SIOUX LOOKOUT MENO YA WIN HEALTH CENTRE BOARD OF DIRECTORS MEETING

held Thursday, December 12, 2019 at 0900 hours in Boardroom A and B

Present: Ms. Sadie Maxwell (chair), Mr. Terry Jewell, Mr. James Cutfeet, Mr. Joe Meekis, Ms.

Beatrice Anderson, Mr. John McKay, Mr. Knowles McGill, Ms. Joyce Timpson, Mr. Roy Spence, Ms. Teri Fiddler, Ms. Heather Lee, Mr. Dean Osmond, Ms. Carole Slater (recorder)

Regrets: Ms. Cindy Hunt, Mr. Leroy Quoquat, Mr. John Cutfeet, Ms. Brenda Fox, Dr. Barbara

Russell-Mahoney, Ms. Patricia Keesickquayash, Ms. Samantha Brooks, Mr. Douglas

Semple, Ms. Renee Southwind

Guests: Ovide Mercredi, Lauren King, Natalie Hansen

Opening Prayer

The meeting was called to order at 0910 hours. The opening prayer was given by Ms. Teri Fiddler.

Patient Story

Ms. Lee shared a patient story that will see departmental improvements in ER from patient surveys feedback.

Directors Conflict of Interest Disclosure

There was no conflict of interest declared.

1. Approval of the Agenda

The agenda was reviewed and approved as distributed.

MOTION #38/19 it was moved by Ms. Joyce Timpson that the board of directors approve the

agenda of the regular meeting held December 12, 2019 as distributed.

Seconded by Mr. John McKay. CARRIED

2. NAN Health Transformation

- Mr. Ovide Mercredi provided an update on the NAN Health Transformation work.
- The Charter of Relationship Principles signed by the Government of Canada, the Government of Ontario and NAN is a visionary document to change the health system to make it more responsive to the needs of people in the NAN territory; which comprises 49 communities.
- Their agenda consists of looking at immediate needs with a team of people assigned to respond to those needs. The first step is community engagement with Chiefs and Councils and this has been ongoing for the past two years. The team is doing a review of what the government obligations are and where are the gaps and inequities.
- A team of five lawyers is working on Indigenous laws and which law will cover the new strategies. A lot of government policies are not adequate for communities and we continue to hear that people are not treated right. The conversation was started at the senior level of bureaucracy.

- The goal is to bring services closer to home; i.e., long-term care, hospital care, ambulance and paramedic services. Conversations have started with the Association of Paramedics.
- Conversations have also started with both the federal and provincial governments to discuss hospitals in the north; including infrastructure and services. A meeting is taking place today with SLFNHA and CCOH. SLMHC has been invited to join in the discussion.
- Mr. Mercredi sits on the board of one of Winnipeg hospitals who is looking at integrating Indigenous practices of healing.
- The NAN Transformation mandate is to not cooperate with the Ford government plan. NAN feels they are not closing the gaps but rather reorganizing what is already there and this is not a solution they are looking for.
- Silos also exists within NAN as well and they need to break those; i.e., SLFNHA, Tribal Councils, etc.
- NAN already has multiple partnerships and they will increase them as they move along with the process. They will ask SLMHC to take part in the process if needed. The common purpose is to get the best services for the people of the north.
- Some communities have already taken some steps to improve health in the north so the Health Transformation is not starting from scratch.
- Mr. McGill asked how they would like to see paramedic services in the north. Mr. Mercredi noted that Attawapiskat and Moosonee have them operate out of their hospitals, paramedics have their own units and equipment and have water transportation to care for patients. They have over 100 people working in that group. ORNGE does not have this type of services. From NAN conversations with paramedic services, they are very keen in putting a proposal/plan together as to what this would look like.
- Ms. Lee noted that we have at least 50% of our patients in hospital waiting for long-term care placement and that any support from NAN to help us move this along would be greatly appreciated.
- Mr. Mercredi mentioned that we should have a look at how many patients at the hospital could be taken care of at home and what type of services they would need. This is something that should be pursued right away. If we can come up with a plan for ALC patients, NAN can make this part of their planning. He would welcome a meeting with Ms. Lee in the new year to further discuss our needs.
- Ms. Timpson inquired about PSW requirements and training and what we can do to train people in the north without them having to leave their community. Ms. Maxwell noted that about 10 years ago, Windigo provided PSW training by modules in the community; however, there is no funding to do this now. There is nobody to take over those who were trained and now retiring, there is no continuity.
- Mr. Cutfeet noted that the purpose for what the hospital was created has now become overcrowded. The number of people accessing services have increased significantly and we might not have enough space to address the needs of the patients. There has been a significant increase in Form 1 patients. There are at least five Form 1 patients at any time in ER and proper care for those patients is not available. It has become increasingly difficult to find a bed for them in either Kenora or Thunder Bay.
- Can we send patients out of province where they can be looked after properly? What is NAN proposing for mental health and Form 1 patients?
- Mr. Mercredi reported that mental health is going to be phase two in the charter moving forward. However, this is something that will need to be addressed sooner rather than later.
- SLFNHA is advertising for some type of mental health support but this does not address immediate needs. We need to determine where is the best place to provide those services.
- SLMHC sees a lot of youth with mental health issues; adults with addictions issues; patients with aggression issues. We keep adding more resources to keep everyone safe. We have met to discuss Form 1 beds at SLMHC; but again this does not address the immediate issue.

- Mr. McKay noted that 10 years ago we were told that type 2 diabetes would be an issue. We know this to be true but a plan was never put in place to address it.
- It was suggested to do an RFP for a review of mental health services and an environmental scan and use that work to put a plan in place. We could invite whoever is interested in participating.

Board Debrief after the Presentation

- Ms. Lee noted that from SLMHC perspective she would like to hear where the board would see the hospital fit in. We are having a service planning session in the new year with the senior team, directors and Chiefs of Department. As we already see a shift in service provision with the Primary Care Team, what is the board vision for SLMHC future.
- Mr. Spence noted that we should look at the data now and compare with data of 10-20 years ago to determine what the challenges are what we need to do moving forward.
- Ms. Maxwell mentioned that it wouldn't hurt participating with NAN. It would be important for the hospital to find out what they can help us with. NAN has a lot of work to do. They are still at the advocacy and law making stage. Because their work affects the hospital, it would benefit us to participate in the process to figure out whose role is what; i.e., SLMHC, Tribal Councils, etc., and where we fit in with the work that each of us is doing.
- Ms. Anderson mentioned that long-term care and mental health are priorities for her and more advocacy might get things done sooner. To keep sending patients out of their community does not necessarily help them.
- Ms. Lee mentioned that because we are provincially funded, we are being put in a difficult position as NAN is not supporting the Ontario Health Team. We have to figure out how to manage these initiatives.
- Mr. Meekis noted that what we currently have does not work for us anymore so we need to move forward. This is a big transition as to what health care used to be. Some things are almost impossible to change; i.e. government policies. It will take time and commitment to make those changes for the people of the north. We need to figure out how the board and SLMHC fit into this transition.
- Mr. Jewell noted that SLMHC funding falls under the provincial government. We need NAN to support us in what we do; but they also need to be reminded where our funding comes from.
- It was suggested to reopen the 4 Party Table and instead of the town replace with SLMHC board.
- Ms. Lee noted that we need to figure out what type of services we will be providing in the next 3 to 5 years. We have to start planning now as our services are shifting to the Primary Care Team.
- It was agreed that a 30 minutes' conversation will be dedicated to this topic on the January board meeting agenda. In the meantime, all were reminded to read the 4 Party agreement.

3. Approval of the Minutes of Meeting held November 14, 2019

The minutes of the regular meeting held November 14, 2019 were reviewed and approved as distributed.

MOTION #39/19

it was moved by Mr. Terry Jewell that the board of directors approve the minutes of the November 14, 2019 regular board meeting as distributed. Seconded by Ms. Joyce Timpson. **CARRIED**

Ms. Lee reported that Mayor Lawrance has another meeting with the Ministry in January and will advocate on our behalf for LTC beds. He will invite us to participate once he is notified of the date.

Ms. Lee reported that her appointment to the SLRPSI board has been approved; however, they did not approve the appointment of a delegate. She noted that SLRPSI has agreed to sign the new agreement for the clinic lease.

Ms. Lee provided a short update on the site visits by two group from Manitoba. They were only here to see how our traditional programs are set up. She noted that we have not heard back from Slate Falls regarding a community visit.

4. Business Arising from the Minutes

4.1 N/A

5. **Standing Agenda Items**

5.1 <u>Financial Update</u>

• There is not much to report since our last meeting. We are forecasting a slight surplus in Fund 1 at year end and expect to balance Fund 2.

6. **New Business**

6.1 Approval of Privileges and Credentialing as per MAC meeting November 25, 2019

• Privileges for physicians and allied health professionals were reviewed.

MOTION #40/19

It was moved by Mr. James Cutfeet that the Board of Directors grant privileges to the physicians and allied health professionals listed in the November 25, 2019 minutes of the Medical Advisory Committee. Seconded by Ms. Joyce Timpson. **CARRIED**

6.2 Approval of New Chief of Department

• A motion to approve the appointment of Dr. Benjamin Langer as Chief of Ambulatory Care Services was presented.

MOTION #41/19

It was moved by Mr. John McKay that the Board of Directors approve the appointment of Dr. Benjamin Langer to the position of Chief of Ambulatory Care Services for a period of three years as per SLMHC Professional Staff by-laws. Seconded by Mr. James Cutfeet. **CARRIED**

6.3 Meetings Schedule for 2020

• Dates for the 2020 board meetings were presented. Meeting requests will go out to everyone's calendars.

7. **Round Table**

Ms. Heather Lee

• Ms. Lee will be on vacation for all of February and early March.

• She reported that a discussion took place at the Elders Council last week regarding their role. They currently meet twice a year. It was decided that moving forward some of the members will be invited to attend board meetings or will meet once a year if there are any issues to discuss.

Mr. Knowles McGill

• Mr. McGill reported that two retired physicians were presented with the Chris Cromarty Award at the SLMHC Christmas party. This is a very prestigious award to receive. They were both very touched. It was jointly presented by Mr. Osmond and Dr. Russell-Mahoney.

Ms. Sadie Maxwell

- Ms. Maxwell thanked the board for their support and direction over the past year. Their support means a lot to her.
- 8. Minutes of Committees for Information
- 8.1 Quality and Patient Safety Committee minutes of the November 13, 2019 meeting
 - The minutes of the meeting were enclosed for information.
- 8.2 Resources Utilization Committee minutes of the November 19, 2019 meeting
 - The minutes of the meeting were enclosed for information.
- 8.2 <u>Medical Advisory Committee minutes of the November 25, 2019 meeting</u>
 - The minutes of the meeting were enclosed for information.
- 9. **In-Camera Session**

There was no in-camera session.

10. Next Meeting/Closing Prayer

The closing prayer was given by Mr. Joe Meekis.

The meeting was adjourned at 1140 hours. The next meeting will take place on Thursday, January 30, 2020 at 9:00 am.

MOTION #42/19

It was moved by Mr. Terry Jewell that, there being no further business, the meeting be adjourned at 1140 hours. Seconded by Mr. James Cutfeet.

CARRIED

H. Lee, Secretary	S. Maxwell, Chair

CS

January 7/2020