

**ALMONTE GENERAL HOSPITAL  
MINUTES OF THE BOARD OF DIRECTORS  
OPEN MEETING HELD ON  
MONDAY, NOVEMBER 23, 2020  
VIA ZOOM CONFERENCE**

**PRESENT:**

√	Mrs. F. Bird	√	Dr. U. McGarry
√	Mr. L. Gardiner	√	Dr. G. McKillop
√	Mr. J. Hann	√	Mrs. S. Muston
√	Dr. L. Heslop	√	Mr. D. Perley- Chair
√	Mr. R. Larkin	√	Mr. M. Vermette
√	Dr. M. Leonard	√	Mrs. M. Wilson Trider
√	Ms. B. Lowry Bagshaw	√	Mr. B. Young

**GUESTS:**

√	Joanna Noble Lead, Clinical Risk, Healthcare Safety and Risk Management	√	Mr. A. Roberts
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**STAFF:**

√	Ms. K. Harbord	√	Ms. T. McLelland
		√	Mr. R. Shaw

**Board Education Presentation: HIROC**

Mr. Perley welcomed Joanna Noble, Lead Clinical Risk, Healthcare Safety and Risk Management at HIROC who provided information on HIROC, including an Overview, Understanding Risk, Integrated Risk Management and the Boards Role in Relation to Integrated Risk Management and Resources to assist.

Ms. Nobel was thanked for her presentation and left the meeting.

Ms. Harbord reminded the Members that AGH first elected to participate in the Risk Assessment Checklist (RAC) program in 2019 to meet accreditation standards even though informal structures and processes were in place to mitigate risk at the hospital. Participating in the program commenced the start of the Integrated Risk Management journey. Next steps were identified as follows:

- Identify top risks as a starting point
- Risk Assessment Checklists
- Strategic plan
- Accreditation Standards
- Staff and Patient Incident Reports
- Recall notices
- Input from Leadership Team

A risk summary will be reported to the board committees (by appropriate category) and all risks will be reported to the Board of Directors annually through the Finance and Audit Committee.

<b>1.0</b>	<b>Call to Order</b>
	Mr. Perley called the meeting to order at 7:40 pm.
<b>2.0</b>	<b>Declaration of Conflict of Interest</b>
	No conflicts were declared.

<b>3.0</b>	<b>Reminder to Consider Ethical Issues</b>
	Members were reminded to consider ethical issues.
<b>4.0</b>	<b>Approval of Agenda</b>
	<b>IT WAS MOVED AND SECONDED THAT THE AGENDA BE APPROVED.</b>
	<b><u>MOTION CARRIED</u></b>
<b>5.0</b>	<b>Chair’s Remarks</b>
	<p>Mr. Perley addressed the following:</p> <ul style="list-style-type: none"> <li>• Encouraged everyone to shop and support local</li> <li>• Informed Members that the meeting evaluation survey (in a Survey Monkey link) has been sent to them by Ms. McLelland to be completed after the meeting</li> <li>• Asked Mr. Roberts if he had anything to add to the Foundation report</li> </ul> <p>Mr. Roberts reported that the Foundation will be launching “Catch the Ace” in the new year in conjunction with the Almont Legion. All tickets will be purchased online and there will not be a cap on tickets. Board Members were informed that they, along with anyone who lives in their house, are restricted from purchasing tickets due to reputational risk.</p>
<b>6.0</b>	<b>Consent Agenda Matters</b>
	<b>IT WAS MOVED AND SECONDED THAT THE FOLLOWING ITEMS CONTAINED IN THE CONSENT AGENDA BE APPROVED:</b>
	<ul style="list-style-type: none"> <li>a. Minutes of the September 28, 2020 Board of Directors meeting</li> <li>b. Financial statements for the 6 months ended September 30, 2020</li> <li>c. Policy IV-8 Asset Protection (updated)</li> <li>d. MRHA Committee Terms of Reference (updated)</li> <li>e. Policy II-4 CEO Performance Evaluation (updated)</li> <li>f. Individual Member Evaluation Tool and Board Evaluation Tool (updated)</li> <li>g. Medical Advisory Committee physician credentialing recommendations</li> </ul>
	<b><u>MOTION CARRIED</u></b>
<b>7.0</b>	<b>Business Arising from the Minutes</b>
	There was no business arising from the minutes.
<b>8.0</b>	<b>Matters Requiring Decision</b>
	There were no matters requiring decision.
<b>9.0</b>	<b>Matters for Discussion</b>
	<b>9.1 Corporate Goals Update</b>
	<p>Mr. Perley noted that material for the Corporate Goals update was included in the meeting package and invited Mrs. Trider to make additional comments and answer any questions.</p> <p>Mrs. Trider reported that additional data received since the document was provided to them includes a 76% uptake of the flu shot for the CPDMH Active Physicians. She also reported that in regards to the obstetrics volume, the Hospital is in a very active phase of recruiting the third OB/GYN with the hope of it being filled within the next few months. Once the third OB/GYN becomes active it will provide another source of volume.</p>
	<b>9.2 2020/21 Quality Improvement Plan – Pay for Performance indicators mid-year review</b>
	Mr. Hann provided an update on the Pay for Performance indicators. No concerns were made.
	<b>9.3 Report of the Chief of Staff</b>
	Dr. McKillop indicated that he has been mostly concerned with helping manage with Covid and the changing protocols. He did not have anything further to report.

