



Regular Meeting of the Board of Directors

Date: February 9, 2023	Location: Virtual	Chairperson: Brent Lundy	Admin Support: Lesley Hollis
Time Meeting Called to Order: 5:08 p.m.		Time Meeting Adjourned: 7:00 p.m.	
Present:			
Balajadia, Kaye: VP of Patient Services and CNO Boutette, Rita LWDH Director Brown, Nicole: LWDH Director Diamond, Jaki: LWDH Director Doerksen, Lisa: LWDH Director Haney, Logan: LWDH Director Johanson, Nancy: LWDH Director Kissick, Charlene: LWDH Brand Management Lead		Kowal, Dr. Melanie: President of Medical Staff Lundy, Brent: LWDH Chairperson of the Board Moore, Dr. Sean: Chief of Staff O’Flaherty, Cheryl: VP of Operations and CFO Peterson, Wendy: LWDH Director Racette, Ray President and CEO Richardson, Fred: LWDH Vice Chair Rizk, Dr. Jean-Marc: Vice President of Medical Staff	
Regrets/Absent:			
Robert Bulman, LWDH Director		Charlene Chapman, LWDH Director	

AGENDA ITEMS	DISCUSSION	ACTION
1. Call to Order	B. Lundy, Chair, called the meeting to order at 5:08 p.m.	Called to Order
1.1. Attendance and Welcome	B. Lundy welcomed everyone to the meeting.	Information
1.2. Acknowledgement of Traditional Lands	The traditional lands of the Anishinaabe of Treaty Three and the Métis Nation were acknowledged.	
1.3. Approval of Agenda	Moved by F. Richardson and seconded by N. Johanson that the regular meeting agenda be approved as circulated.	Motion # 23/2/1
1.4. Declaration of Conflict of Interest	None.	None Declared
2. Consent Agenda	Moved by N. Brown and seconded by W. Peterson that the Consent Agenda be approved as circulated with (2.5) VP Operations and CFO Report pulled for discussion (agenda Item 5.5) 2.1 Board of Directors: 12.08.22 (draft) 2.2 Governance and Nominating minutes 01.31.23 (draft) 2.3 President and CEO Report 2.4 Chief of Staff Report 2.5 VP Operations and CFO Report 2.6 VP Patient Services and CNO Report 2.7 Briefing Note – Regional Services Council of the Board 01.19.23 2.8 Regional Transformation Integration – Board Level Dashboard 2.9 Memo - Clinical Lab Service Delivery issued to all Regional Labs 02.09.23 <u>and</u> letter to B, Kytor re: new KRRRLP Laboratory Model	Motion # 23/2/2
3. Education		
3.1. 90 Day Reflection & Vision for Patient Care	<ul style="list-style-type: none"> • Kaye Balajadia, VP Patient Services and CNO presented on 90 Day Reflection & Vision for Patient Care. • Q&A followed. 	Information
4. Strategy Items		
4.1. <u>Quality and Patient Safety:</u> 4.1.1. LWDH Staffing Crisis	<ul style="list-style-type: none"> • A briefing note was circulated. • Our current vacant rate is 20% organization wide. • Some units, including Emergency, are relying on agency nurse to stay operational. • While we are able to provide short-term management of the staffing crisis, we realize the solution is long-term. • We continue with recruitment efforts, building relationships with local colleges, investing in training supports for staff, and other retention initiatives to encourage staff to stay with the LWDH. • We have also committed to assess our staffing models & delivery of care to look for opportunities. • All hospital and professional staff are doing a tremendous job and are working extremely hard. 	Information



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4.1.2. ED Closures	<ul style="list-style-type: none"> A briefing note was circulated. R. Racette reported about a 45% decrease of our ED physician pool. R. Racette reported our local pool of physicians have picked up 80% of the vacant shifts. Government metrics refer to actual department closures for their planning, but they do not consider the overall impact and toll on local physicians. One challenge we face is we have no guarantee that the financial incentives rolled out during COVID will be carried over. These incentives were helpful in filling shifts. S. Moore reiterated that even with incentives available, the fact remains that a physician from another area working a locum shift, (e.g., Southern Ontario) will make double the amount that a local physician would make for the same shift. if we do not have confirmation that incentives are carried over by the fiscal year end, R. Racette recommends that the Board prepare to advocate. F. Richardson and R. Boutette also recommend regional board support. 	Information
5. Discussion Items 5.1. Strategic Planning Status	<ul style="list-style-type: none"> The Request for Proposals have been issued; the deadline to submit is February 10, 2023. One company has withdrawn their application. R. Racette requested 2 Board directors to assist the working group with the review and recommendation. (N. Johanson and F. Richardson) Our goal is to present a recommendation report for the March board meeting. 	In progress
5.2. LWDH Ethics Committee Update	<ul style="list-style-type: none"> R. Racette updated on the development of the Ethics Committee. Ideally, there would be one (1) board director on the Committee. (L. Doerksen & L. Haney) The committee will focus on ethical issues on the care and management side of the hospital. One goal is to ensure we have a solid ethical decision making framework for staff. Anticipating 2-3 meetings before Accreditation,, with startup meeting in April. 	Information
5.3. All Nations Hospital update	<ul style="list-style-type: none"> Have been finalizing the Stage 2 submission over the last couple months. Additional work was required with our community partners on our external buildings. We met with the project manager to determine alignment on the submission. Approval of Stage 2 is time sensitive, as we want to submit in time to make the Ministry's yearly planning cycle. If we miss the Ministry's planning cycle, it could potentially be another year before being recommended to Treasury Board, who then will give a recommendation to fund the project. A Board to Board meeting with KCA has been scheduled for Thursday, March 2nd for Stage 2 approval from the Boards. The hospital, along with our legal team, have met with the land owners of the recommended site to work on a letter of intent for acquisition. At this point in the project, we are not allowed to purchase land, but we are required to have a guarantee that the land is available to us for purchase. Also working on developing local share planning. Our local share costs have increased significantly since the initial Stage 1 submission. 	Information



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	<ul style="list-style-type: none"> A meeting is scheduled in Ottawa on March 8th with two (2) Federal ministers. Unfortunately, public announcements regarding the recommended location are prohibited until we are given approval by the Ministry. 	
5.4. Cultural Safety Training Update	<ul style="list-style-type: none"> R. Racette provided a brief history on our initial mandatory training that was implemented in 2019 in partnership with Seven Generations Education Institute. This training primarily focused on Indigenous history and the impact on Indigenous peoples. Unfortunately, when the pandemic started, training stalled as the training is most effective when presented in person. <p><u>5.4.1 San'Yas Indigenous Cultural Training</u></p> <ul style="list-style-type: none"> After reviewing other types of training, we are proposing to utilize the San'Yas Indigenous Cultural Training in the interim, as it is anticipated it will take up to 2 years for KCA to develop their training program. Each organization will determine who the training will be mandatory for. Anticipating 200 seats will be purchased between the 2 organizations. Investigating opportunities for board members to attend. We are also hopeful that the new Cultural Services manager is able to provide education and support to staff on an ongoing basis. <p><u>5.4.2 Cultural Competency in Kenora Proposal KCA/GCT3</u></p> <ul style="list-style-type: none"> We supported a submission to apply for research to develop an Anishinaabe specific training tool. We are pleased to say that GCT3 and KCA were approved for 1 million dollars in funding over 2 years. A media announcement was circulated last week. This new cultural training being will benefit our staff as there will be focus on the care of the patient. Some of the funding has to be utilized by fiscal year end. This training would be in partnership with KCA to interim train the staff of both organizations with San'Yas Indigenous Cultural Training. <p><u>5.4.3 Funding Approval Indigenous Services Canada</u></p> <ul style="list-style-type: none"> Letter to Indigenous Services Canada circulated. <p><u>5.4.4 Joint Media Statement KCA and LWDH</u></p> <ul style="list-style-type: none"> Joint Media Statement circulated. 	Information
5.5. VP Operations and CFO Report	<ul style="list-style-type: none"> The VP Operations and CFO Report was pulled from the consent agenda to discuss the projected deficit. C. O'Flaherty detailed on the surgical services expansion, and how we have obtained funding that was never available before. One of our largest costs to the hospital is agency nurses. It was noted that financial burdens to hospitals is felt region wide. 	Information
6. Decision Items		
6.1. Professional Staff Privileges	<ul style="list-style-type: none"> Dr. S. Moore provided a brief update on the professional staff privileges presented for approval. Motioned by L. Haney and seconded by R. Boutette for approval of regional staff ordering and professional staff privileges as circulated. 	Motion # 23/2/3
6.2. CEO External Evaluation Tool	<ul style="list-style-type: none"> Motioned by F. Richardson and seconded by N. Brown for the approval of the revised CEO External Evaluation Tool. This tool will be circulated to community partners for a 2 week period. 	Motion # 23/2/4



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	<ul style="list-style-type: none"> Results will be circulated along with the internal results after review by the Chairperson and other appointed directors. 	
6.3. Future meetings: virtual vs. in person	<ul style="list-style-type: none"> Noted that COVID-19 will eventually become endemic and a part of our daily lives. Discussion ensued on the benefits vs. risks of in person meetings. We are restricted to follow Ministry guidelines and have capacity limits in hospital meeting space. Directors liked the idea of in person meetings 2 – 3 times a year and remain virtual otherwise. Will consider in person board meetings in the Fall. 	Discussion
7. Next Meeting	<ul style="list-style-type: none"> Thursday, March 9, 2022, at 5:00 p.m. via Microsoft Teams. 	Information
8. Adjournment	Moved by R. Boutette that the regular meeting be adjourned at 7:00 p.m.	Adjourned

Chair

President & CEO