

Kemptville District Hospital (KDH)
Board of Directors Meeting
Thursday, November 23, 2023
Via Microsoft Teams Meeting
6:30 pm
Minutes

1. Call to Order: J. Nolan, Board Chair, called the meeting to order at 6:33 pm.

J. Nolan noted the consent agenda's new format for this meeting with the intent of enhancing the efficiency of the meeting. He noted that the consent agenda comprises two sections:

- The first is the approval of items as indicated; and,
- The second is the approval of the acceptance of information items as indicated.

The approval of these two sections will be done with one motion.

There were no questions or concerns relating to the format of the consent agenda.

2. Regrets / Quorum / Declaration of Conflicts: Quorum was established and there were no conflicts declared.

Board Chair J. Nolan 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.

Also, for those attending remotely, acknowledgement was given for the lands they were located on at the time of the meeting.

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

Management, Staff & Guests:

B. Rivard	√		L. Mignault	√		M. Laughton (Recorder)	√	
J. Read	√							

3. Re-affirming KDH Mission: E. Bonokoski re-affirmed KDH's Mission.

4. **Client Centred Care – Patient Stories:** J. Ellis conveyed a compliment and a complaint, including the learning opportunities resulting from the complaint investigation. The Board Chair noted that the patient stories were distributed to the Board ahead of time for pre-review and that this was a good practice.
5. **Education Session: KDH Financial Landscape**
B. Rivard and S. Saslove presented to the Board on the KDH's financial landscape addressing the following components:
 - The Revenue Cycle at KDH;
 - The Budget Process;
 - The CT Scanner;
 - Financing and Debt; and,
 - The impact of the repeal of Bill-124.

Amy Yee joined the meeting at 7:02 pm.

The Board discussed:

- Whether there were restrictions on the way in which revenue could be generated by a hospital, noting that more clarification will be provided at a later meeting.
- That the return on investments in the public sector is not necessarily a monetary return but rather, the ability to improve processes and procedures, and maximize the use of resources.
- The significant effort and commitment to raising funds for the priorities of KDH, for which the Foundation was thanked.

6. **Additions/Changes to the Agenda:** None.
7. **Approval of October 26, 2023, Board Meeting Minutes**

On a motion duly moved, seconded and carried, the Board approved the October 26, 2023, Board Meeting Minutes, as presented.

8. **Approval of Consent Agenda**

On a motion duly moved, seconded and carried, the Board approved the consent agenda consisting of:

- *A recommendation from the Governance Committee to approve the following Board policies as presented:*
 - 8.1.1 *Board Policy 02 CEO Performance Management and Annual Compensation Review*
 - 8.1.2 *Board Policy 13 Public Attendance at Board Meetings*
 - 8.1.3 *Board Policy 22 Ethical Decision Making*
 - 8.1.4 *Board Policy 18 Governance Committee Terms of Reference*

- *A recommendation from the Corporate Services Committee to approve item 8.1.5 Board Policy 09: Human Resources Practices and Recruitment as presented.*
- *The receipt of the following items for information:*
 - 8.2.1 Enterprise Risk Management Q2 Report*
 - 8.2.2 Strategic Performance Indicator Dashboard – Q2*
 - 8.2.3 Compliance Report*
 - 8.2.4 Critical Incident Reporting*
 - 8.2.5 Patient and Family Engagement Strategy Semi-Annual Report*
 - 8.2.6 Patient Compliments / Complaints Reporting – Semi-Annual Report*
 - 8.2.7 2023-24 Q2 Financial Report*
 - 8.2.8 CT Scan Initiative*
 - 8.2.9 2024-2025 Hospital Accountability Planning Submission (HAPS) Budget (Final) and Capital Expenditures Status Update*
 - 8.2.10 Investment Portfolio and Financing*
- 8.3 KDH Foundation Report*

9. Reports

9.1 Hospital

9.1.1. CEO Report

F. Vassallo provided a verbal update, additional to his written report, noting the following regarding the Integrated Medical Model with The Ottawa Hospital (TOH):

- That KDH continues to have excellent collaboration with TOH, primarily through the CEOs, Cameron Love and Frank Vassallo, and Emergency Department (ED) Chiefs, Dr. Guy Hebert and Dr. Colin Sentongo as we continue to integrate the two EDs. The early goals are to stabilize KDH's ED Physician workforce, improve patient flow, and improve work processes within KDH's ED. We continue to advocate with Ontario Health and the Ministry of Health (MOH) for permanent funding to support the creation of an ED integrated medical model.
- This collaborative approach between a large, tertiary care hospital and a small, rural hospital makes sense for patients and providers and is aligned with the Government of Ontario's integration aspirations.
- F. Vassallo noted that current supplemental funding is in place until March 31, 2024.

9.1.2. Chief Nursing Executive (CNE) Report

CNE, J. Ellis, provided additional detail regarding her report, highlighting that the focus remains on health human resources since KDH is highly dependent on agency nurses. KDH has also facilitated training for a nurse to become an Anesthesia Assistant, which should help in covering any gaps in anesthesia going forward.

9.2 Chief of Staff (COS)

9.2.1. COS Report

Dr. C. Sentongo spoke briefly to his written report, noting the generous support of the Foundation in offering to fund an emergency room ultrasound.

9.2.2. Medical Staff Policies

The following medical staff policies were recommended by the Medical Advisory Committee (MAC) for approval by the Board:

- Policy #3 – Chart Completion
- Policy #4 – Removal of Charts from Hospital Property
- Policy #13 – Consent for Procedure
- Policy #29 – Physician Performance Reviews

The Board noted that the policies proposed for approval:

- Are those that require renewal every few years;
- Have been adjusted to reflect the effect of EPIC on various processes, and that otherwise, there were no major wholesale changes.

On a motion duly moved, seconded and carried, the Board approved the following policies as presented:

- *Policy #3 – Chart Completion.*
- *Policy #4 – Removal of Charts from Hospital Property.*
- *Policy #13 – Consent for Procedure.*
- *Policy #29 – Physician Performance Reviews.*

The Board requested that, where it can be foreseen that the MAC will meet in the same week as the Board meeting, mitigating measures be put in place to allow Directors more time to review any materials coming from MAC.

9.3 Governance Committee

9.3.1. Governance Committee Chair Report

A. Vignuzzi noted that the Committee has already started its work on recruiting Board members for the 2024-25 year. There will be a definite need for three new members. A. Vignuzzi encouraged the elected Board members to complete the skills survey recently distributed and to note that while the survey asks that skills be rated on a scale up to “excellent / advanced” members are requested to also indicate if they have an interest in or wish to contribute to a particular committee. A. Vignuzzi also noted that the discussion around Board meeting format continues.

9.4 Quality & Safety Committee

9.4.1. Quality and Safety Committee Chair Report

M. Harrison indicated there were no additional details beyond the materials that were already included in the meeting package, other than highlighting the well-received new format for presentation of the Patient Stories.

9.5 Corporate Services Committee

9.5.1. Corporate Services Committee Chair Report

S. Saslove noted that in addition to the items in the consent agenda:

- KDH is currently engaging in a request for proposal process with their broker for insurance needs that best fit the KDH.
- The Committee was updated on the status of the Infrastructure Adoption Model (INFRAM): and,
- The Committee was updated on the CT Scanner project and S. Saslove reiterated, on behalf of the hospital, gratitude for the Foundation's fundraising.

S. Saslove offered to provide the additional materials from the Committee meeting that address the insurance and information technology updates in more detail.

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

11. Next Meeting: Thursday, January 25, 2024, at 6:30 pm via Microsoft Teams.

12. In-Camera

On a motion duly made and seconded, the meeting went in-camera at 8:02 pm.

On a motion duly made and seconded the meeting came out of in-camera at 8:08 pm.

13. Credentialing

Motion: On a motion duly moved, seconded and carried, the Board approved that 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, be approved by the Board of Directors:

Temp	App	Re-App	Physician	Privilege Category	KDH Primary	Change in Category	Restrictions
	√		Dr. Amir HAMID	Courtesy – Anaesthesia		<i>Temporary to COURTESY</i>	


		√	Dr. Abdullah ALENEZI	Courtesy – Radiology			
		√	Dr. Muhammad BAYAT	Courtesy – Radiology			
		√	Dr. James BLAKSLEE	Active – Surgery	√	<i>Change to COURTESY</i>	
		√	Dr. John BRISEBOIS	Courtesy – Emergency			
		√	Dr. Wade BROCKWAY	Courtesy – Emergency			
		√	Dr. Andrea DONOVAN	Courtesy – Radiology			
		√	Dr. John EVANS	Active – Family Medicine, Surgical Assist	√		
		√	Dr. Ismail EL- SAFITTI	Courtesy - Emergency			
		√	Dr. Fadi HABBAB	Courtesy – Radiology			
		√	Dr. Patrick LEAHY	Active – Family Medicine	√		
		√	Dr. Loan LUONG	Active- Family Medicine	√		
		√	Dr. Bassem MIGALLY	Courtesy – Anaesthesia			
		√	Dr. Paul MILLER	Courtesy – Anaesthesia			
		√	Dr. Annelise MILLER	Courtesy – Emergency			
		√	Dr. Shauntel MINNIS	Courtesy – Radiology			
		√	Dr. Steven PAPP	Courtesy – Surgery, Orthopaedics			

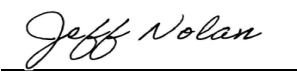
		√	Dr. Anne Marie PELLETIER	Courtesy – Emergency, Surgical Assist			
		√	Dr. Sophie PETITCLERC	Courtesy- Radiology			
		√	Dr. J. Whitcomb POLLOCK	Courtesy – Surgery, Orthopaedics			
		√	Dr. Jonathan RATHWELL	Active – Family Medicine, Surgical Assist	√		
		√	Dr. Gurender RATTAN	Associate – Surgery, Surgical Assist			
		√	Dr. Christopher RAYNOR	Courtesy – Radiology			
		√	Dr. Navaaz SALOOJEE	Courtesy – Surgery, Gastroenterology			
		√	Dr. Benoit ST- JEAN	Courtesy – Surgery			
		√	Dr. Aviva STEWART	Courtesy – Anaesthesia			
		√	Dr. Isabelle VALLEE	Courtesy – EMERGENCY			

STATEMENT OF COMPLIANCE

It is attested that currently all physicians practicing at Kemptonville District Hospital hold valid privileges.

- 14. Meeting Termination:** There being no further business, the meeting was terminated on a motion at 8:09 p.m.


F. Vassallo, CEO


J. Nolan, Board Chair