

**Kemptville District Hospital
Board of Directors Meeting
Thursday, March 26, 2020
Via Teleconference/Zoom Meeting
6:30 pm**

Minutes

1. **Call to Order:** R. Morais, Board Chair, called the meeting to order at 6:45 pm.
2. **Regrets / Quorum / Declaration of Conflicts:** Quorum was established and there were no conflicts declared.

The following Territorial Acknowledgement was made by Board Chair R. Morais:

In the spirit and understanding that we continue to gain in today's world, we would like to acknowledge the Algonquin nation, whose traditional and unceded territory we are gathered upon today.

Directors:			Present	Regrets				Present	Regrets				Present	Regrets
B. Baxter	√		C. Burke	√		C. Chisholm	√							
P.-E. Cloutier		X	P. Currie	√		B. Hale	√							
M. Harrison	√		E. MacPherson	√		Dr. P. McGregor	√							
R. Morais, Chair	√		J. Nolan	√		Dr. Z. Saleh						X		
S. Saslove	√		B. Steacy	√		K. Strackerjan	√							
D. Ulrichsen	√		F. Vassallo	√		A. Vignuzzi	√							
A. Yee	√													
Staff, Management & Guests:														
L. LeClair	√		L. Mignault (Recorder)	√		A. Pinhey	√							
J. Read	√		K. Cooper	√										

3. **Re-affirming Mission:** KDH's mission was re-affirmed by M. Harrison.
4. **Client Centred Care:** In light of the current COVID-19 pandemic, L. LeClair took this opportunity to present the members with a brief instructional video from KDH's internal Surge Learning on Handwashing, in place of Patient Stories.
5. **Education:**

5.1 Legal Governance and Risk from the Board's Perspective

Karen Cooper, Drache Aptowitzer, LLP, was introduced by R. Morais to provide the Board with an informative session on Legal Governance and Risk from the Board's Perspective. A brief question period followed the PowerPoint presentation. R. Morais thanked Ms.

Cooper for presenting this education session during this difficult time of the COVID-19 pandemic.

K. Cooper left the meeting at 7:15 pm.

5.2 COVID-19 Update

R. Morais noted that the COVID-19 updates will be conveyed through the respective CEO, CNO and COS Reports. He also read an excerpt from the recent press release from the Leeds, Grenville and Lanark District Health Unit citing the first confirmed COVID-19 case in the tri-county area.

6. Additions/Changes to the Agenda: Exchange of Item 4.0 Patient Stories with Handwashing Training Video, 5.2 COVID-19 Update will be addressed in the CEO, CNO and COS Reports, 9.1.3b CNO Report March 2020 – moved off consent agenda and for discussion, 9.2.1 COS Report changed to written and was distributed, 9.3.6 Annual Priority Risk Assessment was deferred.

7. Approval of Consent Agenda Items:

Motion: On a motion duly moved, seconded and carried, the Board approved to receive for information or approval for motion, items 8.0 Approval of Previous Minutes: January 23, 2020, 9.1.1a Compliance Report February 2020, 9.1.1b Compliance Report March 2020, 9.1.3 CNO Report February 2020, 9.1.4 Enterprise Risk Management Dashboard Q3, 9.1.5 Strategic Dashboard Indicator Report Q3, 9.2.4 Chiefs of Department HR Plans, 9.3.2 2019-2020 Operational Plan Report Q3, 9.3.3 2019-2020 Health System Integration, 9.3.4.2 Board Policy 15 Process of Election of Officers and Committee Participation, 9.4.2 Quality Improvement Plan 2019-2020 Q3 Report, 9.4.3 Quality Improvement Plan 2019-2020 Final Report, 9.5.2 2019-2020 Q3 Financial Report, 9.5.3 Investment Portfolio Q3 Report, and 9.7 KDH Auxiliary Report.

Under the Consent Agenda, the following motions were approved:

8.0 Motion: On a motion duly moved, seconded and carried, the Board approved the Minutes of the Previous Meeting of January 23, 2020, as presented.

9.3.4.2 Motion: On a motion duly moved, seconded and carried, the Board approved the Board Policy 15 Process of Election of Officers and Committee Participation, as presented.

9. Reports

9.1 Hospital

9.1.2 b CEO Report - The report was provided by F. Vassallo, and cited the tremendous collaboration being observed both locally and regionally through the Regional Bed Management Program and Bypass Strategy Transfer Protocol. Regional collaboration is well established in Eastern Ontario and the region will work through this with a task force approach, and not get entrenched in the process, in hopes of getting ahead of the curve.

9.1.3 b CNO Report

C. Burke verbally highlighted actions being taken on behalf of KDH, for patients, families, staff, and physicians as this worldwide pandemic evolves. She provided a point-by-point summary of actions, processes, and plans that are in place in anticipation of increased severity and demand for healthcare in our community as a result of the COVID-19 virus. Board members were provided with answers to questions on our ability to function with respect to staff, supplies, physicians, screening, communications and capacity within the confines of the hospital.

9.2 Chief of Staff

9.2.1 Chief of Staff Report – P. McGregor addressed the Board from the physician perspective, noting that there are daily calls with the Department Chiefs, and that the local physicians in the community are supportive and want to help. As there are few physicians dedicated strictly to KDH, physician resources could be an area of concern for the hospital; KDH is being realistic about what can be done with the limited resources in place. Regional credentialing will be helpful in enabling movement of physicians among healthcare organizations.

9.2.2 Credentialing

Motion: On a motion duly moved, seconded and carried, the Board approved hospital privileges for the following physicians, who have been credentialed as set out under Article 7 Appointment and Reappointment to Professional Staff of the Professional Staff Bylaws:

Re-Application	Application	Physician	Privilege Category
	√	Dr. Brendan LITT	Courtesy – Radiology (Real Time Medical)
	√	Dr. Adam SACHS	Courtesy – S/OR Microdissectomies

STATEMENT OF COMPLIANCE

It is attested that currently there are no physicians practicing at Kemptonville District Hospital who do not hold valid privileges.

9.2.2.1 Motion: On a motion duly moved, seconded and carried, the Board approved to adopt the following resolution as presented:

BE IT RESOLVED THAT: In response to the COVID-19 pandemic, the HOSPITAL Board of Directors grants the Chief of Staff the ability to make the following changes to the medical staff credentialing process effective March 27, 2020 until the pandemic period ends and the Chief of Staff determines it is no longer needed:

1. A new privileging status will be created to address the individuals privileged as per #2 below. This status will be (COVID-19 Temporary) and will be in effect throughout the pandemic period and until the Chief of Staff determines this is no longer needed.
2. Credentialed Medical staff in the Champlain region who are:
 - a. Critical Care trained
 - b. Emergency Medicine trained
 - c. Anesthesiology trained
 - d. Hospitalist Internal Medicine
 - e. Hospitalist Family Physicians
 - f. Other specialties, not currently identified, deemed necessary during the pandemic

and who currently hold privileges in good standing at their primary hospital be given temporary privileges at Kemptonville District Hospital to assist with rapid resource sharing when and where necessary. A letter of good standing from the Primary Hospital will be provided with a list of medical staff to which this applies. A signed confidentiality agreement will not be required and any other usual temporary privilege requirements will be waived.

Dr. McGregor elaborated on the rationale for this motion, which was drafted by the Champlain LHIN CoS Group to take to all their respective Boards. The CPSO will grant temporary certification and follow their guidelines. This motion is for regional physicians and any new applicants such as a family physician in the community, applying for temporary privileges. The timeline for the end of this temporary medical staff credentialing process is discretionary, i.e., as declared by WHO or regional/provincial governing bodies.

9.2.3 Medical Staff Policies

9.2.3.1 Motion: On a motion duly moved, seconded and carried, the Board approved the Medical Staff Policy No. 20 - Medical Products / New Capital Equipment Purchase Requisitions, as reviewed and approved by the Medical Advisory Committee.

9.2.3.2 Motion: On a motion duly moved, seconded and carried, the Board approved the Medical Staff Policy No. 16 Late Applications to Medical Staff, as reviewed and approved by the Medical Advisory Committee.

9. Reports

9.3 Governance Committee

9.3.1 Governance Committee Chair Report

P. Currie, Chair, provided a verbal report on the Governance Committee meeting of March 10, 2020.

9.3.4 Board Policy Reviews

9.3.4.1 Board Policy 13 Public Attendance at Board Meetings

Motion: On a motion duly moved, seconded and carried, the Board approved the changes to Board Policy 13 Public Attendance at Board Meetings, as presented and recommended by the Governance Committee.

9.3.4.3 Board Policy 21 Code of Conduct for Directors

Motion: On a motion duly moved, seconded and carried, the Board approved the changes to Board Policy 21 Code of Conduct for Directors, as presented and recommended by the Governance Committee.

9.3.5 Next Cycle Strategic Plan

In follow up from the previous meeting, members were reminded of the discussion concerning the current Strategic Plan, and the work of the Ad hoc Committee. The recommendation from the Ad hoc Committee and the Governance Committee was to consider reconvening in the the Fall of 2020 to continue with the development of the next Strategic Plan. As this was not a motion before the members, it was provided for information purposes only.

9.3.7 OHA GCE Board Self-Assessment and Skills Matrix

The Governance Chair reminded the members of the request for required input and participation in the surveys that are used for Board planning and recruitment. The deadlines were reiterated and full participation was requested of all members.

9.4 Quality and Safety Committee

9.4.1 Quality and Safety Committee Chair Report

B. Hale, Chair, provided a verbal report on the Quality and Safety Committee meeting of March 12, 2020.

9.5 Corporate Services Committee

9.5.1 Corporate Services Committee Chair Report

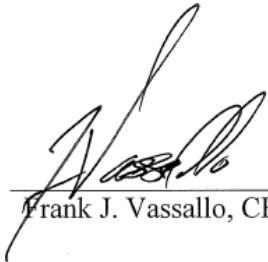
S. Saslove, Chair, provided a verbal report on the Corporate Services Committee meeting of March 19, 2020.

9.5.4 Board Policy Reviews

9.5.4.1 Board Policy 20 Corporate Services Committee Terms of Reference

Motion: On a motion duly moved, seconded and carried, the Board approved the changes to Board Policy 20 Corporate Services Committee Terms of Reference, as presented and recommended by the Corporate Services Committee.

10. **KDH Board Action Registry:** *No outstanding Actions.*
11. **Next Meeting:** Thursday, April 23, 2020, at 6:30 pm., via Zoom Teleconference.
12. *Brief pause at 8:40 pm.*
13. **In Camera:** *No In Camera session was required.*
14. **Adjournment:** There being no further business, the meeting was adjourned on a motion at 8:40 pm.



Frank J. Vassallo, CEO



Robert Morais, Board Chair