

**Kemptville District Hospital
Board of Directors Meeting
Thursday, February 23, 2023
Via Microsoft Teams Meeting
6:30 pm**

Minutes

1. **Call to Order:** E. MacPherson, Board Chair, called the meeting to order at 6:32 pm.
2. **Regrets / Quorum / Declaration of Conflicts:** Quorum was established and there were no conflicts declared.

Board Chair E. MacPherson made the following Territorial Acknowledgement:

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
G. Bebeung		√		E. Bonokoski		√		L. Carnegie		√	
A. Carrière			X	M. Harrison		√		J. Ellis			X
B. Hale		√		S. Mincoff		√		Dr. L. Luong			X
E. MacPherson (Chair)		√		J. Panciuk		√		J. Nolan		√	
S. Saslove		√		Dr. C. Sentongo		√		Y. Pelletier		√	
D. O'Sullivan			X	F. Vassallo		√		A. Vignuzzi		√	
A. Yee			X	H. Zipes		√					

Management, Staff & Guests:

	Present	Regrets		Present	Regrets
L. LeClair, VP Corporate Services (Recorder)	√		B. Rivard, CFO and VP Operations	√	
A. Ladak, Regional Ethicist, Champlain Centre for Health Care Ethics	√		J. Read, Communications / Officer		X

3. **Education Session:** L. MacPherson introduced Ali Ladak, Regional Ethicist, Champlain Centre for Health Care Ethics. A. Ladak presented to the Board members the Ethics Consultation Service provided to KDH by the Champlain Centre for Health Care Ethics, reviewing why an Ethics Framework was needed, the IDEA Framework for clinical decision making, and the Accountability for Reasonableness (A4R) Framework for organizational decision making. Ali reviewed in detail the five values in the A4R Framework; i.e., Relevance, Publicity/Transparency, Revision/Appeals, Enforcement and Empowerment. Ali confirmed that the Centre was available to the Board for consultation in future to guide them through a decision-making exercise.

L MacPherson thanked A. Ladak for the presentation and noted that it was informative.

It was confirmed that the slide deck and a workbook would be sent to the members following the presentation.

4. **Re-affirming KDH Mission:** F. Vassallo re-affirmed the KDH Mission and in his address advised of the addition of this standing agenda item at KDH Management meetings going forward.
5. **Client Centred Care – Patient Stories:** L. LeClair conveyed a compliment and a complaint, including the learning opportunities resulting from the complaint investigation.
6. **Additions/Changes to the Agenda:** The agenda has been modified to move all In Camera items to the end of the meeting for a more efficient flow.
7. **Consent Agenda - Motion to Receive Information 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 Minutes of Previous Meeting: January 26, 2023 , 9.1.1 Compliance Report, 9.1.2 Strategic Indicator Dashboard Q3, 9.1.3 Enterprise Risk Management Dashboard Q3, 9.3 Foundation Report, 9.5.2 Critical Incident Reporting, 9.5.3 2023-2024 QIP Development, 9.5.4 2022-2023 QIP Q3 Report, 9.6.2 Investment Portfolio Q3 Report, 9.6.3 CT Scan Initiative, 9.6.4 2022-2023 Financial Report Q3, and 9.7 KDH Auxiliary Report

Under the Consent Agenda, the following motion received approval:

8.0 Motion: On a motion duly moved, seconded, and carried, the Board approved the Minutes of the Previous Meeting of January 26, 2023, as presented.

The date of the Foundation's Golf Tournament on Tuesday July 25. 2023, and the Auxiliary's Hey Day dates of June 9 and 10, 2023, were noted.

9. Reports

9.1 Hospital

9.1.4 CEO Report

CEO F. Vassallo added to his report that he has been interviewed by Harvard Business Review wanting to get his thoughts/perspectives on hospital leadership/CEO capabilities in the current context; what trends he sees for the future; and how leadership competencies may have to shift to meet these trends.

9.2 Chief of Staff

9.2.1 COS Report

Dr. C. Sentongo did not add to his report but reiterated his reporting that EPIC has entered the optimization phase and the issues that have been raised are being worked on; that a physician well-being study being done, led by Dr. Kirby, Chief of Anaesthesia, continues on the impact of EPIC; that the burden of respiratory illnesses continues to subside with Influenza B being predominantly in circulation; that

regionally there is focus on a post-COVID world; that KDH continues to vaccinate against both COVID and influenza; that, remarkably, KDH has not had any WSIB claims regarding work transmission of COVID; that human resource challenges remain across the hospital with the Emergency Department being the most pressing; and, lastly, that a new surgical plan is being developed to further guide the growth of the program.

L. MacPherson asked Dr. Sentongo to pass on the Board of Directors' thanks and appreciation to Dr. Rutherford on her work on the COVID Assessment and Vaccination Centres. Dr. Sentongo confirmed that he would do so and noted that the COVID Assessment Centre has been particularly helpful to KDH in seeing patients during the recent respiratory illnesses and is aware that they have been assisting CHEO as well.

9.4 Governance Committee

9.4.1 Governance Chair Report

J. Nolan, Committee Chair, gave a verbal update on the activities of the February 16, 2023 meeting including those agenda items that would follow and which focussed on the updates to the Board Retreat planning process.

9.4.2 OHA Board Self-Assessment

L. LeClair went over the new format of the OHA report, the exceptionally high results, and reiterated that this self-assessment is used by the Governance Committee in determining areas for education and perhaps additional work in the next Board year.

9.4.3 Skills Matrix

The Directors assessed theirs and the Board's knowledge and skills in 17 different categories. These results provide us with a profile of the Board's skills and identify gaps for recruitment purposes.

Discussion was held on possible gaps identified in the results to be considered for future Board recruitment and composition based on the Skills Matrix results for the current Board.

9.5 Quality and Safety Committee

9.5.1 Quality and Safety Chair Report

M. Harrison, Committee Chair, gave a verbal summary of the activities of the January 17, 2023, meeting, which included a focussed conversation on the patient compliment and complaint provided, the reporting of zero critical incidents and the development of the hospital's quality improvement plan and the IHI update, discussed below.

9.5.5 IHI Update

The Board of Directors reviewed the Committee's identified actions to be taken to improve KDH's results on the IHI Whitepaper Framework's Governance of Quality Assessment Tool. The three areas identified as focus areas are:

1. Category 1: Prioritize Quality: Board Quality Culture and Commitment
2. Category 2: Keep Me Safe: Safe Care
3. Category 5: Help Me Navigate My Care: Timely and Efficient Transitions

9.6 Corporate Services Committee

9.6.1 Corporate Services Chair Report

Committee Chair S. Saslove conveyed details of the February 16, 2023, meeting that included an Epic and CT Scan update, and Financial, Investment Portfolio, Performance Indicator and Enterprise Risk reports.

9. **KDH Board Action Registry:** *No outstanding items.*

10. **Next Meeting:** Thursday, March 30, 2023, at 6:30 pm via Teams Meeting.

11. **In Camera Request - Motion and Pause:**

Motion: On a motion duly moved, the Board approved to move in camera at 8:05 pm.

12. **In Camera:**

The following items were addressed under the In Camera portion of the meeting:

9.2.2 Credentialing

Motion: On a motion duly moved, the Board approved to move out of in camera at 8:15 pm.

As a result of in camera discussions, the following motion was made:

9.2.2 Credentialing

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

Temp	App	Re-App	Physician	Privilege Category	KDH Primary	Change in Category	Restrictions
		✓	Dr. David BRAGANZA	COURTESY- Emergency			
	✓		Dr. Constance LING	COURTESY – Obstetrics and Gynecology			
	✓		Dr. Tong WU	COURTESY – Radiology			
	✓		Dr. Abdullah ALENEZI	COURTESY – Radiology			

STATEMENT OF COMPLIANCE

It is attested that currently all physicians practicing at Kemptonville District Hospital hold valid privileges.
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14. Adjournment: There being no further business, the meeting adjourned on a motion at 8:35 p.m.

F. Vassallo, CEO

E. MacPherson, Board Chair

Attachment:
5. Listening to the Patient Voice