

Minutes of the Meeting of the MICs Board of Directors
Wednesday, March 27, 2024 – 18h00
Via Teams (LMH Lead Site)

ANSON GENERAL HOSPITAL	
x	Danielle Delaurier – Chair
x	Ann Zsigmond – Vice-Chair
x	Fern Morrissette – Treasurer
R	Ben Lefebvre – Municipal Representative
BINGHAM MEMORIAL HOSPITAL	
x	Oswald Silverson – Chair
x	Melissa Laderoute – Vice-Chair
	Vacant – Treasurer
x	Dave Dymont – Municipal Representative
LADY MINTO HOSPITAL	
x	Pat Dorff – Chair
x	Derek Archibald – Vice-Chair
x	Denis Clement – Treasurer
x	Sylvie Charron-Lemieux – Municipal Representative
MICs GROUP OF HEALTH SERVICES	
x	Paul Chatelain – MICs Chief Executive Officer
x	Isabelle Boucher – MICs Chief Nursing Officer
R	Dr. Joey Tremblay – MICs Chief of Staff
R	Dr. Auri Bruno-Petrina – MICs President of Medical Staff
GUESTS	
x	Tiffany Smith – MICs Executive Assistant (<i>Recording Secretary</i>)
x	Gail Waghorn – MICs Chief Financial Officer
x	Rick Charlebois – Councillor, Town of Iroquois Falls

1.0 Call to Order & Chairs Remarks (P. Dorff)

- 1.1 Land Acknowledgement: We would like to acknowledge that we are hosting this meeting from the traditional territory of the Cree, Ojibwe, Ojicree, Algonquin and Métis Peoples of Apitipi Anicinapek Nation and Taykwa Tagamou First Nation, located in Treaty 9 Territory. Miigwetch to all indigenous and Métis partners for sharing their land with us.
- 1.2 The chair opened the meeting and welcomed everyone. They then inquired if there were any declarations of conflict of interest. There were none.

2.0 Approval of Agenda (P. Dorff)

The agenda was reviewed.

Motion:

Moved by: A. Zsigmond

Seconded by: F. Morrissette

Be it resolved,

THAT the MICs Board of Directors approve the board agenda as presented.

Carried.

3.0 Trustee Education / Presentations

3.1 Trustee Education/Presentations

- CEO Reviewed the ONE Initiative Bulletins; including timelines.
- CNO provided an update on the status of the current training going on.
- The CFO noted the challenges we are currently encountering highlighting that an additional build is required run the Finance modules effectively that will come with an additional cost. This will need to be rectified prior to go live.
- Board Members were invited to ask questions.

4.0 Approval of Minutes (P. Dorff)

4.1 Minutes of the MICs Board of Directors meeting held February 28, 2024 were provided for information.

Omission: Amend 11.2 to include that a template for the SPRC recruitment fair be provided and reviewed at the next board meeting to be able to review and expand on for the conference in April.

Motion:

Moved by: O. Silverson

Seconded by: D. Clement

Be it resolved,

THAT the MICs Board of Directors approve the minutes of the meeting held February 28, 2024 as amended.

Carried.

4.2 Minutes of the MICs Board of Directors meeting held January 24, 2024, were provided for information.

Motion:

Moved by: D. Delaurier

Seconded by: A. Zsigmond

Be it resolved,

THAT the MICs Board of Directors approve the minutes of the meeting held January 24, 2024, as amended.

Carried.

5.0 Follow-Up Items

5.1 Review of the 2023-2024 Board Work Plan

- The Board Work Plan was reviewed for the month of March.
- The approval of the HAPS will be discussed in camera.
- The 2024/2025 QIP for Acute and LTC will be presented for approval.
- The HSAAs Extension will be presented for approval.
- The LSAAs Extensions will be presented for approval.
- The Critical Incidents report will be reviewed tonight.
- We will review the Corporate Scorecard.

6.0 MICs Finance

6.1 Cash Flow and Investments – G. Waghorn

- The CFO provided an update on the current cash flow situation.
- Received 2M in Bill 124 Funding for hospital. Will need to be reconciled once process has been established. We received another announcement today, operating pressure funding over \$900,000 for LMH; AGH and BMH yet to come.
- The cash advance request for 2024/2025 has been submitted.
- Board Members were invited to ask questions.

6.2 January 2024 Operating Statements – G. Waghorn

- The CFO presented the operating statements for all three sites, noting that these numbers do not reflect the new funding announcement.

BMH

- BMH is operating at a deficit of (\$583,747) at end of January 2024
- Total Operating Revenue = \$8,606,552
- Total Operating Expenses = \$9,190,299

AGH

- AGH is operating at a surplus of \$254,702 at end of January 2024
- Total Operating Revenue = \$11,982,337
- Total Operating Expenses = \$11,727,634

SCM

- SCM is operating at a deficit of (\$79,273) at end of January 2024
- Total Operating Revenue = \$6,275,812
- Total Operating Expenses = \$6,355,085

LMH

- LMH is operating at a deficit of (\$780,896) at end of January 2024
- Total Operating Revenue = \$16,536,515
- Total Operating Expenses = \$17,317,411

VM

- VM is operating at a surplus of \$39,152 at end of January 2024
- Total Operating Revenue = \$3,108,372
- Total Operating Expenses = \$3,069,220
- We are currently preparing for the year-end audit.
- Significant changes from last month due to the bill 124 reimbursement and operating pressure funding.
- Board members were invited to ask questions.

Motion to approve January 2024 Operating Statements

Moved by: D. Clement

Seconded by: F. Morrisette

Be it resolved,

THAT, the MICs Board of Directors approve the January 2024 Operating Statements for Bingham Memorial Hospital, Anson General Hospital, South Centennial Manor, Lady Minto Hospital and Villa Minto as presented.

Carried.

6.2 Balanced Budget Waiver – G. Waghorn

- CFO discussed the waiver signed for 2024/2025 3.6M deficit.
- Board Members were invited to ask questions.

7.0 Presentations/Reports (P. Dorff)

7.1 Chief Executive Officer Report: (P. Chatelain)

- Our cash flow challenges continue. We have received two cash advances now, which will have to be re-paid soon, and are applying for another. We will be reimbursed for Bill 124 retroactive payments for all union and non-bargaining groups at 85%.
- The architect has completed and submitted the working drawings at 90%. I presented these drawings to the SCM Resident Family council last week. We are working on the SCM Redevelopment Campaign to raise \$8M over 5 years and waiting for the Provincial Budget to be released to find an announcement on an increased Construction Funding Subsidy.
- The AGH Automatic Transfer Switch continues. The Pharmacy Upgrade is near completion. The following projects are in progress at LMH; Replacement of Flooring, Door Fob/Alarm System, Cabinet Unit Heaters Replacement, and the Parking Lot Lighting (receptacles).
- Our CT scanner proposal has been endorsed by Ontario Health North and is now with the Ministry of Health (HARP) division for final approval.
- We have organized the physiotherapy department at AGH to accommodate (Lyrette Physio) to care for outpatients. The private physiotherapy service is all set to begin April 15, 2024.
- Budget – Next steps to acquire extension on our LTC license.
- Funding hope to see the letters for BMH and AGH come through tomorrow.
- David McNeil, new CEO for HSN, has accepted the invitation to be our guest speaker at our AGM on June 26th.
- Board Members were invited to ask questions.

7.2 Chief Nursing Officer Report: (I. Boucher)

- The CNO provided a report on the following items:
 - Nursing recruitment and retention efforts are ongoing. Attended a recruitment fair at Northern College today. Upcoming job fair in Iroquois Falls on April 10th at the Jus Jordan arena. We continue to be reliant on the support of agency nurses. Applicants are starting to come in and we have provided a few offers. We have seen some resignations and maternity leaves in the past few weeks.
 - Overall occupancy rates are stable with additional capacity to admit ALC patients.
 - Meditech Expanse project is ramping up. End user and physician training has begun and we are discussing our activation and cutover plan. Go live date remains

May 14, 2024.

- Endoscopy program at AGH remains on pause as we are still unable to staff appropriately.

8.0 Medical Staff (Dr. J. Tremblay)

8.1 Chief of Staff Report:

- MICs Chief of Staff provided the following report.
 - Emergency Departments:
 - Received notification that there is an extension on the temporary locum incentive package which will help keep our ER's staffed throughout the summer months.
 - Two physicians have requested hospital privileges this month; will approve at the next meeting.
 - Board Members were invited to ask questions.

8.2 Medical Advisory Committee Minutes

- Minutes of the MAC meeting held February 21, 2024, were provided for information.

9.0 Ontario Health North / MOHLTC Business (P. Chatelain)

- 9.1 LTC Inspections will be added as a standing item and will be reported on at the next meeting.

10.0 MICs Quality Committee (I. Boucher)

10.1 The minutes

- The minutes of the MICs Quality Committee meeting held January 10, 2024, were provided for information.

10.2 Critical Incidents Report

- The CNO reviewed the Critical Incidents report for acute and long-term care. This was reviewed in depth at the quality committee meeting.
- Reporting that no critical incidents are reported for acute care in Q2 and Q3. In LTC we had zero incidents reported for RD, seven incidents reported for SCM and two incidents reported for VM. The incidents were then broken down by category.
- Board Members were invited to ask questions.

10.3 Corporate Scorecard

- Q3 data was provided in the report and was presented to the Quality Committee meeting earlier this month reporting on Q3.
- These are key performance measures that are tied into various agreements or plans.
- Our overall performance for Q3 is very good; only one indicator is underperforming.
- Patient-centred Care, ER Client Satisfaction (ER): AGH (92%), BMH (75%), LMH (100%), Inpatient Client Satisfaction (IP): AGH (100%), BMH (100%), LMH (100%). Acknowledgement of Complaints (Acute): AGH (100%), BMH (100%), LMH (100%). Acknowledgement of Complaints (LTC): SCM (100%), RD (N/R), VM (N/R).
- Efficient, % of Total Alternate Level of Care Days: AGH (43%), BMH (8%), LMH (38%).
- Safe, Falls per 1,000 patient days (LTC): SCM (8.0%) RD (6.7%) VM (3.9%), Hand Hygiene Compliance Before: AGH (91%) BMH (100%) LMH (100%) SCM (55%) RD (82%) VM (77%), Hand Hygiene Compliance After: AGH (83%) BMH (100%)

LMH (100%) SCM (86%) RD (100%) VM (89%), Workplace Violence Frequency: AGH (1) BMH (0) LMH (0) SCM (0) RD (0) VM (1), WalkRound Leadership Workplace Violence: AGH (100%) BMH (100%) LMH (100%) SCM (N/R) RD (100%) VM (100%).

- Worklife, % of Turnover Rates: MICs (18%).
- CNO will provide further breakdown of the ER Client Satisfaction Survey breakdown.

10.4 Approval of 2024-2025 Quality Improvement Plan

- The 2024-2025 QIP for acute and LTC was presented for approval.
- Plans are due to be submitted to Ontario Health on April 1st.
- Collaboration with various stakeholders (patients/PFAC, staff, leadership team, physicians).
- QIPs are comprised of two sections: 1) Narrative (meant for the public) and 2) Work plan (measures and change ideas). Will also be reporting on our progress for the hospital's plan.
- There are no mandatory indicators in this year's plan; provincial priority indicators are selected for both hospital and long-term care: Access and Flow, Equity, Experience and Safety.
- Five Hospital Sector Indicators: 1) Alternate Level of Care throughout ratio, 2) Percentage of Staff who Equity Diversity Inclusion Education, 3) Percentage of respondents who responded "yes" to the following statement: "written information about what to look out for after I leave the hospital was provided to me," 4) Medication reconciliation at discharge: Total number of discharged patients for whom a Best Possible Medication Discharge Plan was created as a proportion the total number of patients discharged, and 5) Rate of workplace violence incidents resulting in lost time injury.
- Four LTC Sector Indicators: Rate of ED visits for modified list of ambulatory care-sensitive conditions per 100 long-term care residents, 2) Percentage of staff who have completed relevant equity, diversity, inclusion and belonging education, 3) Percentage of LTC residents responding positively to: "you and your loved one are encouraged to participate in discussions about your care," Percentage of LTC residents without psychosis who were given antipsychotic medication in the seven days preceding their resident assessment.
- Executive compensation included for hospital plans indicated on the narrative document: Equity, Diversity, Inclusion education.

Motion:

Moved by: O. Silverson

Seconded by: A. Zsigmond

Be it resolved,

THAT the MICs Board of Directors approve the 2024-2025 Quality Improvement Plans for Bingham Memorial Hospital, Anson General Hospital, Lady Minto Hospital, Rosedale Center, South Centennial Manor and Villa Minto as presented.

Carried.

11.0 Physician & HR Recruitment (P. Chatelain)11.1 Frontier Spirit Update

- Frontier Spirit update was provided; community visit from an interested physician who toured with Abigail Brenner. Will be providing another tour on April 7th. MICs is working closely with Frontier Spirit to ensure the most positive experience.
- MICs will continue with physician recruitment.

11.2 Recruitment Fair

- Have yet to receive confirmation from the Frontier Spirit on the contribution amount from the Frontier Spirit for the booth at the SPRC Recruitment Fair that Abigail is attending along with MICs.

12.0 Indigenous and French Language Issues (P. Dorff)12.1 N/A**13.0 Site Business (P. Dorff)**13.1 Anson General Hospital:13.11 SCM Redevelopment Project

- Moving forward and on track to get the shovel in the ground.
- Will discuss community open forums at the ad hoc meeting next week.

13.12 Long-Term Care Home Service Accountability Agreement

Motion:

Moved by: A. Zsigmond

Seconded by: F. Morrissette

Be it resolved,

THAT the AGH Board of Directors approve the 2024-2025 the Long-Term Care Service Accountability Extension Agreement for South Centennial Manor as presented.

Carried.

13.13 Hospital Service Accountability Agreement

Motion:

Moved by: A. Zsigmond

Seconded by: D. Delaurier

Be it resolved,

THAT the AGH Board of Directors approve the 2024-2025 the Hospital Service Accountability Extension Agreement for Anson General Hospital as presented.

Carried.

13.2 Bingham Memorial Hospital:

13.21 Hospital Service Accountability Agreement

Motion:

Moved by: O. Silverson

Seconded by: D. Dymont

Be it resolved,

THAT the BMH Board of Directors approve the 2024-2025 the Hospital Service Accountability Extension Agreement for Bingham Memorial Hospital as presented.

Carried.

13.3 Lady Minto Hospital:

13.31 Long-Term Care Home Service Accountability Agreement

Motion:

Moved by: D. Clement

Seconded by: P. Dorff

Be it resolved,

THAT the LMH Board of Directors approve the 2024-2025 the Long-Term Care Service Accountability Extension Agreement for Villa Minto as presented.

Carried.

13.32 Hospital Service Accountability Agreement

Motion:

Moved by: D. Clement

Seconded by: P. Dorff

Be it resolved,

THAT the LMH Board of Directors approve the 2024-2025 the Hospital Service Accountability Extension Agreement for Lady Minto Hospital as presented.

Carried.

14.0 Partnership Business (P. Dorff)14.1 February 2024 Board Effectiveness Survey Results

- 10 out of 15 surveys were submitted.

14.2 March Board Effectiveness Survey

- The survey was emailed to the Board Members following the meeting.

15.0 In-Camera

15.1 Motion to go in-camera

Moved by: D. Delaurier

Seconded by: O. Silverson

- 15.2 Discussion of Medical Staff hospital privileges
- 15.3 Discussion of HAPS 2024/2025 Operating Budget
- 15.4 Discussion of NU Retroactive Pay in Relation to Bill 124
- 15.5 Motion to go out of in-camera

Moved by: F. Morrissette
Seconded by: O. Silverson

- 15.6 Motion to approve hospital privileges

- Deferred

- 15.7 Motion to approve NU Retroactive Pay

- to approve the recommendation made by the Finance and Audit committee to approve the retroactive payment of non-union increases, excluding executives, sometime in April 2024 at a one-time cost of up to \$250,000 (including benefits) effective April 1, 2023, to December 10, 2023.

Moved by: . D. Delaurier
Seconded by: F. Morrissette

Be it resolved,

THAT, the MICs Board of Directors approve the recommendation made by the Finance and Audit committee to approve the retro adjustment to non-union salary increases, excluding executives, sometime in April 2024 at a one-time cost of \$250,000 (including benefits) effective April 1, 2023, to December 10, 2023.

- Discussed Bill 124 Retroactive payment for NU members for the period of April 1, 2023-December 10, 2023 reimbursement. The motion was made in November to increase the NU grid salaries to accommodate the salary increases. Motion was approved to increase the salaries without retro, now that funding has been received, we can provide NU salary increase retroactive payment for NU. This would amount to \$192,000. We hope to be able to revisit the retroactive payment back to 2020 once we know what the LTC budget will be and we have moved through the reconciliation. We have received confirmation from the ministry.

16.0 MICs News (P. Dorff)

- March 2024 MICs Newsletter was provided for information.

17.0 Next Meeting Date (P. Dorff)

- Wednesday, April 24, 2024 at 6:00 p.m. (BMH Lead Site) via Teams/Boardrooms

18.0 Upcoming Meeting Dates

- As per agenda.

19.0 Adjournment (P. Dorff)

- There being no further business, the meeting adjourned at 8:00 p.m.

CHAIR, Bingham Memorial Hospital

CHAIR, Anson General Hospital

CHAIR, Lady Minto Hospital

SECRETARY, MICs CEO