

# Board of Directors Meeting MINUTES

Date: November 23, 2021

Time: 5:30 PM

Location: Board Room & Zoom

Chair: Ms. Eleanor Vachon

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**Present:** Ms. Eleanor Vachon, Ms. Sonia Green, Mr. Dennis Gushulak, Mr. John Frostiak, Ms. Dianne Pertoci, Ms. Arlene Swanwick, Ms. Holly Stamarski, Mr. Marshall Dumontier, Ms. Audrey Blazek, Ms. Shawnda Norlock

**Staff:** Ms. Hannah Kochuk, Mr. Alex McAuley, Ms. Amanda Kaczmarek, Ms. Sue LeBeau, Ms. Meghan Gilbert

**Regrets:** Dr. Akila Whiley

**Absent:** Dr. Diane Zielke

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## 1. CALL TO ORDER

Meeting was called to order by Ms. Eleanor Vachon at 5:33 PM.

### 1.1. Quorum

Quorum was established.

### 1.2. Acceptance of Agenda

#### Addition of 3.5 Board Email

**The following motion was brought forward:**

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**MOTION NO: 21-39      Moved: D. Gushulak      Seconded: A. Blazek**

*That the agenda for the November 23, 2021, meeting of the RLMCMH Board of Directors be accepted with the proposed changes.*

**Vote for motion: Carried.**

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### 1.3. Declaration of Conflict of Interest

None Declared

## 2. CONSENT AGENDA

*For the purpose of convenience and for expediting meetings, matters of business of repetitive or routine nature are included in the Consent Agenda and*

*all such matters of business contained in the Consent Agenda are voted on collectively. A particular matter of business may be singled out from the Consent Agenda for debate or for a separate vote upon the request of any Member. In the case of a separate vote, the excluded matter of business is served from the Consent Agenda, and only the remaining matters of business contained in the Consent Agenda are voted on collectively*

- 2.1. Minutes, Board of Directors, October 26, 2021
- 2.2. Minutes, Quality Committee, October 12, 2021
- 2.3. Minutes, Resource and Planning Committee, October 19, 2021
- 2.4. Minutes, Patient and Family Advisory Committee, September 15, 2021
- 2.5. Minutes, Medical Advisory Committee, September 23, 2021

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**The following motion was brought forward:**

**MOTION NO: 21-40      Moved: J. Frostiak      Seconded: A. Swanwick**

*That the consent agenda of the November 23, 2021 meeting of the RLMCMH Board of Directors be accepted as presented.*

**Vote for motion: Carried.**

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### **3. BUSINESS ARISING**

#### **3.1. Honeywell Work**

- The numbers included with the package are outdated and have been revised downward. Three projects on the list have been removed; the lighting, laundry and front entrance air curtain. This will save us roughly \$250,000 in equipment costs and \$21,000 on project management costs.
- All of the required information has been supplied by Honeywell, which will be helpful when applying for HIRF.
- There are other large projects within the next few years that need to be completed such as the HIS renewal within the Northwestern region.

- This project will not hit our surplus or deficit; it will impact our bottom line and cash flow.

**The following motion was brought forward:**

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**MOTION NO: 21-41      Moved: S. Green    Seconded: A. Swanwick**

*That the Board of Directors approve the recommendation to proceed with the work as per the contract as amended.*

**Vote for motion: Carried.**

**Mr. Dumontier abstained.**

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### **3.2. COVID Update**

- Planning closure of the Isolation Centre in December. We worked closely with the Red Lake and Area Emergency Shelter for a smooth transition; they now have the capacity to take in the population we intended to cover.
- Our visitor policy was recently revisited. Before the pandemic, our policy allowed all care partners in. During the pandemic, we remade the policy with levels of restrictions to easily move from one to another without having to rewrite. The plan is to open up to level three which allows 1-2 care partners in depending on the circumstances. PFAC members have been involved with the decision making of our care partner and vaccination policy.
- We will soon require all visitors to be double vaccinated. There will be other methods of visiting should they not be vaccinated such as virtually.

### **3.3. Accreditation Update**

- The hospital is accredited with exemplary status.
- There are 21 items on our action plan that are being worked on.
- Suggestion to contact CBC Thunder Bay or CKDR to announce our successful accreditation status.

### 3.4. Retreat Planning

- Ms. LeBeau reviewed the agenda for the Board Retreat which was approved by the Directors.

### 3.5. Board Email

- Some Directors have shown concern over receiving Board material through their personal email. Ms. Kochuk will get Ms. Norlock a Board email and slowly transition Board packages to the new emails.

## 4. NEW BUSINESS

### 4.1. Financial Statements

- We worked on writing off our accounts receivable (AR). About \$86,000 was non-recoverable, which is why we are in a deficit. Have been saving deferred revenue to offset and a surplus will be seen next month.
- COVID expenses are still being reimbursed dollar for dollar.
- We are not at risk of losing our CCAS vacancies funding. Recently got approval to use some funding for head hunters.
- A sharp increase in ER visits is something for us to keep our eye on, and strive to address if it continues.

**The following motion was brought forward:**

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**MOTION NO: 21-42**

**Moved: J. Frostiak**

**Seconded: A. Swanwick**

*That the RLMCMH Board of Directors approves of the financial statements dated October 31, 2021, as presented.*

**Vote for motion: Carried.**

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### 4.2. Occupational Health and Safety: Summary of Incidents

- Ms. Kaczmarek reviewed our summary of incidents with the Directors.

- No LTI related to any incidents.
- The staff are pleased with the Staff duress badge system and feel it has made a vast improvement for personal safety.

#### **4.3. Corporate Scorecard**

- There was concern about the low numbers of survey responses, especially in the ER. New tablets will be placed in departments to gain feedback on a different forum.
- Changes to be made to clarify what the targets are for IPAC on the scorecard.

#### **4.4. Fire Panel Door Lock Wander Guard System**

- A motion from the Board of Directors is required for submission of the application.
- The fire panel is beyond its service life and will need to be replaced before the end of next fiscal year.
- The funding request contains multiple parts. If the application is approved, 75% of the project will be covered, whereas the Hospital will be required to cover the last 25%. The Directors have committed to support the project and will cover any project cost overruns.

**The following motion was brought forward:**

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**MOTION NO:**                      **Moved: D. Gushulak**                      **Seconded: A. Blazek**

*That the RLMCMH Board of Directors approves the submission of the proposed funding application as accepted.*

**Vote for motion: Carried.**

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## **5. CORRESPONDENCE/INFORMATION**

### **5.1. Thunder Bay Medical Society**

### **5.2. Management Letter**

## **6. EMERGING ISSUES FOR DISCUSSION**

- To discuss the rising ER numbers with the FHT.

## **7. REPORTS**

### **7.1. RLMCH Foundation**

- Continuing with the 50/50 draw.
- Recently asked the Hospital for a wish list for new items to fundraise for.

### **7.2. RLMCH Auxiliary**

- The annual Christmas cake sales netted \$2,100.
- Catch the Ace is still running with the pot over \$5,000
- The balance of the pledge for the X-ray machine is to come from the GIC.
- The Auxiliary plans to do the nurses' basket for Christmas again this year.

### **7.3. Medical Advisory Committee**

- Deferred

### **7.4. Quality Committee Update**

- Ms. Sanna-White spoke at the meeting to acknowledge the Directors' concerns and share the steps she has taken to improve the flow of the department such as quarterly surveys, phone numbers at the clinic and the bottom of requisitions.

### **7.5. R&P Committee Update**

- Mr. Pringle from Honeywell spoke at the meeting. The work Honeywell will be doing is a big but necessary step to keep our Hospital in good working order.

### **7.6. Chief Nursing Executive**

- Number of presentations for staff are coming up in December and January
- Attended a nurses' burnout webinar this month.

### **7.7. Chief Executive Officer**

- The Hospital received some exposure from CKDR on our excellent staff immunization rates.
- We are still waiting on funding for Detox and Safe Beds. Recently provided support to a community organization that is considering a managed alcohol program (MAP) to a small subset of clients.
- Focus attention on recruitment and retention. NOSM will do promotional work to bring students in for their second year during practice. In the process of formalizing Red Lake in the rotation.

### **7.8. Regional Services Committee**

- Regional transformation and integration were covered in the meeting. Discussion around the status of OHT.
- Each meeting contains an educational session. The Regional Services Committee is looking for interest in a large education session that is provided to all the Boards in Northern Ontario. Topics to be considered are OHT and cybersecurity.
- Directors will provide feedback and topic suggestions to Ms. Kochuk.

## **8. MEETING EFFECTIVENESS SURVEY**

## **9. CELEBRATIONS**

The Board recognized the whole hospital team's accomplishment of being accredited with exemplary status. The Board played a key role in this.

## **10. ADJOURNMENT**

The meeting was adjourned by Ms. Stamarski at 7:56 PM.

**11. DATE OF NEXT MEETING:** January 25, 2022.



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Ms. Sue LeBeau

**President & CEO**



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Ms. Eleanor Vachon

**Committee Chair**