

# NORTHUMBERLAND HILLS HOSPITAL BOARD OF DIRECTORS

June 3<sup>rd</sup>, 2021, 5:00pm

## Virtual Meeting MINUTES

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Present: P. Went, Chair; T. McLean, D. Morrison, B. Nixon, S. Olsen, B. Selby, D. Slater, C. Tozer, M. Bhargava, F. Cameron, C. Gilmer, W. Ito. M. Hilborn, L. Davis, B. Carman

S. Anderson, K. Simmons, R. Stevenson, B. Prawecki (PFAC rep)

Regrets: A. Logan, M. McAllister

Staff: S. Walsh, D. Yeung, J. Gillard, E. Vosburgh

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### 1. CALL TO ORDER

P. Went called the meeting to order at 5:02 pm.

### 2. CONFLICT OF INTEREST

None declared.

### 3. HEALTH PROFESSIONS SCHOLARSHIPS PRESENTATION

P. Went acknowledged the 2021 recipients of the NHH Health Professions Scholarships, Lillie Donovan and Tovan Lew both grade 12 students from Port Hope and Cobourg respectively. The presentation continued a tradition started by the volunteer Board in 2003 to support students from west Northumberland who have chosen to pursue a career in the health-care sector.

### 4. CONSENT AGENDA

Motion Made and Seconded to approve the Consent Agenda matters as presented. Carried.

### 5. ITEMS FOR DISCUSSION / INFORMATION

#### 5.1 Report from the Board Chair

Pam W. thanked Dr. Bhargava, Susan Walsh, and Bruce Pye for leading the second Board Generative Discussion (subject: Virtual Care). The Generative Discussions will continue in 2021/22. She commended the NHH Finance team on an excellent 2020/21 audit. Pam then advised that PRHC is submitting a Master Plan - Stage 1 and has asked for support from the other C5 hospitals. NHH has provided a letter of support and has indicated that we would hope for reciprocity when our Hospital submits a Master Plan. In closing, Pam pointed out that this is Stacy Connell's last NHH Board meeting and thanked her for all that she has done for the NHH Boards over the past 10 years.

## 5.2 Report from the Senior Staff

The senior staff report was pre-circulated.

## 5.3 Report from the Finance and Audit Committee

T. McLean provided the report of the Finance and Audit Committee which was pre-circulated with the agenda package.

### 5.3.1 2020-21 Audited Financial Statement

D. Yeung presented the 2021-22 audited financial statements for the period ending March 31, 2021.

Motion Made and Seconded to approve the Audited Financial Statement as presented. Carried.

### 5.3.2 Re-Appointment of Auditors

KPMG were re-appointed for a term of up to seven years (i.e., Five years plus a two-year option) in May 2016. This re-appointment was for the provision of audit services for fiscal 2021/22 subject to annual Board review and Hospital membership appointment at the Annual General Meeting. 2020/2021 was the fifth year of the engagement.

The fees for the 2021/22 fiscal year per the accepted April 2016 proposal from KPMG with a 1.6% increase from 2020/21 estimated fees will total \$39,150.

Additional audit work may be required due to Covid-19s impact along with new auditing standards. The estimate incremental fees will vary depending on the level of effort required.

The Finance and Audit recommend to the Board re-appointment of KPMG LLP as external auditors for the provision of audit services for fiscal year 2021/22, subject to re-appointment by the members of the Corporation, at the quoted fees included in their April 2016 proposal.

**Motion was Made and Seconded that the Board of Directors accept the recommendation of the Finance and Audit Committee to re-appoint KPMG LLP as external auditors for the provision of audit services for the fiscal year 2021/22. Carried**

### 5.3.3 H-SAA/ M-SAA Declaration of Compliance

The Multi-sector Accountability Agreement (MSAA) requires the Board to issue a declaration of compliance, signed by the Chair, declaring that all obligations are fulfilled under the accountability agreement in effect during the applicable period. The Committee received confirmation that all programs under the MSAA have fulfilled the obligations for the reporting period

The Hospital Service Accountability Agreement (H-SAA) requires the Board to issue a declaration of compliance, signed by the Chair, declaring that all obligations are fulfilled under the accountability agreement in effect during the applicable period. The Committee received confirmation that the following programs did not meet targets for the applicable period noted below:

1. Alternative Level of Care (%)
  - a. Performance Target: 11.1%, Actual result: 30.2% (April 202- March 2021)
2. Repeat Unscheduled Emergency Visits Within 30 days for Substance Abuse Conditions (%)
  - a. Performance Target: 18%, Actual result: 21.9%
3. Palliative Care Patients Discharged Home (%)
  - a. Performance Target: 90%, Actual result: 77.8%
4. Day Surgery Weighted Cases
  - a. Performance Target: 900, Actual result: 824

P. Went will sign the declaration of compliance.

#### **5.4 Governance Committee**

D. Slater provided the report of the Governance Committee which was pre-circulated with the agenda package.

D. Slater shared that Board succession planning was a focus of March generative discussion facilitated by B. Selby and P. Went. Raised during this discussion was the topic of potential barriers to committing to being a part of the Board executive for a six-year commitment and significant committee involvement. Three questions were developed for consideration by the Governance Committee.

1. Is it necessary that the NHH Board have two Vice Chairs?
2. If, yes, can the term for each Vice Chair be reasonably changed to one year?
3. Can the Terms of Reference for Standing Board Committee membership be reasonable changed to say, 'Board Chair or Vice Chair'?

The Governance Committee based on consideration of these three questions, is recommending to the Board of Directors, changes as required to Board policy, by-laws, and Committee Terms of Reference.

**Motion was Made and Seconded that the Board of Directors accept the changes as required to Board policy, by-laws, and Committee Terms of Reference. Carried.**

## **5.5 Report from the NHH Auxiliary**

Marg Hilborn provided an update on the activities of the Auxiliary. The Auxiliary continues to meet with management to work through the changes to the structure of the Auxiliary. The fundraising side will remain with the Auxiliary and the service side will be managed by the Hospital. A new manager was hired to oversee the service side of the volunteers. A planning day is scheduled during the late summer.

<b>Motion was Made and Seconded to receive all reports. Carried.</b>
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## **6. IN CAMERA**

Motion was Made and Seconded to move meeting to In-Camera.

## **7. NEXT MEETING**

Next meeting will be the Annual General Meeting, June 17, 2021

## **8. TERMINATION**

The meeting was terminated on a motion by B. Selby.