

BOARD OF DIRECTORS MINUTES

Tuesday, July 2, 2024
Huntsville District Memorial Hospital Boardroom
Approved September 12, 2024

PRESENT:

<i>Elected Directors:</i>	Dave Uffelmann	Carla Clarkson-Ladd	Colleen Nisbet
	Anna Landry	Dr. William Evans	Marni Dicker
	Moreen Miller	Bruce Schouten	Jody Boxall
	Tim Ellis	Line Villeneuve	
<i>Ex-Officio Directors:</i>	Cheryl Harrison	Diane George	Dr. Khaled Abdel-Razek
	Dr. Helen Dempster	Dr. Joseph Gleeson	
<i>Executive Support:</i>	Alasdair Smith	Mary Silverthorn	Tammy Tkachuk
	Bobbie Clark	Brady Wood	
<i>Observers:</i>	Matthew Reisler	Bruce Kruger	Katie Peleikis
<u>REGRETS:</u>	Mary Lyne		

At the request of a member of the public that did not pre-register to attend the meeting, the Board was asked to consider an exception to the policy requiring observers to register 24 hours in advance given capacity constraints. The Board considered that an exception had already been made for other members of the public by extending the registration deadline to 12:00 pm July 2nd. A concern was expressed regarding setting precedent for future meetings and not being able to accommodate a large number of people. By consensus, through a show of hands, the Board was in agreement that an exception would not be made and that the policy would be upheld.

1.0 CALL TO ORDER

Dave Uffelmann, Board Chair called the meeting to order at 5:36 pm. The three observers to the meeting were welcomed. The Land Acknowledgment was read aloud.

1.1 APPROVAL OF AGENDA

The Board Chair informed the Board regarding recent discussions with the President and Vice President of the Credentialed Staff Association with respect to their role in bringing forward the issues and concerns of the Credentialed Staff Association. It was noted they will bring to the Board both their individual views as well as those of the collective. There were no concerns or questions from the floor.

It was moved, seconded and carried that the meeting agenda be approved as circulated.

1.2 DECLARATION OF CONFLICT OF INTEREST

Directors were reminded that conflicts are to be declared for any agenda items and the Director shall not attend any part of a meeting during which the matter in which they have a conflict is discussed. Upon review of the agenda, there were no conflicts of interest declared.

2.0 STRATEGIC DIRECTION

2.1 STAGE 1.3: FUNCTIONAL PROGRAMMING

On behalf of the Capital Redevelopment Steering Committee, Dave Uffelmann presented the pre-circulated briefing and noted that its development was guided by the Ethical Decision-Making Framework. Introductory comments were provided highlighting that the overriding issue to address is the quality of care provided to patients across Muskoka Algonquin Healthcare's entire catchment area. It is also an objective of the plan that it stay in line with the budget as much as possible and enables MAHC to function as a medium sized regional hospital. The significant amount of engagement that has occurred throughout the past year was also noted. It was acknowledged that not all are in agreement and that engagement must continue as the process evolves. The recent letter from a group of physicians was recognized and the Board was informed that although a very important group of stakeholders, it represented 17% of the credentialed staff that are not in favour. In addition, the letter from Graydon Smith, Minister of Provincial Parliament was noted. It was explained that both of these correspondence are new information since the Capital Redevelopment Operations Committee and Capital Redevelopment Steering Committee met last week. Key issues noted from those not in favour included the differences in bed numbers between sites, the lack of a transportation plan and the importance of addressing gaps in primary care, and the need for community supports in order to have an impact on Alternate Level of Care. It was reinforced that the transportation and primary care issues are not the Hospital's issues to solve alone and as such continued engagement will be critical for the success of the functional programming.

In terms of the proposed motion, it was clarified that the intent is to ensure continued consultation and make changes to the plan as appropriate. Moving forward now with the detailed work is necessary in order to protect the timeline and ensure the position in the queue for redevelopment projects is maintained.

The floor was open for questions and comments. The key areas of discussion and debate included:

- Importance of moving forward and allowing the professionals to proceed with detailed work and the risk associated with the project timeline.
- Recognition that not all stakeholders will be satisfied
- Adding more specifics to the motion to describe what will be achieved and help stakeholders better understand how the perceived inefficiencies in the plan will be addressed including bed utilization, transportation and integration.
- Recognition that many of the elements of the key issues are outside of the hospitals control and the potential to develop task forces that are co-led by physicians.
- Concerns regarding the number of physicians not in favour of the model and the critical need to address the details and planning for surge and effective plans for gridlock.
- Constrained resources, long term viability of both sites and the potential of asking the government for additional funding.
- The importance of alignment between physicians, management and the board to arrive at the best system for the entire region.
- Confirmation that the final submission will be subject to final approval by the Board prior to the November deadline.
- The endorsement provided by the Medical Advisory Committee from a quality perspective as well as the expert professionals in arriving at the model as it stands currently.
- Messaging from the government with respect to being bold and innovative as to how to provide services to regions in the future.

- The importance of ensuring flexible space is built into the design to ensure the organization has the ability to address surge as well as any other unknowns.
- How the process will continue over the next several years with multi-disciplinary work groups to inform the design.

It was moved, seconded and carried that upon the recommendation of the Capital Redevelopment Steering Committee, the Board of Directors:

- 1. Authorize the consultants to proceed with the formal, detailed planning and documentation for the Stage 1.3 Submission to the Ministry of Health regarding the functional programming for the redevelopment of the two hospitals based on the current proposed model as detailed in the Report.*
- 2. Continue to work on the model with consultants and all stakeholders to collaborate on strategies for addressing flexible space, future capacity planning, and the key issues identified for the success of the project identified in the Report.*
- 3. And direct the Capital Redevelopment Steering Committee to work with staff to continue to develop comprehensive processes to address the issues of bed capacity, transportation and community service integration in consultation with the Medical Advisory Committee, the Credentialed Staff Association and community partners*

3.0 WRAP UP & ADJOURNMENT

It was moved that the open session be adjourned at 7:00 pm.