

**MINUTES OF THE MEETING OF THE BOARD OF DIRECTORS MEETING HELD AT SANTÉ MANITOUWADGE HEALTH
ON Tuesday, August 25, 2020 AT 1900 HOURS IN THE JUDITH C. HARRIS BOARDROOM**

PRESENT:	Valerie Newton	Director
	Rolly Smith	Director
	Donna Jaunzarins	Director
	Marcel DeMars	Director
	Cathy Kelly	Director
	Debbie Hardy	CEO
	Dr. J. Park	Chief of Staff
	Annie Janveau	Chief Nursing Officer
J. Bourgoin	Director of Community Programs and Services	
ABSENT:	Aaron Baker	Director
	Belinda Schleier	Director
	Raymond Lelièvre	Director
	John MacEachern	Director
STAFF:	Stephanie Hardy	Accounts Receivable Clerk

1. Call to Order

Mrs. Valerie Newton took the chair and called the meeting to order at 1833.

2. Certificate of Notice Circulated to all Directors

The Notice of Meeting was as stated in the pre-meeting package.

3. Declaration of Conflict

None to Report

4. Trustee Education

Mrs. Hardy handed out an information package on the standards for Accreditation. The Accreditation for SMH is scheduled for November 22-25, 2020. The SMH Board of Directors will need to set up a group of volunteers for discussions and to meet on a weekly basis before the November Accreditation.

5. Patient Story

Mrs. Janveau explained how a patient who was in SMH emergency department decided to go through the cupboards and take items that did not belong to them and proceed to place them in their bag. When a nurse noticed that a blanket was missing, it was then discovered that SMH was victim of theft by the patient. The discussion was brought up on whether patients should be prohibited to bring in personal bags while seeking treated through the emergency department.

6. Board Chair Report

No Report

7. Chief of Staff Report

Dr. Park discussed the doctor shortage issue within the Physicians group and hopes to identify the problems. His hopes as COS is to build/grow the medical staff at SMH.

8. Administration Report

Strategic Directive #1

SMH will be proactive to individual and community needs

- The myRide van is now operational.
- Clinic appointments are increasing with efforts to focus on reducing the backlog due to the pandemic.
- The FHT programs are being reviewed to assess which ones can return to some level of normalcy while respecting the current directives.
- NOSP has approached us to integrate them within the SMH (space wise). We are looking at our available space, i.e. awaiting to see if Victim Services, CCAC will be returning to our building and we also need to see what the financial impact to the clinic will be as they are intending to give up space as their child/family councilors are moving into the schools.
- A physical barrier remains in place between primary care and the rest of the facility to prevent cross contamination as they open their doors to more clients. This step is to keep our LTC safe and meet their guidelines.
- The Family Health Team entrance is open to individuals with scheduled in-person appointments only. Patients are being screened for COVID the day prior to their appointment and required to wear a face covering while in the building.
- The LTC COVID guidelines have remained steady over the past month and we have opened up to indoor visiting as per the Directive from the MOHLTC. Guidelines include: maintaining a visitor log, swabbing, screening, physical distancing, hand hygiene and the use of a surgical/procedure mask. Staff continue to be tested twice monthly and any indoor visitors to LTC must have a negative swab within 2 weeks.
- The is done, deck repairs, basement windows are being changed as well as the siding is well under way at 34 Mona has been started. 26 Mona will receive a little TLC, fixing the front step and basement ceiling repair to be done.
- The chiropractor has approached SMH looking to rent space 1 day/week. We did show him space in the clinic which will meet his needs and will be rented by the day at the same cost as renting out the board rooms.

Strategic Directive #2:

SMH will sustain outstanding quality and operations

- Our accreditation survey previously scheduled for June 2020 has been rebooked with a date of November 22-24th.
- August 11 the Ontario College of Pharmacist did an inspection of the hospital pharmacy practices and space. Feedback was provided for improvement of compliance, all of which is easily attainable. New palliative care tools are being considered for embedding within PS Suites for primary care workers to have at their disposal.

Strategic Directive #3:

SMH will be innovators in service and program delivery

- The Family Health Team physiotherapist, Wallace, is scheduled to join the team starting November 2, 2020 to run the Chronic Pain Program as well as deliver other needed physiotherapy services.
- The Assisted Living Program has been put on hold due to the COVID-19 pandemic. We are still working on program development during the pandemic but implementation is delayed. PSWs have been recruited for SMH and with this; the Assisted Living Program will have its needed PSW support for the patients.
- The chemo program locally is on hold – Our newest RN hire has expressed an interest in becoming certified. The next certification course – starts September 14/20

Strategic Directive #4:

SMH will become a magnet workplace

- Dr. Park has begun his practice at SMH
- The OTN/Staff Health position was offered and then declined by the successful applicant (external posting).

- Jocelyn Bourgoin has joined the team as the interim Director of Community Programs and Services.
- With the upcoming leave of absence of the Director of Community Programs and Services, the Nurse Practitioner interview was deferred until the interim director is in place.
- Recruitment for a full-time physiotherapist for the Family Health Team is ongoing. The former physiotherapist, Wallace Ross will join us part time.
- Recruitment for a temporary full-time receptionist for the Family Health Team has been successful with Taylor Hunter joining the team.
- Locum staffing has been secured until January 17th, except for the Christmas week.
- Efforts to recruit physicians remain high priority.
- The Maintenance students will be missed by the maintenance crew as the summer ends and they return to school.

9. Committee Reports

9.1. Governance Committee

No Report

9.2. Finance and Audit Committee

The April and May financial statements were reviewed by Mrs. Stephanie Hardy. She advised that at the end of the April there was a surplus of \$8,776.00 and in May there was a surplus of \$15,605.

The following resolution was tabled for approval;

MOVED BY: M. DeMars
SECONDED BY: C. Kelly

BE IT RESOLVED: That the Financial Statements for April and May 2020, be approved as presented.

CARRIED!

9.3. Executive Committee

No Report

9.4. Medical Advisory Committee

Regional Ordering Privileges

The following resolution was tabled for approval;

MOVED BY: C. Kelly
SECONDED BY: D. Jaunzarins

BE IT RESOLVED: That as recommended by the MAC at their August 13th, 2020 meeting that the following professionals be granted Regional Ordering privileges up to December 31st, 2020.

Dr. Alexandra Bastiany	TBRHSC
Dr. Hillary Bohler	NOSH
Dr. Matthew D’Mello	TBRHSC
Dr. Rohyn Duffus	TBRHSC
Dr. Laurel Mazurik	Sioux Lookout Meno Ya Win Health Centre
Dr. Rizwan Rafiq	Lake of the Woods District Hospital
Dr. Sahaana Rangarajan	NOSH

CARRIED!

Locum Tenen Privileges

The following resolution was tabled for approval;

MOVED BY: R. Smith
SECONDED BY: C. Kelly

BE IT RESOLVED: That as recommended by the MAC as their August 13th, 2020 meeting the following professionals be granted Locum Tenens privileges up to December 31st, 2020.

Dr. Christine Foster
Dr. John Presvelos

CARRIED!

9.5 Joint Conference Committee

Mrs. Hardy requested that a committee meeting be held to review the physician clinic structure on Thursday September 3, 2020 at 12:00pm.

10. New Business

10.1 Clinic Information

Mrs. Hardy gave the Board of Directors an update on the clinic finances.

10.2 FHT AOP

The following resolution was tabled for approval;

MOVED BY: R. Smith
SECONDED BY: D. Jaunzarins

BE IT RESOLVED: That Santé Manitouwadge Board of Directors approves the Family Health Team Annual Operating Plan Submission 2020-2021 as submitted.

CARRIED!

10.3 FHT Governance and Compliance Attestation

The following resolution was tabled for approval;

MOVED BY: M. DeMars
SECONDED BY: R. Smith

BE IT RESOLVED: That Santé Manitouwadge Board of Directors approves the Family Health Team Governance and Compliance Attestation 2020-2021 as submitted.

CARRIED!

11. Other Business

12. In-Camera Session

13. Correspondence

14. Consent Agenda Items

Approval:

- a. Minutes of Board of Directors Meeting held: July 21st, 2020

MOVED BY: D. Jaunzarins
SECONDED BY: C. Kelly

BE IT RESOLVED: That the following Consent Agenda items, be approved: Minutes of Board of Directors Meeting held: July 21st, 2020

AND BE FURTHER RESOLVED:

MOVED BY: M. DeMars
SECONDED BY: R. Smith

That the following items be received:
Minutes of the Medical Advisory Committee held:
July 16th, 2020

CARRIED!

- 15. Place and Time of Next Meeting – September 22nd, 2020 at 1900.**

MOVED BY: M. DeMars
SECONDED BY: C. Kelly

BE IT RESOLVED: That the next meeting of the Board of Directors of Santé Manitouwadge Health be held on Tuesday, September 22nd 2020 in the Judith C. Harris Boardroom

CARRIED!

16. Adjournment

There being no further business to conduct. The following resolution was submitted for consideration.

MOVED BY: D. Jaunzarins
BE IT RESOLVED: That this meeting be adjourned.

Mrs. Newton thanked everyone for attending and the meeting adjourned at 2007 hours.

17. For the Good of the Board

Debbie Hardy, CEO

Valerie Newton ,Board Chair