Geraldton District Hospital

Minutes of the

**GDH Board of Directors’ Meeting**

Held in the Boardroom & via Zoom

Tuesday, March 5th, 2024 at 5:30 pm

Present

Voting: Eric Pietsch Terry Popowich Dorene Boulanger

Michael Davis Elaine Mannisto Bobby Jo Chenier

Ralph Humphreys Sanna Humphreys

Non-Voting: Darryl Galusha Ian McPherson Savana Marino

Monique Gosselin Dr. R. Ciccarelli

Jena Goulet (recorder)

Guest : Brent Maranzan

Regrets

Voting: Donna Pelletier Cory Lightfoot

Non-Voting: Dr. C. Starratt Dr. C. Bricks

**Board Composition (voting): 8 Elected 2 Appointments Total = 10**

**Current Vacancies (voting): 1 Elected 0 Appointments Total = 1**

**Total Board Members (voting): 10 Present: 8 Attendance: 80%**

**1.0 CALL TO ORDER**

**1.1 Welcome and Chair’s Opening Remarks**

● The meeting was called to order at 5:28 pm by E. Pietsch.

● E. Pietsch read the Treaty Acknowledgement.

● E. Pietsch shared the following information regarding the meetings he has attended over the last month:

● *OPP:* An Indigenous liaison has joined the OPP. B. Frost will work with B.J. Chenier to form connections with Greenstone’s Indigenous communities on behalf of GDH.

● *Patient Transfers:* Nipigon District Memorial Hospital is running a pilot program for non-urgent patient transfers from towns on the Northshore to Thunder Bay. As GDH has approximately 280 patient transfers via air per year, GDH’s inclusion in the program is being considered.

● *NOMA:* Rapid Intervention Teams were discussed. The program would be available to addiction and mental health patients. E. Pietsch stated that GDH can be ready to participate. However, staffing can present a challenge.

● *NOSM:* They are working to change the processes for accepting students and for physician recruitment and retention. NOMA also has a representative siting on the interview panel. T. Popowich inquired about providing a return for service to new graduates. It was stated that this can be an option but, once a physician’s obligation is fulfilled, it does not guarantee that they will stay with GDH.

**2.0 DECLARATION OF CONFLICTS OF INTEREST**

● None.

**3.0 ADOPTION OF THE AGENDA**

● E. Pietsch asked if there were any amendments to the agenda.

● Move Item 7.2 MAC Meeting Minutes – February 15th, 2024 from *Consent Agenda* to Item 8.1 under *Items Lifted from Consent Agenda.*

● Under *New Business*, add Item 11.1.2 Date of Board Retreat.

● Under *Roundtable,* add Item 15.1 Dialysis Services at GDH – Discussion.

**It was moved by M. Davis and seconded by S. Humphreys that the agenda be approved as amended.**

**CARRIED.**

**RES 12**

**4.0 PRESENTATIONS**

**4.1 GDH Operating Budget FY2024/25**

● The successful challenge of Bill 124 meant increases to staffing costs in the Hospital sector over the last 3 years.

● Coming out of the COVID-19 pandemic, inflation rates have increased.

● High recruitment costs and staffing challenges are the new normal that needs to be factored into budget planning.

***Significant Assumptions***

● Modelling a base funding increase of 6%.

● Based on Bill 124 retro awards in 2023/24 and state of the healthcare industry.

● Received 4% in prior year. Expecting at least that amount this year.

● One-time MOH revenue of $1,054,000 continuing to support certain programs:

● CTSLPE (temporary locum coverage funding)

● Nurse Practitioners,

● Emergency Department Pay for Results,

● Transitional Care Planning.

● Certain purchased services are expected to continue:

● Nurse Practitioner Program,

● Agency Nursing,

● Other positions that are ongoing.

***Budget Highlights***

● Total Fund 1 Revenue = $16,475,000

● Total Fund 1 Expenses = $18,296,000

● Operating Deficit = $1,821,000

● The operating deficit is being generated by:

● Bill 124 and wage inflation (approximately $800,000)

● Nurse Practitioner Program (approximately $145,000)

● Agency premiums ($700,000)

● Recruitment initiatives ($275,000)

***Budget Summary***

● Key areas of pressure:

● Purchased services which were unbudgeted in the past,

● Salaries and wages (Bill 124 increases),

● Recruitment and retention,

● Physician costs (funded through CTSLPE).

***Hours Summary***

● Small changes to the budget expected.

● The hours summary reflects the changes made during the year.

***Supplies by Department***

● Not projecting many major increases as inflation is expected to subside in 2024/25.

***Sundries by Department***

● Significant increases with respect to recruitment and retention initiatives for both physicians and staff.

***Equipment Expenses by Department***

● Minor changes (approximately 10%) related to equipment maintenance and depreciation.

***Board Members’ Input***

● T. Popowich questioned if there are solutions for GDH’s deficit. As GDH continues to recruit permanent RNs, this will decrease the amount spent on purchased services.

● Locum physician costs are astronomical. D. Galusha was advised by MOH to do whatever it takes to keep the Emergency Department open.

● B. Maranzan informed the Board of Directors that GDH is one of two hospitals in Northwestern Ontario who are in the “black”.

● Ontario Health inquired about GDH’s cash reserves. They were informed that the funds are allocated to specified projects.

**It was moved by B.J. Chenier and seconded by R. Humphreys that the Operating Budget for FY2024/25 be approved as presented.**

**CARRIED.**

**RES 13**

***E. Mannisto joined the meeting at 6:21 pm.***

**5.0 CORRESPONDENCE**

**5.1 Patient Story**

● The Patient Story was received by the Board members.

**5.2 Letter of Appreciation – D. Baillargeon**

● The letter of appreciation was received by the Board members.

**5.3 Response to Airport Closure Letter (February 6th, 2024)**

● The response letter was received by the Board members.

**6.0 EDUCATION**

**6.1 Guide to Good Governance – Chapter 7 (pages 134 - 177)**

● Clarifications were provided regarding new Board members’ orientation.

● Chapter 8 (pages 178 - 244) was assigned for reading for the next Board meeting.

**6.2 The Handbook of Board Governance, Third Edition**

● Nothing noted.

**7.0 CONSENT AGENDA**

**7.1** **Regular Board Meeting Minutes – February 6th, 2024**

**7.2** **MAC Meeting Minutes –February 15th, 2024**

● Move to Item 8.1 under *Items Lifted form Consent Agenda.*

**7.3 CCS Report**

**7.4 CNE Report**

**7.5 Human Resources Report**

**7.6COS Report**

**It was moved by M. Davis and seconded by D. Boulanger to accept the Consent Agenda as amended.**

**CARRIED.**

**RES 14A**

**8.0 ITEMS LIFTED FROM CONSENT AGENDA**

**8.1 MAC Meeting Minutes –February 15th, 2024**

● Clarifications regarding GDH’s new Laboratory Director were provided.

● C. Rocheleau is working with the COS Group to determine a scheduling process for the physicians.

**It was moved by D. Boulanger and seconded by E. Mannisto to accept the Items Lifted from the Consent Agenda as presented.**

**CARRIED.**

**RES 14B**

**9.0 BUSINESS ARISING FROM MINUTES**

**9.1 Meeting with GFHT’s Chair of the Board Updates**

● Deferred.

**10.0 OPERATIONS SUPPORT MANAGER REPORT**

**10.1 Financial Highlights**

● I. McPherson summarized his report for the Board of Directors.

● GDH has a $1,780,799 YTD operating deficit as of December 31st, 2023. This is entirely due to Agency Nursing, Nurse Practitioner costs, ED Contingency costs, and Retro Payments due to arbitration awards.

● The difference between Fund 1 and Fund 2 was explained to the Board members.

**10.2 Operational Highlights**

● I. McPherson summarized his report for the Board of Directors.

**10.3 Capital Budgeting – 3 Year Forecast – 2025-2027**

● I. McPherson shared the 3-year forecast of GDH’s capital projects.

● Insight was provided regarding GDH’s non-forecasted major projects which include the old ED renovations, LTC expansion project and under new ED expansion.

● It was shared that a meeting took place last week with consultants to discuss plan for the old ED renovations and the LTC expansion project. The 3-D designs will be shared with the Board of Directors once they have been provided from the consultants.

**10.4 Recommended Capital Projects Workplan FY2025**

● 50 projects are being proposed for 2024/25 at a cost of approximately $1,153,000.

● Clarifications were provided.

**It was moved by B.J. Chenier and seconded by T. Popowich that the Recommended Capital Projects Workplan for FY2025 in the amount of $1,153,000, with an additional $100,000 for unplanned capital projects, be approved as presented.**

**CARRIED.**

**RES 15**

**11.0 NEW BUSINESS**

**11.1 Strategic Planning Kick-Off Meeting Slides**

● The slides were received by the Board members.

**11.1.1 Meeting Minutes – February 14th, 2024**

● The minutes were reviewed.

**11.1.2 Date of Board Retreat**

● It was decided that the Board Retreat will take place Saturday, April 13th at the Geraldton Curling Club.

● J. Goulet will coordinate catering for the Retreat.

**11.2 Governance Process Policies (BOD-GP 17-31) Review**

● Clarifications were provided regarding the Conflict of Interest (BOD-GP 17) policy.

● Clarifications were provided regarding the Director Duties and Responsibilities (BOD-GP 21) policy.

● Clarifications were provided regarding the Continuing Education (BOD-GP 27) policy.

● As the Emergency Department Project has been completed, it was recommended that Building Committee (Ad Hoc) – Terms of Reference (BOD-GP 28) policy be made to encompass any future building projects. J. Goulet will make the amendments and present the policy at the next Board meeting for approval.

● All other Governance Process policies were renewed without changes.

**11.3 Election Intention Forms**

● The forms were received by the Board members.

● It was requested that the completed *Election Intention Forms* be returned to J. Goulet by Friday, March 22nd, 2024.

**11.4 2024/25 Quality Improvement Plan**

● I. McPherson shared the Quality Improvement Plan with the Board of Directors.

● I. McPherson stated that the final draft will be approved by the QIC prior to submission.

● I. McPherson requested that the Board members review the Progress Report, Narrative, and Workplan. All suggested amendments and corrections can be emailed to him.

**11.4.1 Progress Report**

● The Progress Report was received by the Board members.

**11.4.2 Narrative**

● The Narrative was received by the Board members.

● Clarifications provided.

**11.4.3 Workplan**

● The Workplan was received by the Board members.

● Clarifications provided.

**It was moved by R. Humphreys and seconded by B.J. Chenier that the Quality Improvement Plan submission for FY2024/25 be approved as presented.**

**CARRIED.**

**RES 16**

**12.0 LINKAGES & PARTNERSHIPS**

**12.1 HCAC Meeting Minutes – *Next Meeting: March 19th, 2024***

**12.2 QIC Meeting Minutes –February 15th, 2024**

● The meeting minutes were received.

**12.3 Geraldton Hospital Auxiliary Report**

● Auxiliary memberships are being sent out in the mail this week.

● The Auxiliary Committee has started fundraising for the LTC Garden Project.

● The AGM is taking place March 19th.

● Due to the respiratory outbreak in February, the Gift Shop was closed February 8th-20th.

● The Auxiliary is considering reserving a booth at the Geraldton Trade Show on May 10th and 11th in order to sell memberships.

**It was moved by M. Davis and seconded by E. Mannisto that the Linkages & Partnerships reports be accepted as presented.**

**CARRIED.**

**RES 17**

**13.0 CEO REPORT**

● D. Galusha summarized his report for the Board members.

● The factors contributing to the significant increase in Emergency Department visits were discussed.

● The LTC/Old ED Development Projects were discussed. An Ad Hoc Committee will be formed once the construction phases begin.

● MP Vaugeois’ site visit was discussed. A Board member was no invited for the visit as the Hospital was in a respiratory outbreak.

**It was moved by E. Mannisto and seconded by D. Boulanger that the report from the CEO be approved as presented.**

**CARRIED.**

**RES 18**

**14.0 DECISION OF THE BOARD**

**14.1 Physician Privileges**

● The list of Physician Privileges requests from the MAC meeting was presented to the Board for review.

● Clarifications provided.

**It was moved by R. Humphreys and seconded by B.J. Chenier that the list of Physician Privileges be approved as presented.**

**CARRIED.**

**RES 19**

**15.0 ROUND TABLE DISCUSSION**

**15.1 Dialysis Services at GDH – Discussion**

● S. Humphreys is requesting that GDH consider offering dialysis services to the community.

● S. Humphreys highlighted the numerous challenges in accessing these treatments in Thunder Bay.

● D. Galusha shared the response email to S. Humphreys’ original request. The email outlines the reasons why these treatments cannot be offered. All types of dialysis are very specialized services where a nephrologist is required on site and concentrated training is required by the renal department’s staff.

● It was stated that the volume of patients in Greenstone requiring dialysis is too small. All renal programs in North Western Ontario are managed out of TBRHSC. If the number of patients were to increase significantly, the renal department would reach out to GDH to determine a plan of action.

● D. Galusha emphasized that GDH struggles to keep its Emergency Department open and the difficulties with recruitment and retention. GDH needs a strong foundation before specialized medical services can be considered. Permanent physicians are required before specialists.

● Dr. Ciccarelli agrees that offering dialysis would be extremely difficult in a rural hospital as the recruitment of specialized staff would be challenging.

● GDH is currently focused on purchasing a CT Scanner once the Hospital is sufficiently staffed and the LTC Expansion and the Old ED Retrofit Projects are complete. It will be at least 3-5 years before plans for the CT Scanner can begin.

● It was requested that GDH gather statistics on how many patients from Greenstone are currently requiring dialysis treatments. Dr. Ciccarelli is willing to speak with a nephrologist to gain some insight.

**16.0 MONTHLY MEETING EVALUATION**

**16.1 Bi-Monthly Meeting Evaluation Summary**

● The summary was reviewed.

**16.2 Peer Assessments**

● The evaluation sheets were received by the Board members.

● It was requested that the completed *Peer Assessment* forms be returned to J. Goulet by Friday, March 22nd, 2024.

**17.0 IN CAMERA MEETING**

● The In-Camera Meeting was called to order at 7:50 pm.

**18.0 TERMINATION OF IN CAMERA MEETING**

● The In-Camera Meeting was adjourned at 8:07 pm.

**19.0 MEETING WITHOUT MANAGEMENT**

**20.0 MEETING WITH MANAGEMENT (CEO ONLY)**

**21.0 TERMINATION OF REGULAR BOARD MEETING**

**It was moved by B.J. Chenier and seconded by E. Mannisto that the Board of Directors Meeting be adjourned at 8:08 pm.**

**CARRIED.**

**RES 25**

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Board Chair Signature