

**MINUTES OF THE MEETING OF THE BOARD OF DIRECTORS MEETING HELD AT SANTÉ MANITOUWADGE HEALTH  
ON Tuesday, July 27, 2021 AT 1900 HOURS IN THE JUDITH C. HARRIS BOARDROOM**

|                 |                  |   |
|-----------------|------------------|---|
| <b>PRESENT:</b> | Valerie Newton   | Board of Directors Chair                    |
|                 | Rolly Smith      | Board of Directors Vice-Chair               |
|                 | Donna Jaunzarins | Director                                    |
|                 | Marcel DeMars    | Director                                    |
|                 | Belinda Schleier | Director                                    |
|                 | Isabelle Ouellet | Director                                    |
|                 | John MacEachern  | Director                                    |
|                 | J. Bourgoin      | Director of Community Programs and Services |
|                 | Debbie Hardy     | CEO   |
|                 | Annie Janveau    | Chief Nursing Officer                       |
| <b>Staff:</b>   | Julie MacIntyre  | Executive Assistant/Finance Clerk           |
| <b>Absent:</b>  | Peter Ruel       | Director                                    |
|                 | Cathy Kelly      | Director                                    |
|                 | Dr. J. Park      | Chief of Staff                              |
|                 | Keisha Cannon    | Abecedarian                                 |

**1. Call to Order**

Mrs. Valerie Newton, the chair called the meeting to order at 1859.

**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 discussed the Nomination process and Board Structure to the Board of Directors.

**5. Patient Story**

Mrs. Janveau explained to the Board of Directors that SMH sends out surveys to patients in regards to their quality of care during their visit. Mrs. Janveau received feedback from a particular survey regarding an OTN appointment and the lack of space for the large support group for the patient. Going forward there has been measures taken to ensure that bookings for OTN appointments will now accommodate any size of support group for patients.

**6. Board Chair Report**

No Report

**7. Chief of Staff Report**

No Report

**8. Administration Report**

**Strategic Directive #1**

**SMH will be proactive to individual and community needs**

- As the roadmap to re-opening in Ontario unfolds, SMH has allowed PACE to re-open under the provincial guidelines and distancing rules. Many community members as well as some of our LTC and ALC clients are now able to meet and socialize in a controlled environment. This has a positive mental health impact while decreasing the sense of isolation many were feeling.

- LTC general visiting and outings have restarted.
- The JCH Bursary was not awarded as no applicable applicants were received from the high school. One (non-health care program related) student applied late but did not meet criteria of the award. A review of the Bursary criteria will be completed to produce a fair and equitable process for other students in the event we do not get those applicants following a health care related path. – **The policy has been amended and will be presented for Board review at this meeting.**

**Strategic Directive #2:**

**SMH will sustain outstanding quality and operations**

- The DI department has completed demonstrations and negotiation phase for the new U/S including an updated echocardiography module. The next steps are to review the terms and conditions of the proposal which will include our changes/requests which should be received early the wk of July 26. Once that is signed off we have a week to proceed with the purchase order and then it's a matter of deliver which can take up to six weeks.
- The RFP process for the new defibrillator is complete and we are anticipating that the new unit will be received and training will be provided in September. Terms and conditions have been signed off by SMH, awaiting for Zoll to sign-off and then we create a purchase order. Because of Zoll delays (due to summer holidays) we may not achieve the September target.
- Ongoing communications are being had with Accreditation Canada (for accreditation date), as we would not be able to demonstrate the level/quality of service that SMH prides itself on. Because of the critical HHR shortage Nursing Manager and Director are being required to fill vacant shifts providing direct patient care rather than working towards the work of the accreditation process. The CEO has put in a request for a 6 month delay of our survey and is awaiting final confirmation form Accreditation Canada.
- The flooring project is set to begin in the month of August. The project will replace the flooring in the Laundry room as well as 10 patient/resident rooms (or equivalent) on a need basis. This project is funded the HIRF. Everything Floors LTD. Is the company who has been awarded the job. They have provided us the same service in the past and done an excellent job.

**Strategic Directive #3:**

**SMH will be innovators in service and program delivery**

- SMH conducted one more mass immunization clinic on July 22<sup>nd</sup>. We are pleased to report that an additional 26 first doses were administered and 99 second doses delivered. There has been increasing difficulty in booking individuals for their second dose due to people being away or unavailable. Larger immunization clinics may no longer be the option of choice and smaller on SMH site clinics may be the next phase of the vaccination campaign.

| • 1st Dose                   |             |      |           |  | 2nd Dose              |             |      |           |
|------------------------------|-------------|------|-----------|--|-----------------------|-------------|------|-----------|
|                              | Census 2016 | EMR  | Mid Range |  |                       | Census 2016 | EMR  | Mid Range |
| Pop total                    | 1708        | 2100 | 1904      |  | Pop total             | 1708        | 2100 | 1904      |
| Vaccinated to date           | 1316        | 1316 | 1316      |  | Vaccinated to date    | 1160        | 1160 | 1160      |
| Under 12                     | 180         | 200  | 190       |  | Under 12              | 180         | 200  | 190       |
| <b>Eligible % who is vax</b> | 92%         | 73%  | 82%       |  | Eligible % who is vax | 81%         | 64%  | 72%       |
|                              | Census 2016 | EMR  |           |  |                       | Census 2016 | EMR  |           |
| Pop total                    | 1708        | 2100 | 1904      |  | Pop total             | 1708        | 2100 | 1904      |
| Vaccinated to date           | 1316        | 1316 | 1316      |  | Vaccinated to date    | 1160        | 1160 | 1160      |
| <b>Total % who is vax</b>    | 82%         | 66%  | 73%       |  | Total % who is vax    | 72%         | 58%  | 64%       |

- A hybrid RCCR education session is being planned for early September.

**Strategic Directive #4:**

**SMH will become a magnet workplace**

- Efforts continue to recruit adequate nursing staff, new companies have been sought out and we are working on the contracts and attainment of short and long-term nursing. These communications include a recruitment company for Internationally Educated Nurses (IEN).
- Efforts continue to recruit a physiotherapist for the FHT.
- SMH was successful in having the Ministry of Health reverse a decision which would have lowered the locum funding effective August 14<sup>th</sup>. This will help ensure that if we can recruit locum physicians, the funding will be provided for their stay and travel.
- A province wide shortage of locums for the summer period is of increasing concern. Efforts to find someone through regular channels is not producing anticipated results.
- SMH has been creative at finding ways to maintain the staff wellness exercise program throughout COVID times by way of Zoom, outdoor exercise (weather permitting), and finally the resumption of indoor exercise.
- Some locum interest has been generated in an effort to recruit locum physicians particularly in October. Despite some interest, there remain significant concerns for physician coverage after September 6<sup>th</sup>.
- One FHT nurse, along with Laurie, Emily and Annie will be working mainly on the floor for August to assist with the critical shortage of RNs. Future state review of the nursing state has been done, with consideration to service delivery, safety, legislation and other factors.

**9. Committee Reports**

**9.1. Governance Committee**

No Report

**9.2. Finance and Audit Committee**

**9.2.1 Audited Financial Statement Presentation by MNP**

The following resolution was tabled for approval;

**MOVED BY: J. MacEachern**

**SECONDED BY: R. Smith**

**BE IT RESOLVED: That the Corporation of the Santé Manitouswadge Health hereby appoints MNP LLP as its auditor's for the fiscal year ending March 31<sup>st</sup>, 2022 and is hereby authorized to fix remuneration for said services.**

**CARRIED!**

**9.3. Executive Committee**

No Report

**9.4. Medical Advisory Committee**

No Report

**9.5. Nomination Committee**

9.5.1 Nomination Mins

**10. New Business**

**10.1 26 Mona Quotation's** – It was decided by the Board of Directors that before the removal of the tree at 26 Mona Ontario Hydro would be notified to ensure that this was a safe procedure.

The following resolution was tabled for approval;

**MOVED BY:** J. MacEachern  
**SECONDED BY:** M. DeMars

**BE IT RESOLVED:** That the Santé Manitouwadge Health Board of Directors accepts the tender bid of \$7,360.00 plus HST from J & J Equipment Rental for the repair of the retaining wall at 26 Mona and that the CEO be approved to execute any related documents.

**CARRIED!**

**10.2 Judith Harris Bursary Policy** – The Board of Directors decided that the amended changes would not be passed and the policy would stay as is.

**10.3 Accreditation Update** – Mrs. Hardy informed the Board that she has requested an extension on the Accreditation survey.

**10.4 Frequency of Meetings** - The frequency of meetings was discussed and the next Board meeting was scheduled for September.

**11. Other Business**

**12. Quality** – Quarterly report reviewed by Board members

**13 Correspondence**

**14 Consent Agenda Items Approval:**

- a. Minutes of Board of Directors Meeting held: June 29, 2021

**MOVED BY:** D. Jaunzarins  
**SECONDED BY:** I. Ouellet

**BE IT RESOLVED:** That the following Consent Agenda items, be approved: Minutes of Board of Directors Meeting held: June 29, 2021.

**CARRIED!**

**AND BE FURTHER RESOLVED:**

**MOVED BY:** R. Smith  
**SECONDED BY:** J. MacEachern

**That the following items be received:**  
**Minutes of the Nomination Committee held July 22, 2021:**

**CARRIED!**

**15 In Camera**

16. Place and Time of Next Meeting – September 28, 2021 at 1900.

**MOVED BY:** M. DeMars  
**SECONDED BY:** B. Schleier

**BE IT RESOLVED:** That the next meeting of the Board of Directors of Santé  
Manitouwadge Health be held on Tuesday, September 28, 2021 in  
the Judith C. Harris Boardroom.

**CARRIED!**

**17. 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.

**CARRIED!**

Mrs. Newton thanked everyone for attending and the meeting adjourned at 2030 hours.

**17 For the Good of the Board**

---

Debbie Hardy, CEO

---

Valerie Newton ,Board Chair