

**MINUTES OF THE REGULAR BOARD MEETING**

**DATE:** Tuesday, May 27, 2025

**TIME:** 1700 hours

**PLACE:** Hybrid (HDH Boardroom/Virtual)

**PRESENT:** **Voting Directors:** Tina Shier (Chair), Pamela Matheson (Vice Chair), Don Butland, Leigh Butler, Réjane Dunn, Lorna Eadie Hocking, Corwin Leifso, Cathy Lansink, Terry Leis, Chris Prues

**Non-Voting Directors:** Dr. Nick Abell (President of Medical Staff), Dana Howes (President and CEO), Saskia MacMillan (VP of Patient Care/CNE), Dr. Randy Montag (Chief of Staff)

**Invited Staff:** Kim Mighton (Vice President of Finance & Operations), Victoria Cumming (Recording Secretary)

**Guests:**

**REGRETS:** **Voting Directors:** Keith Hopkins

**Non-Voting Directors & Invited Staff:**

**1. CALL TO ORDER**

T. Shier called the meeting to order at 1700 hours and provided opening remarks.

**2. LAND ACKNOWLEDGMENT**

The Land Acknowledgement was spoken, honouring the Indigenous peoples and their ancestral connection to the land on which we gather.

**3. APPROVAL OF AGENDA**

Moved and Seconded

**THAT the agenda be approved as presented.**

MOTION CARRIED

**4. DECLARATION OF ANY CONFLICT OF INTEREST**

No conflicts were declared, and the group was reminded to declare a conflict of interest should one arise.

**5. MISSION, VISION, VALUES**

The Board reviewed the Mission, Vision, and Values and were asked to keep them in mind throughout the meeting.

*C. Prues entered the meeting.*

**6. PRESENTATION: SAUGEEN HOSPICE INC.**

Ken Brown, First Vice Chair and Chuck Boullion, Business Manager on the Saugeen Hospice Board of Directors provided an update on the Saugeen Hospice regional initiative. The project has made significant progress in the past few years with the formation of a regional board, securing a site location, retention of an architect, and completion of architectural drawings. The project build timeline is dependent on successful fundraising, with a target build start date of May 2026.

It was explained that their funding strategy focuses on a targeted donor approach rather than a

broad public campaign, concentrating efforts on key potential donors within the region. This strategy is designed to avoid interference with existing fundraising efforts while emphasizing that his represents a one-time build and the largest fundraising push for the organization. The project has secured a \$1.5 million grant for construction and required an additional \$1.2 million in fundraising.

Regarding ongoing operations, the annual operating budget is projected at \$2.3-2.4 million, with funding coming from government sources. Supplemental fundraising will be required annually, approximately \$1.2 million, though this amount may vary based on future legacy donations received.

The facility has been approved for six beds, with an additional seventh bed to be included for operational efficiency. The extra bed will be privately funded to enhance the facility's effectiveness.

The presenters acknowledged the excellent work of the HDH nursing crew sharing a recent experience and made a request for partnership with HDH. Specifically, they asked for a staff member to participate on the Saugeen Hospice Board.

Key concerns addressed during the presentation included the potential diversion of donations from other causes. The hospice board emphasized their continued encouragement for hospital donations to remain priority and their commitment to using unique fundraising approaches to minimize impact on the broader community fundraising landscape.

## **7. STRATEGIC MATTERS**

### **7.1 Grey Bruce Ontario Health Team (GBOHT) Update**

D. Howes provided a briefing note on the agenda that highlighted the Grey Bruce Ontario Health Team is coordinating two regional submissions under the Ontario Government's initiative to connect 300,000 more people to primary care this year. Both proposals aim to enhance team-based primary care services in underserved areas of Grey and Bruce counties, with GBOHT providing coordination support to ensure regional alignment with broader Ontario Health priorities.

It was clarified that the GBOHT has not been approved and were only invited to apply for funding. The group discussed the nurse practitioner role and if there would be enough to fill potential gaps.

## **8. OFFICER REPORTS**

### **8.1 Board Chair Report**

T. Shier reported on the events/meeting she attended throughout the month of April. There was no further discussion.

### **8.2 President & CEO Report**

D. Howes provided a report on the agenda that highlighted;

- **Project SEARCH Update:** HDH and Bruce Grey Catholic District School Board are launching Project SEARCH in September 2025 to provide internship opportunities for students with developmental disabilities. Skills assessments were completed in May with student placements being finalized.
- **Ontario Hospital Association (OHA) Budget Call:** The OHA confirmed \$1.1 billion in additional provincial funding including up to 4% in base funding, though hospital funding letters are delayed until July creating interim planning challenges.

- **McHappy Day Partnership:** McDonald's Hanover chose HDH as a beneficiary to fundraise for a bubble CPAP machine for newborn respiratory care, demonstrating strong community support. HDH's CEO and a physician volunteered during the event.
- **Auxiliary Annual General Meeting:** The Hospital Auxiliary donated \$19,600 for equipment purchases including obstetrical tables, wheelchairs, and a buddy probe. In addition, new executive members were sworn in.
- **Volunteer Recognition:** A Garden Tea Party is scheduled for June 26 to thank clinical volunteers, Auxiliary members, Patient and Family Advisors, and Board members for their contributions.

## 9. **BUSINESS/COMMITTEE MATTERS**

### 9.1 **Finance/Audit & Property Committee Report**

C. Prues reported that the Finance/Audit and Property Committee met on May 26, 2025, to review draft audited financial statements for 2024-25, the Operating Budget for 2025-26 and required attestations.

#### 9.1 (a) **Draft Audited Financial Statements 2024-25**

The committee met with MNP LLP to review the year-end financial results. The 2024-25 fiscal year was characterized by increased demand for services and rising operating costs, yet HDH continued to operate effectively throughout the year. The financial results ultimately show a year-end operating deficiency. The deficiency presented was better than the initial projections at the beginning of the year, representing a positive outcome despite challenging circumstances. The revenue, expenses, cash flow, working capital; and investment holding were highlighted.

Notably, HDH did not need to access its credit facility or draw on investments during the year. The current ratio remained within acceptable parameters while the total margin metric was outside of target ranges – management does not anticipate any significant ramifications from this variance at this time.

Regarding the audit, MNP conducted a clean audit with no issues identified. The auditor's approach remained consistent with previous years, and particular acknowledgement was given to the VP of Finance and Operations and the Finance Team for their excellent work throughout the audit process.

Moved and Seconded

***THAT the Board of Directors recommends the draft 2024-25 Audited Financial Statements to the Annual Meeting of the Corporation for approval as presented.***

MOTION CARRIED

#### 9.1 (b) **Operating Budget 2025-26**

The operating budget reflects the current healthcare environment, acknowledging that ongoing challenges persist, particularly the uncertainty surrounding healthcare financing. Funding allocation information has been delayed until July, and the budget mandate remains unclear.

HDH prepared a conservative budget that will be submitted to Ontario Health. The proposed budget shows an operating deficiency and is based on key assumptions including a 2% increase to global funding. The Ontario Hospital Association continues advocacy efforts for increased hospital funding allocations. In the short-term management's intent will be to draw on the investment account for cash flow needs if required.

Moved and Seconded

***THAT the Board of Directors approves the 2025-26 Operating Budget as presented.***

MOTION CARRIED

**9.1 (c) 2024-25 Attestations**

The Finance/Audit and Property Committee reviewed the required attestations and recommended them for board approval.

Moved and Seconded

***THAT the Board of Directors approve the following as presented to be certified by the Board Chair and President and CEO;***

- ***2024-25 Hospital Report on Consultant Use***
- ***2024-25 BPSAA Attestation***

MOTION CARRIED

**9.2 Fiscal Advisory Committee Report**

There was no report at this time.

**9.3 By-Law Committee Report**

C. Leifso reported that the By-Law Committee met on April 24, 2025, and there are no revisions to the Corporate or Professional/Staff By-Laws to be brought forward. The By-Laws will stand as current.

**9.4 Nominating Committee Report**

P. Matheson reported that the committee met on May 6, 2025, and brought forward a few items for discussion by the Board.

- First Vice Chair and Second Vice Chair positions: The current chair is willing to stay in their position for another year, and the Nominating Committee would like to implement a First Vice Chair and Second Vice Chair position. Those interested in a Second Vice Chair position are to notify the Nominating Committee.
- The Nominating Committee also brought forward a reminder about utilizing mentors as a resource when needed.

The Nominations report was provided. No new members will be brought forward for election at the Annual Meeting. Other Directors up for reelection include; Rejane Dunn, Cathy Lansink, and Corwin Leifso who will all stand for a 3-year term. No resignations were brought forward to the Nominating Committee.

Moved and Seconded

***THAT the Board of Directors approve the Nominating Committee to present Rejane Dunn, Cathy Lansink and Corwin Leifso to stand for a 3-year term at the Annual Meeting.***

MOTION CARRIED

It was noted that the Nominating Committee met with Linda Doughty, Patient and Family Advisor who has agreed to join the Quality Governance & Risk Management Committee starting in September.

**10. CONSENT AGENDA**

Moved and Seconded

**THAT the items on the consent agenda are approved as follows;**

**10.1 Open Board Session Minutes – April 22, 2025**

**10.2 Board Committee Reports**

- (a) Finance/Audit & Property Committee Minutes – April 17, 2025
- (b) Quality Governance & Risk Management Minutes – April 22, 2025
- (c) Medical Advisory Committee – April 3, 2025

**10.3 Reports**

- (a) VP of Patient Care Services/CNE Report
- (b) HDH Foundation Report

**10.4 HSAA Article 8 – Form of Compliance Declaration**

MOTION CARRIED

**11. ROUND TABLE**

**C. Prues** – Recognized the VP of Finance and her team for their audit results. P. Matheson also passed on her acknowledgements.

**12. NEXT MEETING**

Tuesday, June 24, 2025, at 5:00pm

**13. COMPLETION OF BOARD MEETING EVALUATION**

T. Shier reminded the group to complete the Board Meeting Evaluation.

**14. ADJOURNMENT**

The meeting adjourned at 1752 hours.

  
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Tina Shier, Chair

  
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Victoria Cumming, Recorder

  
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Dana Howes, Secretary