

Committee:	HHS Common Board		
Date:	February 13, 2025	Time:	4:00pm-6:35pm
Chair:	Glen McNeil, Board Chair	Recorder:	Alana Ross
Present:	David Atkinson, Brian Heagle, Lynn Higgs, Steve Ireland, Christie MacGregor, Glen McNeil, Dr. Natuik, Jared Petteplace, Susan Reis, Dr. Ryan, Jane Sager, Dr. Steinmann, Jimmy Trieu		
Regrets:	Dr. Patel, Nonie Brennan, Heather Hern, Tara Oke		
Guests:	Robert Lovecky (CFO)		
1			
Call to Order / Welcome			
<ul style="list-style-type: none"> • Mr. McNeil welcomed everyone and called the meeting to order at 4:00pm <ul style="list-style-type: none"> ○ Notifications: <ul style="list-style-type: none"> ▪ Video/Audio recordings and transcriptions of the open session meeting are retained for the purpose of creating accurate minutes and will be expunged on final approval of the minutes by the Board; in-camera sessions are not recorded or transcribed 			
1.1	<u>Land Acknowledgement:</u>		
<ul style="list-style-type: none"> • Land acknowledgment reviewed 			
1.2	<u>Patient Relations:</u>		
<ul style="list-style-type: none"> • 2025-02-Monthly Report-Patient Relations, circulated <ul style="list-style-type: none"> ○ Two good new stories share, one for each site ○ Serious AMGH case involving intubation and ORNGE; professional and empathetic care received ○ Shout Out to Dr. Ondrejicka for her care of an SHH patient 			
2			
Education / Guests			
2.1	<u>Equity, Inclusion and Diversity:</u>		
<ul style="list-style-type: none"> • DEI, documents circulated and reviewed <ul style="list-style-type: none"> ○ 2024-02-05 EID-AR Work DRAFT ○ Diversity Celebrations <ul style="list-style-type: none"> ▪ HHS celebrates Pride Month in Jun ▪ Feb is Black History Month; see HHS Social Media for articles ○ Equity Inclusion Diversity & Anti-Racism Framework • We are part of the Huron Perth initiative, now known as EID-AR – Equity, Inclusion, Diversity and Anti-Racism; frameworks circulated <ul style="list-style-type: none"> ○ Based on five strategic priorities <ul style="list-style-type: none"> ▪ Data collection for Strategic Planning ▪ Engaging and Co-designing with Key Partners/Voices ▪ Develop Inclusive Recruitment & Retention ▪ Data Analytics and Reporting ▪ Education and training Program • Our Quality Improvement Plan includes an indicator on measuring the percentage of staff who have completed relevant DEI-AR education on an annual basis <ul style="list-style-type: none"> ○ AMGH-71% / SHH 80% at the end of Q3; target is 80% ○ F2526 QIP, the target is increasing to 85% ○ Committee work on strategic priorities includes data analytics and reporting, with a staff survey; responses are being compiled and information is expected to be shared next month ○ The information will be used in the next steps of strategic planning and how we further integrate this initiative daily ○ Diversity plays a positive role in problem solving, decision making, innovation and creativity ○ EID-AR initiatives have resulted in a higher employee engagement and retention 			

	<ul style="list-style-type: none"> HHS has a DEI Committee in place, inclusive of individuals from the 2SLGBTQIA+ community, which meets quarterly <ul style="list-style-type: none"> Closely aligned with OHT and Huron Perth initiatives
3	Approvals and Updates
3.1	<u>Declaration of Conflict of Interest</u> <ul style="list-style-type: none"> Mr. McNeil asked if anyone had a conflict of interest to declare based on information contained in the package <ul style="list-style-type: none"> No conflicts were declared
3.2	<u>Agenda</u> <ul style="list-style-type: none"> Approval / Changes <ul style="list-style-type: none"> Defer 7.3 to Mar meeting Move 7.4 to In-Camera <p><i>MOVED AND DULY SECONDED</i> <i>MOTION: To approve the February 13, 2025 HHS Common Board agenda, as amended. CARRIED.</i></p>
3.3	<u>Previous Minutes</u> <ul style="list-style-type: none"> Approval / Changes <ul style="list-style-type: none"> None <p><i>MOVED AND DULY SECONDED</i> <i>MOTION: To approve the January 9, 2025 HHS Common Board minutes. CARRIED.</i></p>
4	Business Arising from Minutes
5	Consent Agenda Part 1 – Standing Reports
5.1	<u>President & CEO:</u> <ul style="list-style-type: none"> 2025-02-Monthly Report-CEO, circulated <ul style="list-style-type: none"> CCAC is now known as Ontario at Home <ul style="list-style-type: none"> Frequent supply chain issues and confusion around extent of contracts; working through different service deliveries CEO was terminated and an interim CEO is in place New LTC in Goderich will open gradually starting next week; staffing pressures will keep it from opening fully at once <ul style="list-style-type: none"> Inspection is this week Maitland Manor will move 7-8 patients per week Anticipating ALC numbers at AMGH to decline Based on legislature, we do charge our ALC occupants, who refuse an LTC bed, a daily fee <ul style="list-style-type: none"> Complaints have been received by family members, and the legislation has been reviewed with them CEO, COSs and Board Chair met with peer hospitals in Dec to discuss the Clinical Services Plan CEO Table met last evening to discuss a plan to review population data and determine where services need to be; there is money budgeted for this through the OHT <ul style="list-style-type: none"> South West CEO Table previously submitted a formal paper to Ontario Health West / Ontario Health; no response received to date Master Planning process will provide an opportunity to demonstrate how we move capacity to HHS, and the investments required in our EDs, etc.
5.2	<u>CNE:</u> <ul style="list-style-type: none"> 2025-02-Monthly Report-CNE, circulated
5.3	<u>CFO:</u> <ul style="list-style-type: none"> 2025-02-Monthly Report-CFO, circulated
5.4	<u>AMGH Chief of Staff:</u> <ul style="list-style-type: none"> Documents circulated: <ul style="list-style-type: none"> 2025-02-Monthly Report-COS 2024-12-18-MAC Minutes ED schedule is in place to May; physician group met this week to discuss plans for gaps

	<ul style="list-style-type: none"> ○ There are regular locums credentialed at AMGH, however, they have been turning down shifts due to winter weather; hoping they will come through over the summer months <ul style="list-style-type: none"> ▪ The commitment is not what it was in prior years ○ Dr. Holowachuk is semi-retired and is covering 6-8 ED shifts a month; working well ○ There are still approximately 15-20 per month starting in May; some will be covered by our local physicians, but we still rely on EDLP <ul style="list-style-type: none"> ▪ Incentives may be necessary to get physicians to commit
5.5	<p><u>SHH Chief of Staff:</u></p> <ul style="list-style-type: none"> • Documents circulated: <ul style="list-style-type: none"> ○ 2025-02-Monthly Report-COS (SHH) ○ 2025-01-09-MAC Minutes ○ 2025-01-SRPC Letter <ul style="list-style-type: none"> ▪ Summarizes what needs to happen in Huron County to make healthcare sustainable • ED schedule is in place to end of Jun; open shifts for Mar 10 / Apr 6-8 <ul style="list-style-type: none"> ○ Winter is typically easier to fill, however, this winter is outside of the norm ○ Anticipating issues in the summer due to the pending retirement of a long-term ED/Hospitalist physician ○ SHH is anticipating 3rd year Medical Residents to cover ‘moonlighting’ shifts in Mar ○ EDLP Doc scheduled to work today, cancelled yesterday due to pending weather; appreciation extended to Dr. Lach, who picked up the shift on short notice ○ Temporary Summer Locum Funding is due to end as of Mar 31; although it has been continued for three years, there is fear for the impact it will have if it ends ○ Physician groups encourage decisions to be made at Ministry / Regional levels regarding the number of Emergency Departments in Huron Perth <ul style="list-style-type: none"> ▪ Clinton sent notification today regarding a closure happening on Saturday, which increases pressures at SHH & AMGH, as hospitals continue to compete for finite resources
5.6	<p><u>AMGH President of Medical Staff:</u></p> <ul style="list-style-type: none"> • 2025-02-Monthly Report-Pres. MS, circulated
5.7	<p><u>SHH President of Medical Staff:</u></p> <ul style="list-style-type: none"> • No report
	<p><i><u>MOVED AND DULY SECONDED</u></i> <i><u>MOTION: To accept the Staff Reports and MAC Minutes, as presented. CARRIED.</u></i></p>
6	Consent Agenda Part 2 – Committee Reports & Previous Minutes
6.1	<p><u>Governance & Nominating:</u></p> <ul style="list-style-type: none"> • Next G&N meeting is scheduled for Feb 21, 2025 <ul style="list-style-type: none"> ○ 2025-02-Report to Board-G&N circulated
6.2	<p><u>Resources:</u></p> <ul style="list-style-type: none"> • Next Resources meeting scheduled for Mar 6, 2025 <ul style="list-style-type: none"> ○ 2025-01-08-Resources Minutes circulated
6.3	<p><u>Audit:</u></p> <ul style="list-style-type: none"> • Next Audit meeting scheduled for Mar 6, 2025 <ul style="list-style-type: none"> ○ All Board members are invited and encouraged to attend for the RBC presentation regarding remaining SHH investment funds
6.4	<p><u>Quality Assurance:</u></p> <ul style="list-style-type: none"> • Next QA meeting scheduled for Mar 19, 2025, documents circulated: <ul style="list-style-type: none"> ○ 2025-02-Report to Board-QA ○ 2024-10-16-QA Minutes ○ F2425-HHS Quality Improvement Plan (QIP) Dashboard ○ F2425-CNE Incident Risk Report Q3 AMGH ○ F2425-CNE Incident Risk Report Q3 SHH

6.5	<p><u>Recruitment & Retention:</u></p> <ul style="list-style-type: none"> • Next R&R meeting scheduled for Mar 4, 2025
6.6	<p><u>Joint Hospitals & Foundations:</u></p> <ul style="list-style-type: none"> • Next JH&F meeting scheduled for Mar 5, 2025
<p><i><u>MOVED AND DULY SECONDED</u></i> <i><u>MOTION: To accept the Committee Reports and Minutes, as presented. CARRIED.</u></i></p>	
<p>7 New and Other Business</p>	
7.1	<p><u>HHS Financial Update:</u></p> <ul style="list-style-type: none"> • 2024-12-HHS F2425 P9 Results, circulated and reviewed <ul style="list-style-type: none"> ○ Results were reviewed and accepted at Resources meeting on Feb 6 ○ Reviewed Executive summary; outlines operations, revenues and expenses year-to-date to Dec ○ HHS deficit is \$1.2M compared to budget of \$2.6M; positive variance of \$1.5M ○ End-of-year forecast is \$1.8M compared to original budget of \$4.4M <ul style="list-style-type: none"> ▪ Factors attributing to the positive variance include \$1M in vacant positions, one-time funding for Nurse Training Support Programs, uninsured Out-of-Country patient revenues higher than expected, and DI services fees ▪ Factors contributing to cost pressures include unbudgeted benefits ○ Capital spend year-to-date <ul style="list-style-type: none"> ▪ AMGH projects are 44% complete <ul style="list-style-type: none"> – Pending Mental Health renovations at AMGH; scheduled to begin in the next few months and completed in the Fall – Pending equipment orders, i.e., x-ray, portable ultrasound and mammography machines ▪ SHH projects are 65% complete <ul style="list-style-type: none"> – Pending final electrical project billing – Pending equipment orders, i.e., portable ultrasound has just arrived at SHH ED ○ Working capital <ul style="list-style-type: none"> ▪ SHH bank balance as of today is \$531K; working on improving our cash balance in order to cover our expenses ○ IT Initiatives <ul style="list-style-type: none"> ▪ HHS is investigating every possible way to invest in its strategic initiatives <ul style="list-style-type: none"> – Unsolicited project funding request has been submitted to Ontario Health this week – Discussed impact of potential US tariffs on our pending purchases <p><i><u>MOVED AND DULY SECONDED</u></i> <i><u>MOTION: To accept the 2024-12-HHS F2425 P9 Results, as presented. CARRIED.</u></i></p>
7.2	<p><u>Community Engagement Council:</u></p> <ul style="list-style-type: none"> • Mr. Heagle, Mr. Greer and Mr. Trieu met on Jan 31 to discuss the 1st topic for the new CEC – Master Plan <ul style="list-style-type: none"> ○ Based on the summary provided by the CEO, development of dialogue is under way; includes potential hospital amalgamation ○ Determining location that is suitable for entire region, i.e., Bayfield Community Centre ○ Format will include table discussions, with Board members at each table ○ Engagement of staff to determine what changes to facilities / services they would like to see ○ Details and notices to come upon final approval ○ Gathering information to provide to preferred consultants, although they may not be available til Spring 2026 ○ Mr. Ireland volunteered to contribute to the planning process
7.3	<p><u>Board Work Plan:</u></p> <ul style="list-style-type: none"> • Deferred to Mar

7.4	<p><u>Board Advance:</u></p> <ul style="list-style-type: none"> • 2025-01-HHS Board Advance-IT Strategic Initiatives, circulated (moved to in-camera) <ul style="list-style-type: none"> ○ HHS IT initiative discussed as it is a fundamental foundational piece of work for our sites to operate more efficiently ○ Importance of engagement of stakeholders and appropriate investments <p><u>Action:</u></p> <ul style="list-style-type: none"> • Move slides to In-Camera <p><u>By whom / when:</u></p> <ul style="list-style-type: none"> • EA; Today
7.5	<p><u>March Board Meeting:</u></p> <ul style="list-style-type: none"> • Next meeting falls during March Break; discussed rescheduling <p><u>Action:</u></p> <ul style="list-style-type: none"> • Move meeting to Mar 20; adjust invite, room, catering, etc. <p><u>By whom / when:</u></p> <ul style="list-style-type: none"> • EA; Today
8	<p>In-Camera Session</p> <ul style="list-style-type: none"> ○ Notifications: <ul style="list-style-type: none"> ▪ All Board and Ex Officio Members are invited to remain for in-camera sessions, and guests will be invited by the Board Chair, as required; any members with conflicts of interest during in-camera discussion, can be recused as needed ▪ All participants of the in-camera session are expected to ensure that their surroundings are secured from unauthorized participants
8.1	<p><u>Move into In-Camera:</u></p> <ul style="list-style-type: none"> • Human Resources <ul style="list-style-type: none"> ○ Amalgamation discussion from Board Advance ○ Risk Management • Document circulated: <ul style="list-style-type: none"> ○ 2025-02-Motion to Support Increasing SHH BMO Revolving Facility-IC ○ 2025-02-SHH Revolving Facility Credit Increase Board Letter of Support-IC ○ 2025-02-BN HHS IT Strategic Initiatives-IC ○ F2526-BN HHS DRAFT Operating & Capital Budgets-IC ○ 2025-02-Report to Board-Credentials AMGH ○ 2025-02-Report to Board-Credentials SHH ○ 2025-01-HHS Board Advance-IT Strategic Initiatives–MOVED TO IN-CAMERA <p><u>MOVED AND DULY SECONDED</u> <u>MOTION: To move into the in-camera session at 4:59pm. CARRIED.</u></p>
8.2	<p><u>Move Out of In-Camera:</u></p> <p><u>MOVED AND DULY SECONDED</u> <u>Recommendation made to move back into open session at 6:32pm. CARRIED.</u></p>
8.3	<p><u>Motions made based on In-Camera discussion:</u></p> <p><u>MOVED AND DULY SECONDED</u> <u>MOTION: The HHS Common Board supports CFO to approach BMO to increase of revolving Line of Credit from \$400K up to \$1M. CARRIED.</u></p> <p><u>MOVED AND DULY SECONDED</u> <u>MOTION: The HHS Common Board supports divesting \$1M from RBC investment and transfer to a savings account for SHH. CARRIED.</u></p> <p><u>MOVED AND DULY SECONDED</u> <u>MOTION: The HHS Common Board supports HHS entering into an unbinding MOU with LHSC for investigation of the Oracle Strategic Priority. CARRIED.</u></p> <p><u>MOVED AND DULY SECONDED</u> <u>MOTION: The HHS Common Board approves of the credentialing reports for AMGH & SHH, as presented. CARRIED.</u></p>

	<i>MOVED AND DULY SECONDED</i> <i>MOTION: HHS Common Board Supports the move forward with amalgamation discussions. CARRIED.</i>		
	<i>Action:</i> <ul style="list-style-type: none"> • Develop / amend Board Letter of Acceptance for Revolving LOC; may be a two part process • Sign amended Board Letter of Acceptance • HHS / LHSC MOU in place • Physicians are encouraged to attend the scheduled LHSC Oracle demo; communication • Develop amalgamation documents 	<i>By whom / when:</i> <ul style="list-style-type: none"> • Trieu / Lovecky; Feb • Trieu / McNeil / Ireland; Feb • Trieu / Lovecky; Feb / Mar • Trieu / Natuik; As scheduled • Trieu; 2025 	
9	Round Table		
10	Board Evaluations		
11	Next Meeting & Adjournment Regrets to alana.ross@amgh.ca		
	Date	Time	Location
	March 20, 2025	4:00pm-6:00pm	AMGH Boardroom / MS Teams available
	<i>Motion to Adjourn Meeting:</i> <i>MOVED AND DULY SECONDED</i> <i>MOTION: To adjourn the February 13, 2025 HHS Common Board meeting at 6:35pm. CARRIED.</i>		
Signature			
			
<hr/> Mr. Glen McNeil, Board Chair		<hr/> Mr. Jimmy Trieu, President & CEO	