study was presented to the OHT meeting 			
	 Updates received from the Advisory Group 			
	 Organizations have signed back IPAC letters 			
	 LTC homes are pleading for assistance as they face significant challenges 			
	o Ms. Sager will be attending the OHT Board-to-Board meeting scheduled for Feb 14 th			
	 HHR CEO continues work on the HHR Plan with Town CAO, and has asked for 50/50 cost sharing for recruitment strategies; response pending 70% of AMGH's patients are from the Town of Goderich Met with surgeons on Friday to discuss issues, and determine where resources are needed, i.e., psychiatry, anaesthesia, nursing, etc.; consultants are aware of our needs 			
	MOVED AND DULY SECONDED			
	MOTION: To proceed with hiring the recruitment consultants, as discussed, and apply for 50% shared cost			
_	Town of Goderich. CARRIED.			
	Action:	By whom / when:		
i	Organize meeting with physicians and consultant Covernance & Naminating:	s • Trieu; this week		
iv.	Governance & Nominating: • AMGH / SHHA Governance			

- Governance & Nominating has discussed and recommends development of a Joint Governance Ad Hoc committee between SHHA and AMGH
- o Appreciation extended to Mr. Ireland for chairing the Jan G&N

MOVED AND DULY SECONDED

MOTION: To create a joint subcommittee between AMGH & SHHA for the discussion and development of the proposed governance structure changes. CARRIED.

- By-Law Review
 - Governance & Nominating reviewed and discussed a Briefing Note submitted by Mr. Niglas in regards to development of an Ad Hoc subcommittee for review and update of AMGH By-Laws; recommended

MOVED AND DULY SECONDED

MOTION: To instruct Governance & Nominating committee to create an Ad Hoc By-Law Review committee to compare and recommend updates to the AMGH By-Laws based on the new ONCA guidelines and templates. CARRIED.

- Board Evaluations
 - Reviewed Board Effectiveness Evaluations from Sep to Dec; Chair is looking for responses from ex
 officio members as well

l	officio members as well			
	 Peer review results will be sent out privately 			
	Action:	By whom / when:		
	Include ex officios in Effectiveness Evaluation	EA; Ongoing		
	Forward peer review results	EA; This Week		
٧.	Joint Conference:			
	No discussion			
vi.	Joint Hospital / Foundation Executive:			
	No discussion			
vii.	Medical Advisory:			
	No discussion			
viii.	Quality Assurance:			
	Quality committee reviewed dashboards in Jan			
	 Discussed quality issues and need for a more robust Quality Improvement Plan (QIP), and a more 			
	positive Pay-for-Performance/Compensation Plan			
ix.	Recruitment & Retention:			
	Appreciation extended to the Board for approval to hire recruitment consultants			
7	New and Other Business			
8	Correspondence			
9	In-Camera Session			
9.1	Move into In-Camera:			
	MOVED AND DULY SECONDED			
	MOTION: To move into In-Camera at 4:45pm. CARRI	<u>ED.</u>		
9.2		<u>ED.</u>		
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	MOVED AND DULY SECONDED						
	MOTION: To approve creation of an Ad Hoc By-Law Review Committee, and to appointment Mr. Mike Niglas,						
	Ms. Donna Partridge, and Mr. Steve Ireland as members for By-Law review. CARRIED.						
10	Board Evaluations						
10.1	Complete Evaluations (via SurveyMonkey):						
	Mr. McNeil asked everyone to complete the evaluations via SurveyMonkey						
11	Adjournment / Next Meeting		Regrets to <u>alana.ross@amgh.ca</u>				
	Date	Time	Location				
	March 7 th , 2022	6:00pm-9:00pm	WebEx				
	Motion to Adjourn Meeting:						
	MOVED AND DULY SECONDED MOTION: To adjourn the Board of Director's meeting at 4:57pm. CARRIED.						
Signatu	Signature						
Mr. Glen McNeil, Board Chair Mr. Jim			Frieu, President / CEO & Secretary of the Board				