

MINUTES OF THE ALLIED BOARDS OF DIRECTORS
MEETING HELD ON
TUESDAY, NOVEMBER 26, 2024 AT 6:30 PM
CPDMH BOARDROOM

PRESENT:

✓	L. Bernes	✓	L. Learmonth
✓	C. Crosby	✓	B. Lowry Bagshaw
✓	A. Champagne	✓	M. Maidment
✓	M. Fortune	✓	S. Pirie
✓	J. Fournier	✓	R. Probert
✓	L. Gardiner - Chair	✓	G. Smith
✓	B. Harrington	✓	M. Vermette
✓	K. Kirkpatrick	✓	B. Young

REGRETS:

X	M. Bastin-Millar	X	B. Harvey
X	A. Bennett	X	S. Snow

STAF/GUESTS:

✓	R. Arseneau – CPDMH Foundation Executive Director	✓	B. Hilker – VP & CFO
✓	S. Cousineau – VP HR/OHS/DI	✓	P. Kenney – CPDMH Foundation Board Chair
✓	V. Dimas – AGH Foundation Executive Director	✓	T. McLelland

1.0	Welcome Guests
	<p>The Chair welcomed R. Arseneau, V. Dimas and P. Kenny to the meeting. P. Kenney, incoming Chair of the CPDMH Foundation Board of Directors, gave a short introduction.</p>
	<p><u>Education Presentation</u></p> <p>L. Learmonth was invited to provide a presentation on Accreditation and provided the following information:</p> <ul style="list-style-type: none"> • What is Accreditation • 2023 Accreditation Results for AGH and CPDMH • Key Accreditation Gaps • Next Steps, Self- Assessment, Cycle, Risks and; • Survey Tools <p>Questions were raised and answered. It was noted that a dedicated resource will be needed for a Accreditation support and will be considered when drafting the 2025/26 operating budget.</p> <p>L. Learmonth was thanked for the very informative presentation.</p>
2.0	Approval of Agenda
	<p>IT WAS MOVED AND SECONDED THAT THE AGENDA BE APPROVED.</p> <p style="text-align: right;"><u>MOTION CARRIED</u></p>
3.0	Chair's Remarks
	<p>The Chair addressed the following:</p>

	<ul style="list-style-type: none"> • Attended Randy Shaw's retirement parties and thanked Directors who were able to attend. • Thanked J. Fournier for assuming the Chair role at the September meeting when L. Gardiner fell ill and was unable to attend. • Reminded Directors to complete their meeting evaluation which T. McLelland will be sending out after the meeting. • Asked V. Dimas if there was anything to add to the AGH Foundation Report which was included in the package. V. Dimas added that due to the Canada Post strike the Foundation has had to come up with other ways to reach out to donors to send them the Christmas mailer. • Asked P. Kenny if there was anything to add to the CPDMH Foundation report which was included in the package. Reiterated the effect of the Canada Post strike on the Christmas mailer and also noted that an invite will be sent to the Allied Boards to a VIP Foundation event to be held the day before the new ED grand opening.
4.0	Consent Agenda Matters
	<p>IT WAS MOVED AND SECONDED THAT THE FOLLOWING ITEMS CONTAINED IN THE CONSENT AGENDA BE APPROVED:</p> <ul style="list-style-type: none"> a. Minutes of the Allied Boards of Directors Meetings held September 24, 2024 b. AGH Financial Statements for the six-month period ended September 30, 2024 c. CPDMH Financial Statements for the six-month period ended September 30, 2024 d. LCPS Financial Statements for the nine-month period ended September 30, 2024 e. Human Resources Committee Terms of Reference f. Capital Projects Committee Terms and Reference g. Governance & Nominating Committee Terms of Reference h. Policy II-4 CEO Performance Evaluation – updated i. Executive Committee Terms of Reference <p style="text-align: right;"><u>MOTION CARRIED</u></p>
5.0	Business Arising from the Minutes
	There was no business arising from the minutes.
6.0	Matters Requiring Decision
	<p>6.1 Operating Plan Guiding Principles</p> <p>M. Vermette referred to the briefing note included in the package noting that B. Hilker was providing the Allied Boards with education on how the budget is constructed and provide guidance on the principles used to support the budget process.</p> <p>B. Hilker reviewed the guiding principles which were being brought forward seeking the Allied Boards support for development of the operating plan, and noted that the last few years the Board has not approved a budget instead extended spending authority to the CEO because of the lack of a balanced budget and the need for a waiver. The F/S at AGH indicate one-time funding received and therefore has resulted in a significantly different outcome. A question was raised regarding how permanent funding can be secured. B. Hilker reported that Management has been reaching out to Ontario Health and will meet with staff in January to communicate the challenges and the need to convert the one-time funding to base budget.</p> <p>B. Harrington reported that although challenging, the intention is to work towards a balanced budget by March 31, 2025.</p> <p>IT WAS MOVED AND SECONDED THAT SUPPORT OF THE GUIDING PRINCIPALS FOR THE DEVELOPMENT OF THE OPERATING PLAN BE APPROVED.</p> <p style="text-align: right;"><u>MOTION CARRIED</u></p>

	<p>6.2 Risk Management</p> <p>B. Harrington reported that the Senior Team has reviewed the Top 10 Risks previously approved by the Board and a slight change in ranking is being recommended along with a suggestion that the risks be reviewed twice a year, November and March, instead of annually. The Risks will continue to be filtered through the committees. It was noted that the next Senior Team review will include the Chief of LCPS for input.</p> <p>Questions were raised and answered.</p> <p>IT WAS MOVED AND SECONDED THAT THE TOP 10 RISKS (RISK REGISTER) ASSIGNMENTS TO ALLIED BOARDS COMMITTEES BE APPROVED.</p> <p style="text-align: right;"><u>MOTION CARRIED</u></p>
	<p>6.3 Proposed Allied Boards Goals for 2025/26</p> <p>B. Young reminded Directors of the discussion held at the last Allied Boards meeting regarding setting Goals for the Allied Boards of Directors. B. Young noted that the Goals could be ongoing with different milestones.</p> <p>No concerns were raised.</p> <p>IT WAS MOVED AND SECONDED THAT THE REQUEST FOR EACH SUB-COMMITTEE OF THE ALLIED BOARDS TO DELIBERATE AND PROPOSE ONE ALLIED BOARDS GOAL TO THE GOVERNANCE & NOMINATING COMMITTEE NO LATER THAN MARCH 6, 2024 FOR RECOMMENDATION TO THE ALLIED BOARDS OF DIRECTORS FOR APPROVAL BE APPROVED.</p> <p style="text-align: right;"><u>MOTION CARRIED</u></p>
	<p>6.4 MRHA Communications Plan - Updated</p> <p>B. Young reported that that the Governance & Nominating Committee reviewed the updated Communications Plan and was included in the package for approval. B. Young noted that with the addition of a part-time Communications Lead the resources and effort into communications has increased greatly. A discussion was held and it was agreed that a proactive strategy is important.</p> <p>It was agreed that the Communication Plan has been much improved. No concerns were raised.</p> <p>IT WAS MOVED AND SECONDED THAT THE MRHA COMMUNICATIONS PLAN BE APPROVED.</p> <p style="text-align: right;"><u>MOTION CARRIED</u></p> <p>A question was raised on whether the Communications Plan needs to be approved by the Allied Boards going forward as it is more operational in nature. The question will be addressed at a future meeting with the possibility of just being provided to the Allied Boards as Information.</p>
7.0	<p>Matters for Discussion</p>
	<p>7.1 Report of the AGH Chief of Staff</p>
	<p>M. Fortune noted the Report of the AGH COS in the package and added that there has been improved physician engagement with hospital management. No questions were raised.</p>
	<p>7.2 Report of the CPDMH Chief of Staff</p>
	<p>A. Champagne noted that due to being on vacation, was unable to provide a written report. A Champagne provided a verbal report of the following:</p> <ul style="list-style-type: none"> • The CPDMH MAC met October 21 and November 24 – Highlights include ongoing EORLA Representation at meetings and policy approved for Inter-Hospital Transfers for CT Scans. • The integrated MRHA General Surgery program was reviewed by stakeholders to discuss lessons

learned, strengths and areas for improvement. An additional surgeon will join the group in December.

- Medical Staff recruitment remains a priority. Recent additions include an otolaryngologist, dermatologist, and family practice rheumatologist. Discussions with specialists in orthopedics and internal medicine continue as these are areas of need. Continued focus remains on creating and maintaining an environment to attract and support family physicians in the community and hospital.
- Regional Chiefs of Staff in-person meeting was held on September 23 for the first time since before the pandemic. The regional health human resource crises, new Regional Orthopedic Distribution Control Centre and Regional ED and ALC metrics were items discussed.
- Integrated OR Committee met September 25 and continue to make great progress in aligning policies, equipment purchasing, processes and human resources.
- Participated in an educational case review with CHEO and local physicians and staff on September 25. This access to pediatric expertise is one of the many benefits of the CPDMH partnership with CHEO. New CHEO surgeons continue to be welcomed to CPDMH which is beneficial however also a strain on scarce resources as the credentialing and orientation process requires a great deal of work by clinical staff as well as managers and medical affairs. H. Larkin and T. McLelland were appreciated for the excellent job they both do in this area.
- Participated in a Lake 88.1 Radiothon interview on October 17. An excellent opportunity to let the community know how important their support is and to share some of the great work going on at the hospital.
- Georgian Bay Information Network (GBIN) staff visited CPDMH (and AGH) in early November to better understand current state and engage with medical staff around future state planning. Drs. Bastin-Millar, Suttie and Walker were thanked for their participation to help improve information technology and the electronic medical record in the hospitals as this is key to recruitment and retention of clinical staff as well as safe and excellent patient care.
- Dr. Scott Higham was celebrated at a retirement party on October 24. The second annual Wall of Honour induction ceremony recognized Drs. David Atack and Marty White on October 30.

A discussion was held regarding how the Perth Family Health Team has been organizing clinics for unattached patients in association with PSFH. Dr. Champagne indicated that it is a complicated process involving follow up with labwork, orders, medical records etc. and that the Medical Staff have been looking at the nursing requirement of the FHT to see if that resources could be used to service unattached patients. It was noted that the best care continues to be by the Family physician and the need to attract more to this area. The Directors inquired how the Allied Boards could help with recruiting. Dr. Champagne indicated that continuing to place Medical Trainees at both hospitals, ensuring a positive experience and that the new building will both help.

7.3 Report of the CEO & Senior Team

B. Harrington noted that the Report was included in the package. No questions were raised.

7.4 Quality of Care – Good Catch

L. Learmonth referred to the two “Good Catches” included in the package for information.

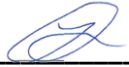
7.5 Quality of Care - Patient Compliment/Concern

L. Learmonth shared a concern received from an elderly patient in the Emergency Department who had a complex history. The patient was sent back home with indigestion only to return two days later by ambulance. Patient was given medication and was back again the next day due to being very ill from the medication. The patient was seen by a different physician each visit. The patient’s family physician who works at AGH was notified and was able to see the patient while in the ED. The patient

	<p>was transferred to the Heart Institute where a diagnosis of a blockage around the heart was made. The daughter felt the physicians in the ED missed the diagnosis. The chart was reviewed and the patient was showing atypical presentation. The daughter also felt there was a lack of privacy in the department during handover and inappropriate language was used by one of the physicians who was discussing a DNR. The Chief of the ED called the daughter to follow up and the daughter indicated the mother was doing well and thanked the Chief for the phone call. A case review was held with the ED Physicians where education was provided on pathways, chest pain, and privacy expectations.</p> <p>L. Learmonth shared a compliment which was received from the AGH info email who thanked the staff for caring for their autistic son with kindness, respect and patience. They felt heard and supported.</p>
8.0	Matters for Information
	<p>The Chair noted the education reports provided by M. Vermette and C. Crosby who attended OHA sessions on Governance.</p> <p>The Chair also noted the OHA President Letter: Financial Position of Hospital Sector and Future Outlook which was provided for information.</p>
9.0	Other Business
	<p>The Chair wished goodnight to P. Kenny, R. Arseneau, V. Dumas, B. Hilker, S. Cousineau, L. Learmonth and A. Champagne, who all left the meeting.</p> <p>IT WAS MOVED AND SECONDED THAT THE MEETING MOVE IN-CAMERA.</p> <p style="text-align: right;"><u>MOTION CARRIED</u></p>
	9.1 2024/25 AGH COS Proposed Goals and Objectives
	<p>M. Fortune presented the Directors with the proposed 2024/25 Chief of Staff Goals and Objectives being recommended by the Executive Committee. M. Fortune noted that they were developed by thinking about areas of gaps for patients receiving care.</p> <p>The Directors thanked M. Fortune noting the phenomenal work being done thus far.</p> <p>M. Fortune thanked the Directors for their time and left the meeting.</p> <p>IT WAS MOVED AND SECONDED THAT 2024/25 AGH CHIEF OF STAFF GOALS AND OBJECTIVES BE APPROVED.</p> <p style="text-align: right;"><u>MOTION CARRIED</u></p>
	9.2 2024/25 MRHA CEO Proposed Goals and Objectives
	<p>B. Harrington presented the Directors with the proposed 2024/25 Chief Executive Officer Goals and Objectives being recommended by the Governance & Nominating Committee.</p> <p>B. Harrington reminded the Directors that the Corporate Goals also form part of the CEO's individual goals and provided an update. No concerns were raised.</p> <p>IT WAS MOVED AND SECONDED THAT 2024/25 MRHA CHIEF EXECUTIVE OFFICER GOALS AND OBJECTIVES BE APPROVED.</p> <p style="text-align: right;"><u>MOTION CARRIED</u></p> <p>T. McLelland left the meeting.</p>
	9.3 Elected Members Discussion with CEO (10 minutes)
	<p>Directors continued an in-camera discussion. No minutes were recorded.</p> <p>B. Harrington left the meeting.</p>

	9.4 Elected Members Only Discussion (10 minutes)
	<p>Directors continued an in-camera discussion. No minutes were recorded.</p> <p>IT WAS MOVED AND SECONDED THAT THE MEETING MOVE OUT OF CAMERA.</p> <p style="text-align: right;"><u>MOTION CARRIED</u></p>
10.0	Next Meeting /Adjournment
	<p>L. Gardiner indicated that the next Allied Boards meeting will be held on January 28, 2025.</p> <p>IT WAS MOVED THAT THE MEETING BE ADJOURNED.</p>

Approved Minutes signed by:



L. Gardiner, Allied Boards Chair



B. Harrington, Allied Boards Secretary