



Minutes of the  
**BOARD OF DIRECTORS MEETING**  
 DRHC Resource Room  
 October 27, 2021                      17:30h

<b>Present:</b>			
B. Moore-Bunney, Chair	D. Armstrong-Ross	S. Boyko	C. Brown
B. Cook	D. Goulet	J. Green	J. Mallyon
J. Park	K. Seeley	V. Simpson	B. Szabo
A. McAuley	S. Moore	L. Nabb	L. Waller
<b>Guests:</b>			
A. Madussi	M. Penner		
<b>Regrets:</b>			
K. Campbell			
<b>Absent:</b>			
T. Ledoux			

**A. CALL TO ORDER:** B. Moore-Bunney, Chair of the Board of Directors called the meeting to order at 17:30 hours.

Mr. Moore-Bunney presented J. Green with a pen set on behalf of the Board, staff, and physicians at DRHC for her services as the outgoing Chair of the Board.

**Land Acknowledgement Statement:** Dr. B. Cook, Chief of Staff, read the Land Acknowledgement Statement to open the meeting.

**Declaration of Conflict of Interest:** None Declared.

**Connecting to Purpose: Patient Story/ Organizational Success:** D. Armstrong-Ross, Chief Executive Officer, shared that with the easing of some COVID-19 related restriction, DRHC has been able to resume more in-person meetings and Staff4Staff Committee events, which has resulted in a significant shift in staff morale, noting this kind of connection is a big part of DRHC culture.

Ms. Armstrong-Ross also noted that this was the first in-person Board meeting in over a year and a half, and acknowledged the effort that went into making this possible.

**B. APPROVAL OF AGENDA-** no additions.

**C. PRESENTATION:** M. Penner, Director of Mental Health and Addictions Services at DRHC shared with the Board some statistics from this department, highlighting that in Q2, Mental

Health and Addictions Services saw 630 patients, and an average wait time to enter services at 16 days, significantly less than other parts of the province. Mr. Penner highlighted the Bimaadiziwin Ashangewinini Social Worker position, which focuses on engaging First Nations clients.

**D. CONSENT AGENDA:** L. Waller noted an error in the September Board minutes, which did not reflect that J. Green was in attendance.

The following items were received and reviewed:

- *Minutes of the Board of Directors Meeting [September 2021]*
- *Minutes of the Quality and Safety Committee Meeting [October 2021]*
- *Minutes of the Governance Committee Meeting [October 2021]*
- *Joint COVID-19 Report*
- *Family Health Team Report*
- *Director Attendance*
- *Board Meeting Evaluation Summary*

**MOTION #32 2021/22: THAT** the Board of Directors of the Dryden Regional Health Centres approves the items in the Consent Agenda, as amended.

**Moved by:** K. Seeley      **Seconded by:** S. Boyko

**CARRIED.**

#### **E. BUSINESS ARISING FROM THE CONSENT AGENDA:**

##### **Policy Review:**

**MOTION #33 2021/22: THAT** the Board of Directors of the Dryden Regional Health Centres approves the following policies, as recommend by the Governance Committee:

2891-V3 Complaints and Compliments Policy

2225-V3 Code of Conduct

3401-V3 Quality Committee of the Board: Terms of Reference

**Moved by:** J. Green      **Seconded by:** B. Szabo

**CARRIED.**

**Board Committee Memberships:** D. Armstrong-Ross shared with the Board a draft of the Board Committee Memberships for the 2021/2022 year, noting that after discussions at the Governance Committee, there were a few vacancies that were to be brought to the Board for any volunteers.

After a brief discussion, it was agreed upon that V. Simpson and S. Boyko would be appointed to the Audit Committee, V. Simpson would also join the Nominating Committee, and that J. Green would serve as the Board representative for the Ethics Committee. It was noted that a vacancy remained for a Community Representative on the Audit Committee, though one individual has expressed interest.

**Annual Board Member Declarations:** D. Armstrong-Ross reminded the Board that these declarations had last been updated in 2018, and need to be signed annually. No questions or concerns were raised.

**Director Self-Evaluations:** D. Armstrong-Ross reminded the Board that this evaluation is used to build the skills matrix which is then used in the recruitment of new Board Members. As recruitment is ongoing for new Board members, D. Armstrong-Ross asked the Board to complete the short evaluation in order to have an updated set of information. A short discussion was held on when the evaluation was last completed.

## **F. NEW BUSINESS**

**New Parking System:** A. Madussi, Director of Facilities, presented to the Board regarding various options for an updated parking system, noting that previously an RFP was sent out though no responses fit what the organization was looking for. The current system has now degraded to the point that maintenance costs outweigh revenue. Various options have been presented at varying price points. Discussions were held on the benefits of pursuing higher priced options. Discussions held on funding, noting that the Dryden Regional Health Services Foundation had previously agreed to loan the amount to the Hospital, but would need to confirm that the Foundation is still willing to do so.

The Board voted to pursue the lower cost option, which would include a cashless system to reduce risk of theft, and anticipated return on investment within three years. More detailed information to be brought to the Board at the next meeting for final approval by Board Motion.

**Medical Staff Report:** Dr. D. Goulet, President of the Medical Staff stated that there were no issues from the Medical Staff to report at this time.

**Financial Statements:** A. McAuley, Chief Financial Officer, reported that as of August 31, DRHC is reporting a surplus related mainly to the increased surgical volume of hip and knee replacements. Main variances are related to COVID expenses, which are reimbursed by the government. Assuming no changes, anticipate a surplus of approximately \$200,000 for the year. Highlighted Fund Type 2 surplus in Mental Health and Addictions for pilot project put on hold due to COVID and the Family Health Team due to staffing shortages, noting that unused funding allocated for these projects must be returned if not used.

Discussion held on bad debts; A. McAuley explained that these typically come from out of province patients, particularly from Quebec or British Columbia.

**MOTION #34 2021/22: THAT** the Board of Directors of the Dryden Regional Health Centre approves the Financial Statements to September 30, 2021, as presented.

**Moved by:** K. Seeley                      **Seconded by:** B. Szabo

**CARRIED.**

**Strategic Plan:** D. Armstrong-Ross reminded the Board that the current strategic plan ends this year, highlighting the need to begin preparing for the next strategic plan. Discussions were held at the Governance Committee, with decision to use that group to inform the process. Ms. Armstrong-Ross stated that with many changes related to the

pandemic, as well as Ontario Health Teams (OHTs) and other changes in healthcare, this particular Strategic plan is extremely important. Still exploring options for consultants to facilitate planning.

A. McAuley updated the Board that after sending an informal ask, the majority of vendors came back with figures around \$75,000, noting that one less costly vendor was discussed at Governance Committee, but this firm has since pulled out. Brief discussion on the past processes used for strategic planning.

The Board voted to move forward with a formal request for quotes; these will be brought forward to the Governance Committee for vetting, then to the Board.

**Ontario Not-for-Profit Corporations Act:** J. Green updated the Board on a presentation she attended with the Senior Leadership Team regarding the Ontario Not-for-Profit Corporations Act, and its impact on the Hospital's governance activities. There is a three-year grace period to have bylaws updated, noting that the Leadership Team is already working on this.

D. Armstrong-Ross shared that the Ontario Hospital Association (OHA) is working with BLG LLP on prototype bylaws; education will come to future Board meetings, and information will be circulated when it is available,

#### **G. INFORMATION ITEMS**

The following information items were circulated and reviewed:

- OHA Survey – Hospital Governance Needs

#### **H. IN-CAMERA SESSION**

**MOTION #35 2021/22: THAT** the Board of Directors of the Dryden Regional Health Centre adjourns to an in-camera session at 18:35 hours.

**Moved by:** J. Green      **Seconded by:** K. Seeley

**CARRIED.**

#### **I. BUSINESS ARISING FROM THE IN-CAMERA SESSION**

**The Board of Directors resumed the Open Session of the meeting at 19:06 hours**

**MOTION #41 2021/22: THAT** the Board of Directors of the Dryden Regional Health Centre approved the credentialing of professional staff as presented in the In-Camera Session.

**Moved by:** J. Green      **Seconded by:** S. Boyko

**CARRIED.**

**MOTION #42 2021/22: THAT** the Board of Directors of the Dryden Regional Health Centre approves the appointment of Dr. S. Viherjoki as Interim Chief of Emergency Services and Dr. C. Pettinger as Interim Chief of Inpatient Services for the period from November 1, 2021 to June 15, 2022, as presented in the In-Camera Session.

**Moved by:** K. Seeley      **Seconded by:** J. Park

**CARRIED.**

**J. RESTRICTED IN-CAMERA SESSION:** (none)

**K. DIRECTORS ISSUES:** (none)

**L. ADJOURNMENT**

**MOTION #43 2021/22: THAT** the Board of Directors of the Dryden Regional Health Centre adjourns the meeting at 19:08 hours.

**Moved by:** K. Seeley      **Seconded by:** B. Szabo  
**CARRIED.**



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Brock Moore-Bunney, Chair



Doreen Armstrong-Ross, CEO