

**HDH** HANOVER &  
DISTRICT  
HOSPITAL  
**MINUTES OF THE SPECIAL BOARD MEETING**

**DATE:** Thursday, August 31, 2023

**TIME:** 1500 hours

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

**PRESENT:** **Voting Governors:** Tina Shier (Chair), Pamela Matheson (Vice Chair), Lorna Eadie Hocking (Immediate Past Chair), Don Butland, Leigh Butler, Rejane Dunn, Cathy Lansink, Terry Leis, Chris Prues  
**Non-Voting Governors:** Dana Howes (President and CEO), Mary Rae (VP of Patient Care Services/CNE),

**Invited Staff:** Victoria Cumming (Recording Secretary), Dr. Nick Abell (President of Medical Staff), Kim Mighton (Vice President of Finance & Operations), Karen Otterbein (Manager of Human Resources & Physician Recruitment)

**REGRETS:** **Voting Governors:** Corwin Leifso,  
**Non-Voting Governors & Invited Staff:** Dr. Tim Heerema (Vice President of Medical Staff), Dr. Randy Montag (Chief of Staff)

**1. CALL TO ORDER**

T. Shier called the meeting to order at 1500 hours.

**2. APPROVAL OF AGENDA**

Moved and Seconded

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

MOTION CARRIED

**3. DECLARATION OF ANY CONFLICT OF INTEREST**

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

**4. MISSION, VISION, VALUES**

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

**5. STRATEGIC MATTERS**

**5.1 Monthly Finance & Property Report – Month Ended June 30, 2023**

The Finance and Property report was provided in the agenda for the month ended June 30, 2023. There was a deficit of \$368,616 before building amortization and a deficit of \$447,918 after building amortization.

Variances to the budget were explained including MOH Operating Revenue, MOH TSLP Funding, Outpatient Revenues, Other, Salaries and Wages, Benefits, Medical Staff Remuneration, Supplier and Other and Medical Surgical Supplies.

It was explained to the group that excluding the impact of the repeal of Bill 124 the hospital would be in a surplus position. The HDH management team is doing an excellent job.

During the quarter, HDH completed a replacement of all wood railings in the hospital. The new

hospital-grade plastic used is a clean look and provides improved infection control measures.

*Dr. Abell entered the meeting.*

It was asked how HDH compares with other hospitals. It was clarified that the retroactive awards are the same for all hospitals but the volume of staff members is different.

A request for funding has been sent to the Ministry in regards to more Emergency Department resources needed to match the volumes being experienced. The physicians have also submitted a letter to MPP, Rick Byers requesting a meeting to discuss the unknowns around their funding. The temporary ED closures are worse in the region then previously and are impacting staff and the budget. It was asked if hospitals that are closed are receiving their full funding amount. It was confirmed that they are along with the physicians.

It was asked if there will be any relieve on the ALC front. Beds are slowly opening but there is not enough Personal Support Worker resources to open up all beds that were closed. Long term care will not be going back to a 3 or 4 bed model. Elgin Abbey is closing as it is bankrupt and there has been no update in regards to the Revera build in Hanover.

### **5.2 Operating Line of Credit Request**

A briefing note was included in the agenda outlining the background of the repeal of Bill 124 and the subsequent arbitration awards which have created significant financial obligations with no timeframe for reimbursement of these costs to the hospital. The payments and awards were outlined in the note specifically.

It was recommended to pursue an operating line of credit up to \$1,000,000 as a temporary measure to manage cash flow fluctuations. HDH does have a cash reserve but liquidating this would contribute to capital losses. A line of credit is a shorter term option.

It was estimated that \$1,000,000 would be enough to get HDH through the next 5-6 months without any funding coming through from the Ministry of Health. This will also give some time to discuss with the investment manager our cash flow needs. There are also cash advances that may be available from the Ministry as well. The application process has been started for this.

In regards to interest through OHA calls it has been heard that hospitals are including these costs on their reimbursement forms as an incremental cost incurred.

The Board discussed increasing the amount and earmarking the use of the line of credit to be specifically for retroactive payments.

Moved and Seconded

***THAT the Board of Governors authorize Management to enter into in a credit facility of \$2,000,000. The intended purpose of utilizing the credit facility is earmarked for retroactive payments as a result of the repeal of Bill 124 while waiting for reimbursement from the Ministry of Health in order to enable the hospital to meet its union and non-union contract obligations. When reimbursement is received it will be utilized immediately to pay down the line of credit.***

MOTION CARRIED

## **6. IN-CAMERA SESSION**

Moved and Seconded

**THAT the meeting move to in-camera to discuss matters as outlined in Board Policy # 400 at 1601 hours.**

MOTION CARRIED

Moved and Seconded

**THAT the meeting move out of in-camera at 1728 hours.**

MOTION CARRIED

**7. ROUND TABLE**

There was no further discussion.

**8. NEXT MEETING**

Tuesday, September 26, 2023 at 5:00pm

**9. ADJOURNMENT**

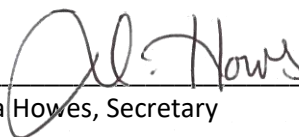
The meeting adjourned at 1728 hours.



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Tina Shier, Chair



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Victoria Cumming, Recorder



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Dana Howes, Secretary