

**Kemptville District Hospital
Board of Directors Meeting
Thursday, March 31, 2022
Via Microsoft Teams Meeting
6:30 pm**

Minutes

1. **Call to Order:** E. MacPherson, Board Chair, called the meeting to order at 6:30 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 E. MacPherson:

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.

E. MacPherson had a few announcements to make: B. Baxter has submitted her resignation from her position on the KDH Board of Directors; this was regretfully accepted. Also announced was the invitation for a member of our Board to participate on The Ottawa Hospital (TOH)'s New Campus Advisory Council; it was agreed that E. MacPherson will be KDH's representative.

| Directors: | Present | Regrets | | Present | Regrets | | Present | Regrets |
|--------------|---------|---------|-----------------------|---------|---------|----------------|---------|---------|
| L. Carnegie | √ | | A. Carrière | √ | | C. Chisholm | √ | |
| J. Ellis | √ | | B. Hale | √ | | M. Harrison | √ | |
| Dr. L. Luong | | X | E. MacPherson (Chair) | √ | | S. Mincoff | √ | |
| R. Morais | √ | | J. Nolan | √ | | M. Norenberg | √ | |
| S. Saslove | √ | | Dr. C. Sentongo | √ | | K. Strackerjan | √ | |
| F. Vassallo | √ | | A. Vignuzzi | √ | | A. Yee | √ | |

Management, Staff & Guests:

| | | | | | | | | |
|--|---|--|-------------------------------------|---|--|--|---|--|
| L. LeClair | √ | | L. Mignault (Recorder) | √ | | J. Read | √ | |
| B. Rivard | √ | | A. Greenberg, OH (Invited Guest) | √ | | Kristen Lechleitner (Requested to attend) | √ | |
| Christopher Durance (Requested to attend) | √ | | | | | | | |

3. **Re-affirming Mission:** B. Hale re-affirmed KDH's Mission.
4. **Client Centred Care – Patient Stories:** J. Read conveyed a compliment and a complaint, including the learning opportunities as a result of the complaint investigation.

Motion: *On a motion duly moved, the Board approved to move in camera at 6:45 pm.*

5. **Education Session:** F. Vassallo, CEO, introduced Anna Greenberg, Chief Regional Officer – Toronto and East, Ontario Health, and welcomed her to the Board meeting, where she provided the Education Session on Ontario Health including their mandate, an overview of the six regions, the strategic priorities, how OHTs are situated within the regions as well as their path forward highlighting integrated care. Following the presentation, further discussion ensued as Ms. Greenberg invited members to ask questions and make comments.

Ms. Greenberg left the meeting at 7:18 pm.

Motion: On a motion duly moved, the Board approved to move out of in camera at 7:18 pm.

4.1 Patient Relations Reporting: Complaints & Compliments – FY 2020/21

L. LeClair and J. Read provided the members with highlights of this new reporting as the Compliments and Complaints are entered into an App and we now have six years of data. This allows for detailed reporting on both complaints and compliments by department, type of issue (with complaints), and the roles of persons mentioned, enabling us to observe trends and (again, with complaints), discover opportunities for improvement. Of particular interest is the *Actions Taken as a Result of Complaints* portion of the reporting. This highlights the changes that have already been made because of patient feedback (during the complaints resolution process). This reporting will be brought to Board Quality and Safety semi-annually going forward. M. Harrison, Quality and Safety Chair commended J. Read and L. LeClair for this level of reporting going forward.

6. **Additions/Changes to the Agenda:** None.

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: February 24, 2022, 9.0 Executive Committee Report, 9.1.1 Compliance Report, 9.1.4 Service Accountability Agreements – Hospital (HSAA) and Long Term Care (LSAA) Extensions, 9.3 KDH Foundation Report, 9.4.2 ONCA Update, 9.5.3 Quality Improvement Plan 2022-2023 Development, 9.6.2 Epic Implementation & Atlas Alliance Update, and 9.7 KDH Auxiliary Report.

Under the Consent Agenda, the following motion was approved:

8.0 Motion: On a motion duly moved, seconded, and carried, the Board approved the Minutes of the Previous Meeting of February 24, 2022, as presented.

9.1.4 Motion: On a motion duly moved, seconded, and carried, the Board approved to accept the Notice and Extension of Service Accountability Agreement(s) (“Extending Letter”) proposed from Ontario Health – East, to amend the SAAs Term and Schedules to March 31, 2023, as presented.

E. MacPherson noted that although under the Consent Agenda, the KDH Auxiliary Report shared that the Auxiliary donated \$60,000 to KDH for the year ending, resulting from the

hard work of the Auxiliary and its membership. During such a difficult period for fundraising, a contribution of this size is truly remarkable and appreciated.

9. Reports

9.1 Hospital

9.1.2 CEO Report

F. Vassallo addressed the CEO Report, sharing a brief update on the CT Scan project progress, in addition to the information provided in his written report.

9.1.3 CNO Report

J. Ellis briefly addressed her CNO Report for March.

9.2 Chief of Staff

9.2.1 Chief of Staff Report

Dr. C. Sentongo spoke to his report and provided additional information on the latest COVID subvariant and its potential impact regionally. He also added there is concern regionally for the coming summer period regarding potential ER physician staff shortages due to burnout and pending vacations. For this reason, KDH is accelerating its ER physician recruitment efforts to reduce this risk locally.

9.4 Governance Committee

9.4.1 Governance Committee Chair Report

Committee Chair J. Nolan updated members on the recent Governance Committee matters discussed at the March 8, 2022, meeting. The current focus of the Governance Committee remains on Director recruitment and the process continues as we work to fill the now five Director positions for the coming Board year. Through a series of recruitment methods, we have 15 applications with a few more anticipated before the closing date of March 31, 2022. Also underway is the process of confirming Committee participation for existing and new Directors for 2022-2023. The Board Chair will be contacting Directors in the coming week to review their individual interests for Committee participation.

9.5 Quality and Safety Committee

9.5.1 Quality and Safety Committee Chair Report

M. Harrison, Committee Chair, reflected on activities of the March 21, 2022 meeting, which focussed on the Patient Complaints and Compliments Reporting as well as Staff Recruitment, Retention and Wellness.

Motion: On a motion duly moved, the Board approved to move in camera at 7:43 pm.

**9.5.2 Staff Recruitment, Retention and Wellness and Strategic Risk #19,
Back-Up Capacity for Critical Positions – *In Camera***

Information was presented and discussed on this Staffing item.

9.6 Corporate Services Committee

9.6.1 Corporate Services Committee Chair Report: *In Camera.*

9.9 Sale of Property – 25 Hilltop Crescent: *In Camera.*

Motion: On a motion duly moved, the Board approved to move out of in camera at 8:19 pm.

Motion: On a motion duly moved, the Board approved the Sale of Property at 25 Hilltop Crescent, to close on April 12, 2022.

9.6.3 FAC/2022-2023 Hospital Operating Budget

Motion: On a motion duly moved, the Board approved the 2022-2023 operating budget on the recommendation of Corporate Services Committee as presented, on the condition that COVID-19 relief for incremental expenses and loss revenue will continue into 2022-2023.

The operating budget was presented to the Board for approval, and although it reflects an operating loss, primarily due to the addition of onsite security, this addition is essential to provide support and a safe environment for all KDH patients and families, staff, physicians, and volunteers. KDH's Strategic Directions and organizational priorities were also provided in the budget materials, as they are reflected in budget items and net new investments. Potential risks to achieving the objectives within the Strategic Directions were also provided.

9.8 Strategic Planning Ad Hoc Committee Chair Report

Since accepting the role of Chair of the Committee, Ms. Yee has reviewed all the materials and work of the Committee to date. The Working Group met on March 31, 2022, to review the most recent version of the draft Strategic Plan and made some additional adjustments through in-depth discussion as we near a final draft. There have been a few iterations of the Draft and a current version will be shared at a meeting of the full Ad Hoc Committee in late April, and then brought to the Board.

K. Lechleitner, C. Durance, J. Ellis, J. Read, B. Rivard, and L. LeClair left the meeting at 8:26 pm.

10. KDH Board Action Registry: *No outstanding Actions.*

11. Next Meeting: Thursday, April 28, 2022, at 6:30 pm via Teleconference.

12. In Camera:

Motion: On a motion duly moved, the Board approved to move in camera at 8:29 pm.

Motion: On a motion duly moved, the Board approved to move out of in camera at 8:33 pm.

13.1 CEO and COS Performance Goals – In Camera.

Motion: On a motion duly moved, the Board approved the 2022-2023 CEO Performance Goals, as presented.

14. Adjournment: There being no further business, the meeting was adjourned on a motion at 8:34 p.m.



F. Vassallo, CEO



E. MacPherson, Board Chair