# Kemptville District Hospital Board of Directors Meeting Thursday, November 25, 2021 Via Telus Business Connect Meeting 6:30 pm

### **Minutes**

- 1. Call to Order: E. MacPherson, Board Chair, called the meeting to order at 6:33 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.

	Present	Regrets		Present	Regrets		Present	Regrets
Directors:	Pre	Re		Pre	Re		Pre	Re
B. Baxter	V		C. Burke	$\sqrt{}$		L. Carnegie		
A. Carrière		X	C. Chisholm		X	PE. Cloutier		X
B. Hale	V		M. Harrison	$\sqrt{}$		Dr. L. Luong		X
E. MacPherson (Chair)	V		S. Mincoff	$\sqrt{}$		R. Morais	$\sqrt{}$	
J. Nolan			M. Norenberg		X	S. Saslove		
Dr. C. Sentongo	1		K. Strackerjan			D. Thompson		
F. Vassallo			A. Vignuzzi			A. Yee		

#### Management, Staff & Guests:

M. Hewitt		L. LeClair		L. Mignault (Recorder)	
J. Read					

- **3. Re-affirming Mission:** D. Thompson 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.
- 5. Education Session: E. MacPherson, Board Chair, presented "Duties and Expectations of Individual Directors" to the members of the Board. The presentation served as a refresher to summarize the duties and expectations that are placed on members of the Board of Directors, both as Members of the Board and as Individual Directors. E. MacPherson stated that, while it is not mandatory, there is an expectation that individual Board Members will support and contribute to the hospital fundraising efforts of both the KDH Foundation and KDH Auxiliary; a brief discussion ensued.

**6.** Additions/Changes to the Agenda: Item 9.1.1 Compliance Report was moved out of the Consent Agenda for an update, 9.1.3 CNO Report has been updated, 9.2.2 Credentialing Report has been revised, and 9.6.1 Corporate Services Committee Chair Report was moved to the In Camera segment of the meeting.

## 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: October 28, 2021, 9.1.1 Compliance Report, and 9.7 KDH Auxiliary Report.

E. MacPherson thanked the Auxiliary for all their work, and L. Carnegie added that the Auxiliary was excited that a few members were putting up seasonal decorations in the Interim Long-Term Care unit over the coming weekend.

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 October 28, 2021, as presented.

Item 9.1.1 Compliance Report came off the Consent Agenda so that L. LeClair could provide an update on the 2021/22 Quality Improvement Plan (QIP). In a communication received from Ontario Health on November 23, 2021 (after agenda materials were distributed), it was confirmed that 2021/22 QIPs are not required to be submitted to Ontario Health; however, hospitals are encouraged to post their 2021/22 QIPs on their websites. Furthermore, Ontario Health directs hospitals to prepare their 2022/23 QIPs for submission by April 1, 2022. As such, we anticipate that we will be provided with technical specifications and priority indicators by Ontario Health in December 2021, and will plan a meeting with the Quality Team to begin the development of the new QIP for approval in the spring.

9.1.1 Motion: On a motion duly moved, seconded and carried, the Board approved to accept the update to the Compliance Report as provided at the meeting, for information.

## 9. Reports

### 9.1 Hospital

### 9.1.2 CEO Report

F. Vassallo addressed the CEO Report, highlighting the progress being made with the CT Scan initiative, including submission of the business case and a presentation made to the United Counties of Leeds and Grenville, where he and Dr. Sentongo were very effective in demonstrating the need. In a previous CEO Report, the Board was advised that F. Vassallo was named as Co-Chair of the Small, Rural and Northern Hospital Network (SRNHN); it was later determined that the committee would have only one Chair and F. Vassallo was subsequently selected as the inaugural Chair. F. Vassallo also updated the Board that a new VP Nursing/Clinical Services and Chief Nursing Executive (CNE) had been selected and an offer letter extended; As a result, C. Burke has formally transitioned to the role of Clinical Lead

for the implementation of the Epic Health Information System. With this being her last Board Meeting, appreciation was conveyed to her for the tremendous job she did in her role as VP Nursing/Clinical Services and CNE.

### 9.1.3 CNO Report

C. Burke updated members on activities occurring at the hospital since her last report. As noted, an updated CNO Report was shared with the Board referencing the recent announcement of the Accreditation Survey results. While KDH did receive an exceptionally high score of 99.7%, an achievement to be celebrated by all, a single Required Organizational Practice (ROP) test was not met, resulting in KDH being awarded "Accredited with Commendation" rather then "Exemplary Standing". For further context, C. Burke noted that the Executive Summary would be shared with the Board immediately following this meeting.

#### 9.2 Chief of Staff

#### 9.2.1 Chief of Staff Report

Dr. C. Sentongo briefly addressed his written report included in the agenda materials.

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

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

### 9.2.2 Credentialing

Motion: On a motion duly moved, seconded and carried, the Board approved that the credentialing report from Dr. C. Sentongo be accepted as presented with revisions confirmed at the meeting: two identified physicians who were added as revised were removed from the report pending further clarification, and two physicians who have been granted temporary privileges will not be further renewed if they do not meet the occupational health requirements by January 15, 2022.

Temp	App	Re- App	Physician	Privilege Category	KDH Primary	Change in Category	Restrictions
2/			Dr. Ralph	COURTESY – S/OR-			
V	l V		LEE	Gastroenterology			
ما			Dr. Avijit	COURTESY -S/OR-			
V			CHATTERJEE	Gastroenterology			
	√		Dr. Steven	COURTESY –		From	
			GRAVELLE	Emergency		TEMP	
		V	Dr. Neera	ACTIVE –	2		
		V	AGGARWAL	Transfusions	V		
		V	Dr. Druvtej	COURTESY –			
		V	AMBATI	Anaesthesia			

	Dr. Muhammad	COURTESY -		
	BAYAT	Radiology		
\ \ \	Dr. James	ACTIVE-	√	
	BLAKSLEE	General Surgery		
\ \ \ \ \	Dr. David	COURTESY-		
	BRAGANZA	Emergency		
\ \ \	Dr. John	COURTESY-	V	
	BRISEBOIS	Emergency		
<b>√</b>	Dr. Wade	COURTESY-		
	BROCKWAY	Emergency		
	Dr. Stephanie	COURTESY –		
· ·	CANNING	Gastroenterology		
	Dr. Natalia	COURTESY –		
V	CAUSADA CALO	Gastroenterology		
	Dr. Alexander	COURTESY –		
V	CORET	Radiology		
	Dr. Andrea	COURTESY-		
· ·	DONOVAN	Radiology		
	Dr. Catherine DUBE	COURTESY-		
,		Gastroenterology		
	Dr. Ismail EL-	COURTESY-		
, v	SALFITI	Emergency		
	Dr. John EVANS	ACTIVE – S/OR		
,	DI. JOHN EVAINS	Family Medicine		
	Dr. Vyacheslav	ACTIVE – Family	$\sqrt{}$	
,	GOULETS	Medicine	,	
	Dr. Daniel	ACTIVE – S/OR	V	
,	HOLMAN	Family Medicine		
	Dr. Sana KENSHIL	COURTESY-		
,		Gastroenterology		
	Dr. Karl-Andre	COURTESY-		
	LALONDE	Orthopaedics		
	Dr. Patrick LEAHY	ACTIVE- Family		
		Medicine		
√	Dr. Loan LUONG	ACTIVE –	V	
		Family Medicine		
√	Dr. Paul MILLER	COURTESY-		
		Anaesthesia		
√	Dr. Annelise	COURTESY-		
	MILLER	Emergency		
√	Dr. Shantel MINNIS	COURTESY-		
		Radiology		
	Dr. Irfan	COURTESY-		
	MOLEDINA	Pediatrics		

	Dr. Sanjay	COURTESY-		
√	MURTHY	Gastroenterology		
	Dr. Christine	COURTESY-		
√	NUNWEILER	Radiology		
	D. Ctores DADD	COURTESY-		
	Dr. Steven PAPP	Orthopaedics		
V	Dr. Anne Marie	COURTESY- S/OR	V	
V	PELLETIER	Emergency		
	Dr. Sophie	COURTESY -		
,	PETITCLERC	Radiology		
	Dr. J.Whitcomb	COURTESY-		
,	POLLOCK	Orthopaedics		
	Dr. Jonathan	ACTIVE- S/OR		
√	RATHWELL	Emergency/Family Medicine		
	Du Committee		V	
√	Dr. Gurender RATTAN	ASSOCIATE – S/OR Family Medicine	V	
		COURTESY -		
√	Dr. Christopher RAYNOR	Orthopaedics		
	KATIOK	COURTESY-	V	
	Dr. Magdy RIZK	Surgical Assist	•	
		COURTESY-		
√	Dr. Alaa ROSTOM	Gastroenterology		
	Dr. Navaaz	COURTESY-		
√	SALOOJEE	Gastroenterology		
	Dr. Lesley	COURTESY -		
	SPENCER	Emergency		
V	Dr. Aviva	COURTESY-		
	STEWART	Anaesthesia		
V	Dr. Benoit ST. JEAN	COURTESY –		
\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	DI. DCHOIL ST. JEAN	General Surgery		
	Dr. Salomine Hilda	COURTESY-		
	THERON	Radiology		
	Dr. Jennifer TYNAN	COURTESY-		
		Radiology		
	Dr. Isabelle	COURTESY-		
	VALLEE	Emergency		
	Dr. Dirk VAN DER	COURTESY –		
	MERWE	Radiology	ı	
√	Dr. Benjamin	COURTESY- Surgical	$\sqrt{}$	
	WALSH	Assist	.1	
√	Dr. Chidam	COURTESY –	$\sqrt{}$	
	YEGAPPAN	Anaesthesia		

#### **Not Renewing:**

- Dr. Rehana Rouf Anaesthesia
- Dr. Sheldon Wiebe Radiology
- Dr. Hector Aguilar Radiology
- Dr. Robert Gauvreau Surgical Assist
- Dr. Erin Kelly Gastroenterology
- Dr. Kate Kelly Gastroenterology
- Dr. Jeffrey McCurdy Gastroenterology
  - **9.3 KDH Foundation Report:** *No Report.*
  - 9.4 Governance Committee
    - **9.4.1** Governance Committee Chair Report: Committee did not meet in November; therefore, there is no report.
  - 9.5 Quality and Safety Committee

### 9.5.1 Quality and Safety Committee Chair Report

M. Harrison, Committee Chair, conveyed the activities of the November 16, 2021 meeting, at which the recently completed Institute for Healthcare Improvement (IHI) White Paper Assessment Tool was reviewed for final presentation to the Board.

## 9.5.2 IHI White Paper Assessment Tool Results

M. Harrison, Committee Chair, presented the final results of the assessment to the Board, utilizing a slide presentation to summarize the details of the work done in reviewing the Best Practices on Board Oversight of Quality and Safety.

### 9.6 Corporate Services Committee

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

Motion: On a motion duly moved, seconded and carried, the Board approved to move in camera at 7:58 pm.

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

### 9.8 Strategic Planning Ad Hoc Committee Chair Report

E. MacPherson gave an update in Committee Chair P.-E. Cloutiers' stead, and provided members with the status of the Strategic Plan development to date.

A first draft has been written, outlining proposed strategic goals and priorities for KDH as an extramural hospital. The plan for the next few weeks is to have the research working group meet in December and review the first draft, suggesting any necessary changes to reflect what we heard during our consultation process. A second draft would then be presented to the Strategic Planning ad hoc committee for

their review, comments and perspective, with an anticipated meeting in early January. Once we have received the comments and reactions of the ad hoc committee members, the proposed Strategic Plan will be brought to the Board for a fulsome discussion at January or February's Board meeting, depending on when the ad hoc committee has completed their work.

- **10. KDH Board Action Registry:** *No outstanding Actions.*
- 11. Next Meeting: Thursday, January 27, 2022, at 6:30 pm via Teleconference.
- **12. In Camera:** *No further In Camera session required.*
- 13. Adjournment: In closing comments, the Senior Leadership Team were thanked for the tremendous amount of time, effort, expertise, dedication and professionalism they have displayed during this incredibly stressful and difficult time in the aftermath of the recent cyber attack on the hospital. The updates provided to the Board have been excellent and the Members felt very informed at all times. All members of the team are to be commended for their efforts and contributions. F. Vassallo drew particular attention to the CFO and VP of Operations, M. Hewitt, who has worked around the clock, seven days per week since the initial incident, and through it all has conducted himself with amazing professionalism and calmness, and is to be commended.

There being no further business, the meeting was adjourned on a motion at 8:20 pm.

F. Vassallo, CEO

E. MacPherson, Board Chair