

**MINUTES OF THE MEETING OF THE RENFREW
VICTORIA HOSPITAL BOARD OF DIRECTORS HELD
ON NOVEMBER 25, 2021 AT 17:00 HOURS.**

PRESENT: Marg Tubman, Chair
Rob Tripp, Vice-Chair
Meena Ballantyne
Tom Faloon
Sandi Heins
Phil Marcella
Robert Pelletier
Chris Ferguson, Vice-President, Patient Care Services
Julia Boudreau, President & CEO

GUESTS: Tim Sonnenburg, Vice-President, Financial Services
Alison Green, Vice-President, Corporate Services
Peter Payton, Director of IT
Erin Rennick
Sandra Buttle, Recording Secretary

REGRETS: Shauna Lemenchick, Auxiliary
Dr. Steve Radke
Dr. Angela Varrin

ATTENDANCE: 75%

1. PRESENTATIONS

A video was shown highlighting RVH and the RVH campus with a focus on the departments/units and programs at the hospital. This video was created to give everyone a peek at the “Life at RVH”, with the primary goal of physician recruitment. There also two short/related videos for the recruitment of volunteers and staff.

Accreditation - Chris Ferguson presented an overview on Accreditation addressing the benefits, integration with The Ottawa Hospital, Network 24 OHT, and collaboration with St. Francis Memorial Hospital. Directors had an opportunity to ask questions. Those that are involved with Accreditation were aware of the schedule and interview times with the surveyors.

2. CALL TO ORDER

With a quorum present, the Chair called the meeting to order.

3. DECLARATION OF CONFLICT OF INTEREST

There were no declarations of Conflict of Interest.

4. MINUTES OF PREVIOUS MEETING

*It was moved by Rob Tripp
And seconded by Tom Faloon,*

That the minutes of the meeting held on September 23, 2021 be adopted. – Carried.

Business Arising - With regards to the property that was purchased on Stewart Street, the hospital is still working with Cavanagh Construction for an estimate on removing the “dirty fill”. If the property is for commercial use the fill does not need to be removed but if it is for residential use it will have to be removed. Until it is determined what the property will be used for, the removal of the fill will be put on hold.

RVH has been having discussions for several years with the Acquired Brain Injury (ABI) Committee and Pathways to Independence regarding building a home for patients living with ABI. Andy Boldt, past RVH Board Chair, has been participating on this committee for many years. Pathways to Independence, RVH and Mr. Boldt recently had a meeting with Ontario Health regarding this initiative and how to move forward.

5. REPORT OF THE PRESIDENT & CEO

• COVID UPDATE

- Effective November 25, 2021, RVH changed to two visitors per patient per day. All previous screening, masking and visiting hour policies remain in effect. Under the visitor policy, visitors, essential caregivers and care partners will be required to show proof that they are fully vaccinated (two shots and at least 14 days since the second shot) along with ID, unless they qualify under one of the exemptions, i.e., under the age of 12, have documented medical exemption, visiting patients at end-of-life, parents of children under age 16 who are receiving care, Emergency department (one support person per patient), individuals who are essential to accompany patients to appointments or participate in care planning discussions or other critical or urgent circumstances requiring family presence.
- The Paramedics have taken over the lead on the vaccine clinics for 1st and 2nd vaccine shots, 3rd doses, and the clinic for children ages 5 to 11 years. There are special clinics scheduled on December 5 and December 21st just for children. These clinics are overseen by Dr. Jessica Bodig. At this time Clinics are being held at Ma-te-way every Tuesday supported by RVH retired nurses and staff. Clinics will be added if needed. Clinics are also being held in Arnprior, Pembroke and at local pharmacies.
- Local Hero Award – On October 21st at the Renfrew & Area Chamber of Commerce Annual Community Awards Celebration, Renfrew Victoria Hospital received the Local Hero Award for their work with the vaccine clinics. This award is to recognize the Global Pandemic and how this community came together to support one another. The recipient of the award was chosen from public nominations. This award was for an individual person or team of people who strived to help their community during the Covid-19 Pandemic. Chris Ferguson, Melissa Gourley, Kate Gahan, Tania MacGregor and Julia Boudreau received the award on behalf of the vaccine clinic team.

• ONTARIO HEALTH TEAM (OHT) UPDATE

- The collaborative decision-making structure was submitted at the end of September as well as the fund holder agreement. The County of Renfrew was selected by majority vote as the fund holder for the Year 1 Implementation Funding. The approval of the leadership structure is now morphing into a Steering Committee. The Steering Committee is staying the same with a few new additions which will stay in place until September 2022. RVH has good primary care representation at the Primary Care Network, including Dr. Noreen Wang, Dr. Angela Varrin and Dr. Brianne Clouthier.
- We are expecting our year 1 implementation one-time funding for \$1.2 million. We are presently recruiting administrative staff and once everyone in place will see some traction in achieving Year 1 goals and deliverables. The province now has 92% of provincial residents covered by OHT's.

- **EMERGENCY DEPARTMENT RENOVATIONS**

The emergency wing is now 20 years old. In 2018 the Board approved a \$200,000 facelift for the department and in 2019 it was decided to pause the project until EPIC was implemented. This was a good decision, as both EPIC and COVID have made us aware of further updates that are needed. After much discussion with staff and physicians, as well as the architect and engineers, it is recognized that more needs to be done than was originally planned. Although the overall footprint of the ER will not be impacted, this renovation will include significant improvements for safety and delivery of care. The anticipated changes include:

- Negative airflow in both trauma bays with a proper anteroom;
- Additional hand wash sinks;
- The telehealth room will become a properly equipped exam room;
- A complete refresh of the workstation and triage areas;
- New trauma lighting and a glass partition between the trauma bays with a glass door;
- Refresh of all other rooms in the department; and,
- Moving the IT closet to provide additional space and security.

The first phase, which is scheduled to start in the New Year, involves all rooms down the back hallway. We would like the second phase to be completed in two or three shorter phases since it involves the trauma rooms, staff areas, etc. and we would like to commence the work in the spring/summer 2022.

The Foundation has earmarked the current Catch the Ace funds for this project and we expect to raise over \$1 million on the current draw.

*It was moved by Rob Tripp,
And seconded by Tom Faloon,*

To continue to move forward with the final estimate of cost for Phase 2 of the ER renovation which will be presented to the Finance and Property Committee for recommendation to the Board. – Carried.

- **STORM WATER WORK**

After a rainstorm following the completion of the generator project, a small ‘sinkhole’ was found as a result of water coming up through the pavement. Investigations revealed 2 broken drainage pipes presenting a risk to the slope which is already in a compromised state. Where the generator was constructed, the slope is not a factor. At the crest, the slope is compromised and may slough off in the future. Our geotechnical and civil engineers have advised that the slope has failed before and could fail again. RVH authorized a permanent repair of the pipes and installation of a manhole to collect surface water for safer drainage, as well as a temporary solution to direct the water safely away from the slope. This construction started November 24, 2021. The temporary slope solution will need to be revisited in the spring/early summer. We will be monitoring the slope over the winter and are taking action to reduce/eliminate activities, i.e. parking in the area, to prevent further destabilization of the slope.

In the spring/early summer, the Hospital’s plan is to engage professional civil and geotechnical engineering services to determine options for a permanent installation.

The Town has been engaged at all points in the process as part of the area is Town property.

A HIROC adjustor will be coming on-site for the excavation of the broken pipe, and conducting a forensic investigation as to the cause of the break. Part or all of the repair work may be covered by HIROC or our generator contractor.

6. REPORT OF MEDICAL STAFF

The report of the Medical Staff was presented and recommended for approval.

RESIDENT AND MEDICAL STUDENT STATISTICS

| Fiscal Year | # Residents | # Resident Days | # Medical Students | # Medical Student Days | Total Hours Mentored in Emergency |
|--------------------|--------------------|------------------------|---------------------------|-------------------------------|--|
| 2017-2018 | 13 | 418 | 19 | 264 | 1029.5 hrs |
| 2018-2019 | 15 | 338 | 25 | 407 | 787 hrs. |
| 2019-2020 | 13 | 338 | 13 | 273 | 944 hrs. |
| 2020-2021 | 26 | 660 | 11 | 206 | 973 hrs. |

*It was moved by Tom Faloon,
And seconded by Phil Marcella,*

That the report of the Medical Staff be adopted. – Carried.

7. REPORTS OF COMMITTEES

A. GOVERNANCE COMMITTEE

Marg Tubman presented the minutes of the Governance Committee meeting held on October 4, 2021 as follows:

a) Accreditation

- An Accreditation Binder was created for committee members as a refresh of board activities. It included the accreditation schedule, surveyor profile, governance standards, report for accreditation, plans and frameworks, recent presentations, board evaluations and information on our integration with The Ottawa Hospital and St. Francis Memorial Hospital.
- Governance Review Presentation - Chris Ferguson presented a Governance Review on Accreditation addressing the foundation of accreditation, who benefits, contributions of accreditation governance standards, roles and responsibilities, and client and family centered care.

b) Potential Board Vacancies

It was noted that in 2022 we have a potential for three board vacancies (there is already one vacancy). A skills matrix and inventory was provided, and will be completed to guide the recruitment and selection process.

It was recommended to the Board that Robert Pelletier be asked to come back on the Governance Committee to fill the vacancy on Governance.

Sandi Heins, Chair of the Recruitment Committee was contacted immediately regarding board recruitment. Rob Tripp and Marg Tubman will also be on the committee. There were discussions on utilizing the RVH website and social media inviting applications.

The Board Chair spoke to the need for succession planning for the Board. The video that was shown speaks to our growth, innovations and culture. We are not just filling a vacancy for today but for the next 3 to 6 to 9 years as our Board constantly changes and we need to position ourselves for these changes. The video speaks strongly as to who we are. We need to continually

think about creating a network of people that we know in the community that can offer a skill set at our table that we may be lacking, now and/or in future.

c) Ontario Health Teams

Further to the information that was provided at the Board meeting, it was noted that the submission at the end of September to the Ministry regarding the collaborative decision making and leadership structure was approved. Ms. Boudreau will provide an update to the Board in the form of a briefing note.

d) COVID Policy

Hospitals in the Champlain region are supportive of Ontario's plan to require proof of vaccination to access businesses. As of October 15, 2021, visitors entering the hospital in the region and at RVH will be required to show proof of vaccination. Exceptional circumstances will be taken into consideration i.e. palliative care, etc.

RVH has less than 10 staff not fully vaccinated. They must provide proof of vaccination by October 31, 2021 or they will be placed on an unpaid leave of absence. Those that have had their 1st dose will be able to work but will continue to have weekly testing until fully vaccinated. Those who refuse to comply will be subject to discipline up to and including termination for cause. This stance is being taken by all hospitals in the region and many across the province. The RVH policy has been endorsed by the Medical Advisory Committee.

*It was moved by Sandi Heins,
And seconded by Phil Marcella,*

That the minutes of the Governance Committee be adopted. – Carried.

B. RECRUITMENT/SECTION COMMITTEE

Sandi Heins presented the minutes of the Board Recruitment/Selection Committee meetings held on October 20, 2021 and November 24, 2021 as follows:

a) Board Vacancies

This meeting was called due to the Board vacancies and potential vacancies. There are nine appointed positions with two current vacancies. We recently had a resignation of a Director, one Director indicated that he would not be reapplying in June 2022 and three other directors are up for reappointment in June 2022. Two vacancies are available to be filled immediately and one is available to be filled in June 2022.

b) Skills Matrix

It was decided that Directors would be asked to complete the skills matrix and inventory on themselves as well as their fellow Directors, based on the perception of their level of understanding at the board table.

c) AD

An ad for recruitment of Board Directors will be created and emailed to the committee members for approval. It was decided to place the ad in the Eganville Leader, on the hospital website, on the RVH and Foundation Facebook accounts and the TV located in Emergency.

The application for Board Membership was reviewed and it was felt that no changes were required.

d) Interview Questions

Interview questions were circulated for previous and returning Directors. It was felt that the interview questions were appropriate and that the returning Directors will be interviewed.

e) **Next Steps**

Two of the Directors up for reappointment indicated that they will be reapplying and the third Director will be contacted to see if it is his intention to reapply.

f) **November 24, 2021**

The Committee received three applications for Board Directors and all were interviewed on November 24, 2021.

The Committee met after the interviews and it was resolved that it will be recommended to the Board at the meeting in January 2022, that one applicant be appointed to the Board of Directors for the period January 2022 to June 2025 (to keep with the three year rotation).

The Committee was also impressed with another candidate and will be advised that their application will be put on hold until June 2022.

*It was moved by Sandi Heins,
And seconded by Robert Pelletier*

That the minutes of the Board Recruitment/Selection Committee be adopted – Carried.

C. FINANCE AND PROPERTY COMMITTEE

Phil Marcella presented the minutes of the Finance and Property Committee held on October 25, 2021 as follows:

a) **Accreditation**

Chris Ferguson reviewed the financial portion on accreditation. The focus will be on integration and interaction. Does the committee meet regularly and review resources, does the committee receive information in a timely manner and have discussions. Does the committee know the pressures, risks and funding, capital process, needs, etc. The committee reviews the information and has in-depth discussions before it goes to the Board. Resource accreditation standards were handed out as part of the agenda package for reference.

b) **Stewart Street Property**

With regards to the property that was purchased on Stewart Street, the hospital is still working with Cavanagh Construction discussing how the dirty fill can be removed. The fill will be accepted at landfill but the costs need to be clarified. The hospital has 18 months (next spring) to have this completed.

c) **Correspondence**

- Ontario Health - RVH will receive up to \$654,100 (2%) in base funding and up to \$70,750 in one-time funding for the year 2021-2022.
- HIROC - During 2020, there was a trend of increasing costs of medical malpractice claims as well as capital markets were volatile during 2020 as they fell during the first quarter and then gradually recovered. While surplus continues to be strong, as previously reported due to capital market volatility and increasing claims costs, HIROC suspended surplus distributions during 2020. As of year-end the minimum capital test, a ratio that regulators use to measure the financial strength of insurance organizations, was 190%, slightly below HIROC's target of 210% and well above HIROC's threshold of 150%. Decisions as to surplus distribution are made in June and December of each year. Given the continued market volatility and the applicable MCT target, HIROC will not be making a surplus distribution at this time and it is not currently expected that there will be a distribution in the near future.
- HIRF/ECP – The MOH is providing \$764,371 in one-time funding for the 2021-22 funding year for the Health Infrastructure Renewal Fund. Included in the total 2021-22 allocation of

\$764,371 is \$725,000 in one-time funding as an Exceptional Circumstance Project Grant. A plan is in place to spend the allocation by March 31, 2022.

d) Operating Results

RVH had a surplus of \$771,750 (3.2% of total revenues) for the six months ending September 30, 2021. This result is higher than budget expectations.

Revenues

- When adjusted for COVID funding impact, overall revenues for the period were \$600,460 higher than budget (3.0 %).
- LHIN base and one time funding revenue is on budget.
- Cancer Care Ontario funding was significantly higher than budget as a result of increased volumes of oncology patients and reimbursement of higher costs drugs.
- Paymaster funding is on budget.
- Inpatient funding is lower than budget as we had fewer non-residents.
- Outpatient revenues are higher than budget due to higher volumes in Diagnostic Imaging, particularly CT volumes.
- Semi private revenues were higher than budget as we had more patients with insurance coverage during the period.
- Sleep product sales are running on budget as sales have rebounded this year. Inventory is difficult to source; sales are expected to be lower for Q3.
- Other revenues are on budget.
- Grant amortization is on budget.

Expenses

- When adjusted for Covid eligible expenses, overall expenses for the period were \$292,616 higher than budget (1.3 %)
- Salary and wages were higher than budget (3.0%) mainly due to costs for replacement staff, training, sick leave and staffing at Sleep store associated with recall.
- Medical staff fees were higher than budget due to increased professional fees in Diagnostic Imaging and higher Emergency expenses due to higher volumes.
- Hospitalist costs are on budget.
- Medical and surgical supply costs were slightly under budget (3.0 %).
- Some supply costs are being charged to Covid up to end of Q2.
- Drugs and medicines are over budget (14.0 %) due to higher Oncology drug costs, but these are reimbursed.

Other Votes

- This is made up of separately funded programs for Palliative Care, Addiction Treatment Services and the Assisted Living Program. The programs are on budget.

e) Investments

Total market value of investments at September 30, 2021 is \$11,099,432. Gross portfolio return for 6 months was 2.5%.

f) RBC Dominion Securities

A letter was provided advising that as of September 30, 2021, the investments and account activity of Renfrew Victoria Hospital are in full compliance with objectives and guidelines in the Investment Policy Statement.

g) Insurance

RVH is part of HIROC (Health Insurance Reciprocal of Canada) which has been in existence since 1987. As a reciprocal, any surplus or deficits accrue to the members of the reciprocal.

The size of the surplus payment is contingent upon overall insurance experience for the reciprocal as well as investment returns on surplus. Since inception in 1987, there has not been a deficit in HIROC.

RVH carries the following insurance:

| | | | | |
|-------------------------------|----------------|----------------|----------|----------------|
| Liability & Fraud | \$10,000,000 | Annual Premium | \$72,381 | 9.0 % increase |
| Property | \$84,839,270 | Annual Premium | \$88,237 | 25 % increase |
| Boiler & Machinery | Various limits | Annual Premium | \$3,435 | 25% increase |
| Travel Accident | \$500,000 | Annual Premium | \$1,210 | no change |
| Cybersecurity | \$500,000 | Annual Premium | \$1,765 | 25% increase |

- Coverage includes Renfrew Victoria Hospital, Renfrew Victoria Hospital Foundation, Renfrew Health and RVH Auxiliary
- Note: Due to increased building material and construction costs property valuation increased by 11% from previous year.

A Claims Audit Report was presented for the period 1991 to 2021. Seventeen claims were reported for this period and total incurred was \$527,341.16 (paid by insurance). Our claims occurrence is well below the average for small hospitals and all hospitals in total.

h) Capital Projects Update

- **Second And Third Floor Renovations - no change**

RVH updated its master program/master plan for the purposes of renovating additional areas of the hospital. The document is required by MOH capital branch for their consideration as part of the approval process. Renovations would include the second and third floor of RVH. In order to meet the definition of a small project, RVH intends to submit a project with the ministry portion being approximately \$10 Million. Should the project be approved MOH would cost share following the 90-10 formula with RVH being responsible for 10% representing "own funds" portion. LHIN board has endorsed the "pre capital" project submission. This means the project can now go to MOHLTC for approval to proceed to phase one of the 5-phase construction approval process.

RVH approved a budget of \$500,000 to update 2-3 rooms in 2017/2018. This work would have to be done prior to the start of the project to provide "swing" space during construction. This project is on hold pending approval from MOHLTC to proceed.

It is anticipated that in order to complete all phases of the construction project the costs will exceed the \$10 Million small project threshold for Ministry of Health. RVH will have to provide additional "own funds" in order to complete the project. A project plan with costing would be presented to the Board for approval.

- **ER Refurbishment**

\$200,000 was approved in 2017/2018 to refurbish the Emergency area. This project was deferred pending requirements for Project Fusion (EPIC). Planning for the refurbishment is underway. Materials for this project have been ordered and due to delays, the project will not start until all the supplies have been received. Plans is to complete spring 2022.

- **Approved Capital Expenditures 2021/2022**

Total Approved Capital Equipment Budget 2021/2022: \$1,668,511

Total Approved Capital Equipment Expenditures to September 30: \$581,280

- **HIRF - Exceptional Circumstances Funding 2021**

RVH received notice that it has been granted \$725,000 in HIRF Exceptional Circumstance funding. This funding will be put towards the roof replacement and fire alarm engineering replacement.

- i) **EPIC UPDATE**

Overall Atlas Alliance had a deficit of \$70,000 (on \$5,000,000 Q1 Budget). The majority of the deficit due to team vacancies resulting in consultant time. The actual annual result is expected to be in line with budget.

- **Upgrades** - A system upgrade was completed October 2, 2021. The upgrade was more technical in nature with only small changes to the software. One area that did change was MyChart. The look of MyChart has changed to allow for easier navigation and some functionality was added. One significant change was the ability to add multi-part authentication in order to secure data. There are tutorials on MyChart to assist users with the changes. The upgrade overall went well
- **New Members** – Four new members will be joining Atlas Alliance- Kemptville District Hospital, Winchester District Memorial Hospital, Deep River and District Hospital and the Georgian Health Group (GHG). New members are required to pay the full incremental cost to join Atlas, as well as pay a fee for entry and a fee for the additional volumes they bring to Atlas Alliance from an EPIC perspective. New members will Go Live, November 2022. (GHC is a simple install as they are already EPIC, and expect to Go Live Feb 2022.
- **Laboratory** - Cerner will be replaced with Beaker over an 18-month period, with Go live set for November 2022. All new hospitals joining Atlas Alliance will be converting to Beaker as well. Both RVH and SFMH Boards have approved beaker capital costs. Overall capital and operating costs are lower with the addition of the three hospitals. Chris Campbell, our EORLA on-site manager, is part of the planning group. RVH is included in the meetings to ensure there is co-ordination at both sites. Project Kickoff took place in May 2021.
- **Lumens** - Lumens (endoscopy) was recently been added to the annual work plan for Atlas Alliance. The addition of Lumens will mean full integration with our endoscopy suite. There is a capital cost component for both RVH (approx. \$40,000) and SFMH (approx. \$10,000). The project has been kicked off with a Go Live early summer 2022.
- **Provincial Strategy** - Recently the EPIC sites in Ontario were granted \$4 Million over 2 years in order to standardize processes and implementation of strategies at EPIC sites. Atlas Alliance has been named the lead for this provincial initiative.

- j) **Other**

Recently in the news it was reported that the provincial government has helped pay off significant operating deficits incurred by hospitals. It was noted that RVH has reserves and no debt so we did not qualify for this funding.

*It was moved by Robert Pelletier,
And seconded by Tom Faloon,*

That the minutes of the Finance and Property Committee be adopted. – Carried.

D. ETHICS COMMITTEE

Tom Faloon presented the minutes of the Ethics Committee meeting held on September 30, 2021 as follows:

The revised Patient Rights and Responsibilities were sent to the Committee. It was noted that no RVH physician has come forward to participate in the MAiD initiative but this service is offered in the community.

a) Vaccine Visitor Policy

- All Champlain hospitals are following the same mandate that all visitors that come into the hospital be fully vaccinated. This includes vendors/suppliers, pastoral care, volunteers and visitors for patients.
- RVH has a duty to care for the patients and cannot deny care, so unvaccinated patients will not be turned away. There is also an obligation to keep patients safe so precautions must be followed.
- It is a much debated topic right now between vaccinated and unvaccinated people, so we must respect that people want to make their own choices but rules must also be followed.
- There are always going to be medical exemptions and there will also be other exemptions dealing with labour and delivery, end-of-life care, children under 12, or minors being brought into ER. These situations will be addressed on an individual basis and will have to be thoroughly reviewed. This may bring ethical dilemmas about when we make exceptions. The date to enact this policy in Renfrew County is October 15th and RVH will be sending out a press release and posting the message on social media.

b) CCHCE Annual Reports

- The Ethicist reviewed the annual reports from the Champlain Centre Health Care Ethics. One was an overall review of the Centre's activities over the last year and one was specifically for RVH.
- Overall the report summarized the work that CCHCE has done, including Quarterly newsletters and monthly Ethics Rounds that are presented. The Committee would like this information forwarded to them so they can review and participate in future rounds.
- Presentations were reviewed including "Pandemic: Consent and Capacity" and Moral Distress education sessions.
- RVH's report showed how many case studies were reviewed (five official case studies, but more were done unofficially) and four education sessions were done particularly for RVH.

*It was moved by Rob Tripp,
And seconded by Robert Pelletier,*

That the minutes of the Ethics Committee be adopted. – Carried.

E. PERSONNEL COMMITTEE

Robert Pelletier presented the minutes of the Personnel Committee meeting held on November 2, 2021 as follows:

a) COVID HR Update

- The Paramedics are taking the lead for vaccine clinics and RVH retired staff are assisting. Clinics are being held every Tuesday at Ma-te-way.
- The RVH Clinic Team were recognized with a community hero award.
- RVH staff are required to be compliant with the directive for Healthcare Workers regarding Covid-19 vaccination. Proof of vaccination or an approved medical or human rights exemption is required. 98% of RVH staff and 100% of physicians are compliant with the Directive.
- Each case is treated individually. Supports are provided as needed, physician available to answer questions, VaxFacts hotline, and conversation with RVH Ethicist, Manager, OHS, and Union etc.
- Managers are supporting nursing recruitment and retention by being hands on, and supportive of staff skills development and culture of acceptance.
- Agency staff have been engaged to fill vacancies and to prevent burnout of staff as a short-term strategy.

b) Labour Relations Update

- Collective Bargaining with CUPE starts in December 2021.

- Collective Bargaining with ONA finished on October 14, 2021 and the agreement is out for signature from all bargaining committee members. ONA will be meeting to ratify the agreement which will go until March 2023. The Central Arbitration award with ONA has been released and put into effect. The 1% pay increase per Bill 124 is reflected. ONA staff received an increase to a night premium retroactive to April 1, 2021.
- There are grievances with ONA regarding the vaccination policy and the wages capped at 1%.

c) Vacancies

RVH has 16 nursing vacancies (5 permanent, 11 temporary)

d) French Language Services

The Ministry of Francophone affairs has approved the designation for our regional programs for Addictions Treatment and the Nephrology Program. There are still outstanding requirements for the Regional Assault Care Program and we are meeting to discuss the next steps. RVH is the first hospital in the region to receive this designation.

e) Accreditation

The RVH Accreditation survey is scheduled for December 6-9, 2021. HR has developed a brag book of accomplishments and strategies for the surveyors.

f) HR Talent Management Plan

The HR Talent Management plan for 2017-2022 has been updated and a draft of the 2022-2027 plan was provided to the committee for feedback.

g) Violence Report

Violence presentation was provided showing the violence statistics over that last several years. Some of the violence initiatives include a buddy system, phone with employee to call for help, maintenance team to support, code white drills throughout the year, panic alarms and training for all staff.

h) Equity, Diversity & Inclusion (EDI)

The newly form EDI Committee held their first meeting. The goal is to ensure a safe space for everyone. Ellen Alie, regional consultant, is available to support the committee. The first step is to ensure a safe space.

i) Management Education Day

A virtual event “day away” was held on October 1, 2021 for Leaders with five speakers, and team building events. There were 55 attendees and the event was well received.

j) Employee Wellness

Staff flu shots are available to all staff. Take the Stairs Challenge is being promoted.

k) Employee Recognition

The Employee Recognition Committee is meeting shortly to discuss next year’s events. Eighty-two perfect attendance letters and gift cards were sent and eighty-nine exemplary attendance letters sent. RVH received a \$500.00 donation from Equitable Health & Dental to go towards the perfect attendance.

l) Education

Staff are completing their Surge learning modules. Managers are able to verify employees’ education records and can follow up with any outstanding courses.

*It was moved by Phil Marcella,
And seconded by Tom Faloon,*

That the minutes of the Personnel Committee be adopted. – Carried.

8. OTHER BUSINESS

Welcome to Erin Rennick who will be taking over the role of Executive Assistant in January 2022.

9. ADJOURNMENT

*It was moved by Sandi Heins,
And seconded by Robert Pelletier,*

*That the meeting adjourn. – Carried.
Time of Adjournment: 18:45 hours*