# SIOUX LOOKOUT MENO YA WIN HEALTH CENTRE BOARD OF DIRECTORS MEETING

# held Thursday, April 28, 2022 at 0900 hours via Zoom/Boardroom A & B MINUTES

**Present**: Ms. Sadie Maxwell (chair), Mr. Knowles McGill, Ms. Heather Lee, Mr. Dean Osmond,

Ms. Beatrice Anderson, Ms. Kathy Loon, Ms. Christine Hoey, Mr. Terry Jewell, Mr. Kevin Holder, Ms. Patricia Keesickquayash, Mr. Dennis Leney, Mr. Douglas Semple, Dr.

Laurel Laakso, Ms. Teri Fiddler, Ms. Selena Froude (recorder)

**Regrets**: Mr. Joe Meekis, Mr. Roy Spence, Dr. Dan Shilensky, Ms. Joyce Timpson

**Guest**: Ms. Renee Southwind

The meeting was called to order at 0915 hours. Ms. Maxwell welcomed everyone to the meeting. Ms. Loon opened the meeting with a prayer.

### **Directors Conflict of Interest Disclosure**

Dr. Laurel Laakso declared a conflict of interest for agenda item 3.6. She will recuse herself.

## 1. **Approval of the Agenda**

The agenda was reviewed and approved as distributed.

MOTION #06/22 it was moved by Mr. Terry Jewell that the Board of Directors approve the

agenda of the meeting held April 28, 2022 as distributed. Seconded by

Mr. Dennis Leney. CARRIED

2. Approval of the Minutes of the in-camera Board Meeting held January 27, 2022.

The minutes of the in-camera Board meeting held January 27, 2022 was reviewed and approved as corrected.

MOTION #07/22 it was moved by Mr. Knowles McGill that the Board of Directors approve

the minutes of the in-camera Board meeting held January 27, 2022 as

corrected. Seconded by Mr. Terry Jewell. CARRIED

#### 3. **New Business**

## 3.1 Appointment of Quality and Patient Safety Committee Chairperson

Ms. Lee noted we are without a chair for the Quality and Patient Safety Committee. Ms.
 Beatrice Anderson has informed the Board that she is unable to fulfill her role as chair person.
 Mr. Dennis Leney volunteered to be the chair person.

MOTION #08/22 it was moved by Mr. Terry Jewell that the Board of Directors approve the

appointment of Mr. Dennis Leney as the chairperson of the Quality and Patient Safety Committee. Seconded by Ms. Sadie Maxwell. **CARRIED** 

# 3.2 Approval of SLMHC Operating Budget for 2022/23

• The SLMHC Operating Budget for 2022/23 was presented. RUC has reviewed the operating budget and is recommending the Board approve. We are showing a deficit of \$300,000.

#### **MOTION #09/22**

it was moved by Mr. Knowles McGill that the Board of Directors approve the Operating Budget for 2022/23 as presented and as recommended by the Resources Utilization Committee (RUC). Seconded by Ms. Christine Hoey. **CARRIED** 

# 3.3 Approval of SLMHC Capital Budget for 2022/23

- The SLMHC Capital Budget for 2022/23 was presented. RUC has reviewed and recommending the Board approve. The budget is an estimate of capital spending annually. This year's budget total funding of \$1.2 million and budget spending of \$1.5 million with a deficit of \$300,000.
- Mr. Holder noted we have a five year capital plan. We try to estimate what our equipment replacement needs are. Much of our capital budget is funded by the Foundation.
- Ms. Hoey noted the Foundation is planning to raise funds in 2022/23 to continue to contribute.

### **MOTION #10/22**

it was moved by Mr. Knowles McGill that the Board of Directors approve the Capital Budget for 2022/23 as presented and as recommended by the Resources Utilization Committee (RUC). Seconded by Mr. Dennis Leney. **CARRIED** 

## 3.4 Approval of Appointment of Chief of Department for Emergency Medicine

### **MOTION #11/22**

it was moved by Ms. Sadie Maxwell that the Board of Directors approve the appointment of Dr. John Glenn to the Chief of Department for Emergency Medicine position for a term as listed in the Professional Staff by-laws. Seconded by Ms. Christine Hoey. **CARRIED** 

## 3.5 Approval of Privileges and Credentialing as per MAC meeting March 17, 2022

• Privileges for physicians and allied health professionals were reviewed.

### **MOTION #12/22**

it was moved by Mr. Dennis Leney that the Board of Directors grant privileges to the physicians and allied health professionals listed and approved at the March 17, 2022 meeting of the Medical Advisory Committee. Seconded by Mr. Terry Jewell. **CARRIED** 

### 3.6 Chief of Staff Appointment

- Dr. Laakso recused herself for this portion of the meeting.
- Ms. Maxwell noted the chief of staff position was advertised and one application was received. The selection committee recommended appointing Dr. Laurel Laakso as the Chief of Staff.

#### **MOTION #13/22**

it was moved by Mr. Terry Jewell that the Board of Directors appoint Dr. Laurel Laakso as Chief of Staff of SLMHC for the term of five years effective May 1, 2022 as prescribed by the Professional Staff by-laws. Seconded by Mr. Knowles McGill. **CARRIED** 

## **Opening Ceremony - Sakatcheway Ceremonial Room**

MOTION #14/22 it was moved by Mr. Dennis Leney that the Board of Directors move this

portion of the meeting in-camera. Seconded by Ms. Patricia Keesickquayash.

**CARRIED** 

MOTION #15/22 it was moved by Mr. Dennis Leney that the Board of Directors move this

portion of the meeting out of in-camera. Seconded by Ms. Patricia

Keesickquayash. CARRIED

### 4.1 Welcome – Southern Community Member

• Ms. Maxwell welcomed Mr. Dennis Leney as the new Southern Community member of the Board of Directors.

# 4.2 Board Member Recruitment

- Ms. Maxwell noted she would like to meet with the Northern members to discuss the Member at Large and SLFNHA representation. Selena to schedule meeting. **ACTION**
- Ms. Lee noted we have received a resignation from Mr. John McKay.
- Ms. Maxwell noted Sandy Lake First Nation had an election and Mr. McKay decided not to seek re-election. Selena to send letter to Sandy Lake First Nation. **ACTION**

## 4.3 MRI Proposal Update

- Ms. Lee noted we are still waiting to hear from the province on operating dollars. We are very positive that the Ministry will fund SLMHC \$5 million for the infrastructure and purchase of the MRI.
- Ms. Lee noted the Minister of Indigenous Services Canada visited our site in March and she is very interested in supporting the MRI proposal.

### 4.4 Workplace Cultural Assessment Update

- Mr. McGill noted People First HR Service are in the process of analyzing data and interviewing staff.
- Mr. McGill noted People First has asked for an extension due to COVID-19 restrictions and delays. The report should be completed by the middle of May.

#### 5. **Round Table**

**Mr. Knowles McGill** – Mr. McGill has talked to folks in the community. He spoke with a patient who came to the ED and the patient noted he was treated well and noted how staff are so busy and could not move quicker, work harder or be more conscientious. Mr. McGill is delighted to hear this.

**Mr. Dennis Leney** – Mr. Leney noted SLMHC was formed with the four party agreement. We are losing staff because our community partner can offer higher wages. This is a concern.

**Ms. Renee Southwind** – Ms. Southwind noted Anishinaabe Culture training use to be offered offsite and staff were treated to cultural food. Her wish is to have this again. We need to train our young people with hope they will come work for our organization.

Mr. Douglas Semple – Mr. Semple noted the late Marie Hoey had once said everything we do seems to me that we always need to be political in getting what we need accomplished. This has always stayed with him. We need to reevaluate and address the points presented by Mr. Angeconeb and look at how things have evolved and what our patients are experiencing at present. We need to have a terms of reference, set boundaries and work together. with the chiefs.

**Ms. Kathy Loon** – Ms. Loon does not believe in coincidence, it has been twenty-five years since the four party agreement was negotiated. The parties need to work together as a region, look internally and reevaluate our commitment. We work very hard here at this organization.

**Ms. Patricia Keesickquayash** – Ms. Keesickquayash is listening to the conversation and looking at it from a community point of view. We hear about the challenges and struggles both organizations are having. We need to work together to address the concerns and how to better our services for patients in the community and the north.

**Mr. Terry Jewell** – Mr. Jewell thanked Ms. Maxwell for inviting Mr. Angeconeb and it was great value to the Board. We need to address Board membership and strengthen our Board. We need to resolve some of the issues we heard today and having a strong Board is partial to the solution going forward.

Ms. Sadie Maxwell – Ms. Maxwell noted we need to strengthen the Board and bring on new membership. It is a commitment that you make when you join the Board and we need to ensure our availability. We hope for some improvement with engagement.

**Dr. Laurel Laakso** – Dr. Laakso noted it is a pleasure to be with everyone again.

## 6. **Reports**

### 6.1 Foundation Report

- Ms. Hoey noted the hospital has repaid the \$137,000 loan to the Foundation. The Foundation donated the money back to the hospital.
- Slate Falls First Nation/Chicken Chef purchased two new carts for the operating room. Value of approximately \$8,000.
- The Foundation has hired a fulltime worker and she will be starting the last week of May. Sarah Spence has worked as a volunteer raising funds for many different organizations.

# 6.2 <u>CEO Report</u>

- Ms. Lee noted the hospital accreditation is June 20-23. The accreditors will meet with members
  of governance; we will inform the Board of the date. In January members of the Board
  completed the governance survey. Action plans were created and submitted. We are working
  on the items that need to be actioned and will keep the Board informed.
- The laboratory accreditation is May 11-12 and pharmacy accreditation is at the end of May. Staff have been working very hard.
- We are working under an old strategic plan. Senior team reviewed our high level goals and agreed these goals align with what we have been working on. Ms. Lee asked for Board approval to keep our high level goals until we start the new strategic plan in March 2023. The Board gave approval.
- Our communications manager has relocated and we are in the process of hiring a manager. This has delayed the key message document.

- Ms. Lee noted she has been working with Ms. Loon on the Ontario Health Team. Ms. Loon has been doing a lot of work with our thirty partners for this region, Dryden and Red Lake. This gives us the advantage of applying for funding. The Ministry has approved our application. We will continue to work with NAN on health transformation and our partners at SLFNHA.
- The Employee Experience Survey has gone out to staff. The results will be available in June.

# 6.3 <u>Chief Nursing Executive (CNE) Report</u>

- Mr. Osmond noted our services remain open but some departments have reduced hours. We
  continue to have high numbers of agency staff. We are in phase four of LTC functional
  planning.
- Mr. Osmond noted he attended a meeting with KDSB to look at partnering for childcare. This
  may help with recruitment of staff and physicians. The government has announced more
  funding for additional childcare allotments.
- Mr. Osmond noted he attended a meeting with the CEO of KDSB for partnership on housing in Sioux Lookout. Another meeting has been scheduled for May.
- We have participated in the International Educated Nurses Program. We have two families that relocated from Alberta. These nurses have immigrated into Canada and will practice within our organization. Our goal is to rebuild our nursing program.
- Drawings for the hostel expansion was presented. We are still waiting on the footprint. Selena to email the briefing note. **ACTION**

# 6.4 <u>Chief of Staff Report</u>

- Dr. Laakso noted we have come close a few times to closing the ED. Our physician group has been great and we have been able to remain open. COVID-19 has decreased the number of locums that come from southern Ontario. We do have physicians coming back this summer. We are doing everything we can to fill vacancies and keep our ED open.
- The Regional Chiefs of Staff table drafted a letter to send to local MP's about the reality of northwestern Ontario and that we are all struggling across the region. We have not received a formal response.
- Dr. Laakso noted she is pleased that Dr. Glenn has accepted the Chief of Emergency Medicine. This will help with recruitment. A thank you to all our physicians.
- We continue to have specialist interested in coming to do clinics here at SLMHC. We have had neurologist, pediatric allergist and pediatric clinics. We continue to expand our services.
- Dr. Laakso noted she attended a meeting with TBRHSC Chief of Staff, Dr. Folk, an ED group in southern Ontario and Ornge Airways to find a way to reduce barriers and get better care for northern patients needing to be transferred to Thunder Bay for higher level of care. The commitment from this group has been great.

### 6.5 Executive Lead Indigenous Collaboration and Relations

- Ms. Loon noted CBC will be coming in June to do a story on traditional programs at SLMHC.
   We are being recognized across the country for positive things we are doing within the organization.
- Ms. Loon noted she was a finalist at a national conference for a philanthropy organization. The topic was reimagining philanthropy food system and climate change. Captain Paul Smith from The Sea Shepherd wants to do a presentation to First Nations groups in Canada.
- Ms. Loon noted she is working on diversity and inclusion and looking at our policies, processes and systems.

## 7. Standing Agenda Items

# 7.1 <u>Financial Update</u>

- The financial statements for February 2022 were presented.
- Mr. Holder noted we received \$2 million in ministry funding which has helped cash flow.
- Mr. Holder did an overview of our capital assets. There has not been much change since the last report. Total assets of \$117 million. Current liabilities of \$7.2 million, long-term liabilities of \$106 million and net assets of under \$4 million. Current ratio is good.
- Mr. Holder did an overview of the statement of operations. We have \$48 million of revenue mostly driven by COVID-19 ministry funding. We have a surplus in total hospital operations of \$925 000.
- Fund type 2 has a surplus of \$425,000. We will allocate some hospital cost to utilize the surplus. We are expecting to repay \$100,000; this attributes to funding for two programs that we did not operate due to staffing shortages.
- Mr. Holder noted the auditors will be onsite the week of May 9. Things are progressing well.

#### 8. **New Business**

# 8.1 <u>Transfer Rent Supplement Agreement</u>

- Mr. Holder presented a briefing note with details of a separate operating agreement with the Ministry of Health to provide a rent supplement program for Kenora District Services Board.
- Mr. Holder noted we want to transfer the accountability over to KDSB. The ministry has requested a relocation from our Board.

**RECOMMENDATION** – that the Board of Directors support a transfer of the Fund Type 2 Rent Supplement Program agreement to another local service partner, Kenora District Services Board, moved by Ms. Patricia Keesickquayash, seconded by Mr. Terry Jewell– **CARRIED** 

# 8.2 Retreat Planning

- Ms. Lee noted senior team would like to request a September retreat with the Board of Directors. As part of the retreat, we can begin our strategic planning which renews in March 2023. Selena to provide dates. **ACTION**
- Ms. Lee noted in the past we sent an RFP to have a company do the strategic planning and suggest we do the same this year.
- Ms. Lee noted she will review the previous RFP and the cost and send to the Board. ACTION

## 8.3 Physician Vacancies

• Addressed in 6.4.

### 8.4 Strategic Planning RFP

• Addressed in 8.2

# 8.5 <u>Friendship Accord Mental Health Funding Update</u>

 Mr. Osmond noted Minister Tibollo was in Sioux Lookout in March and announced they are funding the Friendship Accord Economic Development in the amount of \$4.2 million. This will

- allow Sioux Lookout to have 37 patient treatment beds.
- Mr. Osmond noted the executive director of the Friendship Accord has asked if SLMHC would
  consider having the facility on hospital grounds. A meeting was held with all parties and there
  are some parties that do not agree with the facility being on hospital grounds and would like to
  see it elsewhere. Further discussion will take place after the accountability agreement is in
  place.

## 9. **For Information Only**

- 9.1 Resource Utilization Committee minutes of January 18, 2022 and March 9, 2022
- 9.2 Patient Safety Plan 2022/24
- 9.3 Quality & Risk Report
- 9.4 Sioux Lookout Hostel Expansion Area Plans

# 10. Next Meeting/Closing Prayer

The next meeting is scheduled for June 14, 2022 to be followed by the Annual General Meeting (AGM).

# 11. Closing Prayer

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Ms. Kathy Loon closed the meeting with a prayer. The meeting was adjourned at 2:50 pm.

MOTION #16/22 it was moved by Ms. Sadie Maxwell that there being no further business, the meeting be adjourned at 2:50 pm. Seconded by Ms. Patricia Keesickquayash. CARRIED

H. Lee, Secretary	S. Maxwell, Chair