

WDMH Board of Directors
Tuesday, November 23rd, 2021 at 5:00 p.m.

Minutes

Chair: James Pitruniak

Present:	Cholly Boland, Nathalie Boudreau, Eric Stevens, Mike Villeneuve, Steve Densham, Annik Blanchard, Peter Krajcovic, James Pitruniak, Bruce Millar, David Wattie, Holly Brown, Renée Belhumeur, Michelle Perry, Michelle Blouin, John Trickett
Regrets:	Shannon Horsburgh
Resource:	Amy Lafleche

No.	Item
1.0	Call to Order J. Pitruniak called the meeting to order at 5:03 p.m.
2.0	Declaration of Conflict of Interest None.
3.0	Agenda Check-In The 2021-11-23 Board of Directors agenda was approved by consensus.
4.0	Review of Minutes: Moved by B. Millar, seconded by D. Wattie, that the 2021-09-28 Board of Directors minutes be approved as presented. All in favour. <p style="text-align: right;"><u>Carried</u></p>
5.0	Business Arising J. Pitruniak took a moment to congratulate C. Boland, Leadership, and the entire hospital on the incredible preliminary Accreditation results. The results reflect having great processes, procedures, and people at WDMH.
6.0	A Patient Story Shannon Horsburgh, manager of the Emergency Department, presented a story of a patient who became violent in the Emergency Department. In summary WDMH learned: <ul style="list-style-type: none"> • Code White: A code to identify a violent patient (physically or verbally) that calls on all other departments to help respond. • Violent behaviours in the Emergency Department have become more common over the last four months. This could be due to stress caused from the pandemic and wait times. • During a patient outburst equipment should be moved out of the immediate area of the incident to avoid items being tossed or knocked over. • During a patient outburst, patients in nearby waiting areas should be moved to avoid potential conflict or injury • Flags should be placed on patient charts to identify they have a history of violent behaviour • Further communication and education surrounding Code Whites will be distributed to staff • All staff have the opportunity to debrief with the manager/care coordinator after any event. Clinical managers follow up with everyone that was involved the next day. EAP (Employee Assistance Program) support is always encouraged. Everyone involved in the incident participates in an incident review.

7.0	<p>Generative Discussion: Recruitment and Retention</p> <p>WDMH is experiencing a minor staffing shortage. The current challenge is getting and keeping casual staff. WDMH continues to focus on recruitment and retention and is interested in hearing suggestions from the Board of Directors.</p> <p>Suggestions from the Board:</p> <ul style="list-style-type: none"> • Lower wage work is a challenge to staff. Transportation in rural communities, or shuttles from hubs could be a benefit. • Create a larger social media footprint • Have drone shots and a create a message indicating WDMH is a cool place to work • Interview newer hires that have grown within the organization to hear what led them to WDMH and their successes. • Have exit interviews to create cultural awareness and transparency as to why staff are leaving. • Promote the importance of diversity, equity, and inclusion. • Use local newspapers, and radio in addition to social media to promote hiring • Include links in email signatures to promote hiring • Cross train nurses, allowing for growth opportunity • Pet insurance, cell phone discounts, and day care availabilities are highly valued and are benefits that could attract employees 	
8.0	New Business	
	8.1	<p>Communications Plan</p> <p>The 2022-2023 Communications Plan was received for review. The Communications Plan is updated every year; changes are incremental. There were no suggested changes.</p>
	8.2	<p>Cybersecurity Update</p> <p>A cybersecurity briefing note was received for information.</p> <ul style="list-style-type: none"> • WDMH is working regularly with Bell and has signed a cybersecurity maintenance contract. • M. Blouin to follow up on the WDMH fire and security system firewalls. • Being on Epic will enhance WDMH’s level of cybersecurity. The Bell contract will be reviewed once Epic is implemented. • The highest cybersecurity risk comes from people working at home. • The second highest risk is through email phishing. • WDMH has raised cybersecurity awareness communications since Kemptville’s attack.
9.0	Board Reports	
	9.1	Quality Committee Report
	9.1.1	<p>Policy Approval: Review of Critical Incidents...</p> <p>Moved by D. Wattie, seconded by S. Densham, that the Review of Critical Incidents by MAC and Quality of Care Committee policy be approved as presented. All in favour.</p> <p style="text-align: right;">Carried</p>

<p>9.2</p>	<p>Medical Advisory Committee Report</p> <p>Dr. Devin provided a brief review of the Medical Advisory Committee Report.</p> <p>Dr. Mykytyshyn has announced his intent to step back from his role as Chief of Family Practice. A posting for a new Chief will be advertised within the next week or two.</p> <p>Dr. Devin will be hosting a Chief’s Retreat at the end of the week to discuss chief resilience and sustainment.</p>
<p>9.3</p>	<p>Professional Staff Reappointments</p> <ul style="list-style-type: none"> • The potential WDMH Allergist is currently working as an internal medicine support. They are interested in developing a clinic in Winchester but are looking to develop their own practice; this has been pushed back 6 months due to the pandemic. • WDMH is looking into expanding residency offerings to help with physician retention. • WDMH is considering changes to the surgical assist schedule to include weekdays, to attract more physicians. <p>Moved by J. Milburn, seconded by M. Perry, that the following new physicians and WDMH professional staff modifications be approved. All in favour.</p> <p style="text-align: right;"><u>Carried</u></p> <p>New:</p> <ul style="list-style-type: none"> • Dr. Mohammed Aziz, Locum without Admitting Privileges, Department of Emergency Medicine • Dr. Megan Delisle, Term with Admitting Privileges, Department of Surgery – General • Ms. Elizabeth LeBlanc, Locum Midwife with Admitting Privileges, Department of Obstetrics – Midwifery • Dr. Lisa Caulley, Term without Admitting Privileges, Department of Surgery – Surgical Assist • Dr. Pamela Lai, Term with Admitting Privileges, Department of Family Medicine • Dr. Matthew Taylor, Term with Admitting Privileges, Department of Family Medicine • Dr. Michael Woo, Term without Admitting Privileges, Department of Emergency Medicine <p>Modified:</p> <ul style="list-style-type: none"> • Dr. Nicolas Lacroix From Locum without Admitting Privileges, Department t of Anesthesia with Temporary Cross Appointment in Emergency Medicine To Term without Admitting Privileges, Department t of Anesthesia with Temporary Cross Appointment in Emergency Medicine • Dr. Kheira Jolin-Dahel From Associate with Admitting Privileges, Department of Family Medicine with Cross Appointment in Obstetrics and Emergency Medicine To Active with Admitting Privileges, Department of Family Medicine with Cross Appointment in Obstetrics and Emergency Medicine • Dr. Leah Jones From Locum without Admitting Privileges, Department of Emergency Medicine To Term without Admitting Privileges, Department of Emergency Medicine

	9.4	Medical Staff Organization Report None.
10.0	Finance Report	
	10.1	Second Quarter Financial Statements The hospital's financial statements for the period ending September 30 th , 2021 show a deficit from hospital operations of \$779,325; unfavourable by 1.2 million dollars from the approved budget. The factors attributing to the deficit are: <ul style="list-style-type: none"> • Overtime and staffing costs incurred by the hospital due to staffing shortages • Lost patient revenue • Lost parking revenue • One-time supply expense due to an upgrade requirement for our Enhanced Care Unit monitoring system • Costs related to an early retirement settlement
11.0	Report of the CEO <ul style="list-style-type: none"> • Covid-19 numbers in the Eastern Ontario Health Unit region remain stable. Test centre volumes are high on Mondays and Tuesdays. This Thursday WDMH will host it's first Covid-19 booster clinic. • Accreditation results indicate that WDMH complied with all but fifteen of the 1,500 standards. WDMH will be contesting 12 of the areas of non-compliance within the next 30 days. • WDMH has received notice from the Ontario Government that hospitals will not be required to submit the annual patient care improvement plan. WDMH will again be creating their own to bring forward to the Board for approval. • WDMH Leadership will be receiving training on LGBTQ+ and Gender Informative practice. 	
	11.1	Strategic Priorities Quarterly Report The November 2021 Strategic Priorities Quarterly Report was received for information.
	11.2	2021-2022 Strategic Priorities The 2021-2023 Strategic Priorities list was received for review. The Board of Directors reviewed the priorities and had no further additions. The 2021-2022 Strategic Priorities list is more focused than last year's, only listing eight priorities. A more formal plan with targets will be developed after review from the MAC, MSO, and Patient and Family Engagement Committee. Moved by D. Wattie, seconded by M. Villeneuve, that the 2021-2022 Strategic Priorities be approved as presented. All in favour. <u>Carried</u>
12.0	WDMH Foundation Report The WDMH Foundation Report was received for information. P. Krajcovic reported that contributions continue to flow in, and everything is moving positively. The Dundas Manor campaign is exceeding expectations.	

	J. Pitruniak encouraged Board members to donate to the WDMH Foundation during the holiday season.
13.0	WDMH Auxiliary Report The WDMH Gift Shoppe is now open, and 35 active volunteers have returned.
14.0	Report of the RHI Board All Dundas Manor staff received their Covid-19 booster shot last week. 100% of staff and residents have received the booster. New building update: Dundas Manor continues to work with Infrastructure Ontario to gain financing. The land sale has not yet been finalized.
15.0	Governance
15.1	Executive Committee Minutes The 2021-11-15 WDMH Executive Committee Minutes were received for information.
15.2	Board Meeting Evaluation Distribution A. Lafleche to distribute.
15.3	Board Meeting Evaluation Results The September 2021 Board meeting evaluation was reviewed, there were no concerns to be discussed.
16.0	In-Camera Session None.
17.0	Communications & PR Considerations <ul style="list-style-type: none"> • Accreditation: MDRD, Obstetrics and Gynecology, and Governance all received perfect scores. Kudos to the housekeeping staff, as Accreditors mentioned multiple times WDMH is the cleanest hospital they've ever been in. A cleaner hospital is a safer hospital. • The new strategic priorities are reaffirming the hospital's main priorities for the upcoming year.
18.0	Next Meeting Tuesday, February 22, 2021 at 5:00 p.m. Zoom
19.0	Adjournment J. Pitruniak called the meeting to a close at 7:23 p.m.