



**REGULAR OPEN MEETING of the BOARD OF GOVERNORS**  
Thursday, June 2, 2022 / 5:00 pm / RMH Boardroom & Videoconference

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<b>Elected</b>	Wanda Percival, Board Chair	Paul McPherson, Governor
<b>Governors:</b>	Pat Clarke, Governor	Bob Nielson, Governor
	Larry Hope, Governor	Christine Norris, Vice Chair
	Beverley John, Governor	Meri Saunders, Governor
	Bonnie Kennedy, Governor	Karissa Ward, Governor
	David Kimmerly, Treasurer	
<b>Ex-Officio /</b>	Anne Botond, President, RMH Auxiliary	Pat O'Reilly, CKL Council Representative
<b>Appointed</b>	Dr. Bharat Chawla, Chief of Staff	Anne Overhoff, VP Clinical / CNE
<b>Governors:</b>	Kelly Isfan, President & CEO	
<b>Regrets:</b>	Dr. Mostafa El Beheiry, President, Professional Staff	Dr. Andy Knox, VP Professional Staff
<b>Staff</b>	Emma Elley, CHRO	Veronica Nelson, VP & COO
<b>Resources:</b>	Tamra Fierheller, Executive Assistant, Recorder	Paul Truscott, CFO & CIO
<b>Guests:</b>		

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**1. CALL TO ORDER**

Ms. W. Percival, Chair, called the (Open) meeting to order at 5:02 pm.

**1.1 Quorum** – Quorum was confirmed.

**1.2 Approval of Agenda** – The agenda was reviewed. Thereafter, there was a **MOTION: That the agenda be approved as presented.**

Ms. P. Clarke/Mr. D. Kimmerly, **CARRIED**

**1.3 Declarations of Conflict of Interest** – None declared.

**1.4 Acknowledgement of the Hospital's Vision/Mission/Values** – The Hospital's Vision, Mission and Values were acknowledged.

**1.5 Patient Story** – A Patient Story was shared.

**2. CONSENT AGENDA**

Items identified as part of the consent agenda were pre-circulated and the related motions were presented as follows:

**1. MOTION: That the draft minutes of the (Open) Board of Governors meeting of April 7, 2022 be approved as circulated.**

**2. MOTION: That the Board of Governors receives the draft minutes of the Quality/Governance & Planning Committee meeting of May 17, 2022.**

**3. MOTION: That the Board of Governors receives the draft minutes of the Resources & Audit Committee meeting of May 26, 2022.**

4. **MOTION**: That the Board of Governors approves the Broader Public Sector Accountability Act Attestation for the reporting period of April 1, 2021 to March 31, 2022, as recommended by the Resources & Audit Committee.
5. **MOTION**: That the Board of Governors approves the Hospital Service Accountability Agreement Declaration of Compliance for the reporting period of April 1, 2021 to March 31, 2022, as recommended by the Resources & Audit Committee.
6. **MOTION**: That Board of Governors approves the Multi-Sector Service Accountability Agreement Declaration of Compliance for the reporting period of April 1, 2021 to March 31, 2022, as recommended by the Resources & Audit Committee.

Thereafter, there was a

**MOTION**: *That the Board of Governors approves motions 1 through 6 on the (Open) Consent Agenda for June 2, 2022 as presented.*

Ms. M. Saunders/Mr. P. McPherson, **CARRIED**

### **3. BOARD BUSINESS – QUALITY/GOVERNANCE & PLANNING COMMITTEE**

**3.1 2022/23 Quality Improvement Plan** – The 2022/23 Quality Improvement Plan (QIP) dashboard, and related minutes from the Quality/Governance & Planning Committee meeting of May 17, 2022, were pre-circulated. The 2022/23 QIP indicators and performance targets are as follows:

1. Decrease Total Number of Alternate Level of Care (ALC) Days – baseline 30.8% / target 25% (data from two years pre-COVID was used to determine baseline).
2. Increase Patient Response for ‘Received Enough Information About Their Health and Their Care at Discharge’ – baseline 66.7% / target 72%.
3. Decrease the Number of Medication Errors: Wrong Patient, Medication or Dose – baseline 20 / target 0 (Q3 2021/22 data was used to determine baseline).
4. Decrease the Number of Patients that have Four or More Visits to the ED Over a 12-Month Period for Addiction or Mental Illness – baseline 4.4% / target 3.6% (baseline developed from 2021/22 data).
5. Decrease the Number of Workplace Violence Incidents by Hospital Workers – baseline 120 / target data collection (baseline is based on annual data – this will be revised based on Q3 data only).

**3.2 Corporate Bylaw Revisions** – A revised copy of the Hospital’s corporate bylaws, and related minutes from the Quality/Governance & Planning Committee meeting of May 17, 2022, were pre-circulated. The recommended revisions bring the language regarding Members’ Meetings in line with the new *Ontario Not-for-Profit Corporations Act* (ONCA), and specifically revises the language around quorum at Members’ Meetings to reflect the Hospital’s new Special Act. All revisions mirror the language in the Ontario Hospital Association’s prototype hospital bylaws as developed by Borden Ladner Gervais.

A full review/update of the corporate bylaws to ensure ONCA compliance will be undertaken as part of the Board’s 2022/23 Work Plan.

There was a

**MOTION: That the Board of Governors approves the revised Corporate Bylaws as presented.**

Ms. C. Norris/Mr. L. Hope, **CARRIED**

**3.3 Corporate Goals 2022/23** – The draft 2022/23 Corporate Goals, and related minutes from the Quality/Governance & Planning Committee meeting of May 17, 2022, were pre-circulated. The corporate priorities for 2022/23 are recommended as follows:

1. Complete Strategic Planning.
2. Advance post go-live optimization of our shared regional clinical information system (CIS) Epic.
3. Advance safe and quality patient care through the 2022/23 Quality Improvement Plan.
4. Work with the Ministry of Health Capital Branch to advance the Master Plan and obtain Stage 1 approvals.
5. Work with our partners to evolve the Kawartha Lakes Ontario Health Team to expand and improve opportunities for connecting local care.
6. Initiate planning for the Hospital's Accreditation in Q2 2023/24.
7. Action follow up on areas for improvement identified in the Employee Engagement pulse survey conducted in April 2022.
8. Steward financial health and fiscal responsibility.

There was a

**MOTION: That the Board of Governors approves the 2022/23 Corporate Goals & Objectives as presented.**

Mr. P. O'Reilly/Mr. D. Kimmerly, **CARRIED**

#### **4. BOARD BUSINESS – RESOURCES & AUDIT COMMITTEE**

**4.1 2021/22 Draft Audited Financial Statements/Report** – The Final Audit Report, the draft audited Financial Statements for the fiscal year ending March 31, 2022, and related minutes from the Resources & Audit Committee meeting of May 26, 2022, were pre-circulated. A slight difference in total revenue was noted between the \$111,177,019 recorded on the draft audited statements and the \$109,548,994 recorded on the Hospital's internal statements. The difference is related to how/where \$1.6-million in community mental health and other restricted program revenue is recorded.

Per the Audit Report:

- Preliminary materiality was \$2-million and this remained unchanged. There was no fraud affecting the Hospital identified. The scope of the audit work performed was substantially the same as that described in the Planning Report provided to the Board in April 2022.
- Risks related to COVID-19 were reviewed. The financial statements were prepared based on the most recent directives from the Ministry, and the journal entries were prepared based on knowledge to-date and management estimates. Actual results may vary as the Ministry process solidifies its reconciliation. This may result in adjustments in future reporting periods.
- Risks related to the Epic system implementation were reviewed, including the capitalization and amortization of the new system, and the cutoff of transactions on the conversion to the new system. It was verified that the revenues and receivables entered into the old system were accurately transferred into the new system. Capital policies were examined in order to ensure that the amounts capitalized are accurately classified in the financial statements and amortized appropriately.

The Summary of Unadjusted Misstatements (SLAM) initially included potential errors related to:

- deferred COVID revenue of \$487,495 not recognized in the year
- QBP funding of \$1,745,737 recognized in income to clear loss
- unadjusted amounts resulting from the change in capitalization policy

Following the Resources & Audit Committee meeting, further discussions were had with the Auditors regarding the inclusion of the misstatement related to QBP funding. The Auditors reversed their position and removed it from the SLAM. Other deferral was also decreased based on further support and documentation provided. The revisions provide a much cleaner audit opinion. The revised SLAM was tabled.

The draft audited financial statements were reviewed with the following highlighted:

- The increase in the Hospital's cash is due to a long-term loan for the clinical information system (CIS).
- The increase in capital assets reflects a significant increase in computers and other equipment related to the implementation of the CIS.
- Note 2 related to COVID-19 Ministry of Health (MOH) funding was added in 2020/21. The note continues to reflect that there is a measurement of uncertainty associated with the MOH revenue related to COVID-19.
- Note 9 related to long-term debt was added new to recognize the new long-term debt reported on the statement of financial position.

**MOTION: That the Board of Governors approves the Financial Statements for the fiscal year ending March 31, 2022 as revised.**

Mr. D. Kimmerly/Ms. P. Clarke, **CARRIED**

## **5. REPORTS**

**5.1 Report of the Chief of Staff** – The Report of the Chief of Staff dated June 2, 2022 was pre-circulated. Chief of Staff, Dr B. Chawla reviewed the items reference in the report. The Hospitalist Department continues to struggle with coverage. An action plan developed to provide the Hospitalists support includes the recruitment of two additional nurse practitioners, and increased physiotherapy, occupational therapy and social worker support. The Hospital will welcome Dr. Glasine Lawson to the Department of Obstetrics full-time in July 2022. A Celebration of Life honouring Dr. Bhatia is planned for June 23, 2022.

Following an opportunity for discussion, there was a

**MOTION: That the Board of Governors receives the Report of the Chief of Staff for June 2, 2022.**

Ms. K. Ward/Ms. B. Kennedy, **CARRIED**

**5.2 Report of the President & CEO** – The Report of the President & CEO dated June 2, 2022 was pre-circulated. President & CEO, Ms. K. Isfan reviewed the items referenced in the report. Hospitals throughout the province are experiencing significant challenges with health human resources. Current RMH staffing pressures were noted and recruitment strategies reviewed. In partnership with LCVI, a Health Sciences Program and Co-operative Education placements will be offered starting in September 2022. These opportunities will expose students to various hospital careers.

Following an opportunity for discussion, there was a

**MOTION: That the Board of Governors receives the Report of the President & CEO for June 2, 2022.**

Ms. K. Ward/Ms. B. John, **CARRIED**

**6. OTHER BUSINESS**

**6.1 2021/22 Board Work Plan** - The 2021/22 Board Work Plan was previously circulated. The work plan status as of June 2022 was reviewed. Despite the challenges imposed by COVID-19, the Board successfully completed its work plan. A review of the Risk Management Plan has been deferred to a later date when COVID-19 pressures have decreased.

**6.2 Next Meeting Date** – June 16, 2022. This meeting will immediately follow the Annual Meeting.

**7. MOTION TO ADJOURN THE OPEN MEETING & MOVE INTO THE CLOSED MEETING**

On a motion of B. Nielson, the Open meeting adjourned at 6:01 pm and the Board moved into its Closed meeting.

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Chair

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Secretary

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Date