

**MINUTES OF THE MEETING OF THE BOARD OF DIRECTORS MEETING HELD AT SANTÉ MANITOUWADGE HEALTH
ON Tuesday, September 28, 2021 AT 1900 HOURS IN THE JUDITH C. HARRIS BOARDROOM**

PRESENT:	Peter Ruel	Board of Directors Chair
	Donna Jaunzarins	Director
	Marcel DeMars	Director
	Belinda Schleier	Director
	Keisha Drapeau	Director
	M. Esarte	Director of Community Programs and Services
	Debbie Hardy	CEO
	Annie Janveau	Chief Nursing Officer

Staff: Julie MacIntyre Executive Assistant/Finance Clerk

Absent:	Rolly Smith	Board of Directors Vice-Chair
	Isabelle Ouellet	Director
	John MacEachern	Director

1. Call to Order

Mr. Peter Ruel, the chair called the meeting to order at 1904.

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 Accreditation process and what is expected of the Board of Directors.

5. Patient Story

No Report

6. Board Chair Report

Mr. Ruel explained the Board of Directors how diligent the CEO has kept him informed since he has returned as chair to the board.

7. Chief of Staff Report

No Report

8. Administration Report

Strategic Directive #1

SMH will be proactive to individual and community needs

- SMH continues to provide vaccination clinics for the community and have partnered with the pharmacy to utilize the vaccinations received by them.
- The clients relocated mid Aug due to shortage of staff have been repatriated with one
- ALC/LTC residents who were able to go on LOA have really enjoyed their summer and it improved their level of happiness. All clients had their family and friends welcomed back.
- SMH has had an amazing compliance rate for vaccinations – there are talks continuing in the northwest regarding Mandatory Vaccinations for all healthcare workers. Several facilities have adopted the Mandatory Vaccines for all new hires (each facility has their own date of implementation set).

- We continue to work with agencies and have created a recruitment and retention package hoping to entice permanent workers – to be reviewed during meeting.

Strategic Directive #2:

SMH will sustain outstanding quality and operations

- The purchase order for the new U/S including an updated echocardiography module has been completed and now it's a matter of deliver which can take up to six weeks.
- The RFP process for the new defibrillator is complete and the invoice sent.
- 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 from Accreditation Canada – This was denied by Accreditation and they are insisting a virtual component needs to be completed in the fall or we get a deferral which has the consequence of being non accredited until the survey is completed. We did ask for a later fall date and after some negotiations we have committed to Dec 1 & 2 as a virtual assessment with the follow up on site date in March 2022.
- The flooring project will likely be completed in November. 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 through HIRF. Everything Floors LTD is the company who has been awarded the job. They have provided us the same service in the past and have done any excellent job.
- The Ministry of Labour was in on Sept 14, 2021 to meet with the OH& S Team.

Strategic Directive #3:

SMH will be innovators in service and program delivery

- There has been increasing difficulty in booking individuals for their second dose of COVID vaccine due to people being unavailable. Smaller on SMH site clinics have been completed. The clinic sizes may change once 3rd dose recommendations are authorized by Public Health.
- A hybrid RCCR education session is being planned 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) however this is complicated by union issues.
- A regional task force has been formed to address the HHR issues across NW Ontario. We have 2 reps on this committee.
- Efforts continue to recruit a physiotherapist for the FHT.
- The Director of Community Services has been working diligently to secure physicians for Manitouwadge.
- MD incentive \$\$ for working in emergency expired September 7 2021.
- 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, 2021.
- One FHT nurse, along with Emily and Annie has continued working shifts on the floor to assist with the shortage of RNs. Megan has completed some orientation to the unit and will be available to help.
- We anticipate 3 more nurses in the next week which will bring us to 8 full time people of varying contract lengths. This will help alleviate the demand and workload of these staff.
- Our Nurse Manager has decided to leave due to personal reasons. We will not actively recruit another until we stabilize the nursing staff

- Dr. Cimona has signed on as a permanent full time as of Sept 8, 2021
- We hope to have more good news early October on the physician front.
- Jocelyn and Megan are at a recruitment fair in Kitchener on Sept 22, 2021.

9. Committee Reports

9.1. Governance Committee

No Report

9.2. Finance and Audit Committee

The April financial statements were reviewed by Ms. Julie MacIntyre. She advised that at the end of the April there was a deficit of \$79,310.00.

The following resolution was tabled for approval;

MOVED BY: D. Jaunzarins

SECONDED BY: B. Schleier

BE IT RESOLVED: That the Financial Statement for April 2021, be approved as presented.

CARRIED!

The May financial statements were reviewed by Ms. Julie MacIntyre. She advised that at the end of the May there was a surplus of \$25,047.00.

The following resolution was tabled for approval;

MOVED BY: B. Schleier

SECONDED BY: K. Drapeau

BE IT RESOLVED: That the Financial Statement for May 2021, be approved as presented.

The June financial statements were reviewed by Ms. Julie MacIntyre. She advised that at the end of the June there was a deficit of \$3,216.00.

CARRIED!

The following resolution was tabled for approval;

MOVED BY: M. DeMars

SECONDED BY: D. Jaunzarins

BE IT RESOLVED: That the Financial Statement for June 2021, be approved as presented.

CARRIED!

The July financial statements were reviewed by Ms. Julie MacIntyre. She advised that at the end of the July there was a surplus of \$6,417.00.

The following resolution was tabled for approval;

MOVED BY: K. Drapeau

SECONDED BY: D. Jaunzarins

BE IT RESOLVED: That the Financial Statement for July 2021, 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: M. DeMars

SECONDED BY: C. Kelly

BE IT RESOLVED: That as recommended by the MAC at their May 20, 2021 meeting the following professionals be granted Regional Ordering privileges up to December 31st, 2021.

Dr. L. Altamiran0-Diaz TBRHSC
Dr. G. CumminsNOSH
Stephan Chery, NP NOSH
Stephanie Vincent, NP TBRHSC

CARRIED!

Locum Tenen Privileges

The following resolution was tabled for approval;

MOVED BY: B. Schleier

SECONDED BY: M. DeMars

BE IT RESOLVED: That as recommended by the MAC at their May 20, 2021 meeting the following professionals be granted Locum Tenens privileges up to December 31st, 2021.

Dr. Daniel Rooyakkers

CARRIED!

Associate Privileges

The following resolution was tabled for approval;

MOVED BY: D. Jaunzarins

SECONDED BY: M. DeMars

BE IT RESOLVED: That as recommended by the MAC at their May 20, 2021 meeting the following professionals be granted Associate privileges and acting Chief of Staff up to December 31st, 2021.

Dr. Camille Cimona

CARRIED!

9.5 Nomination Committee

9.5.1 Nomination Mins

The following resolution was tabled for approval;

MOVED BY: M. DeMars
SECONDED BY: D. Jaunzarins

BE IT RESOLVED: That Ms. Keisha Drapeau be appointed as a Director to the Board of Santé Manitouwadge Health for a term of 3 years ending September 2024 in accordance with Corporate bylaws.

CARRIED!

10. New Business

10.1 Regional Services Committee (Donna) – reviewed by Board members. Donna advised the board that should they have any questions or concerns, they bring them to her before the next meeting.

10.2 Criminal Record Check Policy

The following resolution was tabled for approval;

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

BE IT RESOLVED: That the following policy be approved as presented;

Policy IV-190 Criminal Record Check Including Vulnerable Sector Screening.

CARRIED!

10.3 Recruitment and Retention – Mrs. Hardy updated the Board of Directors on the status of the recruitment status of securing RNs and physicians at SMH.

11. Other Business

11. Quality – MOL Inspection

- Mrs. Janveau updated the Board on the recent MOL inspection. The inspection of SMH resulted in no major infractions.

13 Correspondence

14 Consent Agenda Items Approval:

- a. Minutes of Board of Directors Meeting held: July 27, 2021

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

BE IT RESOLVED: That the following Consent Agenda items, be approved: Minutes of Board of Directors Meeting held: July 27, 2021.

CARRIED!

AND BE FURTHER RESOLVED:

MOVED BY: M. DeMars

SECONDED BY: B. Schleier

**That the following items be received:
Minutes of the Nomination Committee held September 9, 2021:**

MOVED BY: D. Jaunzarins
SECONDED BY: M. DeMars

**That the following items be received:
Minutes of the Medical Advisory Committee held May 20, 2021:**

CARRIED!

MOVED BY: K. Drapeau
SECONDED BY: B. Schleier

**That the following items be received:
Minutes of the Medical Advisory Committee held July 6, 2021:**

CARRIED!

15 In Camera

The following resolution was tabled for approval;

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

BE IT RESOLVED: That we move into an In-Camera session at 2018 and that Mrs. Hardy be requested to attend.

CARRIED!

The following resolution was tabled for approval;

MOVED BY: D. Jaunzarins
SECONDED BY: B. Schleier

BE IT RESOLVED: That we move out of In-Camera session at 2018.

CARRIED!

16. Place and Time of Next Meeting – October 26, 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 Manitouswadge Health be held on Tuesday, October 26, 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:
BE IT RESOLVED:

D. Jaunzarins
That this meeting be adjourned.

CARRIED!

Mr. Ruel thanked everyone for attending and the meeting adjourned at 2028 hours.

17 For the Good of the Board

Debbie Hardy, CEO

Peter Ruel ,Board Chair