



The (**OPEN**) meeting of the **Board of Governors** of the Ross Memorial Hospital was held on **Thursday, March 4, 2021**, via videoconference.

Present: Ms. W. Percival (Chair), Mr. R. Ashmore, Ms. A. Botond, Dr. B. Chawla, Ms. P. Clarke, Dr. M. El-Beheiry, Mr. J. Griepsma, Mr. L. Hope, Ms. K. Isfan, Ms. B. Kennedy, Mr. P. McPherson, Mr. B. Nielson, Ms. C. Norris, Ms. A. Overhoff, Ms. N. Rooney, Ms. M. Saunders Ms. K. Ward

Regrets: Mr. D. Kimmerly, Dr. A. Knox

By Invitation: Ms. E. Elley, Mr. P. Truscott

1. CALL TO ORDER

Ms. W. Percival, Chair, called the (Open) meeting to order at 5:44 pm.

Ms. Anne Botond, newly appointed President of the RMH Auxiliary, was welcomed to the Board.

1.1 Quorum – A 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. B. Kennedy/Mr. L. Hope, **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 minutes of the (Open) Board of Governors meeting of February 4, 2021 be approved as circulated.

2. MOTION: That the Board of Governors receives the draft minutes of the Quality/Governance & Planning Committee meeting of February 16, 2021.

3. MOTION: That the Board of Governors receives the draft minutes of the Resources & Audit Committee meeting of February 18, 2021.

4. MOTION: That the Board of Governors receives the February 2021 report from the RMH Foundation CEO.

Thereafter, there was a

MOTION: That the Board of Governors approves motions 1 through 4 on the (Open) Consent Agenda for March 4, 2021 as presented.

Ms. M. Saunders/Ms. C. Norris, **CARRIED**

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

3.1 Quality & Patient Safety Report – Q3 2020/21 – The 2020/21 Q3 Quality/Patient Safety Report, and related minutes from the Quality/Governance & Planning Committee meeting of February 16, 2021 were pre-circulated. Vice President Clinical/Chief Nursing Officer, Ms. A. Overhoff summarized 2020/21 Q3 performance related to the Quality Improvement Plan (QIP) indicators, patient safety incident volumes, severity of patient safety incidents, and the publicly reported patient safety indicators.

QIP performance remains positive and it is anticipated that all indicators will meet or exceed target by the end of Q4.

Hospitals are awaiting direction from Health Quality Ontario (HQP) regarding the status of the 2020/21 QIP submissions, as well as the 2021/22 QIP priorities. Should HQO continue to halt QIP activity due to COVID-19, the Hospital will move forward with developing its own priority 2021/22 quality performance indicators and targets.

In Q3, 369 patient safety incidents were reported; a 7.6% increase compared to Q2. The most prevalent safety incidents reported were: fall (53), medication/fluid (49), workplace violence (49) and lab/specimen (46).

Under the patient safety indicators, it was noted that the Clostridium Difficile Infection (CDI) rate was slightly higher than the target in Q3, with three nosocomial cases acquired during the period. At present, in Q4 there has only been one nosocomial case of CDI.

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

None identified.

5. **REPORTS**

5.1 Report of the Chief of Staff – The Report of the Chief of Staff dated March 4, 2021 was pre-circulated. Chief of Staff, Dr. B. Chawla provided a high level review of items referenced in the report. A new general surgeon has been recruited to replace Dr. Greenberg who will be leaving at the end of March. Recruitment of a new orthopaedic surgeon is also underway to replace Dr. Noronha who will be retiring at the end of May.

Following an opportunity for discussion and questions, there was a

MOTION: That the Board of Governors receives the Report of the Chief of Staff for March 4 2021.

Ms. P. Clarke/Mr. R. Ashmore, **CARRIED**

5.2 Report of the President & CEO – The Report of the President & CEO dated March 4, 2021 was pre-circulated. President & CEO, Ms. K. Isfan provided a high level review of items referenced in the report. The report included a Vaccine Distribution Plan graphic from Public Health Ontario that explains the vaccine roll-out plan over the next several

months. The Hospital has followed Ministry of Health guidance to create a prioritization matrix of how the vaccine will be rolled out to RMH staff and physicians according to identified risk. The Hospital's upper rotunda will be utilized as an on-site vaccination clinic to serve staff, physicians and health care workers from the local area. The Hospital will work with the HKPR Health Unit to assist in planning for community-wide vaccination clinics.

In order to support the recent COVID-19 outbreak at Caressant Care McLaughlin (CCM), the Ministry of Long-Term Care approved a Voluntary Management Agreement between the Hospital and Caressant Care. The term of the Management Agreement is 90 days. V. Nelson remains on-site at CCM as Incident Command, working with Caressant Care and the Ministry to ensure the facility has a transition plan and can provide safe and effective care for residents before she and other seconded hospital staff members return to RMH.

Appreciation was noted to the Foundation for its support for the kitchen renovation project. The renovation was budgeted at \$1.6-million, with the Foundation pledging support of about \$1.25-million. To-date, the Foundation has disbursed almost \$900,000 for the project, with the outstanding disbursement expected before the end of the fiscal year.

Following an opportunity for discussion and questions, there was a

MOTION: That the Board of Governors receives the Report of the President & CEO for March 4 2021.

Ms. K. Ward/Ms. M. Saunders, **CARRIED**

6. OTHER BUSINESS

6.1 2020/21 Board Work Plan – Copies of the 2020/21 Board Work Plan were previously circulated. President & CEO, Ms. K. Isfan noted the work plan status as of February 2021. Physician satisfaction results from the recent engagement survey will not be presented to the Board as there was not enough physician-specific data to support a separate report. The Hospital Insurance Reciprocal of Canada (HIROC) will be engaged to provide a risk management presentation to the Board in June or early fall.

6.2 Next Meeting Date – April 1, 2021.

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

On a motion by Ms. P. Clarke, the Open meeting adjourned at 6:21 pm and the Board moved into its Closed meeting.

Chair

Secretary

Date