



# Board Meeting

November 29, 2021 at 5:00 pm via ZOOM

## Minutes

### Decision Making Framework

NDMH is committed to ensuring decisions and practices are ethically responsible and align with our vision, mission, values, philosophy and strategic directions. All decision makers should consider issues from an ethics perspective, including their implications of patients/residents and their families, staff and the community.

The following questions should be considered for each issue:

- 1 Does the decision put **Patient's First** by responding respectfully to needs, values and preferences of our patients/residents and their families, our communities and by considering input from our Patient/Resident and Family Advisory Council?
- 2 Does the decision support the pursuit of high **Quality** care through the adoption of best practices and innovation?
- 3 Does the decision demonstrate **Accountability** by advancing a high quality patient/resident experience that is socially and fiscally accountable?
- 4 Does the decision demonstrate **Respect** by honoring the uniqueness of each individual and the diversifying natures of our communities?
- 5 Does the decision foster **Compassion, Fairness, Integrity and Teamwork**?

### Agenda

| Time  | Presenter  | Item & Purpose |          |          |          |          | Expected Outcome                  |                                   |              |                |           | Page # |  |
|---|--|----------------|----------|----------|----------|----------|-----------------------------------|-----------------------------------|--------------|----------------|-----------|--------|--|
|   |  |                |          |          |          |          | R: Recommendation                 | D: Discussion                     | E: Education | I: Information | A: Action |        |  |
| <b>R: Recommendation Decision/Action    E: Education    D: Discussion    I: Information =    R-E-D- I</b> |  |                |          |          |          |          |                                   |                                   |              |                |           |        |  |
| <b>1.0</b>  | <b>Roll Call</b>   |                |          |          |          |          |                                   |                                   |              |                |           |        |  |
|   | <b>Membership</b>  | <b>O</b>       | <b>T</b> | <b>V</b> | <b>R</b> | <b>A</b> | <b>Non-Voting Membership</b>      |                                   |              |                |           |        |  |
|   | Kal Pristanski, Chair  |                |          | X        |          |          | Cathy Eady, CEO                   |                                   |              | X              |           |        |  |
|   | Nancy Gladun, Vice Chair   |                |          | X        |          |          | Jacqueline Dorval, CNE            |                                   |              | X              |           |        |  |
|   | Ed Wawia, Director   |                |          | X        |          |          | Lauren Haskell, CFO               |                                   |              | X              |           |        |  |
|   | Eric Rutherford, Director  | X              |          |          |          |          | Shannon Jean, Director, NDFHT     |                                   |              | X              |           |        |  |
|   | Gordon Mackenzie, Director                                       |                |          | X        |          |          | Dr. Ravi Dhaliwal, Chief of Staff |                                   |              | X              |           |        |  |
|   | James Foulds, Director   |                |          | X        |          |          | Dr. Doug Scott, Physician Lead    |                                   |              |                |           | X      |  |
|   | Robert Beatty, Director  |                |          | X        |          |          | Dr. Robert Foulds, Pres., MAC     |                                   |              |                |           | X      |  |
|   | O: On-site / T: Telecon. / V: Videocon. / R: Regrets / A: Absent |                |          |          |          |          |                                   | Janice Nicol Vella, EA/Bd Liaison |              |                | X         |        |  |

| Time       | Presenter                         | Item & Purpose   | Expected Outcome |
|------------|-----------------------------------|--|------------------|
| <b>2.0</b> | <b>Call to Order at 5:08 p.m.</b> |  |                  |
| 2.1        | K. Pristanski                     | <p><u>Indigenous Land Acknowledgement Protocol/Opening Remarks</u></p> <p><i>Welcome and boozhoo. We acknowledge the Indigenous Peoples of all the lands that we are on today. While we meet today in-person and/or on a virtual platform, let's take a moment to acknowledge the importance of the land, which we each call home.</i></p> <p><i>We do this to reaffirm our commitment and responsibility in improving relationships between nations and to improving our own understanding of local Indigenous peoples and their cultures.</i></p> <p><i>We acknowledge the ancestral and unceded territory of all the Inuit, Métis, and First Nations people that call this nation home, and acknowledge the territory of the Ojibwe/Chippewa/Anishnaabe, Oji-Cree and Mushkegowuk/Cree peoples of Northwestern Ontario, the traditional territory of the Anishinaabe peoples of the Robinson-Superior Treaty, Treaty 9 and Treaty 5.</i></p> <p><i>Please join in a moment of reflection to acknowledge the harms and mistakes of the past and to consider how we can each, in our own way, move forward in a spirit of reconciliation and collaboration. Thank you, miigwetch.</i></p> |                  |

|            | Presenter                       | Item & Purpose  | Expected Outcome |
|------------|---------------------------------|---|------------------|
| 2.2        | K. Pristanski                   | <u>Quorum</u><br>With 6/7 members present, quorum was met.  |                  |
| 2.3        | K. Pristanski                   | <u>Conflict of Interest</u><br>There were no conflicts of interest declared.  |                  |
| 2.4        | K. Pristanski                   | <u>Additions/deletions to agenda, approval of the agenda, Motion #1</u><br>Items 3.1 and 3.3 have been switched to allow W. Gates to present first.<br>Motion: N. Gladun<br>Second: J. Foulds<br>Opposed: none<br><i>"That the amended agenda for the NDMH and NDFHT Board of Directors meeting for November 29, 2021 be accepted as amended."</i> CARRIED.   |                  |
| <b>3.0</b> | <b>Education / Presentation</b> |   |                  |
| 3.1        | W. Gates                        | <u>SNEMS Presentation</u><br>W. Gates from Superior North Emergency Medical Services provided an overview of the 5 modules that have presented across the district. The presentations were provided as part of the board package. The following highlights were made:<br><br>Ambutrans has been beneficial for non-urgent patient transfers in the area. While the patient journeys are better, funding remains a challenge. The implementation of this program is thanks to C. Eady and a team. There will be a summary/program impact report at the end of the year. It is expected that non-urgent transfers will help with workload.<br><br>Concerns were raised regarding services not aligning with an anticipated population increase, the impact of the opiate crisis, the expected national shortage of paramedics (retirements, inability of colleges to prepare paramedics), along with disappointment around the proposed Beardmore station closure. It was noted that as projects progress, federal and provincial funding should be sought to help with growth; that the City of Thunder Bay has not yet approved the plans and that the current funding model requires the City to make decisions such as this on behalf of the region. A request for an update was made regarding the state of EMS buildings related to the issues flagged in the presentations, and a briefing note will be brought to the next board meeting. |                  |
| 3.2        | J. Dorval                       | <u>C. Schoales Ph.D. Research at NDMH, Motion #2</u><br>A presentation on Ph.D. research and collaborating with NDMH was shared. The study seeks information on how nurses develop their social norms/practice, with the results of the research to be shared once complete.<br>Motion: R. Beatty<br>Second: G. Mackenzie<br>Opposed: None<br><i>"That the Nipigon District Memorial Hospital will participate in the research study of Ms. Catherine Schoales."</i> CARRIED.   |                  |
| 3.3        | C. Eady                         | <u>Education: Guide to Good Governance, Chapter 7</u><br>Chapter 7 was presented with the board to consider the grooming of a new chair and an ad hoc recruitment committee.  |                  |
| 3.4        | J. Dorval                       | <u>Patient/Resident Story</u><br>A patient story was shared where a complaint was received and managed through the complaint process. It was determined through an investigation that social norms  |                  |

|            | Presenter              | Item & Purpose   | Expected Outcome |
|------------|------------------------|--|------------------|
|            |                        | around anger, grief are seen and interpreted differently across different generations of nurses. Support for the family was sought to help with a change.  |                  |
| <b>4.0</b> | <b>Meeting Minutes</b> |  |                  |
| 4.1        | K. Pristanski          | <u>NDMH Board Meeting Minutes, October 25, 2021, Motion #3</u><br>Motion: N. Gladun<br>Second: E. Wawia<br>Opposed: None<br><i>"That the minutes for the NDMH Board meeting for October 25, 2021 be accepted as presented."</i> CARRIED.   |                  |
| 4.3        | K. Pristanski          | <u>MAC Meeting Minutes, November 10, 2021, Motion #5</u><br>Motion: N. Gladun<br>Second: E. Wawia<br>Opposed: None<br><i>"That the minutes for the MAC Meeting for November 10, 2021 be accepted as presented."</i> CARRIED.   |                  |
| <b>5.0</b> | <b>Generative</b>      |  |                  |
| 5.1        | K. Pristanski          | <u>Board Chair Report, Regional Services Council Nov 4, 2021</u><br>The Chair noted that the council coming along nicely, and the next meeting would be in February (all board members are welcome to join since the education provided could be beneficial). All board members noted their interest with the board chair to confirm with the committee.   |                  |
| 5.2        | C. Eady                | <u>Senior Management Report, November 2021, Motion #6</u><br>A correction was made to advise that the transfer nurse start date is Dec 6 and not Dec 1. Dr. McEwan has seen 19 patients as part of a clinic with NDMH writing letters of support since northern health programs did not see Dr. McEwan as a specialist. The cost to our organisation was significant (would like nurse support), and it was added that she would like to return. HIRF (Health Infrastructure Renewal Fund) funding for the skylight must be spent by March 31, supplies are an issue but the company is on-site.<br>Motion: E. Rutherford<br>Second: R. Beatty<br>Opposed: None<br><i>"That the Senior Management Report for November 2021 be accepted as presented."</i> CARRIED. |                  |
| 5.3        | R. Dhaliwal            | <u>Chief of Staff Report, November 2021, Motion #7</u><br>The verbal report noted that physicians are still down-staffed, with support of locums; that the vaccine mandate to cover Northwestern Ontario should move forward as a unit instead of having separate mandates for physicians (noted that it would be difficult to exclude physicians in a vaccine mandate and require other staff to vaccinate.)<br>Motion: E. Wawia<br>Second: J. Foulds<br>Opposed: None<br><i>"That the Chief of Staff report for November 2021 be accepted as presented."</i> CARRIED.  |                  |
| 5.5        | C. Eady                | <u>Board Meeting Schedule for 2022/23</u><br>Board meetings will continue to be held on the last Monday of the month.  |                  |
| <b>6.0</b> | <b>Strategic</b>       |  |                  |
| 6.1        | C. Eady                | <u>Mandatory COVID-19 Vaccination, Joint Communication</u><br>Regional approach, ready to sign, then physicians varied (should not be excluded, along with NOSH). Waiting on TBRHSC to revisit a uniform letter, waiting on that.  |                  |

|            | Presenter                               | Item & Purpose  | Expected Outcome |
|------------|---|---|------------------|
| 6.2        | C. Eady                                 | <u>BRD 03, 04 Motion #9</u><br>A revised BRD 03 policy was presented that reflected by recent changes from OHA and updates to BRD 04 were also provided.<br>Motion: E. Wawia<br>Second: N. Gladun<br>Opposed: None<br><i>"That policy BRD 03 and 04 be accepted as presented."</i> CARRIED.   |                  |
| 6.3        | K. Pristanski                           | <u>Board Declaration of Compliance</u><br>The board declaration of compliance requires completion, directors are asked to return it to Janice in Administration. Signatures and dates required.   |                  |
| 6.4        | C. Eady                                 | <u>Individual Director Self-Assessment, update for 2021</u><br>The self evaluation is not yet available and once it is, the board will be advised.  |                  |
| <b>7.0</b> | <b>Fiduciary</b>                        |   |                  |
| 7.1        | L. Haskell                              | <u>Executive Compensation / QIP, Motion #10</u><br>With an increase in reporting incidences, the criteria requiring the of workplace violence was met, but zero tolerance of abuse/neglect were not met (achieved 96% of indicators).<br>Motion:<br>Second:<br>Opposed: None<br><i>"That the Board of Directors acknowledges that the targets related to the QIP of 2020/21 have been achieved at 96%, and that funds held back at 2% shall be returned to the CEO, and COS, and the funds held back at 1% shall be returned to the CNE and CFO at 96% of 1%."</i> CARRIED. |                  |
| <b>8.0</b> | <b>Adjournment to In-Camera Meeting</b> |   |                  |
| 8.1        | K. Pristanski                           | <u>Adjournment to In-Camera Meeting, Motion #11</u><br>Motion: J. Foulds<br>Second: N. Gladun<br>Opposed: None<br><i>"That the Board of Directors move to in-camera at 7:17 p.m."</i> CARRIED.  |                  |
| 8.2        | K. Pristanski                           | Return to regular board meeting   |                  |
| <b>9.0</b> | <b>Adjournment</b>                      |   |                  |
| 9.1        | K. Pristanski                           | <u>Meeting evaluation</u><br>The meeting evaluation can be returned to Admin via email or via call.   |                  |
| 9.2        | K. Pristanski                           | <u>Adjournment, next meeting on January 31, 2022 at 5:30 p.m., Motion #12</u><br>Motion: E. Rutherford<br>Second: N. Gladun<br>Opposed: None<br><i>"That the Board of Directors meeting be adjourned at 7:33 p.m."</i> CARRIED.   |                  |



K. Pristanski, Board Chair



C. Eady, Chief Executive Officer