



**MINUTES** of the **BOARD OF DIRECTORS** meeting held on **Thursday, September 8, 2022**, 17:00 hours, via ZOOM, live streamed on YouTube.

**PRESENT VIA ZOOM:**

Anthony Paniccia, Chair

Laura Copat

Paul Lachance

Cynthia Bissonnette

Ian McLeod

Mary Dawson

Linda Staudt

David Malian

Dr. Laurie Freeman

Genevieve Isshak

Penny Allen

Patricia France

Michael Lavoie

Dr. Wassim Saad (ex-officio, non-voting)

David Musyj (ex-officio, non-voting)

Karen Riddell (ex-officio, non-voting)

Dr. Danielle Soulliere (ex-officio, non-voting)

Dr. Larry Jacobs (ex-officio, non-voting)

**STAFF VIA ZOOM:**

Executive Committee

**REGRETS:**

Dr. Maher Sabalbal (ex-officio, non-voting)

**1. CALL TO ORDER:**

The meeting was called to order at 1705 hours with Mr. Paniccia presiding as Chair and Ms. Sutherland recording the minutes.

**2. DECLARATIONS OF CONFLICT OF INTEREST:**

None declared.

**3. PREVIOUS MINUTES:**

The minutes of the June 2, 2022 Board meeting had been previously circulated.

**MOVED** by Ms. P. France, **SECONDED** by Ms. G. Isshak and **CARRIED**

**THAT** the minutes of the June 2, 2022 Board of Directors meeting be approved.

The Chair provided a couple of updates:

- The Canadian flags at both campuses have been lowered to half-mast in honour of Queen Elizabeth II who passed away today. A moment of silence was observed.
- The St. Clair College 28<sup>th</sup> Annual Gourmet Food & Wine Gala will be held on Friday, September 23, 2022. This year funds are being raised for the New W/E Acute Care Hospital.

#### **4. REPORT FROM THE PRESIDENT & CEO:**

Mr. Musyj referred to his submitted report and he indicated that he is trying to get back to this reporting format. This was difficult during the last couple of years of the pandemic with things changing so rapidly. Highlights are as follows:

- **Bill 7 – More Beds, Better Care Act 2022** - Mr. Musyj explained the concept. This legislation is meant to allow better patient flow through the system. Prior to Bill 7, the process was a complicated one, allowing patients to select their “top 5” choices of LTC homes. Now it is a physician (clinical decision) that declares a patient ALC for LTC. Based on modelling from OH, further action is needed to strengthen the health-care system or we could see a shortage of approximately 2,400 spaces as we head into the fall. According to the OHA, there were 5,930 ALC patients in hospital as of August 17, 2022, of which 2,400 or 40% are awaiting a LTC bed. Since January 1, 2022 to the end of July 2022, WRH has had 276 patients declared by their physician as requiring an alternative level of care, not requiring acute care, and qualifying to be placed in LTC. At the same time for the month of August, WRH had approximately 22 patients a day waiting in the ER for an inpatient bed to become available.

Mr. Musyj outlined what we have to make sure happens and all of this will be addressed by regulations and rules coming out shortly.

- **Upcoming Influenza season** – Dr. Saad spoke to the 2022 projections. We look at the southern hemisphere to get a sense of what we can expect, for example, Australia, who is nearing the end of its worst flu season in five years. Flu activity was unusually low throughout the 2020-2021 flu season.

In Australia, cases peaked about three times higher than the average for that period, and they topped out about two months earlier than they normally do. Dr. Saad explained why this could be, starting with the fact that children are back in school and no longer wearing masks. Another reason could be low immunity to influenza. The big concern is the already strained hospital setting and then having two respiratory viruses co-circulating at the same time. Dr. Saad explained this has always been a concern.

- **Health Human Resources** – Ms. Riddell provided the update. Work continued over the summer to boost staffing. Since prior to the start of COVID-19 WRH has approximately 10% more front line clinical staff – this is over 400 more clinical employees working now. The Hospital has taken advantage of all government supported programs such as hiring third and fourth year nursing students and recruitment of internationally educated nursing (IEN) staff through the CNO program. WRH has also collapsed part-time clinical jobs into full-time jobs as much as possible. This has resulted in 12 full-time jobs being created. Ms. Riddell added we have eliminated some temporary jobs and made them permanent where we could. As a result, 27 temporary full-time positions were converted into permanent full-time and 27 temporary part-time positions were converted to permanent part-time. This is more attractive to external recruits. These strategies have been very successful to date.

## **5. REPORT FROM SCHULICH:**

Dr. Jacobs referred to his report which included several announcements. The Windsor Campus hosted a Meet and Greet this week with the incoming class of 2026. The annual event also welcomed NP students to the University of Windsor

An Accreditation review is taking place in 16 months so the upcoming year will be busy with collecting documentation and hopefully finding opportunities for growth.

The International program was approved and launched over the summer and is now accepting applications for international students. More to come.

## **6. FINANCIAL PRESENTATION (July 2022 Results):**

Mr. McLeod reported.

### **Slide 2 – Financial Results – YTD July 2022:**

- \$245,000 deficit for hospital operations year to date
- The net deficit after building amortization is \$657,000

### **Slide 3 – COVID-19 Impact on Expenses:**

- This slide shows the breakdown of \$9.3 million in COVID-19 expenses
- Unfunded COVID-19 expenses total \$1,123,000 due to
  - the wage differential for the Nursing Externs, sick and isolation costs in July which are now unfunded, additional staffing in the perioperative program
  - Incremental PPE
  - Additional shuttle costs, storage of equipment
- We expect the \$170,000 gap in medical remuneration to be funded

### **Revenue shortfalls relate to three categories and these are reimbursed through COVID-19 funding:**

- Volume-based for Quality-Based Procedures (QBP), Neuro, Cardiac and Wait Time. When compared to the budgeted volumes there is a \$3.3 million shortfall.
- Patient Services revenue sources are preferred accommodation (semi and private room charges), OHIP technical (hospital portion) and professional (physician portion) fees and billing for cosmetic procedures (not covered by OHIP).
- Recoveries come from retail operations such as the gift shop, food services, parking, print shop and services such as laboratory test referred in from other hospitals.

### **Slide 4 – Revenue:**

- Base and one time funding is \$3.6 million favourable due to amounts that have been accrued for known COVID-19 reimbursements.
- Preferred Accommodation and Co-payment Revenue \$1,045,000 unfavourable due to the inability to bill for private and semi-private rooms assigned for infection control reasons.

- Patient Services Revenue \$1,661,000 favourable – relates to uninsured patient revenue from the Ministry which is paid at the interprovincial rate which is higher than the OHIP rate.
- Other Recoveries favourable \$769,000 – retail pharmacy revenues are offset by higher drug expenses

**Slide 5 – Expenses:**

- Salaries and Wages are \$851 million unfavourable year to date. This variance includes \$1.3 million in COVID sick and isolation pay and \$1.9 million for nursing externs and \$995,000 in screening costs.
- Medical/Surgical supplies are \$238,000 unfavourable due to increased use of PPE which is not funded beyond June 30, 2022
- Medical staff fee variance is largely attributable to temporary COVID-19 physician payments which are funded (\$1.8 million) with the remainder attributable to additional diagnostic volumes which are funded via OHIP billings (patient services revenue).
- Drugs \$215,000 unfavourable, additional drug expenses in retail pharmacies are offset by recoveries as noted previously
- Other supplies variance of \$83,000 mainly due to COVID-19 related expenses such as additional shuttle costs, storage of equipment to implement social distancing

**MOVED** by Mr. I. McLeod, **SECONDED** by Mr. P. Lachance and **CARRIED** **THAT** the September 8, 2022 Financial Presentation (as of July 31, 2022) be accepted.

**7. CONSENT AGENDA:**

**MOVED** by Mr. I. McLeod, **SECONDED** by Ms. P. France and **CARRIED** **THAT** the reports from the June 20, 2022 and August 22 2022 Finance/Audit & Resources Committee meetings be accepted.

**8. CORRESPONDENCE/PRINTED MATTER:**

a) Media Report – FYI only.

**9. BOARD MEMBER QUESTIONS, COMMENTS OR NOTICES OF MOTIONS:**

None

**10. NEW BUSINESS:**

None

**11. DATE OF NEXT REGULAR MEETING:**

**Thursday, October 6, 2022, 1700 hrs VIA: ZOOM**

**12. ADJOURNMENT:**

There being no further business to discuss, it was

**MOVED** by Ms. P. France, **SECONDED** by Mr. M. Lavoie and **CARRIED**

**THAT** the September 8, 2022 Board of Directors meeting be adjourned at 1745 hours.

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Anthony Paniccia, Chair  
Board of Directors

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Dawn Sutherland  
Recording Secretary/ds