

# Board of Directors Meeting MINUTES

Date: March 22, 2022

Time: 5:30 PM

Location: Zoom & Board Room

Chair: Ms. Eleanor Vachon

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**Present:** Ms. Eleanor Vachon, Ms. Sonia Green (Zoom), Mr. Dennis Gushulak (Zoom), Mr. John Frostiak, Ms. Dianne Pertoci, Ms. Arlene Swanwick, Mr. Marshall Dumontier, Ms. Holly Stamarski

**Staff:** Ms. Hannah Kochuk, Ms. Allison Church, Ms. Sue LeBeau, Ms. Meghan Gilbert, Ms. Amanda Kaczmarek

**Regrets:** Dr. Diane Zielke, Dr. Akila Wwhiley, Ms. Audrey Blazek, Ms. Shawnda Norlock

**Absent:**

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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

**The following motion was brought forward:**

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**MOTION NO: 22-11      Moved: J. Frostiak      Seconded: H. Stamarski**

*That the agenda for the March 22, 2022, meeting of the RLMCMH Board of Directors be accepted as presented.*

**Vote for motion: Carried.**

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### 1.3. Declaration of Conflict of Interest

## 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, February 22, 2022
- 2.2. Minutes, Quality Committee, February 8, 2022
- 2.3. Minutes, Resource and Planning Committee, February 15, 2022
- 2.4. Minutes, Patient and Family Advisory Committee, January 19, 2022
- 2.5. Minutes, Medical Advisory Committee, January 20, 2022

**The following motion was brought forward:**

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**MOTION NO: 22-12      Moved: S. Green      Seconded: D. Pertoci**  
*That the consent agenda of the March 22, 2022, meeting of the RLMCMH Board of Directors be accepted as presented.*  
**Vote for motion: Carried.**

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### **3. BUSINESS ARISING**

#### **3.1. COVID Update**

- The Hospital has eased up on some restrictions including n95 masks, eye protection and visitor restrictions. All inpatients are permitted to one visitor.
- Our region's percent positivity rate has decreased to 16%.

#### **3.2. Ontario Health Team**

- Our region has submitted the OHT application which includes 13 signatories.
- The Ontario Health Team for Red Lake, Dryden and Sioux Lookout is composed of a diverse group covering multiple sectors. Organizations

have established their commitment as a signatory, observer, or partner which can be changed for now.

- The first-year goals are to establish our team, build relationships and get to know one another and determine how best we will work together on selected shared priorities.

### **3.3. QIP Update**

- Health Quality Ontario has opened the portal for voluntary submission of Quality Improvement Plans.
- Our Hospital has decided to continue with the process as it is a requirement for the ECFA.

## **4. NEW BUSINESS**

### **4.1. Financial Statements, February 2022**

- After writing off bad debts and adjustments to COVID related expenses, we have a surplus of approximately \$85,000 for February.
- Ms. Church reviewed the variances in detail as well as the program costs.
- Unrealized loss/gain is attributed to our investment accounts.
- Ms. Church will review what the speciality clinics are and bring them to the Board meeting in April.

**The following motion was brought forward:**

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**MOTION NO: 22-13      Moved: A. Swanwick      Seconded: J. Frostiak**

*That the RLMCMH Board of Directors approves of the financial statements dated February 28, 2022, as presented.*

**Vote for motion: Carried.**

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### **4.2. Review Capital Plan Spending**

- Ms. Church, Ms. Gilbert and Ms. Kaczmarek reviewed all equipment and created a capital plan/wish list which was

provided to the Directors. The goal is to create projections for five years.

- Commitments of funding from other parties is included in the document.

### **4.3. Policy Review**

#### **4.3.1. Code of Conduct, BG-DIR-03**

- Changes to be made; removal of the third sentence in section 3, add ex-officio to the first sentence.

**The following motion was brought forward:**

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**MOTION NO: 22-14                      Moved: M. Dumontier                      Seconded: A. Swanwick**

*That the RLMCMH Board of Directors approves the policies, Code of Conduct, BG-DIR-03 with proposed changes.*

**Vote for motion: Carried.**

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### **4.4. Safe Bed Location**

- The Directors agreed the property that was inspected was not feasible due to the structural concerns.
- A community review will be held for any location that is decided upon to obtain feedback on the parameters they would feel comfortable with.
- Reviewed the briefing note and weighed the pros and cons of buying versus leasing. All agreed that either buying or leasing will be determined by the lease terms and what properties are available.

### **4.5. ONCA Update**

- The Ontario Non Profit Corporations Act (ONCA) update began in October of 2021. Over the next three years, we will be reviewing our policies and by-laws to ensure ONCA compliance.
- Work has begun and adjusted policies will be reviewed and approved by the appropriate Subcommittees and Board of Directors.

The Meeting was brought to in-camera at 7:02 pm.

Meeting resumed at 7:23 pm.

## **5. CORRESPONDENCE/INFORMATION**

### **5.1. HIROC Letter**

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

## **7. REPORTS**

### **7.1. RLMCH Foundation**

- The golf tournament will resume this year during the third weekend of June.
- Letters and notices have been sent out to donors.

### **7.2. RLMCH Auxiliary**

- The South and North unit will be combined.
- The Auxiliary is participating in the spring trade show by raffling baskets.

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

- Deferred

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

- We have maintained a return rate of 25% for inpatient surveys.

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

- All items have been discussed during the meeting.

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

- Met with the Director of the Cancer Care Program to ensure our site is up to date with current policies and practices as well as

updated education and self-assessment tools for the Nurse administering chemo.

- Attended the Rural and Northern Health Care conference as well as Mental Health for Leaders webinar.
- Continuing to monitor the fluctuations of COVID cases regionally to determine how and when we can reduce some of the restrictions at the hospital.

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

- Advocated for rapid antigen tests in our region. The distributor will likely be the Family Health Team.
- Presented to Treaty #3; there was positive conversation and reception.

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

- Deferred

### **8. MEETING EFFECTIVENESS SURVEY**

### **9. CELEBRATIONS**

- Ms. LeBeau celebrated the work that Ms. Fleming has been doing to celebrate and recognize staff.

### **10. ADJOURNMENT**

The meeting was adjourned by Mr. Frostiak at 7:49 PM.

**11. DATE OF NEXT MEETING:** April 26, 2022.



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Ms. Sue LeBeau

**President & CEO**



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Ms. Eleanor Vachon

**Committee Chair**

