



BOARD OF DIRECTORS OPEN MEETING

Thursday, February 25, 2021 at 2:00 pm via MS Teams

PRESENT: Paul Nichols (Chair), Varouj Eskedjian, Cathy Vosper, Sandra Chapman, Nancy French, Joe Csafordi, Valerie Przybilla, Karen MacGinnis, Craig Hitchman, Liz Mathewson, Michael Bunn, Trish Wood, Heather Zak, Kevin Huestis, Bruce Thompson, Robbie Beatty, Dr. Bruce Bain, Patricia McAllister (by phone).

REGRETS: Dr. Kelly Parks.

STAFF PRESENT: Alysia English – CNO; Caitlin Lavoie - Communications Coordinator and Lynda Tinney, Interim EA to CEO and Recorder.

AGENDA ITEM & DISCUSSION	MOTION / DISCUSSION OUTCOME
<p>PATIENT STORY – Mental Health – “Creative Outreach”</p> <p>Deirdre MacDonald, Maygen Dochuk, EPI Peer Support, Athena Brownson were invited to talk to the Board about their new video, “Creative Outreach”.</p> <p>The video was developed as part of an 8 week Narrative Therapy/PhotoVoice group with individuals who are part of the Early Psychosis Intervention program. The group first discussed common and unique experiences of the individuals in the program and then explored areas/gaps in knowledge where it would be helpful to share their experiences. In this case, the individuals identified that recovery and relapses in recovery/recurring symptoms were important to discuss with individuals struggling with their mental health as several people had a common experience of feeling that they would get better immediately upon receiving help and then being disappointed and/or feeling that they had failed recovery when they did experience a relapse/recurrence of symptoms after the initial recovery. The group then explored pictures that could represent the common and individual experiences and developed captions to assist others to link the pictures with the experiences of each individual. From that, the video was developed and the hope is to have an art installation on the 2nd floor of the hospital as well (pending grant approval).</p>	<p>The Board was enthralled with the video and congratulated the Mental Health staff and their clients for a job well done.</p>
<p>1. CALL TO ORDER</p>	<p>Paul Nichols called the meeting to order at 2:20 pm.</p>
<p>1.1 Confirmation of Quorum</p>	<p>A quorum was confirmed.</p>
<p>1.2 Approval of Agenda</p>	<p>Add 3.7 OHT Governance Advisory Council update.</p>

	MOVED by Valerie Przybilla; SECONDED by Karen MacGinnis that the agenda be approved with the addition of 3.7. CARRIED.
1.3 Declaration of Conflicts of Interest	None declared.
2. CONSENT AGENDA	
<p>2.1 Board of Directors minutes of January 28, 2021. 2.2 Governance Committee minutes of February 11, 2021 2.3 CMH Foundation Report 2.4 Auxiliary to CMH Report</p> <p>Announcement:</p> <p>Varouj Eskedjian recapped a discussion at the CMH Foundation Board of Directors meeting held on February 24. This year’s Polar Plunge is a virtual plunge as opposed to the plunge taking place at the Lions Beach over the past several years. It was noted during the meeting the absence of an individual who had not yet signed up for the plunge.</p> <p>Bruce Thompson put out the challenge to Varouj Eskedjian with John Russell, leaving it up to them as to what the plunge would be, that he would make a donation of \$25,000 towards the Polar Plunge.</p> <p>John and Varouj will speak to Fire Chief Tim Blake about assisting them with the plunge.</p> <p>Bruce’s generous donation was received with sincere thanks from the Board.</p>	<p>Items identified as part of the Consent Agenda were previously circulated.</p> <p>MOVED by Cathy Vosper and SECONDED by Karen MacGinnis that the Board of Directors approves items 2.1, 2.2, 2.3 and 2.4 as listed on the Consent Agenda for February 25, 2021. CARRIED.</p>
EDUCATION SESSION	
<p>Dr. Bruce Bain gave a presentation on the process involved with professional staff credentialing. The presentation covered 1) why privileges and credentialing is needed 2) the Board’s responsibility 3) the processes for new applications and re-applications 4) categories of privileges and 5) the refusal of privileges process in the event MAC does not recommend granting privileges.</p>	For information purposes.
3. BOARD BUSINESS/COMMITTEE MATTERS	
<p>3.1 <u>Professional Staff Credentialing</u></p> <p>Dr. Bain presented and recommended 3 applications for consulting privileges:</p> <p>New Applications:</p> <ol style="list-style-type: none"> 1) Dr. Sandra Demaries – Consulting – Geriatric Psychiatry (GAIN) 2) GNMI Medical Imaging Group - Consulting – Limited Scope – Teleradiology On Call Dr. Ramy Ashmawy Dr. Eric Durran 	<p>MOVED by Valerie Przybilla; SECONDED by Bruce Thompson that the following 3 new applications for consulting privileges be approved by the Board as recommended by Credentials Committee and MAC. CARRIED.</p> <ol style="list-style-type: none"> 1) Dr. Sandra Demaries – Consulting – Geriatric Psychiatry (GAIN)

	<p>2) GNMI Medical Imaging Group - Consulting – Limited Scope – Teleradiology On Call Dr. Ramy Ashmawy. Dr. Eric Durran</p>
<p><u>3.2 Adopting 12 Best Practices for Governance</u></p> <p>Karen MacGinnis noted that from previous information sent to the Board, the process came out to look at the governance style and model and try to put together a framework of good governance. One of the key things that a Board has to do is always look for opportunities for improvement and always look to how to better yourself as a Board member. OHA's GGG is good information and resource for developing good governance. and will try to go through the process to see what the board's perception is as to what is working and what is not working and where we can fill the gaps. The Board has also done an assessment through OHA and whether the Board does it again this year is undecided.</p> <p>The GGG Chapter 9 talks about creating a culture of good governance in getting the right people, getting the right policies, committees/structures. The Board has their policies and procedures, but are they actually using them and following what they say?</p> <p>The Board was asked to look at the 12 best practices for governance and a summary was compiled and emailed in the board meeting package.</p> <p>Subsequently the summary was re-compiled and emailed to the Board. The practices identified in a poll of Directors in February as the top 3 priorities for the Board at CMH were:</p> <p><i>#1 – Understand mission, vision, values and accountabilities</i></p> <p><i>#2 - Understand the Board's role</i></p> <p><i>#3 - Ensure Board independence</i></p> <p>Karen explained the process of identifying the top 3 priorities and recommended the following next steps/tasks.</p> <ul style="list-style-type: none"> • divide the Board into 3 groups and each group will champion one of the priorities. • each group to meet in a MS teams meeting and elect a chairperson/recorder. • all teams to report back to the March 25th Board meeting. <p>The Governance Best Practices Evaluation template drafted by Joe Csafordi asks good and some difficult questions and shows ways of looking at the particular best</p>	<p><u>DISCUSSION OUTCOME/ACTION PLANS</u></p> <p>The following teams were identified:</p> <p><i>#1 Priority – Understand mission, vision, values and accountabilities</i> – Heather Zak (contact), Karen MacGinnis, Trish Wood, Michael Bunn, Kevin Huestis.</p> <p><i>#2 Priority – Understand the Board's role</i> – Liz Mathewson (contact), Robbie Beatty, Bruce Thompson, Valerie Przybilla, Joe Csafordi.</p> <p><i>#3 Priority – Ensure Board independence</i> – Nancy French (contact), Cathy Vosper, Craig Hitchman, Sandra Chapman, Patricia McAllister.</p> <p>Paul Nichols will select a team to participate on.</p> <p>Heather Zak will set up the MS teams meetings and send a link to everybody.</p>

<p>practices. Teams were also encouraged to look at our own resources, educational resources at OHA, the GGG and research other peer hospitals.</p>	
<p>3.3 <u>Community Engagement & Communication Plan 2021/22</u></p> <p>Liz Mathewson reported the Community Engagement & Communication Plan for 2021/22 was presented to the Governance Committee on February 11 and it was approved by the committee to bring forward to the Board of Directors for final approval.</p> <p>Feedback from the committee resulted in one change on Page 13, under Deliverables from Municipal Leaders. The committee added to that section that the CEO and the Board Chair be part of those conversations with municipal leaders.</p> <p>A question was raised about the status of PFAC and whether it existed and was functioning as it is mentioned in the key messages on page 4 of the plan.</p> <p>PFAC does exist and will be in the beginning ‘functioning’ stages.</p> <p>Following a discussion, the Board was content with the existing language and intent of the proposed communication plan.</p>	<p>MOVED by Valerie Przybilla; SECONDED by Karen MacGinnis and CARRIED that the Community Engagement & Communication Plan for 2021/22 be approved as recommended by the Governance Committee.</p>
<p>3.4 & 3.5 <u>Board of Directors Meeting Reports & Background Material for Consent Agenda – Policy 1-040 and Board Accountability – Policy 1-050</u></p> <p>Karen MacGinnis reported the policies were reviewed and approved by the Policy Committee and Governance Committee. There were no major changes.</p> <p>Paul Nichols commented that perhaps more consideration needs to be given as to what document is listed under the Consent Agenda. The Chair and the CEO work collaboratively developing Board agendas and discuss and decide what goes into the Consent Agenda.</p> <p>Varouj noted that in preparing the new Consent Agenda, other EA’s in area hospitals were canvassed to try and get a sense of what they included in their Consent Agendas and what was not included. The Consent Agenda for this meeting was drafted based on the feedback of what other hospitals are doing.</p> <p>If the CMH Foundation and Auxiliary Reports are to be pulled into reports as opposed to leaving them in the Consent Agenda that it up to the Board to decide.</p> <p>Valerie advised that previously, the Board used to use Consent Agendas and the CMH Foundation and Auxiliary reports were in the Consent Agenda. The purpose of having a Consent Agenda is to speed up the meeting. All Board members would have received the meeting package in advance, read the good news, and if they have any questions regarding those reports, they have the opportunity to have the material moved to the meeting agenda for further discussion/comment.</p>	<p>Board Members are encouraged to give their feedback to Varouj as to what they would like to see as a Consent Agenda item and what they would like to see outside of the Consent Agenda.</p> <p>MOVED by Kevin Huestis; SECONDED by Michael Bunn and CARRIED that the Board of Directors Meeting Reports & Background Material for Consent Agenda (Policy 1-040) and the Board Accountability Policy (1-050) be approved by the Board of Directors as recommended by the Governance Committee.</p>

<p>The Board policy does not prescribe what goes into the Consent Agenda. It just states that there is one. It puts the onus on the board to read the all the reports circulated in advance rather than having them read to them during a meeting, but the opportunity is still there to have the report moved to the meeting agenda. The intent of Consent Agendas is not to preclude the importance of the reports listed in the Consent Agenda.</p>	
<p>3.6 <u>Nominating Committee</u></p> <p>The Nominating Committee meeting will be convening in the next 2 weeks.</p> <p>The hospital intends to go out with a public expression of interest. As in the past, the Board can canvass people they feel would be a good fit for the Board.</p> <p>To determine the interest of Board members in renewing their terms, the Nominating Committee will be conducting end of term interviews. Those interviews take place at the end of year 1, end of year 3 and end of year 6.</p>	<p>For information purposes.</p> <p><u>ACTION PLAN</u></p> <p>The skills matrix and inventory exercise identified the skills and qualities that are needed and required in a Director. The Nominating Committee will communicate those required skills sets to the Board to keep them informed as they canvas individuals.</p>
<p>3.7 <u>OHT and the Governance Advisory Council</u></p> <p>Kevin Huestis gave a quick overview regarding the OHT which is still in its infancy. Our OHT Northumberland was among the first to be approved. We have a seat on the Governance Advisory Council (GAC) and Kevin Huestis is filling that role and Cathy Vosper is back-up. The GAC will be committing to a collaborative decision making agreement (CDMA). This is a form of collaborative governance where the group will be agreeing to work together towards shared goals, and this may not always be solely in the interest of CMH.</p> <p>Eventually cross organizational councils will be formed. To date, there 4 priorities for OHT-N including: Volunteer Peer Support Program headed up by Community Care Northumberland 2) rural outreach clinic in Colborne 3) digital health 4) community para-medicine program with Northumberland EMS.</p> <p>Varouj noted with COVID, it's been a lost year in terms of the development of the OHT and it's now that we are returning our attention to development work and have some funding from the Ministry as well.</p>	<p>For information purposes.</p>
<p>4. REPORTS</p>	
<p>4.1 <u>Chief of Staff Report</u></p> <p>Dr. Bain presented his Chief of Staff report that was circulated in advance. Dr. Bain is still awaiting news for go live dates. With respect to COVID vaccines, vaccines are rolling out more quickly now and PRHC has received 5,000 to 6,000 doses of the Pfizer vaccine. They have immunized most, if not all, long term care residents in the area and are now working on long term care staff. NHH received 5,000 doses of Pfizer and a lot of that has gone out into the community to long term care homes and long term care providers, as well as other caregivers. NHH</p>	<p>For information purposes.</p>

<p>has asked all the rest of the hospitals, not including PRHC, to bring all their acute care, high priority staff to come and get their first dose of the vaccine. The hospital now has the provincially approved computer “clinic in a box” program to be used for COVID vaccinations and this should be ready to go next pending a receipt of a supply of the vaccine. Nursing students working at CMH will be given the opportunity to be vaccinated.</p>	
<p>4.2 <u>President & CEO Report</u></p> <p>COVID guidelines and prioritization changes on almost a daily basis. The hospital is working to meet all kinds of IT requirements sorted out and hopefully by next week, CMH can do all our vaccinations in-house, which is contingent on receiving the vaccine. We are currently looking at acquiring a Pfizer freezer.</p> <p>Varouj noted for the residents who live in the Multicare Lodge Board, the hospital is going to facilitate getting them vaccinated in the next couple of weeks as they will be in the high priority 80+ age group in a congregate setting that has some high risk.</p> <p>The hospital’s Mission Week is March 8 to 12. During that week the hospital holds its years of service and values awards presentations. The ‘virtual’ awards ceremony is taking place on Wednesday, March 10 at 2:00 pm. An MS Teams meeting calendar will go out to all board members.</p> <p>Varouj reported the hospital received \$245,000 in funding both from Trent Hills and from the OH East Region.</p>	<p>For information purposes.</p> <p><u>ACTION</u></p> <p>Caitlin will send to the Board the Mission Week Calendar.</p>
<p>5. OTHER BUSINESS</p>	
<p>5.1 Next Meeting Date: Thursday, March 25, 2021 at 2:00 pm via MS Teams.</p>	
<p>6. MOTION TO ADJOURN THE OPEN MEETING & MOVE INTO THE IN-CAMERA MEETING</p>	<p>MOVED by Valerie Przybilla to adjourn the Open meeting at 4:07 pm and the Board moved into its In-Camera meeting. CARRIED.</p>