

Chair / Acting Chair:	Ms. Betty-Lou Souter
Minutes taken by:	Christine Wignall
Appointed record custodian:	Christine Wignall

OPEN SESSION

Voting Trustees: Mr. B. Lawler, Ms. B.L. Souter, Mr. P. DiPaola, Ms. A. Atkinson, Ms. N. Medulun-Burke, Ms. M. Woodhead, Ms. A. Carter, Mr. G. Leach, Mr. F. Bagatto

Non- Voting Trustees: Dr. D. Ceglie, Ms. J. Hansen

Also Present: Mr. R. Mauro, Dr. Z. Ismail, Mr. B. Smith, Sister L. Dillon, Ms. K. Manzi

Regrets: Mr. J. Rollo, Bishop G. Bergie, Dr. G. Arvinte, Dr. W. Reimer, Mr. P. Brown

Guest: Mr. S. Kulkarni, Director, Pharmacy & Quality Improvement

Land Acknowledgement Statement:

Let us take a moment to recognize and show our respect for the Indigenous Peoples on whose land we live and work. Hotel Dieu Shaver Hospital is situated on treaty land in Niagara. This land is steeped in the rich, traditional history and is the territory of Anishinaabeg (ah-ni-shi-nah-bay), Haudenosaunee (hoe-D-no-show- knee), and Attawandaron (atta-wan-da-ron) peoples. This territory is covered by the Upper Canada Treaties and the Dish with One Spoon Wampum Agreement. We recognize and deeply appreciate their historic connection to this territory and the contributions of Métis, Inuit, and other Indigenous peoples, in both shaping and strengthening the community in which we all live. May we continue to reconcile and flourish collectively.

Decision Making Matrix / Reserved Powers

The Corporate Decision Making Matrix and Reserved Powers of the Members of the Corporation are included in the package for information and reference.

1. Call to Order & Opening Prayer

The meeting was called to order. Quorum was achieved. Sister Louise opened the meeting with a prayer.

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 expressed at this time.

Presentation – Pharmacy Services, Risk & Quality Improvement

Mr. Subuddhi Kulkarni, Director of Pharmacy Services & Quality Improvement, was introduced and welcomed to the meeting. He presented an overview of pharmacy services, incident reporting, and quality improvement. Details of the operational aspect of the pharmacy department including order verifications and medication reviews were provided.

The Incident Reporting System (IRS), a non-judgmental, non-punitive electronic reporting system used by staff to report all patient, employee, and affiliate (visitor) incidents was detailed. The IRS 2024/25 Q3 report and top three incident types – falls, medication errors, and violence/harassment – were discussed.

The new 2025/26 Quality Improvement Plan (QIP) and planned quality improvement projects, including student projects with a focus on managing dementia and delirium, were highlighted. New targets and current performance were reviewed.

A Q&A session was held and discussion centered on the rationale for missed medications and the management of such incidents. The HIS audits show clear details which provide background for follow-up meetings with staff, as required. Incidents of violence/harassment require a root cause investigation in compliance with the Health & Safety Act and early identification of these types of incidents allow for the creation of behavioral care plans and other necessary action plans.

Mr. Kulkarni was thanked for the informative presentation and excused from the meeting.

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

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

On a move forward basis, questions that may arise during pre-meeting review of the materials are requested to be submitted to allow staff the opportunity to prepare responses.

- **Board of Trustees meeting minutes, March 18, 2025**

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

- **Medical Advisory Committee minutes, March 26, 2025**

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

3. Business Arising

There was no business arising.

4. Reports:

- **Leadership Report – May 2025**
-Employee Incident Report
- **Communications/PR Report – May 2025**
- **Foundation Report – May 2025**

The reports were presented. Trustees discussed the recent Smile Cookie campaign and the 100th birthday celebration of Archbishop James MacDonald.

5. Correspondence:**Pre-circulated:**

- Daily news
- Letters of thanks/Acknowledgements

Notes of thanks were pre-circulated.

Motion	Moved by:	Ms. N. Medulun-Burke
	Seconded by:	Mr. B. Lawler

“That the Consent Agenda items be approved.”

CARRIED

6. STRATEGIC AGENDA

Minutes:

- **Audit Committee minutes, March 25, 2025**
-monthly financial report ending January 2025
- **Audit Committee minutes, April 22, 2025**

The minutes dated March 25, 2025, and April 22, 2025, and reports were presented for review.

Motion	Moved by:	Mr. B. Lawler
	Seconded by:	Ms. M. Woodhead

“That the Audit Committee minutes dated March 25, 2025, be approved.”

“That the Audit Committee minutes dated April 22, 2025, be approved.”

CARRIED

- **Nominating, Board Membership, Evaluation Committee minutes, March 31, 2025**

The minutes of the meeting were presented and reviewed.

Motions	Moved by:	Mr. G. Leach
	Seconded by:	Ms. N. Medulun Burke

“That the Nominating, Board Membership, Evaluation Committee minutes dated March 31, 2025, be approved.”

“That the Board of Trustees recommends the election of Bishop Gerard Bergie, Diocese of St. Catharines, voting trustee and Frank Bagatto, CHI, voting trustee, by the Members of the Corporation.”

“That the Board of Trustees identifies Dr. Galina Arvinte, Chief of Staff, Jennifer Hansen, Chief Nursing Officer, Dr. David Ceglie, Chief Executive Officer, to non-voting trustee positions as prescribed by the Public Hospitals Act.”

“That the fixed number of trustees be set at 16.”

“That the members of the Le Royer Patrons be reappointed as presented.”

“That the Board of Trustees recommends the following Board Officer appointments for approval for the ensuing year to the Members of the Corporation:

Betty Lou Souter, Chairperson

Anne Atkinson, Past Chairperson

Angela Carter, 1st Vice Chairperson

Bob Lawler, 2nd Vice Chairperson”

“That the Board of Trustees endorses the following recommendation for appointment to the Members of the Corporation:

Executive Committee – Mr. Peter DiPaola”

CARRIED

7. Business Arising

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8. Reports/Other Business

-Annual Report to the Sponsor

The Annual Report to the Sponsor completed by the CEO and Sister Louise Dillon, was provided for review.

Motion **Moved by:** **Ms. N. Medulun Burke**
 Seconded by: **Mr. P. DiPaola**

“That the Board of Trustees approves submission of the Annual Report to the Sponsor.”

CARRIED

-CHI Board Self-Assessment Process to begin

Trustees have participated in the CHI Board Self-Assessment survey in the past and were reminded about the process. The anonymous survey assists with identifying areas for improvement and gaps in education. Survey results will be shared in an aggregate report with the Board Chair and the Executive Committee and results will be shared subsequently with the Board. The survey link will be circulated to trustees by Eileen Bowes, from Catholic Health International.

-CEO Annual Evaluation to begin

The CEO outlined the Catholic Health International Evaluation of the CEO process in detail noting that the annual evaluation will be initiated. Discussion was held and it was confirmed that as previous, the desire of the CEO and the trustees is for the evaluation to be completed by trustees and that members of the Senior Team will complete the 360 survey. Ms. Eileen Bowes, Vice-President of Governance Operations CHI, will be notified and trustees and members of the Senior Team can anticipate receiving the survey via email. Once the survey results are available, the Nominating, Board Membership, Evaluation Committee will meet to review and subsequently a meeting will be held with the CEO to discuss the overall results. The Board Chair will provide trustees with a general summary of the assessment.