

**I MINUTES**  
**Board of Directors Meeting**  
Wednesday, September 27, 2023  
5:00 p.m.

Pembroke Regional Hospital, Boardroom, Tower C (C142)

<b>Attendance</b>					
P = Present R = Regrets					
<b>Voting Directors</b>	<b>P</b>	<b>R</b>	<b>Non-Voting Directors</b>	<b>P</b>	<b>R</b>
David Unrau, Chair	✓		Sabine Mersmann, President & CEO	✓	
Rebecca Paulsen, Vice Chair	✓		Dr. Thomas Hurley, Chief of Staff	✓	
Dean Sauriol, Vice Chair	✓		Dr. Margarita Lianeri, President of Professional Staff	✓	
Richard Wilson, Past Chair	✓		Beth Brownlee VP Clinical and Support Services / CNE	✓	
Amy Sicoli, CHSO Designate		✓	<b>Resources (Non-Voting)</b>		
Suli Adams	✓		Scott Coombes	✓	
Daniel Burke	✓		Melanie Henderson	✓	
Clay Deighton	✓		Brent McIntyre	✓	
Kim Drake	✓		Carolyn Levesque	✓	
Matthew Neadow	✓		<b>Recorder</b>		
Neil Nicholson	✓		Sarah Mellish	✓	
Les Scott	✓				
Lisa Edmonds, Foundation Chair	✓				
Diana Gagné, President of Hospital Auxiliary	✓				

	<b>Agenda Items</b>	<b>Minutes</b>
<b>1.0</b>	<b>Board Education Session</b>	
1.1	Lean Management at Pembroke Regional Hospital	The Board was provided with a <u>presentation</u> on the Lean Management System by Sarah Selle, Lean Manager. The presentation was followed by a visit to a staff huddle and a tour of the main Strategy Room in order to see how everyone from our front line staff to our Senior Leadership Team is aligning all that they do with the strategic directions set by the Board and articulated in our Lean Drivers.
<b>2.0</b>	<b>Call to Order</b>	Dean Sauriol chaired the meeting and called the meeting to order at 5:56 p.m.
2.1	Opening Prayer	Beth Brownlee led the Board in an opening prayer.
2.2	Land Acknowledgement	The Land Acknowledgement Statement was read by Dean Sauriol.
<b>3.0</b>	<b>Adoption of Agenda Motion 1</b>	<b>Moved by Les Scott, seconded by Rebecca Paulsen, that the agenda of the September 27, 2023 Board Meeting be accepted as presented.</b> <b>CARRIED</b>
<b>4.0</b>	<b>Declaration of Conflicts of Interest</b>	A call for declarations of conflicts of interest was made. No conflicts of interest were declared.

5.0	<b>Patient Story</b>	Melanie Henderson provided the Board with an overview of a patient story.
6.0	<b>Strategic Matters – Generative Discussion</b>	
6.1	<b>Budget Update / HSAA Extension to March 31, 2024</b>	<p>Scott Coombes provided a <u>presentation</u> with updates on the 2023/24 Budget and the Hospital Services Accountability Agreement (HSAA) Extension.</p> <p>It was noted that there is still a clear message from the Ontario Hospital Association (OHA) that they are continuing discussions with Ontario Health in support of Hospitals and both are continuing to signal not to work on performance improvement plans and to stay the course for the current time.</p> <p>It was confirmed that the Hospital has received a one-time cash advance from the Ministry for the ONA reimbursements and will be applying for the same for the CUPE and non-union reimbursements.</p> <p>Regarding the HSAA, the Hospital has received a letter from Ontario Health East further extending the HSAA to March 31, 2024 and this will be signed by the CEO and Board Chair.</p>
6.2	<b>EMR Update</b>	<p>Scott Coombes provided the Board with an Electronic Medical Record (EMR) <u>update</u>.</p> <p>It was confirmed that PRH will be on the same instance as The Ottawa Hospital.</p> <p>It was asked if currently not having an EMR system is creating challenges with physician recruitment and it was noted that this is seen on a daily basis with surgeons and other specialists and there is also an impact to diagnostic imaging referrals.</p> <p>It was confirmed that Community Mental Health has also been involved in the discussions and they will have access to more tools and the ability to document right on site when they are working in the community.</p> <p>Primary care physicians will also have access to records right away if their patient is treated in the Emergency Department.</p> <p>In November, the Resource and Audit Committee will be holding a special meeting to receive a presentation from representatives from The Ottawa Hospital on EMR Implementation and a motion will be brought</p>

		forward for further discussion/approval by the Board.
<b>7.0</b>	<b>Business/Committee Matters – Generative Discussion</b>	
7.1	<b>Strategic Planning Update</b>	Sabine Mersmann provided the Board with a <u>presentation</u> and update on the Strategic Planning process so far. A team of consultants from Drenth Consulting and Santis have been hired and the kick-off meeting with the consultants and the Strategic Planning Steering Committee was held on September 15 <sup>th</sup> . The process is well underway with engagement sessions and surveys being planned in preparation for the Board Retreat scheduled for November 24 <sup>th</sup> and 25 <sup>th</sup> , 2023.
<b>8.0</b>	<b>President and CEO’s Report</b>	
	<ul style="list-style-type: none"> <li>PRH Exploring Options to Become a Schedule 1 Facility</li> </ul>	<p>The Hospital recently shared with staff the options being explored to becoming a Schedule 1 facility (a designated psychiatric facility under the Mental Health Act set out by the Ministry of Health and Long Term Care) in order to better serve patients with acute mental health needs.</p> <p>Our 15-bed Acute Mental Health unit provides county-wide care for those voluntarily admitted. As a Schedule 1 facility, we would be expanding our program to provide county-wide care for those involuntarily admitted because they are deemed to potentially be at risk for harm to themselves or others.</p> <p>For this to happen, many steps need to be taken. These include some changes to our Acute Mental Health unit in order to make it safer for more acute patients, enhancements in the area of physician health human resources, and discussions around funding from Ontario Health.</p> <p>A review of our Acute Mental Health unit already resulted in a list of recommendations for physical improvements which would allow us to proceed with a Schedule 1 facility application in the future. Over the next few years, we will be making some of those changes.</p>
	<ul style="list-style-type: none"> <li>Visual Audit</li> </ul>	<p>In early June, we welcomed some guests who were assisting us with a visual audit of our public areas to take a detailed and critical look at how these areas appear to our patients and visitors who may be coming to the hospital for the very first time (i.e. signage, wayfinding, positioning of objects, clutter and branding). A working group has been developed and</p>

	<ul style="list-style-type: none"> <li>• Chapel Enhancements</li>   <li>• Lunch with the CEO</li>   <li>• PRH Recognized by Trillium Gift of Life Network (TGLN)</li>   <li>• End of Summer Frosty Treat Day</li> </ul>	<p>has reviewed the final recommendations and is prioritizing improvements to be completed over the coming months.</p> <p>Mrs. Mersmann thanked Bea and Jack Lockhart who have created some beautiful nature-inspired stained glass pieces for our new Chapel. The recently installed additions will make the space more welcoming to all.</p> <p>The new <i>Lunch with the CEO</i> program was launched on September 26<sup>th</sup> which will provide an opportunity for eight staff to join the CEO for an onsite, informal meal and a chance to ask questions, share work experience, bring forward improvement ideas, discuss how PRH can do better and learn a few things about each other.</p> <p>PRH was one of only two hospitals to receive 100% Routine Notification Rate awards in Ontario for the 2022/23 fiscal year, with 134 notifications. Routine Notification is the rate at which hospitals notify the Trillium Gift of Life Network (TGLN) when a patient has died and there may be potential for organ and/or tissue donation. PRH has received the Provincial Routine Notification Rate Award five times which is outstanding!</p> <p>This year, for the first time, PRH will also be receiving the Provincial Eligible Approach Rate Award which recognizes hospitals for demonstrating leading practices by facilitating a donation discussion between Ontario Health (TGLN) and eligible patients and/or families at the end of life. PRH has achieved a 100% eligible approach rate.</p> <p>A big thanks to the team from Farmstead Cheese house who assisted in serving 355 portions of gelato on September 1<sup>st</sup> as part of our annual end-of-summer staff appreciation Frosty Treat Day.</p>
<b>9.0</b>	<b>Consent Agenda</b>	
<b>9.1</b>	<b>Board of Directors</b>	<ul style="list-style-type: none"> <li>• Verified the Board Minutes of June 28, 2023</li> </ul>
<b>9.2</b>	<b>Medical Advisory Committee</b>	<ul style="list-style-type: none"> <li>• Received the minutes from the Medical Advisory Committee meeting held September 20, 2023 and approved the following motions: <ul style="list-style-type: none"> <li>• that the Board of Directors accepts the recommendation of the Medical Advisory Committee and approves the following new Term application:</li> </ul> </li> </ul>

		<p><u>New Term Applications</u>          Dr. Bailey, Karen – Internal Medicine          Dr. Bark, Frodo – Emergency Medicine          Dr. Best, Jarrett – Anesthesia          Dr. Boivin, Michel – Critical Care          Dr. Carter, Daniel – Emergency Medicine (Zone B/Flow)          Dr. Davies, Sarah – Internal Medicine          Dr. Follis, Vivian – Critical Care          Dr. McCarthy, Lia – Hospitalist Medicine          Dr. Rae, Christopher – Psychiatry          Dr. Truong, Lan-Linh – Hospitalist Medicine</p> <ul style="list-style-type: none"> <li>that the Board of Directors accepts the recommendation of the Medical Advisory Committee and approves the following reapplication:</li> </ul> <p><u>Active Reapplication</u>          Dr. Mgbemena, Ben – Internal Medicine</p> <ul style="list-style-type: none"> <li>that the Board of Directors accepts the recommendation of the Medical Advisory Committee and approves the following reapplications:</li> </ul> <p><u>Term Reapplication:</u></p> <p>Dr. Kuncheria, Joy – Hospitalist / Emergency Medicine</p> <ul style="list-style-type: none"> <li>that the Board of Directors accepts the recommendation of the Medical Advisory Committee and approves the following reapplications:</li> </ul> <p><u>Term Reapplication:</u></p> <p>Dr. McLachlan, Alexander – Emergency Medicine</p>
9.3	<b>Board Quality and Patient Safety Committee</b>	<ul style="list-style-type: none"> <li>Received the minutes from the Board Quality and Patient Safety Committee meeting held September 12, 2023</li> </ul>
9.4	<b>Board Executive Committee</b>	<ul style="list-style-type: none"> <li>Received the minutes from the Board Executive Committee meeting held September 14, 2023 and approved the following motion:</li> </ul>

