



**Board of Directors
Tuesday, January 25, 2022
3:15 p.m. – 4:15 p.m. (OPEN)**

Zoom: <https://us06web.zoom.us/j/88394738640>

Password: 042468

If dialing by phone: +12042727920,,88394738640#

AGENDA

Members: Nancy Evans (Chair), Lisa O’Toole (Vice-chair), John Kearns (Treasurer), Patrick Johnston, Tamara Kleinschmidt, Peggy Payne, Ross Rae, Christian Sauvageau, Andrew Fleming, Gary Hannaford, Janet Dalicandro, Aileen Edwards, Stacey Daub (President & Chief Executive Officer), Dr. Colin MacPherson (Chief of Staff) and Sarah Corkey (Interim Chief Nursing Officer)

Senior Leadership: Susan Rowe, Jeff Hohenkerk, William (Bill) Tottle

Recorder: Olivia Maynes

Time	Item	Topic	Lead	Reason
3:15	1.0	Call to Order 1.1 Approval of Agenda 1.2 Declaration of Conflict of Interest	N. Evans	Decision
3:20	2.0	<i>QHC Values in Action Award</i>		
3:30 3:40 3:50	3.0	Reports 3.1 Report of the Chair 3.2 Report of the President & CEO 3.3 Report of the Chief of Staff	N. Evans S. Daub C. MacPherson	Information Information Information
3:55	4.0	Consent Agenda 4.1 Minutes – November 23, 2021 4.2 Approve Financial Statements 4.3 Quality of Patient Care Committee Update 4.4 Audit and Resources Care Committee Update	N. Evans	Decision Decision Information Information
4:00	5.0	Adjournment Next Board Meeting: March 22, 2022		
4.00 - 4:15	6.0	Media Interviews/Break		

Normally, we begin every board meeting with the Values in Action award to celebrate a particular individual or team at QHC hospitals that exemplify the QHC values of - Imagine it's you, Respect everyone, We all help provide care, Always strive to improve, and Take Ownership. This meeting, we've decided to instead highlight a way for everyone to express gratitude to all team members at QHC facing the enormous weight of wave 5 of the pandemic.

After 2 years of COVID, our teams are now facing the 5th wave at a time when they are tired and dealing with unprecedented demand and province-wide staffing shortages. As hospital workers continue to face new challenges, messages of support and gratitude are needed now more than ever.

While I know COVID fatigue is rampant, I want to appeal to our communities to take a moment to "Imagine it's you" and think of the incredible resilience of our teams dealing with COVID every single day for the past two years. I hope you will take time to send messages of hope, gratitude, care and support to the frontline workers and hospital staff of all four QHC hospitals. Let's show them that while we are all tired of COVID, that in no way eclipses our immense gratitude for what they continue to face.

Messages received to date have included musical performances, creative art work and poems from local students and many messages from individual community members.

We thought we would take a few moments to see and hear some of the submissions.

(2-minute video slide show)

I'm thrilled that so many of the members of this board have taken time to send in thoughtful messages of appreciation. Anyone interested, can share letters, cards, pictures, emails, and videos with QHC at info@qhc.on.ca and our communication team will add them to the Wall of Hope page on our website and will share them on social media. Your messages will provide hope, encouragement and positivity for the day.

I also want to highlight the amazing work of our Foundations in recognizing individual staff members or teams through their initiatives. The BGH Foundation's Hospital Heroes, TMH Foundation's Shining Stars, the PECMH Foundation's Care Champions and the continued efforts of the North Hastings Hospital Fund Development Committee. More information about supporting our hospital teams is available on the QHC website.

QHC welcomes new Vice President and Chief Nursing Executive

Quinte Health Care (QHC) welcomes Lina Rinaldi to the position of Vice President and Chief Nursing Executive (CNE) effective February 7, 2022. Lina replaces Carol Smith Romeril, who retired from the role in November.

Lina joins QHC from Closing the Gap Healthcare, where she is the Vice President, Client Services. In this role, Lina provides strategic and operational oversight for approximately 2,000 homecare community and clinic staff across Ontario and Nova Scotia. As the Vice President, Client Services, Lina has led strategies for growth in existing and new programs with a focus on partnerships and integrated care delivery models to enable accessible services in the homecare sector. Additionally, Lina is a Team Leader/Surveyor and Expert Advisor with Accreditation Canada and Health Services Organization.

Prior to joining Closing the Gap Healthcare, Lina was the Vice President, Industry Relations, Healthcare, Pharmacy for GS1 Canada. Prior to GS1, Lina held executive leadership positions at the Brant Community Healthcare System as the Chief Operating Officer, Chief Nurse Executive and, previously, as Vice President, Patient Services. In addition, Lina was Director of Emergency and Medicine Services at Trillium Health Centre and, prior to this, Director of Cardiac Services.

Lina holds a Bachelor of Science in Nursing from York University, Master of Nursing (Admin) from the University of Toronto. She is a Certified Health Executive (CHE) with the Canadian College of Health Leaders (CCHL) and a graduate of the University of Toronto Rotman Advanced Health Leadership Program (AHLP) and holds a certificate in Legal Aspects of Healthcare Administration from Dalhousie University.

Lina is currently Chair of the Board of Directors of Summit Housing and Outreach Programs, Halton Region which is a not-for-profit organization supporting individuals with mental health and addictions. Lina recently stepped down from the Quality committee of De dwa da dehs nye Aboriginal Health Centre, Brantford/Hamilton having the privilege to serve on the Board of Directors for 8 years. She remains active in her community of Halton and looks forward to contributing to her new community of Carrying Place and more broadly in Hastings and Prince Edward Counties.

BOARD OF DIRECTORS
Board Chair Report

From:	Nancy Evans, Board Chair
Subject	Board Chair Report
Meeting Date:	January 25, 2022
For:	Information
Management Support:	

Purpose of Agenda Item	
Why brought forward? (✓)	Description
Information ✓	The purpose of the agenda item is for the Chair to update the board on governance-level activities and matters since the last board meeting
Discussion / Input	
Decision	

Despite our hopes just a few months ago to be turning a positive corner on COVID, the latest wave has had the greatest impact so far on our communities and the operations of QHC. We have continued to see extraordinary resilience from the staff and physicians as this marathon of pandemic pressures continues.

Management has kept the Board abreast on an ongoing basis of the evolving status of cases and adjustments to operations. In the Quality of Patient Care Committee meeting this month, Susan Rowe provided us with a comprehensive walk-through of the work of the QHC Incident Management Team -- from projecting likely volumes and timing based on other hospitals' experiences and provincial data, to finding innovative solutions to spread resources across escalating needs, to coping with the serious challenges of outbreaks among patients and staff, and the ongoing health human resources pressures. I know we were all impressed.

On behalf of the entire QHC Board, thank you to the entire QHC team for its unwavering commitment to serving the people of our communities so well.

We have also been very mindful of the invaluable contributions of Belleville General Hospital Foundation, Prince Edward County Memorial Hospital Foundation, North Hastings Hospital Fund Development Committee, and Trenton Memorial Hospital Foundation. Not only do they continue to raise very important funds for equipment purchases for QHC despite the limits of a pandemic environment, but have also organized many acts of support for the teams at the hospitals. They have touched many with these efforts.

Recognizing the significant additional demand on staff, the Board trimmed back the scope of work in our committee meetings this cycle to focus on essential items and COVID-response related up-dates. This still meant we had robust briefings on financials, including the multiple puts and takes related to pandemic adjustments, and the ongoing progress of the Prince Edward County Memorial Hospital redevelopment plans, as well as a deep-dive discussion in the Quality of Patient Care Committee into the key role of home care as it relates to hospital patient flows.



AGENDA ITEM 3.1

We are looking forward to the resumption of activity on the new strategic plan, which has been temporarily stayed to give staff space and time to manage the pandemic wave. There is excellent momentum established which will not be lost.

**Quinte Health Care
Board of Directors Meeting – New Members
November 23, 2021 (Videoconference)**

A meeting of the 2021/22 Board of Directors of Quinte Health Care was on Tuesday, November 23, 2021 via videoconference. N. Evans chaired the meeting.

Present: Nancy Evans, Chair
Lisa O'Toole, Vice-chair
John Kearns, Treasurer
Janet Dalicandro
Aileen Edwards
Andrew Fleming
Gary Hannaford
Patrick Johnston
Peggy Payne
Christian Sauvageau
Stacey Daub, President & CEO
Dr. Colin MacPherson, Chief of Staff
Carol Smith Romeril, Vice President and Chief Nursing Officer

Regrets: There were regrets from Ross Rae and Tamara Kleinschmidt.

Staff Present: Jeff Hohenkerk
Susan Rowe
Bill Tottle
Catherine Walker
Julia Minek, recorder

1.0 Call to Order

N. Evans welcomed everyone, acknowledged members of the media and called the meeting to order at 3:18 p.m.

1.1 Approval of Agenda

Motion: To approve the open session agenda of November 23, 2021

Moved by: J. Kearns
Seconded by: P. Johnston
Carried

1.2 Declaration of conflict

There were no conflicts declared.

2.0 QHC Values in Action Award

N. Evans welcomed the recipients of the Quinte Health Care (QHC) Diversity, Equity and Inclusion Committee (DEIC). She highlighted how over the pandemic, the DEIC at QHC has been responsible for leading initiatives to help us improve and grow as an organization - to be more mindful of our broader ethical commitments to our communities both inside and outside the hospital walls. On behalf of the QHC Board, each member was thanked for his or her commitment to the hospitals.

3.0 Reports

3.1 Report of the Chair

N. Evans noted how the Board has had a busy and productive fall cycle. This included the Board Retreat meetings in October where they were able to dive into the macro developments in the Ontario health system, the implications for effective board governance, the early emerging themes for the new QHC strategic plan and the feedback of our stakeholders, and ultimately the priorities for the year ahead. There are still a lot of pressures QHC is under and the team has done incredible work to recruit staff.

3.2 Report of the President & CEO

S. Daub noted how QHC Leadership continues to monitor the ever-evolving pandemic situation locally and provincially. Commensurate with the increased community transmission in November, QHC is experiencing an increase in the number of local patients with COVID requiring hospital care, after weeks of having no COVID patients at QHC. This has given us a way to reflect on our processes during this next community wave. As a result, we are increasing our IPAC measures and reviewing our patient policy. We do not expect any changes to our service levels but it may add pressure to the organization.

3.3 Report of the Chief of Staff

Similar to S. Daub's report, Dr. MacPherson also noted how we are anticipating increasing our IPAC standards due to a rise in community spread. Dr. MacPherson then reported that Choosing Wisely Canada and Canadian Blood Services have recognized QHC as a designated Using Blood Wisely Hospital. This achievement is the result of a 3-year improvement project lead by the Department of Laboratory Medicine. Accolades was given to J. Hohenkerk and his team for leading this improvement.

4.0 Decision Items

4.1 2022/23 Slate of Directors and Recommendation to the Nominations Ad-hoc Committee

G. Hannaford presented the board with the 2022/23 slate of Directors and Recommendation to the Nominations Ad-hoc Committee. G. Hannaford noted how J. Kearns does not seek re-election however, N. Evans, T. Kleinschmidt and C. Sauvageau would like to continue their role and was recommended to be added to the 2022/23 slate of Directors. As a result, L. O'Toole handled the voting process and proposed the two Directors present to stay for the vote while N. Evans and C. Sauvageau abstained from the vote.

The Board also reviewed how the Nominations Ad-hoc Committee would undertake a process to recommend one additional candidate for the slate of Directors that will draw candidates from the diversity of population served by QHC.

Motion: **The QHC Board of Directors approves that the GCSC recommends to the Board that Nancy Evans, Tamara Kleinschmidt and Christian Sauvageau be added to the 2022/23 Board of Directors nominations slate.**

Moved by: **J. Kearns**
Seconded by: **G. Hannaford**
Carried

Motion: The QHC Board of Directors approves that the GCSC directs the Nominations Ad-hoc Committee to undertake a process to recommend one additional candidate for the slate of Directors. The process should put emphasis on a diversity of candidates reflecting the population served by QHC.

Moved by: P. Payne
Seconded by: C. Sauvageau
Carried

5.0 Discussion Items

5.1 Strategic Planning

S. Daub shared a slide on our pollination activity showing how we have engaged with our communities and staff on our Strategic Plan. The outreach not only included QHC staff, physicians, and volunteers but also donors, municipal partners, business owners, community members and patients. A number of themes emerged from this activity, which, will be discussed at the six strategic hives commencing on November 29, 2021.

G. Hannaford noted how the Board is involved with the Strategic Plan and explained the Board's role in approving the strategy so that there could be clarity and consensus. In summary, the CEO is responsible for establishing and leading the strategic planning process for board approval; the Board is responsible to establish the mission, vision and strategic direction; the Board will contribute to the development of and approve the strategic plan; and, the Board monitors the implementation of the strategic plan on an on-going basis.

C. Sauvageau exited the meeting at 4:10 p.m.

5.2 Build Better Access to Care and Stabilize Staffing – Progress Update

On behalf of C. Sauvageau, N. Evans noted how The Quality of Patient Care Committee had a robust discussion focusing on the Access and Staffing to Care and Stabilizing Staff priorities identified for the remainder of the fiscal year. This areas of focus included surgical backlog from surgeries delayed during COVID, diagnostic imaging backlog and improving the patient flow through the emergency departments, between inpatients unit and out of the hospital to the most appropriate care location. QHC is also trying to appropriate physician coverage that enhances safety and quality of care and appropriate staff coverage across QHC to meet patient needs and enhance the work-life. The Senior Team has also been focusing on attending to the well-being of our physicians and staff.

S. Daub noted how C. Smith Romeril went out to the teams to find out how we can better support them while J. Hohenkerk and C. Walker have been working on trying to renew relationships with our Primary Care providers.

C. Sauvageau entered the meeting at 4:28 p.m.

6.0 Consent Agenda

Approval of the following items was included within the consent agenda:

- 6.1 Minutes – September 28, 2021
- 6.2 Approve Financial Statements
- Motion:** **The QHC Board of Directors approves the September 2021 financial statements.**
- 6.3 Approve Board Work Plan and Committee Terms of Reference
- Motion:** **The Board of Directors approves the Committee Terms of Reference and 2021/22 Board Work Plan.**
- 6.4 Senior Leadership Evaluation and Compensation Committee Update

- 6.5 Quality of patient Care Committee Update
- 6.6 Audit and Resource Committee Update
- 6.7 Governance, Communication and Strategy Committee Update
- 6.8 Regional Health Information System (RHIS) Update

Motion: **To approve all items within the consent agenda of November 23, 2021.**

Moved by: **L. O'Toole**
Seconded by: **C. Sauvageau**
Carried

7.0 Board Member Recognition

The Board gave full recognition to C. Smith Romeril as a member of the Board and the Senior Leadership Team. C. Smith Romeril was thanked for her calm, patient and unflappable manner as a Vice President and Chief Nursing Officer.

8.0 Adjournment

8.1 Motion to adjourn session at 4:43 p.m.

Moved by: **L. O'Toole**
Carried

Next meeting: **January 25, 2022**

Action Items

- There we no action items from the November 23, 2021 meeting.

Nancy Evans, Board Chair
Board of Directors

Stacey Daub
President and CEO and Board Secretary

QHC Board of Directors

From:	John Kearns, Board Treasurer & Chair of Audit and Resources Committee
Subject	November 2021 Financial Statements
Meeting Date:	January 25, 2022
For:	Decision
Management Support:	William Tottle, Vice President & CFO

Purpose of Agenda Item	
Why brought forward? (✓)	Description
Information	The purpose of agenda item is to approve the November 2021 financial statements
Discussion / Input	
Decision ✓	
Motion	The Audit and Resources Committee recommends approval of the November 2021 financial statements to the QHC Board of Directors.

The committee met on January 22, 2022 and reviewed the unaudited financial statements as presented by Management.

The Audit & Resources Committee discussed the current operating performance including the risks and impacts of emergency department volume, inpatient pressures, the broader health human resources issues and lastly, the emergence of the Delta / Omicron variant on the organization.

The organization is reporting a small surplus through the first eight months due to the continued funding of pandemic related costs and lower staffing expense. This surplus is despite investing in strategies to address Health Human Resource issues while reacting to higher than expected emergency and inpatient volumes. The organization is expected to report a balanced budget by end of year.

The organization is reporting a strong cash position of \$17.2 million and a current ratio of 1:1.

The committee discussed managements strategies to address the on-going pressures, the implications of one-time funding and the risks associated with a shift in a post pandemic operating cost structure and the potential loss of one-time supports.

The committee recommends approval by the Board of Directors, the November 2021 Unaudited Financial Statements.

**QHC Board of Directors
Committee Report**

From:	Christian Sauvageau, Chair Quality of Patient Care
Subject	Quality of Patient Care Committee Report
Meeting Date:	January 25, 2022
For:	Information
Management Support:	Sarah Corkey, Interim CNO

Purpose of Agenda Item		
Why brought forward? (✓)		Description
Information	✓	A summary for the full Board of Committee agenda items, excluding the items that are brought forward to the Board agenda.
Discussion / Input		
Decision		

The Committee virtually met on January 11, 2022. Given the demands on QHC staff and management during the fifth wave, the January QPC meeting discussed the following two topics only:

Home Care Situational Overview

S. Daub introduced Jo-anne Poirier, President and CEO of VON, to the QPC Committee. J. Poirier provided an overview on home care, the current state and challenges and how they are advocating for change and what they see as the near term opportunities to effect improvement. There needs to be a transformation in home care including its business model. It needs to be more client and family-centered. The policy framework, including funding, needs to change with the government needing to take a systems-wide approach.

COVID-19/Emergency Operation Centre Update

S. Rowe provided a comprehensive update on COVID-19/Emergency Operation Centre. With the Wave 5 experience to-date, we required very fast response and decision-making that has led to an overall better position than some hospitals in our region. There is lower severity but high number of cases with a lower rate of hospitalization. There is optimism that this is the last significant wave before COVID-19 becomes endemic. The Committee asked how they could help and they were encouraged to send an online message of gratitude, care and support to the frontline workers and hospital staff at all four QHC hospitals through the ‘Wall of Hope.’

**QHC Board of Directors
Committee Report**

From:	John Kearns, Board Treasurer & Chair of Audit and Resources Committee
Subject	Audit and Resources Committee Report
Meeting Date:	January 25, 2022
For:	Information
Management Support:	William Tottle, Vice President & CFO

Purpose of Agenda Item		Description
Why brought forward? (✓)		
Information	✓	A summary for the full Board of Committee agenda items, excluding the items that are brought forward to the Board agenda
Discussion / Input		
Decision		

The Committee virtually met on January 12, 2022. The Committee received reports for decision which are included in the Board of Director agenda. The following is a summary of items reviewed, discussed and approved at the meeting, noting given the demands on QHC staff and management during the fifth wave, the January A&R meeting was condensed.

1. Finance Report – November 2021

The committee reviewed the financial and operating performance for Quinte Health Care for the eight months ending November 30, 2021.

The organization is reporting a small surplus through the first eight months due to the continued funding of pandemic related costs and lower staffing expense. This surplus is despite investing in strategies to address Health Human Resource issues while reacting to higher than expected emergency and inpatient volumes. The organization is expected to report a balanced budget by end of year.

The organization is reporting a strong cash position of \$17.2 million and a current ratio of 1:1.

The committee recommends approval by the Board of Directors, the November 2021 Unaudited Financial Statements. This item is included in the consent agenda.

2. Audit Plan/Proposed Audit Fees

The committee met with KPMG to discuss the audit plan for the 22/23 Audit.

The committee approved the Audit Plan as presented by KPMG and the proposed audit fees for the fiscal year 22/23.