

<b>ATTENDANCE REGISTER</b>											
P = Present    R = Regrets    A= Absent    t/c = teleconference											
<b>Committee Member</b>	<b>Sept. 28/20</b>	<b>Oct. 27/20</b>	<b>Nov. 24/20</b>	<b>Jan. 26/21</b>	<b>Feb. 23/21</b>	<b>Mar. 30/21</b>	<b>April 28/20</b>	<b>May 27/21</b>	<b>June 22/21</b> <small>*pre AGM*</small>	<b>June 22/21</b> <small>*post AGM*</small>	<b># of Mtgs.</b>
Lori Ker, Chair	t/c										1
Greg Pope, Vice Chair	R										0
Janice Cockburn	t/c										1
Warren Maycock	t/c										1
Hugh O’Brodivich	t/c										1
Tim Peters	t/c										1
Dave Straughan	t/c										1
Ken Topping	t/c										1
Winnifred Anderson	t/c										1
Adrian Bita	t/c										1
Barb Fitzgerald	R										0
Gerry Merkley	t/c										1
Shelley Scriver	t/c										1
Kim Delahunt	t/c										1
Dr. Peter Cino	t/c										1
Peter Varga	t/c										1
Dr. Jeff McKinnon	t/c										1
Dr. Mercedes Rodriguez	t/c										1

**Staff Present:** Bonnie Kulba, Cathy van Leipsig, Dora Boylen-Pabst **Guest:**

**1.0 CALL TO ORDER**

The Chair called the meeting to order at 5:03 pm.

**2.0 PRELIMINARY ITEMS**

**2.1 Chair’s Remarks**

The Chair welcomed all Board Members in addition to guests Sharon Hendry, Quality & Patient Experience Specialist and Ashley, a Member of the Patient and Family Advisory Partnership. Winnifred Anderson and Ken Topping were acknowledged for their additional role of Patient Family Caregiver Director(s). The Chair noted that all Briefing Notes would have a patient perspective.

The Chair congratulated Kim Delahunt on her first-year anniversary at Headwaters Health Care Centre.

**2.2 Disclosure of Conflicts**

All received Statements of Interest are a standard part of the package. Two new Members will share their interests with Bonnie Kulba who will update for the October Board package.

**2.3 Approval of Agenda**

**MOTION: Moved by Hugh O’Brodivich, seconded by Dave Straughan, “That the Agenda as presented be approved.” CARRIED**

**2.4 Action Item Log**

A review of the final Action Log for the 2019/20 was shared as information only.

### **3.0 PATIENT STORY**

#### **3.1 Patient and Family Advisor**

Ashley, a Member of the Patient and Family Advisory Partnership (PFAP) shared her heartwarming experience with Headwaters Health Care Centre and its' staff. Ashley commended several physicians and nurses in ICU and noted that her role as a PFAP helps with her grief.

### **4.0 BOARD EDUCATION AND DEVELOPMENT**

#### **4.1 Patient and Family Advisor Partnership**

Sharon Hendry provided an overview of the Patient and Family Partnership at Headwaters Health Care Centre. The Board applauded Sharon on a great job overseeing the Partnership and noted they felt very informed.

### **5.0 STRATEGIC DISCUSSIONS**

#### **5.1 Hills of Headwaters Collaborative OHT Governance Models Consultation**

The CEO provided background information on the March 2, 2020 Governance Forum and provided a high-level synopsis of each of the options explored for review by The Hills of Headwaters Collaborative OHT Members which were pre-circulated in the package.

The Board Members expressed that their primary role is to operate in the best interest of Headwaters Health Care Centre and to manage risk. It was expressed that although Headwaters Health Care Centre would continue to be accountable through HSAA, it would appear the language speaks to relinquishing authority to the new Governing Corporation. Additional concerns were raised around the diverse membership extending beyond the Ontario Health Team geography that perhaps have different funders within the Ministry of Health and may not be in-line with Headwaters Health Care Centre funding or have any direct funding relationship to the hospital. There may also be further implications to the Foundation which need to be investigated further.

The Board requested a one-pager on the authority the Governing Corporation would have versus the hospital's Board of Directors including an outline of role and responsibilities.

**MOTION: Moved by Hugh O'Brodovich, seconded by Shelley Scriver, "That the HHCC Board of Directors supports further investigation by the Hills of Headwaters Collaborative Governance working group around different governance models, including a Governing Corporation." CARRIED**

#### **5.2 Meditech Care4 Report/Headwaters Site Charter**

The Vice President of Patient Services and CNE provided an update on the progress of the Care4 project to date. He noted that the project is moving forward well and there are no current major risks at this time. The go-live date will be finalized over the next few weeks along with the revised budget. Both will be brought forward to the Board for approval.

The Board felt the information was timely and informative but asked that goals and objectives along with measurables be included going forward.

### **6.0 BUSINESS OF THE MEETING/COMMITTEE REPORTS**

#### **6.1 Board Work Plan**

**MOTION: Moved by Dave Straughan, seconded by Janice Cockburn, "That the Board of Directors approve the Board Work Plan for 2020-2021 as presented." CARRIED**

## 6.2 CEO Report/COVID Assessment Centre

New format of CEO Report was presented, and the CEO asked for feedback to which Board provided positive comments, very fulsome and informative. The CEO provided an Executive Summary on the current landscape both at a Provincial and Local level. She also provided an update on our 3 Strategic Directions and how we are advancing each. Other highlights of the CEO report includes risk, mitigation strategies and how we are living our values by showcasing several staff and teams.

The Assessment Centre is seeing double the volume, and that 40% are coming from outside the Caledon/Dufferin area. Due to the increase in numbers, we are currently ramping up staff. Pharmacies outside of Caledon/Dufferin are offering testing with more Pharmacies being added daily. Planning underway to move dismantling the tent outside and bringing swabbing into hospital. Continue to partner with primary care and communications on all logistics.

The Board asked if we were turning people away at the Assessment Centre. The CEO confirmed that a runner is pre-screening cars in line and that staff are doing their best to see everyone that has an appointment.

She did note that the hospital is seeing respiratory issues, non COVID, but lower numbers over last year same time.

## 6.3 COS Report/Credentialing

The Chief of Staff welcomed the new Board Members and given he wasn't able to make the Orientation he asked that they feel free to contact him with any questions they may have.

He noted that Emergency Department volumes were back up and that they continue to be in and out of moderate surge (not COVID). He noted that the well being of some staff were being impacted due to wearing PPE for several hours at a time.

Dr. Willans recently held an education session and it was well attended, 40 physicians. The COS gave Dr. Willans recognition for his hard work on this session and dedication to the hospital and physicians.

The Chief of Staff then moved on to Credentialing:

### Recommendation

- New Appointments** (\*Physicians who obtain privileges after January receive privileges for more than one year as reappointments begin to be processed February 1)

	Professional Staff	Category	Department(s)	Temporary Privileges Date
1.	<b>Dr. Michelle Durst</b> is a paediatrician who is providing locum coverage.	Term	Obstetrics, Div. of Paediatrics	August 6, 2020
2.	<b>Dr. Yuchen (Richard) Tang</b> is an emergency physician joining our group.	Term	Emergency Medicine	June 24, 2020
3.	<b>Dr. Rebecca Woolnough</b> is a paediatrician who is working full time at Headwaters.	Associate	Obstetrics, Div. of Paediatrics	May 21, 2020

### Recommended Board Motion:

<input type="checkbox"/>	No Motion Required - not applicable
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<input checked="" type="checkbox"/>	Motion Required – MOVED by Dave Straughan and seconded by Shelley Scriver, “That the “Board of Directors approve the above new appointments with privileges as delineated until June 30, 2021.” CARRIED
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### Associate Staff Evaluations

	Associate Staff Member	Department	Board Approved Privileges	6 Month Review	12 Month Review	Recommendation
1.	<b>Dr. Guillaume Chouinard-Pelletier</b>	Emergency Medicine	Jul 1/18 (Temporary) Sep 12/18 (Term) Jul 1/19 (Associate)	Mar 4/20	Sep 9/20	Promotion to Active staff
2.	<b>Dr. Michael Gagnon</b>	Family Practice	Sep 24/19 (Associate)	May 14/20	Sep 9/20	Promotion to Active staff
3.	<b>Dr. Ricky Jrearz</b>	Surgery	Jul 16/19 (Temporary) Sep 24/19 (Associate)	Mar 4/20	Sep 9/20	Promotion to Active staff
4.	<b>Dr. Melissa Lui</b>	Emergency Medicine	Apr 20/18 (Temporary) Sep 12/18 (Term) Jul 1/19 (Associate)	Mar 4/20	Sep 9/20	Promotion to Active staff
5.	<b>Dr. Preveshen Moodley</b>	Surgery, Urology	May 28/19 (Associate)	Mar 4/20	Sep 9/20	Promotion to Active staff
6.	<b>Dr. Cesar Orellana</b>	Medicine, Infectious Disease	Jun 12/18 (Temp) Sep 12/18 (Regional Affiliate) Jul 1/19 (Associate)	Mar 4/20	Sep 9/20	Promotion to Active staff

### Recommended Board Motion:

<input type="checkbox"/>	No Motion Required - not applicable
<input checked="" type="checkbox"/>	Motion Required – MOVED by Janice Cockburn and seconded by Dave Straughan, “That the “Board of Directors approve the above promotions to Active staff, effective immediately, with privileges as delineated until June 30, 2021.” CARRIED

### 6.4 Quality Report

The Chair of Quality Committee, Janice Cockburn, provided highlights from the September 18, 2020 meeting:

#### Quality and Patient Safety Report

The Quality and Patient Safety Report provided updates for the 2019/20 Q4 results, as well as the 2020/21 Q1 results for the Key Performance Metrics (KPI’s). Diagnostic imaging; the emergency department; patient satisfaction; and the update for the Meditech Expanse project were highlighted. The HHCC performance over the past 12 months in DI and ED showed positive trends in several KPI’s.

#### Diagnostic Imaging Presentation

Dr. Dan Mozeg (Chief of Radiology) and Geoff Harris (Director of ambulatory services) presented a patient story that highlighted the impact of COVID-19 on the breast screening wait times. They provided an excellent update on the current performance of the DI program with insight to the current challenges experienced with resuming services and the backlog of tests. Members discussed several topics including the benefit of a Magnetic Resonance Imaging (MRI) device to better serve our community and the reasons for Radiology turn-over.

Currently there 4.7 FTE Radiologists (a total of six individuals). Members congratulated the presenters for their hard work and improvements to services.

### **COVID Updates**

A briefing note highlighted the provincial and local updates with regards to the impact of COVID-19 to HHCC. An overview of the current state and insight into the ongoing efforts by the hospital to support our community.

### **CARE4 Updates**

The members received a briefing note that provided an update to the current state of the CARE4 project including revised start date; HHCC readiness plan; revised costs and recent accomplishments by HHCC.

### **Patient Impact or Engagement Activity**

- The hospital relaunch committee has a patient representative who participates in the weekly meetings and provides comments and feedback on the steps being taken to increase services
- Sharon Hendry actively supports the Patient Family Advisory Partnership (PFAP) where ongoing hospital updates and activities are shared for input, advice and consultation
- A recent survey was circulated by the PFAP to members for input on several items related to hospital services and digital health

## **6.5 Governance Report**

The Chair of Governance Committee, Shelley Scriver, provided highlights from the September 16, 2020 meeting:

Each year the Governance Committee (GC) reviews and recommends to the Board for approval all the Committee Terms of Reference (TOR) and Work Plans thus ensuring that Committee work aligns with Board work. Work plans and Committee TORs are good governance tools and help to ensure effective board governance.

**Motion: Moved by Janice Cockburn and seconded by Dave Straughan, "That the Board of Directors approve the Governance Work Plan for 2020-2021." CARRIED**

**Motion: Moved by Janice Cockburn and seconded by Winnifred Anderson, "That the Board of Directors approve the Governance Terms of Reference for 2020-2021." CARRIED**

### **Governance Action Plan**

The Ontario Hospital Association (OHA) Board Assessment Survey was conducted in March of 2020 and the results were reviewed by the Board subsequently. At the June 23, 2020 Board meeting, several areas of focus for ongoing governance improvement were identified for 2020/21.

At the September Governance Committee meeting the improvement ideas generated from the survey were discussed and the following were deemed to be priority for this year:

- CEO/COS Succession Planning oversight
- Patient, Family, Caregiver perspective in governance
- OHT Governance Models
- Board Quality and diversity of skills, experience, and background
- Effective governance in a virtual environment
- Onboarding process for new board members

- Review of Strategic plan
- Governance of Care4/Meditech and COVID

**Motion: MOVED by Adrian Bitá and seconded by Janice Cockburn, "That the Board of Directors approve the Governance Action Plan for 2020-2021"**

#### **6.6 Finance & Audit Committee Report**

The Chair of Finance & Audit provided highlights from the September 23, 2020 meeting. It was noted that the Terms of Reference and Work Plan would go to Governance Committee on October 21, 2020 for recommendation to Board for approval.

##### **COVID-19**

- COVID-19 impacts contribute to our YTD deficit position as well as our depleting cash position.
- The Forecast assumes o the July expense rate will continue through to the rest of the year,
  - o we will incur additional costs to open beds in our medical unit,
  - o the revenue loss will slowly reduce as we begin to ramp up services, and
  - o the COVID-19 operating, and capital costs will be reimbursed 100%
- Friday, September 18, 2020 the Ministry confirmed they will transfer \$1.6M to cover 100% of the COVID-19 operating expenses for March and April. At this point the Ministry has not discussed if they will cover capital costs.

##### **Capital**

The Hospital has several large and multi-year capital improvements in progress; Welcome Centre, Main Entrance, Emergency Department renovation and Meditech Expanse.

#### Care4 Budget

The CARE4 project team has been working diligently to assess the budget impact on the CARE4 project as it relates to the delay in our go-live date from February 2021 to May 2021. The budget impact for Headwaters is \$892,000 which increases our budget from \$6.512M to \$7.404M.

**Motion: Moved by Adrian Bitá and seconded by Gerry Merkley, "That the Board of Directors approve the increase in the Headwaters Share of the Care4 Total Cost of Ownership Budget of \$892,000." CARRIED**

#### Financial Statements for Period Ended July 31, 2020

The operating deficit at July 31, 2020 is \$2.6M compared to \$746k deficit in prior year. Revenue are much lower than prior year actual as well as budget for parking, diagnostic procedures, cafeteria and other patient revenue i.e. out of province, out the of country and self-pay. COVID-19 expenses to the end of July are \$3.1M.

In the month of September, we utilized our line of credit and expect to use this periodically until 100% of the funding is flowed to cover COVID-19 expenses. The year-end projected Forecast is estimated to be ~\$358k deficit.

**Motion: Moved by Adrian Bitá and seconded by Ken Topping, "That the Board of Directors approve the Internal Financial Statements for the period ended July 31, 2020." CARRIED**

#### 6.7 Foundation Report

The Chair of the Foundation, Tim Peters, provided an overview of fundraising and marketing initiatives. The Chair noted that finances were in good shape and mini projects under way over the next 6-8 months would bring in more fundraising dollars. The last item the Chair brought forward was that the Foundation's Strategic Plan has been extended.

#### 7.0 Consent Agenda

7.1 Minutes from the August 18, 2020 Pre-Annual General Meeting and Minutes from August 18, 2020 the Post-Annual General Meeting.

**Motion: Moved by Dave Straughan, seconded by Hugh O'Brodivich, "that the Board of Directors approve the Consent Agenda." CARRIED**

#### 8.0 INFORMATION

Information only.

#### 9.0 ADJOURNMENT

With there being no further business, the meeting was adjourned at 8:01 pm.



Lori Ker, Board Chair



Kim Delahunt, Secretary