

**BOARD OF DIRECTORS MEETING
OPEN SESSION**

Thursday, January 26, 2023
5:30 pm – La Verendrye General Hospital / Webex

A G E N D A

Item	Description	Page
1.	Call to Order – 5:30 pm – Indigenous Acknowledgment & Reading of the Mission Statement 1.1 Quorum 1.2 Conflict of Interest and Duty	
2.	Consent Agenda 2.1 Board Minutes – November 24, 2022 * Pg 4 2.2 Board Chair & Senior Leadership General Report – J. Ogden, H. Gauthier, J. Loveday, C. Larson, Dr. L. Keffer * Pg 6 2.3 Governance Committee Report – J. Begg 2.4 Audit & Resources Committee Report – B. Norton * Pg 9 2.5 Quality Safety Risk Committee Report – D. Clifford * Pg 12 2.6 Auxiliary Reports * Pg 14	
3.	Motion to Approve the Agenda	
4.	Patient / Resident Safety Moment	
5.	Business Arising - None	
6.	New Business - None	
7.	Opportunity for Public Participation	
8.	Move to In-Camera	
9.	Other Motions/Business	
10.	Date and Location of Next Meeting: February 23, 2023	
11.	Termination	

* denotes attached in board package / **denotes circulated under separate cover / *** denotes previously distributed



**BOARD OF DIRECTORS MEETING
ANTICIPATED MOTIONS – OPEN SESSION**

Thursday, January 26, 2023

3.	Motion to Approve the Agenda	THAT the RHC Board of Directors approve the Agenda as circulated/amended
8.	Move to In-Camera	THAT the RHC Board of Directors move to in camera session at (time)
9.	Other Motions/Business	
11.	Termination	THAT the RHC Board of Directors meeting be terminated at (time)

Indigenous Acknowledgment:

Riverside acknowledges that the place we are meeting today is on the traditional lands of the Anishinaabeg people, within the lands of Treaty 3 Territory, as well as the home to many Métis.

Our Mission
Improving the health of every person we serve,
responding to the needs of our communities.

MISSION

VISION *Our Vision*
Innovative, high quality health care - inspired
and delivered by our team and partners.

Our Values **VALUES**
Integrity • Respect • Excellence • Growth

STRATEGIC PILLARS

Quality • Organizational Health • Partnerships • Advocacy

RIVERSIDE HEALTH CARE

COVID-19 for a second time. The patient and family voiced frustrations regarding lack of communication by St. Joe's as the family was not made aware of the fall that resulted in the transfer and additional surgery and the second bout of hospital acquired COVID-19. The family called the Patient Flo Coordinator at Riverside to enquire about transferring the patient back to their home hospital, which was accommodated. It was shared the communication from Riverside has always been commendable. The patient is looking forward to going back to Riverside, hoping that ORGNE can accommodate the transfer without delay. The patient noted they are excited to start a new journey where they feel a sense of community and a sense of safety back home.

5. BUSINESS ARISING:

There was no business arising.

6. NEW BUSINESS:

There was no new business.

7. OPPORTUNITY FOR PUBLIC PARTICIPATION

There was no public participation.

8. MOVE TO IN-CAMERA:

It was, MOVED BY: K. Lampi THAT the Board go in-camera at 5:39 pm.	SECONDED BY: B. Calder CARRIED.
--	--

9. OTHER MOTIONS/BUSINESS:

There was no other motions/business.

10. DATE AND LOCATION OF NEXT MEETING:

January 26, 2023

11. TERMINATION:

It was, MOVED BY: K. Lampi THAT the meeting be terminated at 8:16 pm.	CARRIED.
---	----------

Chair

Secretary/Treasurer



Board Chair, Chief of Staff & Senior Leadership Report – January 2023
Open Session

Strategic Pillars & Directions

Investing in Those Who Serve - Strategically Leveraging our Human Resources

- **Orthopedic Program**
 - Revenue from Ortho program this fiscal year has been substantial!
 - Commitment to increased volumes for Q4
 - Surgical Innovation Funding and Bundled Care Gains has supported the purchase of a Hip Grip, Purist Table, Zimmer Power Tools and Micropower, which will support the success of this growing program
 - Q3 Volumes:
 - Dr. Cullinan, Dr. Droll and Dr. Marion – 34 Hips and 50 Knees – Total 84 joints
 - Dr. LeFrancois – 2 ACLs, 6 MTP fusions, 22 Degenerative Meniscus and Joint Repair – Total 30 procedures
 - Urology and Gynecological Program
 - Carly Whalen and Heather Wright have both completed their Laser Safety Officer Training. All other staff have completed the basic laser safety training required
 - Laser is on-site, but still awaiting the “brains” (a microchip for the camera) for the reusable cystoscopes. There are global supply chain issues with the microchip. We are using disposable cystoscopes in the interim
 - Gyne and Urology programs are both running very well and have been successful in providing care close to home for our community
 - V-Pro Sterilizer for cystoscopes will be delivered/installed on March 7, 2023
 - Start up/testing of V-Pro unit and staff training will occur March 8 and 9, 2023 – Grant Billings is the Lead for Steris and will be on-site with the Team those days
 - Q3 Volumes:
 - Gyne: Dr. Buitenhuis – 13 mixed Gyne procedures, 5 hysterectomies – Total 18 procedures
 - Urology: Dr. Zakaria – 8 mixed procedures, 8 cystoscopies – Total 16 procedures
 - Advocacy
 - Regional Mental Health Assessment Team
 - Q3 MHAT Stats
 - 18 MHAT Assessments, 3 transfers to Schedule One Facility, 15 managed locally
- **Vaccine Policy**

Effective January 30, 2023, staff, students, volunteers, support workers, physicians and contractors will no longer be required to be vaccinated for COVID-19 as a condition of working at Riverside. Measures put in place to mitigate the spread of COVID-19, such as daily screening, staying home if symptomatic, completing antigen testing as required in our long-term care facilities, and complying with masking requirements remain mandatory. This change recognizes that the efficacy of two vaccines administered over a year ago is primarily the same as being unvaccinated. As a result, we opted to recognize the only reason to retain the policy would be political and not scientific. As a result of this change, we do have a few staff returning to Riverside and we are exploring both a surgical and emergency department locum physician
- **Rainycrest - Beds In Abeyance (BIA)**

We recently shared an analysis outlining the 2022-23 and 2023-24 Health Human Resource and Deficit Challenges for Riverside Health Care, including Rainycrest Long Term Care with Ontario Health North and the Ministry of Long-Term Care (MLTC). At that time, we requested that 42 beds remain in abeyance for a 15-month period to March 31, 2024, recognizing touch points will need to occur to determine progress made in restoring our health human resources. We also recommended system changes that would facilitate re-stabilization of the Home. On December 16, 2023, the MLTC notified us that further to our request regarding the expiry of the agreement of the 22 beds in abeyance (BIA) at Rainycrest will be extended from December 31, 2022 to January 30, 2023. RHC is working with the MLTC to coordinate a follow up meeting prior to the end of January 2023
- **Diagnostic Imaging**

The move to 16-hour onsite coverage has occurred starting in January, with positive comments from staff
- **Lab**

Riverside laboratory will soon be doing Point of Care (POC) testing for maternity patients to assess for amniotic fluid to diagnosis rupture of membranes. This will provide an increased accuracy in diagnosing than the current method of amnio stick. POC testing is also being implemented to identify Group A strep utilizing our “ID NOW” unit. We have been approved for a 3rd ID NOW unit. These units will be housed in our laboratory, LaVerendrye and Rainy River emergency departments
- **General Surgery**

Dr. Eltawil’s last active day is February 3, 2023. In addition to working with General Surgery from Thunder Bay we are engaging two general surgeons that have expressed potential interest in our organization for a full-time surgical rotation. We are working to finalize locum rotations for both these surgeons over the next 3-5 months to allow them opportunity to

visit Fort Frances and work at LaVerendrye General Hospital. In addition, a general surgeon from another Northwestern Ontario community recently applied for privileges at Riverside. The physician recruiter is prioritizing recruitment of locum general surgeons with a focus on the months of February and March

One Riverside - Promoting a Consistent and Empowering Culture

- **Satisfaction Surveys**
 - Quick Response (QR) codes have been developed for patient satisfaction surveys. Posted in all maternity rooms
 - QR Codes developed for Day Surgery and Endo Patient Satisfaction Surveys. Will provide to patients upon discharge with goal of increase in patient feedback
 - Out-patient satisfaction survey presently being conducted for virtual service
- **Lunch With Leadership – Rainy River**
 Our next Lunch with Leadership is scheduled in February with a multi-disciplinary group from the Rainy River Health Centre. We are also attempting to schedule a separate meeting with the onsite physician at that time

Tomorrow's Riverside Today - Investing Today to Support Tomorrow

- **Capital List (23-24)**
 Supply Chain leadership is meeting with Directors and their Senior Leader to review their Capital requests for 2023-24. Video conferencing (Microsoft Teams) is being used to conduct these meetings intended to gain a better understanding of each request. This process is preliminary in nature but will assist in better informing and streamlining the decision-making process
- **Thunder Bay Regional General Surgery Support**
 Thunder Bay Regional has indicated a desire to provide 4-5 days of general surgery support per month, with an opportunity to expand upon this commitment level over time. While the Regional Surgical Network contract with the Ministry provides for up to three General Surgeons in each of Fort Frances, Kenora, Dryden and Sioux Lookouts its compensation model does not support Fee for Service billing by general surgeons in any of our communities. As a result, we have met with the General Surgery leadership from both the Regional Surgical Network and Thunder Bay Regional and the Ministry of Health representatives that administer the contract to discuss temporary changes to the agreement that will permit us to access Thunder Bay General Surgeons. While the Ministry is considering this request for an interim period, it was conveyed to our group that advocacy across the Ministry and Ontario Medical Association would be required in order to impact a more permanent change to the existing model
- **Mental Health in the Emergency Department**
 - Health System Navigator provided support to 28 patients in Emergency Department for Q3
 - Q3 ER Volumes
 - 2022/2023 Q3 4830 visits
 - 2021/2022 Q3 4147 Visits (683 less)
 - 2020/2021 Q3 3269 (1551 less)
 - Investigation into workplace violence incident with contracted staff that resulted in many meetings including legal council, OPP and staff along with development of restricted access letter and communication for staff involved
 - Emergency Department Peer to Peer Support Program
 - Emergency Department (ED) Peer-to-Peer Support Programs for Physicians. Same number as Critical, but Physicians can call with any questions regardless of CTAS level. This program went live December 6, 2022
- **Online Payments**
 The Finance Department has explored options to support online payment for patients, residents and clients. Toronto Dominion (TD) Online Mart has been identified as the potential system, also recognizing that we currently bank with the TD. This long overdue functionality will allow the flexibility for those we serve to make payment conveniently as we do in all other aspects of our lives. Finance is currently working through the onboarding process with the TD and is anticipating this service will be active by April 2023
- **Electronic Funds Transfer (EFT) Payments (Accounts Payable)**
 While RHC has utilized EFT payments for several years there remain a significant number of vendors that do not support payment in this manner. Finance has been actively campaigning vendors to register for direct EFT payments to reduce our need to issue cheques. This in turn reduces outstanding cheques, delays in payments, late charges and lost cheques. The result of this campaign is that numerous vendors have signed up for EFT. Over the next few months, we will be moving to having all staff sign up for direct EFT payments
- **Ontario College of Pharmacists**
 Ontario College of Pharmacists (OCP) visited Emo/RR on October 4, 2022, and LVGH October 5, 2022. All reports were received and responded to for issues outstanding, with continued implementation of changes/policies and procedures. Outstanding item is risk assessment for mixing of chemo and ongoing plan for pharmacy relocation/renovations. Awaiting

meeting with architect and contractor to determine where changes can be made to reduce costing/suggestions for location

- **OHT The Path Forward (as summarized by Miller Thomson)**

On November 30, 2022, the Ministry of Health announced a new guidance document to support the maturation of Ontario Health Teams (OHTs). Here are some of the highlights of the guidance document:

1. Clinical priorities and development of common clinical pathways: Initial clinical pathways will be introduced for some chronic conditions, such as congestive heart failure, diabetes, etc. Over time, common clinical pathways will also be developed for mental health, addictions, and palliative and end-of-life care
2. Common structure to progress to full implementation: To support the future state vision for OHTs of integrated clinical and fiscal accountability, OHTs will be expected to create new not-for-profit corporations to manage and coordinate OHT activities. OHT member organizations will maintain their existing accountabilities
3. Consistent collaboration in decision-making: The Ministry is standardizing OHT decision-making to include the following groups: Primary Care Providers; Home and Community Care Providers; Community Care Providers; Public Hospitals; Mental Health and Addictions Providers; Patients, Families and Caregivers; and Physicians and other Clinicians. OHTs are also encouraged to expand decision-making to include long-term care, municipalities, emergency health services, community paramedicine and public health units
4. Sustainable operational capacity: The Ministry is requiring OHTs to identify an Operational Support Provider to provide back-office functions to support the OHT on an ongoing basis

Striving to Excel in Equity, Diversity & Inclusion (EDI) - Supporting Employees Throughout the Organization

- **Code of Conduct**

The Code of Conduct rollout plan, as follows, is progressing with an expected completion date of February 10, 2023:

- Develop signage (complete)
 - Posted in our policy system (complete)
 - Post signage throughout organization (in progress)
 - Post electronic version on portal, web site, newsletter, social media (outstanding)
 - Develop mandatory course in our learning system (outstanding)
 - Engage leadership to engage front line personnel (outstanding)
5. Consistency in OHT communications: The Ministry has set out requirements for OHT-led communications that include making best efforts to include patient/provider benefits, including a standard OHT hashtag, linking to government websites where possible, and communication sign off instructions.
 6. The Ministry of Health has indicated that additional guidelines, protocols and resources will be provided over time to support OHTs in implementing the new directions. Provincial timelines have not been communicated for this transition and the Ministry and Ontario Health will be working with each OHT to assess readiness.

Thank you to the Riverside Team for their submissions, they are invaluable in the preparation of this report.

Respectfully Submitted,

Joanne Ogden, Board Chair

Dr. Lucas Keffer, Chief of Staff

Julie Loveday, Executive Vice President, Clinical Services & CNE

Carla Larson, Chief Financial and Information Officer

Jordan Forbes, Chief Human Resources Officer

Henry Gauthier, President & CEO



Audit & Resources Committee Report – January 2023

2.4.1 Financial Report – November and December 2022 *



Operating Revenue & Expense Summary April 1, 2022 to December 2022

		2022-2023 DRAFT Budget	YTD DRAFT Budget	YTD Actual	YTD Actual Dollars Over(Under) YTD Budget	YTD Actual Percent Over(Under) YTD Budget
Fund Type 1 - LHIN Funded - Hospital Services						
REVENUE						
LHIN - Base Funding	A-1	\$27,866,124	\$20,899,593	\$20,746,571	(\$153,022)	-0.73%
QBP Funding	A-2	\$489,500	\$367,125	\$1,169,901	\$802,776	218.67%
Other Funding (19*) - Hospice, Oncology Drug Reimbursement, Stroke Strategy	A-3	\$1,398,500	\$1,048,875	\$1,892,732	\$843,857	80.45%
LHIN - One Time Funding	A-4	\$58,800	\$44,100	\$1,701,824	\$1,657,724	3759.01%
MOHLTC - One Time Funding	A-5	\$196,275	\$147,206	\$147,211	\$5	0.00%
Other Revenue MOHLTC - HOCC	A-6	\$624,774	\$468,581	\$502,922	\$34,342	7.33%
Paymaster	A-7	\$0	\$0	\$0	\$0	0%
Cancer Care Ontario	A-8	\$21,788	\$16,341	\$10,145	(\$6,196)	-37.92%
Recoveries & Miscellaneous	A-9	\$1,716,159	\$1,287,119	\$1,492,228	\$205,109	15.94%
Amortization of Grants/Donations Equipment	A-10	\$387,373	\$290,530	\$256,768	(\$33,762)	-11.62%
OHIP Revenue & Patient Revenue from Other Payors	A-11	\$1,725,506	\$1,294,130	\$1,352,978	\$58,848	4.55%
Differential & Copayment	A-12	\$970,001	\$727,501	\$562,137	(\$165,364)	-22.73%
TOTAL REVENUE	A-13	\$35,454,800	\$26,591,100	\$29,835,416	\$3,244,316	12.20%
Compensation - Salaries & Wages	A-14	\$19,234,068	\$14,491,421	\$16,672,845	\$2,181,423	15.05%
Benefit Contributions	A-15	\$5,173,732	\$3,898,017	\$3,914,122	\$16,105	0.41%
Future Benefits	A-16	\$199,100	\$149,325	\$122,850	(\$26,475)	-17.73%
Medical Staff Remuneration	A-17	\$1,810,900	\$1,358,175	\$1,848,794	\$490,619	36.12%
Nurse Practitioner Remuneration	A-18	\$138,448	\$103,836	\$109,847	\$6,011	5.79%
Supplies & Other Expenses	A-19	\$5,390,945	\$4,043,209	\$4,511,125	\$467,916	11.57%
Amortization of Software Licenses & Fees	A-20	\$27,831	\$20,873	\$13,373	(\$7,500)	-35.93%
Medical/Surgical Supplies	A-21	\$747,713	\$560,785	\$988,053	\$427,268	76.19%
Drugs & Medical Gases	A-22	\$1,622,419	\$1,216,814	\$2,003,401	\$786,587	64.64%
Amortization of Equipment	A-23	\$813,165	\$609,874	\$607,314	(\$2,560)	-0.42%
Rental/Lease of Equipment	A-24	\$158,458	\$118,844	\$134,016	\$15,173	12.77%
Bad Debts	A-25	\$82,000	\$61,500	\$80,981	\$19,481	31.68%
TOTAL EXPENSE	A-26	\$35,398,779	\$26,632,673	\$31,006,721	\$4,374,048	16.42%
SURPLUS/(DEFICIT)	A-27	\$56,021	\$42,016	(\$1,171,305)	(\$1,213,320)	-2887.77%



Operating Revenue & Expense Summary April 1, 2022 to December 2022

		2022-2023 DRAFT Budget	YTD DRAFT Budget	YTD Actual	YTD Actual Dollars Over(Under) YTD Budget	YTD Actual Percent Over(Under) YTD Budget
Fund Type 2 - LHIN Funded - Counselling & Non Profit Housing Programs Mental Health - Case Management - Housing - Addictions - Problem Gambling						
TOTAL REVENUE	B-1	\$1,523,053	\$1,142,290	\$1,477,024	\$334,734	29.30%
TOTAL EXPENSE	B-2	\$1,523,053	\$1,142,290	\$1,518,558	\$376,268	32.94%
SURPLUS/(DEFICIT) - DUE To LHIN	B-3	\$0	\$0	(\$41,534)	(\$41,534)	0.00%
Fund Type 3 - Other Ministry/Agency Funded - Non Hospital Services Partner Assault Response - Family Violence						
TOTAL REVENUE	C-1	\$203,436	\$152,577	\$154,404	\$1,827	1.20%
TOTAL EXPENSE	C-2	\$203,436	\$152,577	\$154,404	\$1,827	1.20%
SURPLUS/(DEFICIT) - DUE To Other	C-3	\$0	\$0	\$0	\$0	0.00%
Fund Type 2 - LHIN Funded - RainyCrest Community Support Services (Home Support, Assisted Living, Adult Day, Meals on Wheels)						
TOTAL REVENUE	D-1	\$1,612,382	\$1,209,287	\$1,386,295	\$177,009	14.64%
TOTAL EXPENSE	D-2	\$1,612,382	\$1,209,287	\$1,386,295	\$177,009	14.64%
SURPLUS/(DEFICIT) - DUE To LHIN	D-3	\$0	\$0	\$0	\$0	0.00%
Fund Type 2 - LHIN Funded - RainyCrest Long Term Care						
TOTAL REVENUE	E-1	\$14,252,075	\$10,689,056	\$12,740,120	\$2,051,063	19.19%
Compensation & Benefit Contributions	E-2	\$12,055,122	\$9,082,626	\$11,276,013	\$2,193,386	24.15%
Supplies	E-3	\$1,314,068	\$985,551	\$1,067,496	\$81,945	8.31%
Service Recipient Specific Supplies	E-4	\$0	\$0	\$0	\$0	0.00%
Sundry	E-5	\$1,135,117	\$851,338	\$1,094,316	\$242,978	28.54%
Equipment	E-6	\$252,989	\$189,742	\$371,325	\$181,583	95.70%
Contracted Out	E-7	\$113,883	\$85,412	\$61,020	(\$24,393)	-28.56%
Building & Grounds	E-8	\$29,013	\$21,760	\$251,000	\$229,240	1053.50%
TOTAL EXPENSE	E-9	\$14,900,192	\$11,216,429	\$14,121,169	\$2,904,740	25.90%
SURPLUS/(DEFICIT) including unfunded liabilities	E-10	(\$648,117)	(\$527,372)	(\$1,381,049)	(\$853,677)	161.87%
Less: Unfunded Future Benefits	E-11	\$0	\$0	\$107,325	\$107,325	0%
Less: Unfunded Amortization Expense	E-12	\$0	\$0	\$1,097	\$1,097	0%
SURPLUS/(DEFICIT) excluding unfunded liabilities	E-13	(\$648,117)	(\$527,372)	(\$1,272,628)	(\$745,255)	141.31%
Summary - Operating Surplus(Deficit) - Corporate - Hospital and Other Funds						
Operating Surplus(Deficit) - Corporate - Hospital and Other Funds		(\$592,096)	(\$485,357)	(\$2,485,466)		
Summary - Operating Surplus(Deficit) - Hospitals & Long Term Care ONLY						
Operating Surplus(Deficit) - Hospitals & Long Term Care ONLY		(\$592,096)	(\$485,357)	(\$2,443,932)		
Summary - Total Operating Margin - Hospitals & Long Term Care ONLY						
Total Operating Margin - Hospitals & Long Term Care ONLY		-1.19%	-1.30%	-5.74%		



Quality, Safety, Risk Committee Report – January 2023

2.5.1 Board Quality Metrics *

BOARD OF DIRECTORS - QUALITY METRICS - 2022-2023



- INDICATORS:**
- Participation A** - # of voting board members attending board meetings monthly.
 - Participation B** - # of voting board members attending committee meetings monthly.
 - Reflection A** - # of completed board meeting evaluation surveys bi-monthly.
 - Reflection B** - # of members that complete the board self-assessment questionnaire annually (June).
 - Decision Making** - # of board decisions made by detailed briefing notes/supporting documentation done monthly.
 - Education A** - # of education sessions at board meetings monthly.
 - Education B** - # of board meeting agenda items related to integration, quality or strategy monthly.
 - Composition** - # of categories in the skills based board matrix met annually (March).
 - Compliance** - # of new directors that attend board orientation annually (Sept).

INDICATOR	SEP	OCT	NOV	DEC	JAN	FEB	MAR	APR	MAY	JUN	JUL	AUG	YTD Actual	Target	Variance	Notes
1. Participation A	100%	89%	67%	#DIV/0!	85%	75%	10%									
2. Participation B	67%	90%	80%	#DIV/0!	78%	75%	3%									
3. Reflection A	89%	#DIV/0!	89%	#DIV/0!	89%	100%	-11%									
4. Reflection B										#DIV/0!			#DIV/0!	100%	#DIV/0!	
5. Decision Making	100%	100%	100%	#DIV/0!	100%	90%	10%									
6. Education A	100%	100%	100%	#DIV/0!	150%	100%	50%	min of 1 session/mtg								
7. Education B	100%	100%	100%	#DIV/0!	100%	100%	0%	min of 2 items/mtg								
8. Composition							#DIV/0!						#DIV/0!	89%	#DIV/0!	11/18 skills met
9. Compliance	#DIV/0!	100%	#DIV/0!										#DIV/0!	90%	#DIV/0!	Board Orientation took place in October 2022



Auxiliary Report – January 2023

Emo

No Report.

La Verendrye General Hospital

See attached report.

Rainycrest

No Report.

Rainy River

The Rainy River Hospital Auxiliary had a very busy December. We held our December meeting at member Ida Maryniuk's home, with Allison Cox attending the meeting and providing us with valuable information from the Foundation. She also accepted our donation to purchase the Stryker bed. A luncheon was enjoyed by all after the conclusion of the meeting. Our annual Christmas Bazaar was a great success thanks to donations from our members, the public and especially the West Rainy River District Lions Club. As a result, we reached our financial goal of purchasing the Stryker emergency stretcher for our hospital. Gifts for long term residents were purchased and delivered to the hospital. Vouchers for haircuts were distributed, with services being provided by local hairdresser Laurie Kuzyk. Members were also encouraged to take a tag from the Angel Tree in the lobby of the hospital to purchase a gift for specific residents. Discussion took place regarding gathering items for hospital kits to be available at the hospital for patients who may not be prepared for a hospital stay. We will be assembling these kits in the New Year. The Auxiliary will also be reviewing and amending our Constitution in the New Year, as it has not been updated since 2017.

LAVERENDRYE GENERAL HOSPITAL AUXILIARY EXECUTIVE MEETING
December 6, 2022 1:30pm
Ground Floor Meeting Room, LaVerendrye Hospital

1. **Call to Order:** The meeting was called to order at 1:35pm by Marnie Cumming.

Attendance: Marnie Cumming, Linda Booth, Irene Laing, Donna Penney, Diane Glowasky Ellen Gagne, Susan Sieders, Brenda Cox
Regrets: Jan Beazley, Linda Plumridge, Margie Gibson
2. **Auxiliary Pledge:** Read by Donna Penney
3. **Declaration of Conflict of Interest:** None declared
4. **Approval of Agenda:** All approved
5. **Minutes of October 4, 2022 and November 8, 2022 meetings:** Revised and distributed to all present.
6. **Treasurer's Report:** True balance as of November 30, 2022 was \$39,395.33 in bank. The month of November 2022 has brought in \$12,349.23. Our expenses were \$1892.11. We haven't received a bill from the Rendez-Vous as of yet.
7. **Correspondence:** None to report.
8. **Directors' Reports:**
 - a. **Foundation Representative:** Update that the Foundation Gala had netted \$45,000.
 - b. **Gift Shop:** There are 2 new pop-ups that we are hoping will do well. The debit problem has been sorted out and the machine is proving to be an asset to the Gift Shop.

Lobby Lottery: The Lottery is going well, we have grossed approx. \$240.00 to date. All sales of pull-tab tickets must end by December 31st as our license expires at that time.
 - c. **Communication:** Position remains vacant although we have received good coverage in local media regarding the *Spirit of Christmas*.
 - d. **Membership:** Marnie reported 160 paid members which is an increase of 5. In addition, we received \$58.00 in donations. Marnie will send out membership forms in January to those who have not yet renewed with added inspiration such as missing you statements etc.

Courtesies: Donna has sent sympathies to Linda Beadows, the family of Gloria Wood and a Get Well to Linda Plumridge.
 - e. **Social Activities:** Christmas Luncheon – Plans are in hand and Linda B. and Diane will be putting up posters. All new members from within the past year have been contacted by phone to invite them to attend. A 'mix and mingle' bingo activity is planned as a way to get attendees to get to know new members.
 - f. **Special Events:** vacant
 - g. **Directors-at-Large:** No Reports.

9. Unfinished Business:

- a. **The Spirit of Christmas** was a huge success. Diane thanked everyone and is getting names and addresses on donations ie. quilts etc. There was a request for 2 different tax receipts for donated items valued at \$80 - \$100. Diane will e-mail Linda Plumridge and ask how to handle this. Linda P has made and mailed out charitable receipts to cash donor donations. Any future cash donations (cheques) for Spirit of Christmas should be to the LaVerendrye General Hospital Auxiliary and mailed to the hospital.

We received \$2117.00 in cash donations. The admittance table took in \$721.00 and there were 120 paid attendees. The Penny Table made \$845. The silent auction made \$7561.00 for a total revenue of \$11,244.00. The net income is approx. \$9300 - \$9400 pending the bill from the Rendez-Vous. In comparison, total revenue in 2018 was \$16000, with a net of \$12,500. Attendance had been 210 versus 120 this year.

Diane would like to know where Susan would like her to store the leftover baskets, acrylic signs and penny table tickets etc. Diane suggested we make bins for the different events. Diane stated there was one quilt donated by the Beyak Group left over that we might want to use in a future event. It was decided we would discuss this at our February meeting. Diane also asked what she should put in the thank you ad for the Spirit of Christmas. It was decided it should be generic so it would include everyone. Diane will talk to Linda Plumridge about it and to decide what dates to put it in the newspaper.

- b. **Volunteer Recognition:** Marnie reported that Allison will be spearheading planning in January with all the Auxiliaries and the Foundation so that a recognition event can be held in the spring.
- c. **Policy and Procedures manual updating:** Policy and Procedures manual needs updating. Marnie, Jan and Irene had begun last spring. All agreed to continue the work in January.

10. New Business:

- a. **New Year's Baby Gift:** Judy Webster has expressed her wish to continue making baskets to welcome New Years' babies and is looking for a \$100.00 donation from the Gift Shop for each basket. Irene suggested we make a policy to give \$100 in donated merchandise from the Gift Shop for the New Year's baby basket each year. All executive present at this meeting approved.
- b. **Staff thank you's:** Thank you gifts of Poinsettias and Oranges etc. to Alison Cox and Sandra Beadle. Cookie donation to Dietary personnel and Maintenance personnel. Brenda and Alison will deliver cookies and maybe some Quality candy tins. Diane will deliver Poinsettias.
- c. **Proposals regarding 2 new events for 2023/24:** We discussed the need for new members and trying to attract younger members. We need a proposal for new events although we all agreed that we should continue the Rocking for a Reason and the Strawberry Social which have been met with much success. We discussed getting more members not on the executive to help out.

Marnie passed out 2 new event proposals detailing a Women's Wellness Workshop for early 2024 and a Stitches (quilt display) event Oct/Nov 2023. Both were positively received and will be brought forward for further discussion at our next meeting.

11. **Adjournment:** Marnie made some really lovely quilted star Christmas decorations complete with a special and unique message of appreciation to each of the executive members. We were all very touched. This meeting was adjourned at 3:10pm. Next meeting scheduled for February 7, 2023 at 1:30pm.