

Committee:	HHS COMMON BOARD		
Date:	November 27, 2025	Time:	4:33pm-6:54pm
Chair:	Brian Heagle, Board Chair	Recorder:	Alana Ross
Present:	Elected: David Atkinson, Nonie Brennan, Brian Heagle, Heather Hern, Steve Ireland, Glen McNeil, Tara Oke, Jared Petteplace, Susan Reis, Jane Sager Ex Officio: Jimmy Trieu, Lynn Higgs, Dr. Sean Ryan, Dr. Tamra Steinmann		
Guest(s):	Robert Lovecky, Amber Brodie, Laura Herman, Kimberley Payne		
Regrets:	Christie MacGregor, Dr. Shannon Natuik, Dr. Neeraj Patel		
1	<u>Open Session - Call to Order / Welcome</u> <ul style="list-style-type: none"> ○ Video / audio recordings and transcriptions of open session are retained for the purpose of creating accurate minutes and will be expunged on final approval of the minutes by the HHS Common Board. 		
1.1	<u>Land Acknowledgement:</u> Land Acknowledgement LINK D. Atkinson reviewed the land acknowledgement and shared his personal reflection. <i>Land acknowledgments are meant to be respectful and should be a step toward personal reflection and building relationships with Indigenous peoples. In that spirit, David shared some personal experiences and comments - including his first exposure to land acknowledgements through his leadership positions at every national and provincial golf championship over the past 12+ years, as a tournament official tasked with delivering the acknowledgement. He also shared his relationship about another director and officer on the Board of British Columbia Golf who is a member of the Leq'a:mel First Nation. He was, among other things, the Board Chair and CEO of the Coastal First Nations; Advisor to the Lieutenant Governor of BC; Advisor to the BC Missing Women Commission of Inquiry; Vice President, Canadian Executive Service Organization; Director, Strategic Planning and Communications for Indian and Northern Affairs Canada.. One thing that has always stayed with David was how that person showed respect to other First Nations peoples. Every time he travelled to another First Nations territory, he made a point of contacting the leadership of that territory to advise them that he would be visiting their land, thus showing his respect for them, by seeking their permission to be on their traditional territorial lands. David was taught a lot about respect for Indigenous Peoples over the years by the example set by his friend.</i>		
1.2	<u>Story:</u> H. Hern shared her personal reasons for wishing to represent the SH community as a member of this Board. <i>Heather was born at SHH[A] in Exeter, and her mother trained at SHH[A] in the RPN program and was in residence in what is now the SHMC, giving Heather a very solid feeling of connection with the Hospital. Over the years, Heather's family has utilized the small hospital. Heather, as a healthcare professional, has traveled to numerous hospitals, but always comes back to SHH[A] for care within the community. Heather feels more at ease at SHH and is happy for the quick service.</i> <i>Heather's main purpose for becoming a Board member happened around four years ago, during the pandemic. She had reached out to Bruce Shaw, who was the Chair at the time. Heather and Christie visited Bruce at his home to discuss the purpose of the Board. Bruce shared his view of the future Board, which Heather agreed with. Heather felt this was an opportunity to utilize her healthcare history and experience to give back to a community that she feels so connected with.</i> <i>Heather is currently reviewing Congestive Heart Failure and Preventative Medicine programs with Joelle Lewis, a long-time friend and HP&A OHT Director.</i>		
2	<u>Education / Guests</u>		
2.1	<u>Infection Prevention & Control:</u> <ul style="list-style-type: none"> • Amber Brody, Infection Control Practitioner for Huron Health System presented information on Infection Prevention and Control (IPAC) 		

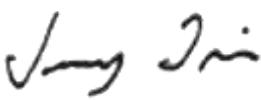
	<ul style="list-style-type: none"> ○ Respiratory season is well under way <ul style="list-style-type: none"> ▪ Flu season runs from mid-Oct to Apr; while it has been steady over the last several years, it can change ▪ COVID does not have a season, outbreaks can happen at any time <ul style="list-style-type: none"> – Numbers have been lower recently, however, with people congregating throughout the holiday season, numbers will likely rise ○ Influenza vaccine clinics started in Oct at AMGH & SHH with regular scheduled dates and communications <ul style="list-style-type: none"> ▪ Immunization rate as of today: AMGH-58% / SHH-54% ○ Vaccine opportunities will continue to be offered ○ Declaration must be completed and handed in by all staff whether or not they choose to receive the flu vaccine ● Influenza A positive patients as of today: AMGH-3 / SHH-0; numbers have been steadily increasing over the last week <ul style="list-style-type: none"> ○ Current influenza A hotspot is London; cognizant of patients returning to our hospitals from London ● Masking has been implemented in clinical areas effective Mon., Nov 24 <ul style="list-style-type: none"> ○ Staff, visitors and patients are encouraged to wear masks in patient areas, i.e., ED, Inpatient units, and common areas such as Diagnostics, etc. ○ Huron Perth Hospitals meet weekly to review influenza season data for Ontario ● With the increase in respiratory illness in the area, there will be increased instances of patients who require private rooms and respiratory swabbing; there may be an increase in patients who are in emergency overflow, as patients wait for a bed <ul style="list-style-type: none"> ○ Working closely with other hospitals to manage ED overflow as quickly as possible, i.e., transferring patients between AMGH & SHH to utilize open beds and cut down of overflow ● One LTC home in our area is under gastrointestinal outbreak, effective Nov 21 ● Appreciation extended to Amber for being part of the HHS organization, and the fantastic work she has done since she's been with us; she has garnered the respect of all the clinicians and providers across both sites and her experience with infection control has really helped the organization stay ahead of any outbreaks ● HHS has moved Board meetings to the virtual platform in support of the flu season
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3	Approvals and Updates
3.1	<p><u>Declaration of Conflict of Interest</u></p> <ul style="list-style-type: none"> ● B. Heagle asked if anyone had a conflict of interest to declare based on information contained in the package <ul style="list-style-type: none"> ○ No conflicts were declared
3.2	<p><u>Agenda</u></p> <ul style="list-style-type: none"> ● Approval / Changes <ul style="list-style-type: none"> ○ MOVE 8.3 to In-Camera <p><u>MOVED AND DULY SECONDED</u></p> <p><u>MOTION: To approve the November 27, 2025 HHS Common Board agenda, as amended. CARRIED.</u></p>
3.3	<p><u>Previous Minutes</u></p> <ul style="list-style-type: none"> ● Approval / Changes <ul style="list-style-type: none"> ○ None <p><u>MOVED AND DULY SECONDED</u></p> <p><u>MOTION: To approve the October 30, 2025 HHS Common Board minutes. CARRIED.</u></p>
4	Business Arising from Previous Minutes
5	Foundations Report
5.1	<p><u>AMGHF Quarterly Rotation:</u></p> <ul style="list-style-type: none"> ● 2025-11-27-AMGHF Update to HHS <ul style="list-style-type: none"> ○ Board Member changes: <ul style="list-style-type: none"> ▪ Laura Herman, Board Chair ▪ Donelda Schwartzenuber, Vice Chair ▪ Angela Leggatt, Treasurer ▪ Scott McGee, Executive Member

	<ul style="list-style-type: none"> ○ Capital Campaign for MRI <ul style="list-style-type: none"> ▪ CT is asking for donations at the checkouts for the month of Nov; donations are currently at \$5K; this will take place again in Apr 2026 ▪ Magnetic Moments Launch scheduled at Cow Bell, Dec 2 @ 4:30pm <ul style="list-style-type: none"> – Campaign will be run internally rather than by an external consultant; savings of \$600K-\$900K – Campaign Chair is Dr. Tiffaney Kittmer; staff has been hired (Mandy) / hours increased (Jennifer) – Cabinet recruitment is still under way; names will be announced at the launch; first meeting has been held – SHHF will be attending the launch of this regional campaign – very exciting; great partnership <ul style="list-style-type: none"> – MRI will serve communities beyond Huron County – Launch is sponsored by Cow Bell-an extraordinary partner to AMGH <ul style="list-style-type: none"> – Cow Bell hosted a golf tournament in the summer, which raised \$20K – Campaign 'ask' time frame has been compressed to 24months out of respect for other community organizations seeking donations; actual pledges can be made over several years ○ Giving Tuesday is Dec 2 <ul style="list-style-type: none"> ▪ Cait's Café and BMR are running promotions on behalf of AMGHF ▪ \$5K anonymous donor who match up to \$5K; working toward the \$10K mark ○ Workplace Giving program will be relaunched; staff who donate \$50/pay for the coming year will receive special socks <ul style="list-style-type: none"> ▪ Will be in the cafeteria with a spinning wheel; staff have the opportunity to answer questions about the role AMGHF at hospital ○ Anything over \$1K is funded by the community, a threshold that has been in place since 1983 when Foundations were first established; encouraging Foundations to advocate to the Ministry to increase the threshold as the current threshold puts 100% of the hospital equipment burden on communities ○ 2026 Long Table Dinner will be held in the Coast subdivision ● Appreciation extended for the open lines of communication between the Hospitals/Foundations Boards <ul style="list-style-type: none"> ○ Everyone is encouraged to attend the launch on Dec 2 ○ Board is working on fiscal responsibility for this \$6.5M endeavour, as the hospital will continue to require other equipment during this campaign <ul style="list-style-type: none"> ▪ Radiothon held Oct 10, fund raised for MRI ▪ Large estate donation made to the general account, which supports capital equipment; AMGHF Board is looking for best prioritization of the capital list for decision making over the next few years ● Appreciation extended to the AMGH Foundation for the tremendous work they are doing
6	Consent Agenda (time allotted for any questions and/or updates)
6.1	<u>Patient Experience:</u> <ul style="list-style-type: none"> ● 2025-11-Monthly Report-Patient Experience, circulated
6.2	<u>Governance & Nominating:</u> <ul style="list-style-type: none"> ● 2025-11-Monthly Report-Governance, circulated ● 2025-10-10-Governance Minutes, circulated <ul style="list-style-type: none"> ○ Appreciation extended to Steve Ireland for accepting the position of Governance Co-Chair
6.3	<u>Resources:</u> <ul style="list-style-type: none"> ● 2025-11-Monthly Report-Resources, circulated ● 2025-10-23-Resources Minutes, circulated
6.4	<u>Audit:</u> <ul style="list-style-type: none"> ● 2025-11-Monthly Report-Audit, circulated ● F2526 Audit Work Plan v1, circulated ● F2425-Audit Work Plan-Completed, circulated <ul style="list-style-type: none"> ○ Next meeting is scheduled for Dec 11

6.5	<u>Quality Assurance:</u> <ul style="list-style-type: none"> • Next meeting scheduled for Jan 21 	
6.6	<u>Collaborative Leadership Roundtable:</u> <ul style="list-style-type: none"> • 2025-11-Monthly Report-Collaborative Leadership Roundtable, circulated • 2025-09-09-Collaborative Leadership Roundtable-Minutes, circulated <ul style="list-style-type: none"> ○ Great attendance; collaborative discussions 	
6.7	<u>Recruitment and Retention:</u> <ul style="list-style-type: none"> • 2025-11-Monthly Report-Recruitment and Retention , circulated • 2025-09-02-Recruitment and Retention Minutes, circulated 	
6.8	<u>Joint Hospitals & Foundations:</u> <ul style="list-style-type: none"> • Next meeting scheduled for Dec 3 	
6.9	<u>Community Engagement Council:</u> <ul style="list-style-type: none"> • Next meeting scheduled for Jan 27; will report at Feb Board meeting 	
	<p><u>MOVED AND DULY SECONDED</u></p> <p><u>MOTION: To accept the Patient Experience report and all Committee reports with corresponding Minutes pursuant to items 6.1 to 6.9, as presented. CARRIED.</u></p>	
7	Standing Reports	
7.1	<p><u>President & CEO:</u></p> <ul style="list-style-type: none"> • 2025-11-Monthly Report-CEO, circulated and reviewed <ul style="list-style-type: none"> ○ Huron County reporting on EMS; recent article posted in the Goderich paper related to provincial ambulance offload times not being met, specifically AMGH & SHH <ul style="list-style-type: none"> ▪ These numbers have been tracked and reported since Oct 2024, as part of our Quality Improvement Plans (QIP) ▪ There are no targets for small volume hospitals, so we use the 90th percentile target for larger hospitals, which is 30min ▪ In Oct 2025, AMGH met the target at 26min, and SHH was slightly above the target at 32min ▪ Factors include patient acuity,, increased patient volume at our EDs, seasonal volume, space, lack of resources that larger hospitals have,, i.e., designated nurses, number of ambulances arriving at once, etc. • HPHA held a community meeting in Clinton last week and announced that CPH will be returning to 24/7 ED services in Jan 2026 	
	<u>Action:</u>	<u>By whom / when:</u>
	<ul style="list-style-type: none"> • Double check data formulas for reporting; add legend 	<ul style="list-style-type: none"> • Trieu; Dec
7.2	<p><u>CFO-Financial Results and Risk Management:</u></p> <ul style="list-style-type: none"> • 2025-11-Monthly Report-CFO, circulated • F2526-7-Monthly Report-Financial Results, circulated and discussed <ul style="list-style-type: none"> ○ Reminder made to the Board, that while these numbers are as accurate as possible, they are unaudited internal statements, which are subject to year end additions, changes and reviews ○ HHS has completed F2526 Period 7; finances continue to trend in a positive variance of the budgeted deficit <ul style="list-style-type: none"> ▪ Revenues \$31.5M vs Expenses \$32.6M = total HHS deficit of \$1.2M vs budgeted of \$2.8M; \$1.6M positive variance, due to one-time funding and increased base funding <ul style="list-style-type: none"> – Projecting year end deficit of \$2M vs \$4.5M budgeted – F2425 year end landed at \$2M vs 4.2M budgeted ○ Error found on the SHH side regarding accruals, which has been caught and will show up in the Nov reporting ○ Cash positions are currently good; anticipating they will reach F2627 Q3 ○ HIS planning continues with LHSC re SHH scheduling system ○ Engaged with Supply Ontario re back office systems ○ Strategic IT initiatives continue; RFP has been reissued ○ Planning for future building renovations ○ HSAs are posited on the website 	

	<ul style="list-style-type: none"> ○ Confirmation received regarding available HIRF for MH unit windows at AMGH, project to be determined at SHH; Ministry was late with the confirmations, which will make it difficult to complete projects by the annual Mar 31 deadline <ul style="list-style-type: none"> ▪ There may be HIRF recovery on the SHH side; pending 				
<u>MOVED AND DULY SECONDED</u>					
<u>MOTION: To accept the President & CEO and Financial Results and Risk Management reports pursuant to items 7.1 and 7.2, as presented. CARRIED.</u>					
	<table border="1"> <tr> <td>Action:</td><td>By whom / when:</td></tr> <tr> <td> <ul style="list-style-type: none"> ● Follow up HIRF; report to Board </td><td> <ul style="list-style-type: none"> ● Lovecky; Dec / Jan </td></tr> </table>	Action:	By whom / when:	<ul style="list-style-type: none"> ● Follow up HIRF; report to Board 	<ul style="list-style-type: none"> ● Lovecky; Dec / Jan
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7.3	<p><u>CNE:</u></p> <ul style="list-style-type: none"> ● 2025-11-Monthly Report-CNE, circulated <ul style="list-style-type: none"> ○ Rooms approved at Comfort Inn for staff re winter weather <ul style="list-style-type: none"> ▪ Working diligently to reduce overtime; determining where resources can be shared ○ Opportunity received for nurse upskilling in the ICU and OB areas ○ Inpatient Mental Health Manager has resigned; CNE will cover the role while recruiting is underway ○ Received great patient feedback for a visit to AMGH ED; amazing, professional, compassionate care ○ Continuing to encourage positive culture at AMGH & SHH ○ Working on day-to-day workload for dashboards and accreditation 				
7.4	<p><u>AMGH Chief of Staff:</u></p> <ul style="list-style-type: none"> ● 2025-11-Monthly Report-COS, circulated ● 2025-10-15-MAC Minutes, circulated 				
7.5	<p><u>SHH Chief of Staff:</u></p> <ul style="list-style-type: none"> ● 2025-11-Monthly Report-COS, circulated ● 2025-10-30-MAC Minutes, circulated 				
7.6	<p><u>AMGH President of Medical Staff:</u></p> <ul style="list-style-type: none"> ● Continuously working on ED / Hospitalist scheduling; ED schedule meeting booked for next week <ul style="list-style-type: none"> ○ ED schedule is filled up to Christmas; still working some gaps ● Physicians looking forward to the recognition event ● Appreciation extended to the Physicians for regaining their medical leadership at the Southbridge LTC home (Goderich location), rather than having Toronto physicians provide long distance care <ul style="list-style-type: none"> ○ Dovetails well with the Southbridge location opening in Exeter ○ Dr. Stan Spacek has noted that he appreciated the Board's support the during this endeavour 				
7.7	<p><u>SHH President of Medical Staff:</u></p> <ul style="list-style-type: none"> ● No Report 				
<u>MOVED AND DULY SECONDED</u>					
<u>MOTION: To accept all Standing Reports and MAC Minutes pursuant to items 7.3 to 7.7, as presented. CARRIED.</u>					
8	New and Other Business				
8.1	<p><u>Strategic Plan:</u></p> <ul style="list-style-type: none"> ● Board Advance held on Nov 20 for the Board to review the Strategic Plan 2023-2026, expires Mar 31, 2026 <ul style="list-style-type: none"> ○ Decision was made to refresh rather than rewrite; comments and proposals will be discussed at committee level, with recommendations to the Board ○ 1st proposal is to extend the current Strategic Plan to 2026-2029 				
8.2	<p><u>Common Board Agreement (CBA):</u></p> <ul style="list-style-type: none"> ● Governance Committee reviewed the CBA and provided comments / suggestions at the Board Advance on Nov 20; Board has agreed to work with Miller Thomson on development of the 1st amendment to the CBA <ul style="list-style-type: none"> ○ Governance Co-Chairs will develop a Letter/Briefing Note for the Board, which will then go to Miller Thomson; anticipating the first draft will be available in the New Year 				
8.3	<p><u>Future Initiative Group (FIG):</u></p> <ul style="list-style-type: none"> ● Moved to In-Camera 				
8.4	<p><u>Letter to Ministry:</u></p> <ul style="list-style-type: none"> ● 2025-11-OHA Letter to Minister Jones & Minister Bethlenfalvy, circulated 				

	<ul style="list-style-type: none"> ○ Letter advocates for investment into the healthcare sector; recommends a multi-year funding model rather than annual unknown one-time funding drops <ul style="list-style-type: none"> ▪ Looking for 3-year plans from the Ministry for better operations planning at hospital level ○ Ontario continues to be one of the most efficient provinces in healthcare, however, deficit issues cannot be solved through further efficiencies; it would take a cash injection of \$1.5B to stabilize healthcare <ul style="list-style-type: none"> ▪ Currently operating 2K beds that are unfunded; a reduction of 2K beds is not feasible ▪ 53 hospitals are currently relying on lines of credit for daily operations, i.e., payroll ▪ 31 of those hospitals are at risk of cash failure, i.e., inability to pay tomorrow's expenses ▪ Many aging, complex patients are staying in our hospitals longer (ALC); the Ministry is working on growing the 'hospital to home' program where patients are transitioned home to await their next step, i.e., long term care, which has had some success 						
8.5	<p><u>Physician Recognition Event:</u></p> <ul style="list-style-type: none"> ● 2025-12-04-Invitation-Dr. Recognition Event, Dec 4, 7-9pm, Part II Bistro; RSVP gwen.devereaux@gmail.com ○ Important opportunity for Board to network and interact with physicians 						
8.6	<p><u>Holiday Lunches:</u></p> <ul style="list-style-type: none"> ● AMGH Dec 10, 11:30am ● SHH Dec 11, 11:30am <ul style="list-style-type: none"> ○ All Board members are welcome and encouraged to attend lunch and/or assist in serving food ○ Important opportunity for Board to network and interact with staff 						
9	HHS Common Board Work Plan						
9.1	<p><u>Work Plan:</u></p> <ul style="list-style-type: none"> ● Reports to take place at end of each quarter, next report Jan 2026 						
10	<p><u>In-Camera Session</u></p> <ul style="list-style-type: none"> ○ In-camera session is not recorded or transcribed, and no minutes will be created. ○ All Directors remain for any in-camera session, and guests will be invited by the Chair, as required. ○ Any Director and/or guest with a conflict or other concern may be recused, as needed. ○ All participants must ensure their surroundings are secure from unauthorized participants. 						
10.1	<p><u>Move into In-Camera:</u></p> <ul style="list-style-type: none"> ● SHMC ● Hospitalist ● HSSP ● FIG / AWG (Amalgamation Working Group) <p><u>MOVED AND DULY SECONDED</u></p> <p><u>MOTION: To move into an in-camera session at 6:24pm. CARRIED.</u></p>						
10.2	<p><u>Move Out of In-Camera:</u></p> <p><u>MOVED AND DULY SECONDED</u></p> <p><u>MOTION: To move back into the open session at 6:51pm. CARRIED.</u></p>						
11	Common Board Evaluations						
12	<p>Next Meeting & Adjournment</p> <p>Regrets to alana.ross@amgh.ca</p>						
	<table border="1"> <thead> <tr> <th>Date</th><th>Time</th><th>Location</th></tr> </thead> <tbody> <tr> <td>December 18, 2025</td><td>4:30pm-6:30pm</td><td>**VIRTUAL MS Teams available</td></tr> </tbody> </table>	Date	Time	Location	December 18, 2025	4:30pm-6:30pm	** VIRTUAL MS Teams available
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	<p><u>MOVED AND DULY SECONDED</u></p> <p><u>MOTION: To adjourn the November 27, 2025 HHS Common Board meeting at 6:54pm. CARRIED.</u></p>						
Signature							
							
Brian Heagle, Board Chair							
							
Jimmy Trieu, President & CEO							