

**BOARD OF TRUST**

DATE: Tuesday, February 25, 2025

In the Boardroom

TIME: 5:00 p.m.

PRESENT: Ms. P. Hilderley (Chair), Ms. T. Crockford, Mr. R. Mitchell, Ms. J. Soden, Mr. D. Wallet, Ms. S. Wolfe, Ms. B. Taylor, Mr. P. Lang, Ms. K. Lavelle, Ms. C. Smart, Ms. D. Westcar, Ms. A. Fortin, Ms. L. Symons, Dr. P. Howatt, Dr. K. Green, Dr. I. Hons, Dr. M. MacLeod

REGRETS: Ms. C. Lauder (City Rep), Mayor J. Acchione (County Rep), Ms. M. Ross (Pt. Advisor), Mr. E. Andreola, Mr. B. Kennedy

Recorder: Ms. H. Scherer (Executive Assistant)

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| **AGENDA ITEMS** | **DISCUSSION** |
| CALL TO ORDER | The meeting was called by Ms. Hilderley, Chair at approximately 5:00 p.m. |
| PRESENTATION | **Ethics Update:**Dr. R. Butcher, Ethicist, gave the following update:* + - * He provided an overview of his background for the new board members.
			* He referenced an article in MacLeans magazine where a Canadian woman is suing the government for not allowing mental health patients to undergo MAID. It talks about the fairness of other people getting relief from their suffering but individuals suffering from a mental health illness are denied relief.
			* In 2021, a two-track approach to procedural safeguards based on whether or not a person’s natural death is reasonably foreseeable:
				+ Existing safeguards are maintained and, in some cases, eased for eligible persons whose natural death is reasonably foreseeable.
				+ New and strengthened safeguards are introduced for eligible persons whose natural death is not reasonably foreseeable.
* Individuals suffering solely from mental health illness for 24 months was excluded from receiving MAID until 2024. It has since been pushed back to 2027.
* There is still lots of discussion around whether or not dementia patients should be able to make advance requests for MAID. In October, Quebec adopted Bill 11 which allows dementia patients to make an advance request for MAID. These individuals would have to appoint an individual that would make the final decision down the road for them.
* In 2023, 5% of deaths were by MAID.
* It was noted that death doulas are also popular. MAID has definitely made people think differently about their end of life.

Ms. Hilderley thanked Dr. Butcher for his presentation.  |
| DECLARATION – CONFLICT OF INTEREST  | No one declared a conflict of interest.  |
| ADOPTION OF AGENDA | **MOVED** by Mr. Mitchell to adopt the agenda as circulated, seconded by Ms. Symons. **CARRIED.** |
| HUDDLE | **Reporting Potential or Actual Negligent Care:**Ms. Fortin presented the following:* Negligent care by a healthcare worker is the failure or omission to provide care that a reasonable and prudent healthcare worker in similar circumstances would have rendered.
* In Ontario, four elements must be established or proven for any legal action based on a claim for negligence to be successful:
	+ There must be a duty of care owed to the patient
	+ There must be a breach of that duty of care
	+ The patient must have suffered some harm or injury
	+ The breach of the duty of care must have caused the harm or injury
* If the alleged negligence happened at WH, patients, families or visitors can report to:
	+ Patient Relations Officer by phone, email or on the hospital website
	+ Advising another healthcare worker who can enter a SERS in the WH patient safety event reporting system or report it directly to the Patient Relations Officer
	+ File a complaint with an applicable college or regulatory body
	+ Reach out to Patient Ombudsman of Ontario who will assist them in navigating where to report
	+ File a civil liability lawsuit against the healthcare worker
* If the alleged negligence happened at WH, healthcare workers report by:
	+ Entering a SERS in the WH patient safety event reporting system
	+ Notify the Director and/or Chief of Staff and/or Chief of Department
	+ Call the Whistleblower hotline
	+ File a complaint with an applicable college or regulatory body
	+ Medical Health Records Auditor reviews all patient deaths within the hospital that might reveal negligent care and brings them forward to Medical Audit, who will escalate concerns to the Chief of Staff and/or VP Patient Care
	+ Quality of Care Review Committee leads care reviews that may identify negligent care by a healthcare worker. If negligence is identified, the discussion is stopped immediately and brought forward to the Chief of Staff and/or VP Patient Care
	+ ED Return Visit Audits
* Quality Care Reviews are designed to identify the causes of patient safety incidents or near misses. The results of quality improvement reviews can lead to a system improvement that will prove beneficial to all future patients.
* Quality Care Reviews are completed under the Quality of Care Information Protection Act (QCIPA) to ensure employees feel comfortable discussing quality of care concerns without fear of retribution from legal or regulatory proceedings.
* Accountability Reviews focus on the conduct or performance of an individual healthcare professional. This generally occurs in response to a concern that a provider’s performance may have been a significant contributor of a patient safety incident. The challenge is to understand the reasonableness of a provider’s decision at the time of a patient safety incident, taking into account all the circumstances in the working environment. The Chief of Staff and VP Patient Care will meet with the healthcare provider.
* An example of a Quality of Care Review and Accountability Review was provided.
* The hospital reports negligence to our insurance provider (HIROC). If it is deemed that the healthcare worker is negligent, it is reported to the appropriate college or regulator. The CEO then reports all actual claims of negligence during in-camera sessions of the Board meetings.
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| PREVIOUS MINUTES – January 28, 2025 | **MOVED** by Ms. Taylor, seconded by Mr. Wallet to approve the previous minutes of January 28, 2025. **CARRIED.** |
| Joint Health and Safety Committee  | **MOVED** by Ms. Soden, seconded by Ms. Wolfe to approve the previous minutes of January 21, 2025. **CARRIED.**Workplace Violence Incidents Update**:**At the last meeting, there was a discrepancy in the number of incidents. After the meeting it was confirmed that there were 4 incidents - 3 level 1 and 1 level 2. A definition of each level was provided.  |
| Finance Committee: | **Q3 HSAA Scorecard**:Ms. Westcar reviewed the Q3 HSAA scorecard and noted there hasn’t been much change from Q2 to Q3 with the exception of knee replacements, which has gone down. **Cybersecurity Update**:Ms. Westcar reviewed the cybersecurity scorecard and noted that many of the partially implemented initiatives have moved to fully implemented.  |
| City Report  | No report |
| County Report | No report  |
| Foundation Report | Ms. Symons provided the following update:* The Foundation received an anonymous estate gift at the end of December for $380,000, which will be used to support the chemotherapy renovation.
* The Winter Direct mail was sent to 5,600 homes in November; 217 responses were received for a total of $120,520 for the 2024 campaign. The total number of donations was down compared to 2023, likely due at least in part to the postal strike, but the average size of donation was higher so overall more money was raised in the 2024 campaign

 **2023               2024**Number of gifts:                      332                  300 (-10%)Average gift:                           $317                $404.73 (+28%)Total raised:                        $105,731             $120,520 (+14%)* Revenue from the 50/50 peaked in December again, at $322,165 resulting in net income of the $117,668. The grand prize winner of WHF monthly 50/50 in January was Michelle Lightheart who won $49,780.
* The Dairy Capital Run is scheduled for May 24, 2025, and will be a similar format to last year. Currently there are 40 runners signed up, and the Foundation is following up with sponsors.
* The Golf Tournament will be held on June 11, 2025. Sponsorship packages were sent the week of February 10th.
* The chemo campaign has generated $2.3M, which includes all donations from January 2023 – January 2025. More donations are expected to filter in over the coming months as well.
* The Foundation is considering a proposal by Joos Canada. They are interested in having one of their power bank kiosks in the hospital to provide patients and visitors with the opportunity to rent chargers for electronic devices. This would be cost-free for the hospital, and the Foundation would get 10% of all revenue. The Foundation is gathering more information before making a decision about this, including talking to the other Ontario hospitals who have Joos kiosks.

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| Correspondence  | Ms. Symons read aloud a letter from TDMH/AHI Board Chairs congratulating WH on achieving Exemplary Standing on our Accreditation. |
| Adjournment  | The meeting adjourned to LPP on motion at 5:49 p.m. CARRIED.  |

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Ms. P. Hilderley, Chair Ms. L. Symons, Secretary