



# Listowel Wingham Hospitals Alliance Board of Directors Meeting Minutes

Wednesday, February 26, 2025  
WDH Boardroom / Microsoft Teams

<b>PRESENT</b>	Stacey Ash, Chair	Kailey Fallis	<b>STAFF PRESENT</b>	Becky Bloemberg
	Doug Miller	Sheena Haines		Rhonda Scheeringa
	Jessica Weber	Jean Montgomery		Jade DeVries
	Monica Dey	Mark Foxtton		
	Conor O’Keefe	Rosalea Beyersbergen		
	Dr. Vander Klippe	Dr. Suggitt		
	Esther Millar			
			<b>PATIENT REP</b>	Rosemary Rognvaldson
<b>ABSENT</b>			<b>GUESTS</b>	
<b>REGRETS</b>	Susan McLaughlin	Justine Leslie	<b>REGRETS</b>	
	Derek Mendez			

## 1. CALL TO ORDER

Chair S. Ash called the Board of Directors meeting to order at 1742 hours.

## 2. APPROVAL OF AGENDA and CONSENT AGENDA

**Moved by: Doug Miller**

**Seconded by: Kailey Fallis**

**THAT** the LWHA Board of Directors approves all motions formally passed in the Committee of the Whole meeting, the Agenda for Wednesday, February 26, 2025, and the following Consent Agenda reports be received as circulated:

- ♦ Board of Directors Meeting Minutes of January 29, 2025
- ♦ Professional Staff Credentialing Policy

**MOTION: CARRIED**

## 3. DECLARATION OF CONFLICT OF INTEREST

- There were no conflicts of interest declared.

## 4. BOARD EDUCATION: Laboratory Services – Brittney, King, Lab Supervisor

- Brittney King educated the Board on the laboratory department’s services and the role they play in healthcare. Medical Laboratory Assistants (MLA) perform quality controls and draw blood; Medical Laboratory Technologists (MLT) support with blood banking and analysis.
- Successful quality improvement initiatives in the lab include increasing moral amongst MLT staff by implementing flexible scheduling, onboarding of chemistry analyzers, and recruitment of two MLT students by offering tuition reimbursement. Quality improvement initiatives currently underway include review of transfusion requests and LWHA’s massive hemorrhage protocol, and obtaining “Using Blood Wiseley” designation from Canadian Blood Services.
- A 12-hour MLT staffing model is being implemented at LMH, which will eliminate scheduled on-call hours for staff. Without an MLT on-site, WDH remains unable to cross match blood after 2000.

## **5. OPEN SESSION: NEW BUSINESS / DECISIONS AND REPORTS**

### **5.1 WDH Foundation Report – N. Duquette-Jutzi**

- The Executive Director provided an overview of the WDH Foundation campaigns in 2024. S. Ash congratulated the WDH Foundation on the successful CT campaign; R. Rognvaldson expressed appreciation for the efficiency with which the WDH Foundation processes donations.

### **5.2 VP of Clinical Services and Quality / CNE Report – J. Leslie**

- Success of the unattached patient clinic was highlighted.

### **5.3 President and CEO Report – E. Millar**

- The Ministry continues toward implementing privatized, standalone clinics for select procedures; these clinics will operate weekday hours at increased rates of pay, which will negatively impact small hospitals' ability to recruit specialists. Although hospitals in the South West have unused surgical capacity, the Ministry will not provide funding to support the work.
- LMH recently recruited hospitalist and emergency department locums; LWHA extended an offer to a UK physician interested in emergency department, surgical assist and anesthesia work.
- A Memorandum of Understanding between the Recruitment Committees and stakeholders has been drafted. The Housing Subcommittee is actively seeking additional housing for medical learners; North Perth expressed a willingness to enter into a lease agreement on behalf of LMH. C. O'Keefe commended LWHA on the recruitment efforts and positive momentum.

### **5.4 Ontario Hospital Association Board Self-Assessment Survey Results – E. Millar**

- Based on the Self-Assessment survey results, the Board feels well informed and believes there to be a good mix of skills amongst directors; opportunities to improve the effectiveness of hybrid meetings may need to be discussed. Lower scoring areas on the survey include CEO development and succession, Chief of Staffs' annual goals and performance, and Board orientation, had been previously identified by the Board, and work is underway to fill the gaps.

### **5.5 HSO Governing Body Assessment Survey Results – J. Houston**

- An overview of the Governing Body Assessment results was shared; indicated areas for improvement include Board orientation, education on equity, diversity, anti-racism (EIDA-R) and systemic racism, and engaging with external stakeholders. J. Houston will confirm which Accreditation standard the constructive feedback question refers to; Board members were encouraged to raise concerns or discussion topics with the Chair as they arise. Accreditation Canada requires the Board to implement one action item based on the survey results.
- Suggested improvements to LWHA's Board orientation process included tailoring orientation around directors' experiences, dividing orientation into two parts, and guidance for mentors; the agenda structure and meeting flow should be reviewed at the first meeting of each Board year.
- To improve the organization's communication with external stakeholders and social media presence, LWHA is seeking to hire or outsource a communications position; the Board was encouraged to be involved in the EIDA-R and systemic racism education being provided for staff and physicians as part of LWHA's Strategic Plan refresh.
- LWHA's Accreditation survey is scheduled for November 24-28, 2025; a cheat sheet will be shared with the Board in September, and a date for the Board's Governance Accreditation meeting will be shared once confirmed.

**5.6 Set 2025-2026 Goals and Objectives of the Board – S. Ash**

- The Board orientation process will be revised based on suggestions, and the Board will work in collaboration with staff and leadership to receive EIDA-R education. The Board will also utilize and regularly review it’s dashboards to monitor the organization’s strategic progress.

**5.7 Board Meeting Evaluation Survey Results – S. Ash**

- The Board consistently notes the education sessions to be interesting and valuable; to improve the effectiveness of hybrid meetings, Board members are to begin stating their name so everyone is aware of who is speaking.

**5.8 Hospital Service Accountability Agreements 2025-2026: Notice of Extension – B. Bloemberg**

- Both sites’ Hospital Service Accountability Agreements, inclusive of balanced budget waivers, have been extended until March 31, 2026; Ontario Health has advised no decisions on the upcoming fiscal year will be made until following the election.

**Moved by: Jessica Weber**

**Seconded by: Kailey Fallis**

**THAT** the LWHA Board of Directors approves the amendment of the Hospital Service Accountability Agreement between Ontario Health and the Listowel Memorial Hospital as set out in the Extending Letter with effect on March 31, 2025.

**MOTION: CARRIED**

**Moved by: Sheena Haines**

**Seconded by: Jean Montgomery**

**THAT** the LWHA Board of Directors approves the amendment of the Hospital Service Accountability Agreement between Ontario Health and the Wingham and District Hospital as set out in the Extending Letter with effect on March 31, 2025.

**MOTION: CARRIED**

**5.9 Closed In-Camera Session**

**Moved by: Jessica Weber**

**Seconded by: Sheena Haines**

**THAT** the LWHA Board of Directors meeting move to ‘In-Camera’ session and that staff remain.

**MOTION: CARRIED**

**6. CLOSED IN-CAMERA SESSION**

- The in-camera minutes are under separate cover.

**7. BOARD RECOGNITION OF QUALITY IMPROVEMENT**

- S. Ash noted the information being received is appreciated.
- Dr. Vander Klippe expressed appreciation for the WDH Foundation, and the work being done.

**8. ONTARIO HOSPITAL ASSOCIATION**

**8.1 OHA Population Health: Anchor Institutions**

**8.2 OHA Ontario Election: Political Parties’ Campaign Health Priorities**

- Provided information purposes.

