

Chair / Acting Chair:	Ms. A. Atkinson
Minutes taken by:	Christine Wignall
Appointed record custodian:	Christine Wignall

OPEN SESSION

Voting Trustees: Ms. J. Armitage, Ms. A. Atkinson, Ms. B.L. Souter, Mr. B. Lawler, Ms. J. Friesen, Ms. S. Piluso, Ms. M. Woodhead, Bishop G. Bergie, Mr. G. Leach, Mr. F. Bagatto, Mr. P. Brown, Mr. J. Rollo

Non- Voting Trustees: Ms. L. Pay, Dr. J. Luce, Dr. G. Arvinte, Ms. J. Hansen

Also Present: Mr. D. Ceglie, Sister L. Dillon

Regrets: Ms. N. Medulun-Burke

1. Call to Order

The Open Session meeting was called to order following the annual meeting. Quorum for the meeting was achieved.

Decision Making Matrix / Reserved Powers

Previously at in-person Board meetings, the placemat was available with the Corporate Decision Making Matrix and Reserved Powers of the Members of the Corporation. Since virtual meetings are now held, these documents will be included in the package for information and reference.

Declaration of Conflicts

This item allows trustees the opportunity, based on the approved agenda, to express a conflict of interest with any items. No conflicts were voiced at this time.

PRESENTATIONS / EDUCATION

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POLICY REVIEW

-Board Meetings & Voting Policy

The Board Meetings & Voting Policy has previously been presented and further changes were recommended to the language on how votes may be taken during virtual meetings. Votes may be taken audibly or by the raising of the hand if it is possible to see all participants on the electronic platform being used. Participants should keep their cameras on, their microphones muted unless speaking and ensure that a private location is utilized to protect confidentiality of business being discussed.

Motion **Moved by:** **Mr. G. Leach**
 Seconded by: **Ms. M. Woodhead**

“That the Board of Trustees approves the Board Meetings & Voting Policy.”

CARRIED

-Whistleblower Policy

At the request of the Board, this policy was developed updating an older policy from Hotel Dieu Hospital and similar policies from other hospitals. Over the years, and as required by legislation, related policies have been developed. The Whistleblower Policy aims to fill any voids or gaps when dealing with confidential complaints. Discussion was held regarding the rationale for the period of time that a complaint will be acknowledged. It was noted that there is no list of information or reporting provided following a complaint and therefore the policy will be reviewed further and brought back to a future meeting.

-Complaints Involving Chief Executive Officer, Chief of Staff or Board Trustee Policy

The policy was presented and reviewed.

Motion **Moved by:** **Mr. P. Brown**
 Seconded by: **Mr. J. Rollo**

“That the Board of Trustees approves the Complaints Involving Chief Executive Officer, Chief of Staff, or Board Trustees policy.”

CARRIED

-Board of Trustees Education Policy

The policy was presented and reviewed.

Motion **Moved by:** **Ms. J. Friesen**
 Seconded by: **Bishop G. Bergie**

“That the Board of Trustees approves the Board of Trustees Education policy.”

CARRIED

2. CONSENT AGENDA (includes Minutes, Reports & Information)

No items within the Consent Agenda were identified to be moved to the Strategic Agenda at this time.

- **Board of Trustees meeting minutes, May 25, 2021**

The minutes were presented, reviewed and approved through the Consent agenda motion.

- **Medical Advisory Committee meeting minutes, May 26, 2021**

The minutes were presented, reviewed and approved through the Consent agenda motion. Several medical staff policies were approved by the Medical Advisory Committee and an inquiry was made regarding the duties of the Most Responsible Practitioner (MRP). MRPs are responsible for the day to day care of in-patients, ordering tests and reviewing results, writing an admission note, history and physical and providing a discharge summary. Transfer of responsibility of patients during periods of practitioner absence was outlined.

3. Business Arising

-Board Education Session survey results

The presentations from the May 18, 2021 education session on the history of the RHSJ's and Our Corporation were very valuable and will be provided annually. Results of a follow-up survey to attendees were shared. Twelve responses were received (16 attendees):

All twelve said they found the session helpful (Q1).

Eleven said it provided clarity around Sponsorship (Q2), one skipped the question.

All twelve said it provided clarity around the reporting structure (Q3).

All twelve said it provided clarity around the Board role (Q4).

Ten said they do not require further information, two commented that refreshing this annually would be optimal/helpful and appreciated (Q5).

4. Reports:

- **Leadership Report & Communications – no report**
- **Foundation Report – no report**

5. Correspondence:

Pre-circulated:

- Daily news
- Memo, MOH re: 2021 Hospitals Annual Meetings
- Letters of Thanks/Acknowledgements

Motion **Moved by:** **Mr. G. Leach**
 Seconded by: **Ms. J. Friesen**

“That the Consent Agenda items be approved as presented.”

CARRIED

6. STRATEGIC AGENDA

Minutes:

- Governance Accreditation & Strategic Planning Ad Hoc Committee minutes, June 1, 2021

The minutes were presented and reviewed. The updated Strategic Plan Dashboard was provided for information. A request for Accreditation postponement was detailed to the committee. Prospective Governance education opportunities for the Board will be sought through a RFQ process and assessed on several parameters including understanding of the structure of faith based hospitals under the auspices of a sponsor.

Motion **Moved by:** **Ms. J. Armitage**
 Seconded by: **Bishop G. Bergie**

“That the Governance Accreditation & Strategic Planning Ad Hoc Committee minutes dated June 1, 2021 be approved.”

CARRIED

7. Business Arising

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8. Reports/Other Business

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