

Listowel Wingham Hospitals Alliance Board of Directors Meeting

Wednesday, February 22, 2023

WebEx / WD Boardroom / LM Outpatient Building

PRESENT:	Jes Weber, Chair	Doug Miller	STAFF	Barb Major-Mcewan
	Conor O'Keefe	Dale Gilchrist		Becky Bloemberg
	Stacey Ash	Susan McLaughlin		Jade DeVries
	Rosalea Beyersbergen	Sheena Haines		
	Rosemary Rognvaldson	Rick Boisvert		
	Karl Ellis	Justine Leslie		
	Dr. T. Suggitt		PATIENT REP	
ABSENT:	Dr. D. Gateman		GUESTS:	
REGRETS:	Janny Pape	Claude Leroux	REGRETS:	
	Dr. S. Vander Klippe	Rhonda Sheeringa		

1. CALL TO ORDER and WELCOME

Chair J. Weber called the meeting to order at 1707 hours.

2. APPROVAL OF AGENDA AND CONSENT AGENDA

Moved by: S. Ash

Seconded by: D. Gilchrist

THAT the LWHA Board of Directors approves all motions formally passed in the Committee of the Whole meeting, the Agenda for Wednesday, February 22, 2023, and the following Consent Agenda reports be received as circulated.

Board of Directors Meeting Minutes of January 25, 2023

MOTION: CARRIED

3. DECLARATION OF CONFLICT OF INTEREST

There were no conflicts of interest declared.

4. **BOARD EDUCATION: OPEN FORUM DISCUSSION**

- An opportunity for an open discussion regarding operations, policies, funding, etc.
- In answer to a previously raised question, J. Leslie noted WDH receives a standard rate for each Episode of Care Outpatient physio patient, which is closely monitored against the program cost.
- J. Leslie confirmed that nursing staff desire one educational skills day per year rather than two; this unallocated education funding will be funneled into the Professional Nurse Lead program.
- The Clinical Extern program is being funded through the government and will fall under the professional practice portfolio.
- S. Haines asked if there is a way to see who is managed under each umbrella, and K. Ellis advised that an organizational chart showing the span of control for all leaders could be provided.
- K. Ellis advised that North America is seeing a significant lack of lab techs, with the majority of those being near retirement age. Northern and rural areas are seeing the greatest impact in this area.
- There is an attempt to switch the staffing model and increase education and scope of practice for

laboratory aides and nurses to alleviate reliance on lab techs. Lab staffing issues could be a risk going into the summer.

- Should an unexpected expense occur, LWHA could look into borrowing funds, or requesting additional funds if savings accounts and previously received Ministry funding cannot cover the cost.
- D. Miller asked if partnerships, such as that with London Supply, present a risk to the organization.
 K. Ellis noted that most hospitals operate through partnerships, and while there are many vulnerabilities in this type of operation, there is greater risk in making changes to another vendor.

5. NEW BUSINESS / DECISIONS AND REPORTS

5.1 VP of Clinical Services and Quality Report – J. Leslie

- Nurse staffing and scheduling is quite stable this year compared to last year. Will provide the Board with an update in March if any summer staffing risks are present.
- There are barriers preventing some area oncology patients from receiving chemo at WDH, one being low referrals from LRCP. LRCP will be reviewing their cancer care program as they are dealing with waitlists and overcapacity.
- C. O'Keefe asked if the organization is seeing staffing issues due to low morale. J. Leslie advised that ED closures lessen pressure and recognize the limits of our staff.
- ED closure risks lie in last minute calls of absence rather than staffing shortages.
- J. Leslie confirmed that staff turnover is low, however, the struggle is in recruiting for temporary positions to cover instances such as maternity leaves.
- ONA is in the middle of central bargaining to negotiate wages. ONA members will be picketing outside LMH on February 23rd at 12p.m. for one hour. Staff have noted that they feel supported by the organization, however, this offers an opportunity to present this issue to the public.

5.2 President and CEO Report – K. Ellis

- Work is underway on the MRI project. The Wingham Foundation is doing a feasibility study on supporting a campaign for MRI and CT for the hospital.
- Bill 124 is proving to be complex for labour relations due to the reopener clauses which allow for negotiations on wages; complicated to account for outcomes financially and legally.
- C. O'Keefe noted that increases in funding resulting from provincial and federal negotiations may not affect the organization for quite some time. K. Ellis agreed that any potential funding increases will likely trickle down over time as targeted investments within the system.

5.3 Briefing Note: Huron Perth Hospitals Planning – K. Ellis

- K. Ellis wanted to gauge the Board's interest in proceeding with discussions of single Master plan with all Huron Perth hospitals. While this type of planning has its merits, it also has risks. All 8 hospitals in Huron and Perth are at different stages of development, and a plan such as this could mean 20-years before any project completion. LWHA will be asked in March if the organization is interested in moving forward with a shared plan between Huron Perth Hospitals.
- R. Boisvert asked if there would be value, or anything to be learned, by participating in this. K. Ellis noted that planning a health system locally as well as regionally will be a benefit for citizens in ensuring they receive the healthcare they deserve.
- R. Beyersbergen noted that, while a plan can be developed locally, it does not guarantee a benefit for the community. J. Leslie added that having a health system as a County does not necessarily mean members of the community will be receiving health care in their County.
- S. McLaughlin asked how the organization can build resilience in both hospitals. Dr. Suggitt advised that keeping strong OB and surgical programs build resiliency.

- R. Boisvert noted the value in being a part of the conversation before politics force the conversation.
- K. Ellis confirmed that LWHA will participate in the discussions amongst Huron Perth Hospitals regarding a joint plan; the organization will continue to ensure that healthcare services locally are maintained, and will still be moving forward with the Listowel proposal.

5.4 Move to Closed In-Camera Session

6. CLOSED IN CAMERA SESSION

The in-camera minutes are under separate cover.

Moved by: S. Ash

Seconded by: S. McLaughlin

That the LWHA Board of Directors meeting move to 'In-Camera' session and that staff remain.

MOTION: CARRIED

7.	BOARD RECOGNITION OF QUALITY IMPROVEMENT		
•	For anyone to note instances that reassure the Board that the organization is providing quality care,		
	or to voice concerns.		
•	K. Ellis noted the commitment of HR, Finance and Nursing staff in posting for full-time staffing		
	positions for the benefit of the alliance when budgeted positions don't always exist.		
•	S. McLaughlin thanked the team for doing a great job.		
	ONTARIO HOSPITAL ASSOCIATION		
Healt	h System Update – Prime Minister Trudeau Proposes New Funding for Health Care		
•	Updating Board on correspondences from OHA.		
<u>Sustai</u>	ining Ontario's Small Rural and/or Northern Hospitals		
•	No comments.		
8.	CORRESPONDENCE		
8.1 Health811			
•	Telehealth replacement that includes a chat line in addition to a 1-800 number.		
8.2 No	orth Huron ROMA Delegation Letter		
•	Making Board aware of a pitch made to the Ministry regarding daycare funding allowances wherein		
	LWHA's was noted.		
9.	COMMUNICATION REQUIRED FOLLOWING BOARD MEETING		
•	A summary of this meeting will be emailed.		
•			
10.	DATE OF NEXT MEETING		
	 Wednesday, March 29, 2023 		
	 WebEx / WDH Board Room / LM Outpatient Building 		
	 1700 Hours 		
	 Board Retreat: April 12, 2023 at 1700 		

11.	MEETING EFFECTIVENESS EVALUATION		
No comments.			
12.	BOARD ONLY		
13.	ADJOURNMENT		
Moved by: Seconded by:			
THAT there being no further business the LWHA Board of Directors meeting be adjourned at 1830 hours.			

Jes Weber, Chair

Karl Ellis, Secretary