Geraldton District Hospital

Minutes of the

**GDH Board of Directors’ Meeting**

Held at the Geraldton District Hospital and via Zoom,

Tuesday, September 14th, 2021 at 5:30 pm

Present

Voting: Mark Wright Bobby Jo Chenier Victor Tschajka Michael Davis Terry Popowich Dorene Boulanger

Sanna Humphreys Ralph Humphreys Patricia Dufour

Non-Voting: Darryl Galusha Ian McPherson Laurie Heerema

Dr. Roy Laine Brigitte Ouellet

Jena Goulet (recorder)

Regrets

Voting: Jessie Beaulieu Kathryn Legault

Non-Voting: Dr. Ryan Zufelt

Guests: Scott Potts

**Board Composition (voting): 9 Elected 2 Appointments Total = 11**

**Current Vacancies (voting): 0 Elected 0 Appointments Total = 0**

**Total Board Members (voting): 11 Present: 9 Attendance: 82 %**

**1.0 CALL TO ORDER**

**1.1 Welcome and Chair’s Opening Remarks**

● The meeting was called to order at 5:32 pm by M. Wright.

● M. Wright welcomed Bobby Jo Chenier and Michael Davis to the Board of Directors. They introduced themselves to the rest of the members.

● M. Wright read the Treaty Acknowledgement.

**2.0 DECLARATION OF CONFLICTS OF INTEREST**

● No conflicts declared.

**3.0 ADOPTION OF THE AGENDA**

● M. Wright asked if there were any amendments to the agenda.

**It was moved by D. Boulanger and seconded by V. Tschajka that the agenda be approved as amended.**

**CARRIED.**

**RES 50**

**4.0 PRESENTATIONS**

**4.1 ER Project Updates**

● S. Potts presented the Emergency Department Project updates to the Board members.

● S. Potts expressed that there are a number of delays to complete the Project due to coordination issues between the contractors and subcontractors.

● The outstanding work includes:

● Flooring: additional materials were needed and the work will be complete by the end of next week,

● Some windows require replacing,

● Fire shutters need to be installed,

● Landscaping and signage issues need to be addressed,

● The roof scuppers will be completed by the end of the week,

● The registration shield requires revision and should be corrected next week,

● The doors separating Level 0 and the old Emergency Department need additional hardware and it will be installed in two weeks,

● Staining of the outside walls of the Emergency Department is starting this week and should take 6 days to complete.

● Tom Jones should be off the site by the end of October.

● V. Tschajka inquired about the coordination issues. S. Potts explained that they are caused by availability problems with some of the subcontractors who are working on other projects.

● S. Potts shared some MOHLTC updates. They have started the reconciliation process and are analyzing the Change Orders. Many items have been identified as non-shareable. Another template with rationale for the Change Orders will be submitted shortly.

● The original Change Order submission requested the MOHLTC to cover $812,000. They have asked for clarifications for approximately $360,000 worth of Change Orders.

● The lien period expired September 2nd and the Ministry’s holdback has been released to Tom Jones.

● D. Boulanger inquired about the stone benches that were removed from the Medicine Wheel. S. Potts stated that they have been moved for now but will be put into the garden once the work has been completed.

● T. Popowich expressed his concern about the holdback being released even though the work is not 100% complete. S. Potts reassured the Board members that even though the holdback has been released, there are still outstanding Progress Certificates that need to be submitted. The contractors do not get paid until those have been approved.

**It was moved by V. Tschajka and seconded by D. Boulanger that the following changes be approved by the Board of Directors for the Emergency Department Project:**

● **Level 1 mechanical interference,**

● **Elevator room change,**

**● Nurse Call Interphone,**

**● Replacement of exhaust motor in Compounding Room,**

**● Medicine Wheel painting,**

**● Eye Wash Station in Compounding Room,**

**● Janitor Room exhaust rerouting,**

**● Level 0 mechanical interferences,**

**● Floor leveling,**

**● Roof Scuppers,**

**● Door drop bottoms,**

**● Level 0 door change to lock public access to corridor.**

**The Changes are confirmed to be no more than $36,583.57 maximum.**

**Carried.**

**RES 51**

**5.0 CORRESPONDENCE**

**5.1 Ministry of Health – 2021 Hospital Annual Meetings**

**5.2 M. Stark – Thank You Card**

**5.3 M. Baillargeon – Thank You Card**

**5.4 Staff Email – “Great Teamwork!”**

**5.5 Anishnaabe Liaison Committee Invitation**

**5.6 GDH Facebook Messenger Communications – Patient Story**

**6.0 EDUCATION**

● Clarifications concerning education was provided for the new Board members.

**6.1 Guide to Good Governance – Chapter 7 (Pages 135-177)**

● M. Wright asked if there were any questions or comments regarding this month’s education.

● D. Boulanger is requesting for the Board of Directors hold a day retreat or luncheon. D. Galusha explained that with the COVID-19 double-vaccination requirements, these may cause issues with some locations and/or the public.

● T. Popowich asked for clarifications on a Board member’s terms of service. D. Galusha shared that the By-Laws state that each member can serve 3 consecutive 3-year terms.

● R. Humphreys requested that the questions from the *Annual Board Evaluation* be included as education for the Board at the October meeting for review. The Board members can provide revised questions for the November meeting.

● Chapter 8 (pages 178-244) was assigned for reading for the next Board meeting.

**7.0 CONSENT AGENDA**

**7.1 Regular Board Meeting Minutes – June 1st, 2021**

**7.2** **MAC Meeting Minutes**

**7.2.1 May 19th, 2021**

**7.2.2 June 23rd, 2021**

**7.3 CCS Report**

**7.4 CNE Report**

**7.5 Human Resources Report**

**7.6 COS Report**

**It was moved by T. Popowich and seconded by S. Humphreys to accept the Consent Agenda as presented.**

**CARRIED.**

**RES 52A**

**8.0 ITEMS LIFTED FROM CONSENT AGENDA**

**9.0 BUSINESS ARISING FROM MINUTES**

**9.1 Regional Services Committee Representation**

● T. Popowich has taken the GDH seat on the committee to replace J. McPherson.

● T. Popowich shared that a meeting was held September 2nd.

● T. Popowich shared that the following subjects were discussed and provided information:

● Ontario Health Hubs,

● Health Integration Information,

● Cyber Security,

● Changing the Committee to a Council.

● The Board members discussed the possibility of Greenstone becoming its own Ontario Health Hub.

**10.0 OPERATIONS SUPPORT MANAGER REPORT**

**10.1 Financial Highlights**

● I. McPherson informed the Board of Directors that GDH currently has an operating surplus as of June 30th, 2021.

● I. McPherson summarized the Statement of Operations.

● D. Boulanger expressed that she is happy to see that the Nakina Clinic is operating with a surplus. I. McPherson explained that with the two new physicians working at the Clinic, the surplus will decrease significantly. He also stated that if the Nakina Clinic remains in a surplus by the end of the fiscal year, the Ministry will take back the excess funds.

**10.2 Operational Highlights**

● I. McPherson expressed that all outstanding projects from the previous fiscal year have been completed aside from the ON2 Concentration. This is scheduled to be installed in late October.

● I. McPherson stated that quotes have been received for most of the projects. However, most are on hold until the Emergency Department Project is fully complete. Most are internal projects and are likely to begin in the winter.

● I. McPherson shared that additional funding is required for 3 projects:

*1 – Digital Imaging Equipment/Portable X-Ray Unit*

● The RFP began in April 2020. The cost of the equipment was underestimated and the cost has increased over the last year.

● $185,000 was originally budgeted for the project but the costs came to $283,000. This is an increase of $98,000.

**It was moved by T. Popowich and seconded by R. Humphreys that $98,000 be added to the Capital Budget for the Digital Imaging Equipment/Portable X-Ray Unit for the Imaging Department as presented.**

**CARRIED.**

**RES 53**

*2 – ON2 Fill Station*

● Will attempt to have the Fill Station installed at the same time as the ON2 Concentrator and will allow for GDH to produce and distribute its own oxygen throughout the facility.

● An ON2 Fill Station will help to save on delivery costs and delayed delivery from Thunder Bay due to weather, shortages, or other issues that may arise.

● The cost of the ON2 Fill Station may be covered through the Ministry’s COVID-19 Expenses. However, the expenses cannot be submitted before the Station is purchased.

● V. Tschajka inquired about GDH having a backup plan in place. I. McPherson stated that oxygen can still be ordered from Praxair, if needed.

● Clarifications were provided for where the equipment would be installed.

**It was moved by V. Tschajka and seconded by P. Dufour that $90,000 be added to the Capital Budget for the ON2 Fill Station as presented.**

**CARRIED.**

**RES 54**

*3 – Hospital Vehicle*

● GDH has never had a company vehicle and the Maintenance Staff are currently using their personal vehicle to pick up materials for the Hospital. This can create liability issues.

● Funds would be allocated from the Operational Funds for maintenance and insurance.

● The pros and cons of a company vehicle were discussed.

**It was moved by P. Dufour and seconded by D. Boulanger that a maximum of $60,000 be added to the Capital Budget for the purchase of a Hospital Vehicle for the Maintenance Department as presented.**

**CARRIED.**

**RES 55**

● The remaining Capital Projects were discussed and clarifications were provided.

● Consulting costs were discussed for revising the Hospital’s Strategic Plan. M. Wright asked if the Plan required revision or if it can be extended for another 2-4 years since the Board of Directors does not want to make any changes. I. McPherson will discuss this at the next Managers’ Meeting and will hold back the RFP process until a decision is made. This will save the Hospital $50,000 to use towards other projects.

● GDH’s Accreditation Evaluation is set to take place June 2022. I. McPherson is looking for 3-4 Board members to help review the Accreditation Canada Governance Standards. This will involve 1-2 meetings over the course of the next couple of months. I. McPherson will send an email to all the Board member with more information.

● The Board members will be required to complete a mandatory Accreditation Survey. It is approximately 30 questions long and can be done online. The Board requested to receive the Survey in November in order to have it completed before the end of December.

● I. McPherson shared that the Staff Satisfaction Survey will be distributed in October to all GDH employees.

● The Risk Management Report was summarized for the Board members.

**11.0 NEW BUSINESS**

**11.1 Board Planning Cycle 2021-2022 (Draft)**

● Approved as presented.

**11.2 Board Committees & Representatives (Draft)**

● The Board members suggested that an Accreditation Standards Ad HOC Committee be formed. Terms of Reference need to be developed for the committee.

● B. J. Chenier will be joining the Anishnaabe Liaison Committee and the Quality Improvement Committee.

● M. Davis will be joining the Quality Improvement Committee and the Accreditation Standards Ad HOC Committee, if it is formed.

● D. Boulanger will join the Nominating Committee.

**11.3 Board Members’ Roles and Responsibilities**

● The form was provided to the Board Members. The forms will be signed and returned to J. Goulet by Friday, September 24th.

**11.4 Confidentiality Agreement**

● The agreement was provided to the Board Members. The agreement will be signed and returned to J. Goulet by Friday, September 24th.

**11.5 Incident Reports (RL6): May – July 2021**

● The reports were received.

**12.0 LINKAGES & PARTNERSHIPS**

**12.1 ER Project Report – September 2021**

● Report was received.

**12.1.1 ER Project Ad Hoc Committee Meeting Minutes – June 15th, 2021**

**12.2 QIC Meeting Minutes – June 24th, 2021**

● V. Tschajka voiced his concerns regarding a physician not following proper PPE protocols. L. Heerema explained that this was all related to one physician who was non-compliant. He was addressed about the situation and is being monitored.

**12.3 HCAC Meeting Minutes – Next Meeting: September 21st, 2021**

**12.4 Geraldton Hospital Auxiliary Report**

● S. Humphreys provided a verbal report to the Board of Directors.

● The Gift Shop is now open again.

● The next GDH Auxiliary Meeting is scheduled for September 21st.

**It was moved by S. Humphreys and seconded by D. Boulanger that the Linkages & Partnerships reports be accepted as presented.**

**CARRIED.**

**RES 56**

**13.0 CEO REPORT**

● D. Galusha highlighted his written report to the Board of Directors.

● D. Galusha expressed that the OHA has changed their strategic focus regarding education. He is currently exploring other options.

● D. Galusha shared that he will be meeting with Greenstone Gold on September 21st.

● D. Galusha informed the Board members that two new physicians have been employed at the Nakina Clinic. He anticipates that this will help improve access to healthcare for those who live north of Geraldton.

● D. Galusha stated that the RPN Program with Confederation College has begun and has 7 students enrolled in the program.

● D. Galusha shared that the Grand Opening o the new Emergency Department has been delayed until the end of October.

**13.1 COVID-19 Internal & External Communication**

**13.2 Staff Appreciation Luncheons & Raffles – Posters**

**It was moved by V. Tschajka and seconded by P. Dufour that the report from the CEO be approved as presented.**

**CARRIED.**

**RES 57**

**14.0 DECISION OF THE BOARD**

**14.1 Physician Privileges**

● The list of Physician Privileges requests from the MAC meeting was presented to the Board for review.

**It was moved by T. Popowich and seconded by D. Boulanger that the list of Physician Privileges be approved as presented.**

**CARRIED.**

**RES 58**

**15.0 ROUND TABLE DISCUSSION**

● Discussion occurred.

● D. Boulanger requested that coffee and donuts be provided to the staff of GDH on behalf of the Board of Directors. J. Goulet was assigned to arrange a date and the delivery.

**16.0 MONTHLY MEETING EVALUATION**

**16.1** **Annual Board Evaluation Summary – June 2021**

● The Evaluation Summary was provided to the Board members.

**16.2 Bi-Monthly Meeting Evaluation Summary – June 2021**

● The Evaluation Summary was provided to the Board members.

● The Board members would like to see the Board of Directors’ Scorecard at the next meeting.

**17.0 IN CAMERA MEETING**

● In Camera Session held on September 14th, 2021 was called to order at 8:07 pm.

**18.0 TERMINATION OF IN CAMERA MEETING**

● In Camera Session held on September 14th, 2021 was terminated at 8:14 pm.

**19.0 MEETING WITH MANAGEMENT (CEO ONLY)**

**20.0 MEETING WITHOUT MANAGEMENT**

**21.0 TERMINATION OF REGULAR BOARD MEETING**

**It was moved by S. Humphreys and seconded by T. Popowich that the Board of Directors Meeting be adjourned at 8:16 pm.**

**CARRIED.**

**RES 59**

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Board Chair Signature