

Sault Area Hospital

Board of Directors, Chair's Report

Updates and News from the SAH Board Meeting



From: **Sharon Kirkpatrick**, Board Chair
Sault Area Hospital

March 2022 Board of Directors' Meeting

The Board of Directors holds its regular meetings each month from September through June. Each month the Board of Directors, through the Board Chair, will share an update on key governance updates and Board decisions impacting the hospital. The Board held its regularly scheduled meeting on March 28, 2022.

At the Board of Directors meeting, board members, senior leadership team, guests, and members of the media heard reports from several of the Board of Directors Committee Chairs. Below are highlights from the committee reports and March's President & CEO Leadership Report and Chief of Staff Leadership Report.

Quality & Service Committee Update

The Committee received reports from management regarding performance in a number of areas.

Patient Experience

Year-To-Date (YTD) Results

Patient Experience

Patient experience is the primary measure of quality through the patient lens.

62.3%
(YTD results are lower than the target.
F21/22 Target – 64%)

NOTES:

- There was a steady increase in ratings from December 2019 to May 2020 and from December 2020 to March 2021.
- In July, we had our lowest rating since December 2019.
- Changes are driven mainly by Emergency Department results and a small decrease across all areas. Factors believed to affect results include the COVID-19 outbreak on 3B and visitor restrictions
- Several improvement opportunities are being explored.

Historical Patient Experience, year-end results from 2016-17 to the present indicate there has been an overall positive trend since 2016.

ED Wait Times

Year-To-Date (YTD) Results

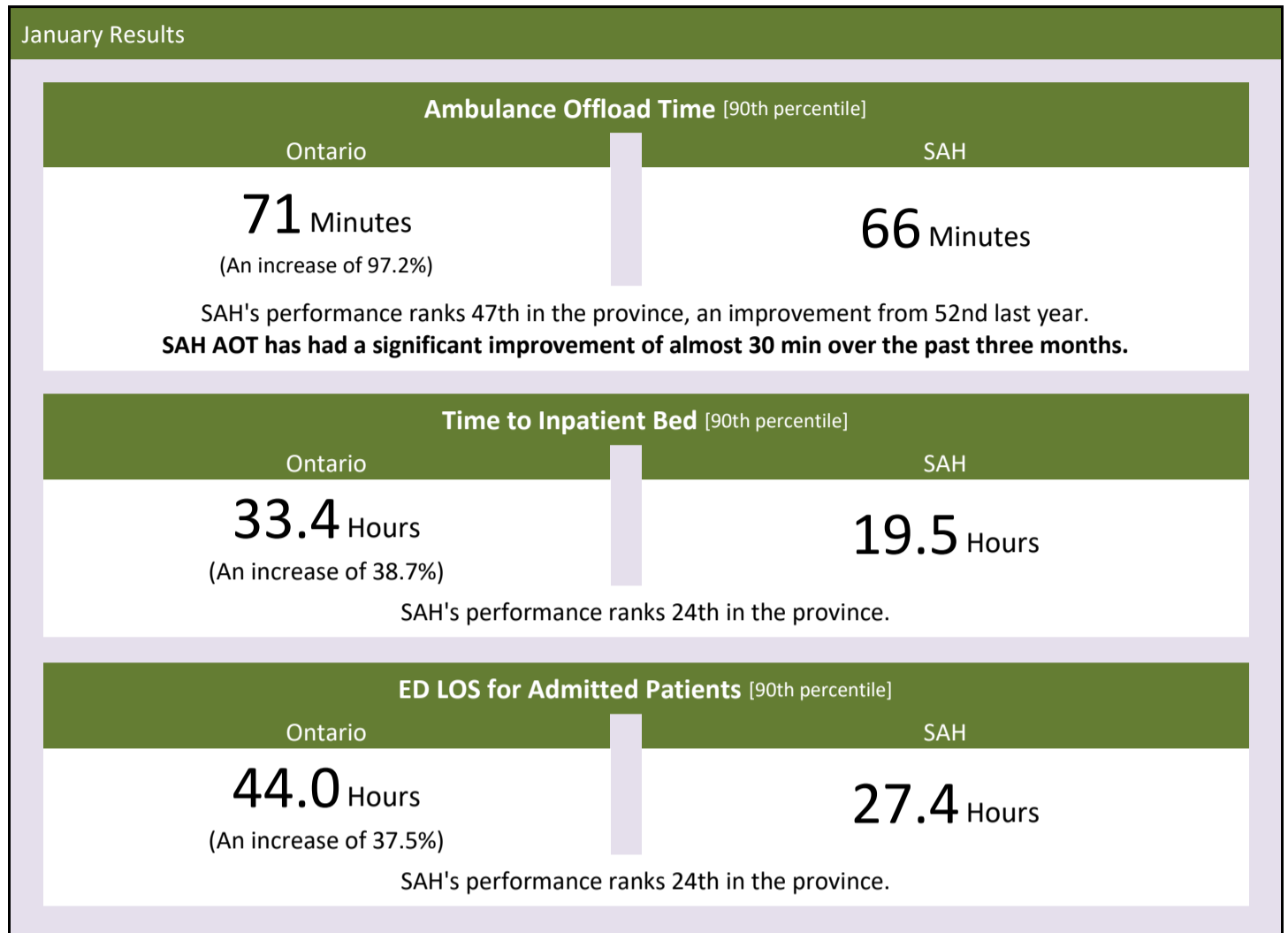
ED Wait Times for Admitted Patients [90th percentile]	ED Wait Times for Admitted Patients [Median]
The is how long patients spent in the emergency department and were then admitted to the hospital.	This is how long patients spent in the emergency department and were then admitted to the hospital calculated using the median, which better reflects the experience of patients.
On average, patients spent 20.6 Hours YTD results are better than the target F21/22 Target – 21 hours	On average, patients waited 10.4 Hours YTD results are above target F21/22 Target – 10 hours

ED Wait Times for All Patients

Wait Time to First Assessment by a Doctor in Emergency for All Patients: How long patients waited from checking in at triage to their first assessment by a practitioner in the ED.

On average, non-admitted low acuity patients waited 1.9 Hours YTD results are within the F21/22 guide band	On average, non-admitted high acuity patients waited 3.8 Hours YTD results are within the F21/22 guide band
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Pay for Results (P4R) Metrics — Provincially, all P4R metrics are up anywhere from 9 - 97%. Hospitals across the province have struggled since the New Year, particularly with Ambulance Offload Time (AOT) and length of stay (LOS) for admitted patients.



ED Time to Physician Initial Assessment (PIA) — Current performance is within the target guide band at 1.3h. The ED has seen a steady rise in PIA over the summer and fall of 2021, which may be attributed to patient volumes approaching prepandemic levels. The ED continues to work with many of the changes the ministry and the pandemic have placed on patients, staff and space. Some of these changes include working without hallway stretchers and chairs, enhanced isolation precautions, fewer staff due to sick time, and increasing occupancy on the inpatient units.

Strategies to improve initial assessment times include:

- MD triage and pre-assessment. It is anticipated that this will dramatically reduce PIA times, improve safety, and enhance the patient experience
- Physician shift allocation will be reviewed to match patient demand
- Review of the triage space and ED workflow processes
- ED and EMS leaders are working to address AOT, and an escalation process has been developed and implemented

The department continues to function with new post-pandemic realities. With the return to prepandemic volumes, there will be a need to maximize wait space.

Collaborative Practice Strategy — Collaborative Practice has many corporate and program-specific work plans in progress. Collaborative Practice and the Clinical Educator Team have been instrumental in the planning, developing, and implementing of COVID-19 guiding documents and Ministry directives.

Accreditation Readiness — The next Accreditation survey will be in April 2023. Accreditation Canada will be transitioning to a sequential or phased survey format by the end of 2023, and we will transition gradually to the new format after the April 2023 survey. Plans are in place to ensure organizational readiness. The accreditation process must be completed before the conclusion of the current accreditation cycle.

Quality Committee Approved Terms of Reference — The Committee's new Terms of Reference were approved at the February Board meeting.

Finance, Audit & Risk Committee Update

January 31, 2022, Financial Results — SAH reports a \$0.3M YTD deficit from hospital operations compared to a budgeted deficit of \$4.0M for the same period.

The key drivers remain consistent with those provided in previous months; unexpected COVID-19 related funding, offsetting unfavourable volume-related funding. SAH will likely end the fiscal year in a balanced position.

People & Culture Committee Update

The People & Culture Committee has now approved the Terms of Reference and Work Plan and recommended that the Governance Committee review and recommend to the Board of Directors approval of the Terms of Reference and Work Plan.

The following are highlights of the Committee's discussion:

French Language Services (FLS) — As part of SAH's commitment to providing excellent patient care, SAH is committed to ensuring members of the Francophone community are able to communicate and access services in French. The Committee reviewed and updated the FLS Board Policy to better address FLS at SAH and has recommended its approval to the Governance Committee for their review and their recommendation for Board approval.

Workplace Planning (Employee) — On an annual basis, an update is provided to the People & Culture Committee regarding workforce planning activity and trends. It was discussed how attracting, recruiting and retaining people builds our capacity, how workforce planning links directly to the delivery of care and how effective workforce planning contributes positively to engagement and mitigating financial risk. The Committee reviewed current demographics to predict future needs.

The Committee requested that future reporting include a workforce analysis review of current hospital staffing compared to how the hospital should be staffed. The Committee looks to better understand variances compared to planned staffing, including discussing risks and mitigation strategies.

Compensation and Salary Administration — Management provided an annual overview of SAH Compensation and Salary Administration for union, non-union and management staff. This compensation is primarily dependent on current legislation or established through collective bargaining.

Occupational Health Safety — Management reported on Health and Safety highlights, including incident analysis comparison over the last seven (7) years. As of reporting, there were no ministry orders.

Education Committee Update

The Education Committee Annual Work Plan was reviewed, and no changes were required; however, depending on the impact of the multi-year Board Education Plan, there may be adjustments needed in September.

A framework for the development of a multi-year Board Education Plan was presented. The balance of the meeting was spent populating the framework. It was agreed that the eight functions of the Board, as outlined in the **Guide to Good Governance**, could be used as a foundational guide for the monthly topics, and all topic presentations are to focus on the Board's governance role. The draft plan will be shared with the Governance Committee and SLT.

Governance Committee Update

Patient and Family Caregiver Declaration of Values — The Committee reviewed and supported the recommendation to align with Algoma Ontario Health Team member organizations and adopt the Patient and Family Caregiver Declaration of Values, endorsed by the Patient and Family Advisory Council Citizens Reference Panel and AOHT partner organizations. Adopting this material will continue to meet legislative requirements and aligns with SAH iCcare values.

2022-2025 Strategic Plan — The Committee received a report on the ongoing work to finalize the 2022-2025 Strategic Plan and incorporate feedback from the February Board meeting.

Board Recruitment — The Board completed a review of current Board member skills/competencies to support its Board Recruitment Plan. The following skills/competencies should be considered; Knowledge of the health care system, Research Innovation and Transformation, Information Technology, Quality Patient Care, Knowledge of the Legal System and Labour Relations/Human Resources. It was also noted that the need for governance experience is an overall requirement.

There was agreement that consideration of specific skill sets would be a priority; in addition, focused recruitment of candidates with diverse backgrounds will be undertaken. Recruitment efforts will take a board approach, including promotion on the website, use of social media, targeted approach within personal and professional networks, and local organizations for targeted recruitment.

Several items of significance were approved at this month's Board of Directors meeting.

- 2022-2025 Sault Area Hospital Strategic Plan
- 2022-2023 Hospital Indicators, Metrics & Targets
- 2022-2023 Quality Improvement Plan
- Patient and Family Caregiver Declaration of Values
- The Board of Directors confirmed agreement with SAH becoming a formal member of the ONE Initiative

Over the coming weeks, we will be sharing information regarding each of these items with our staff, physicians, volunteers, partners, and community.

Chief of Staff Leadership Report

The [Chief of Staff Leadership Report](#) to the Board provides updates on activities at SAH for March. The following are highlights from the report:

- At our February meeting, we welcomed Dr. Stephen Smith, our Chief for the ED group and Dr. Lorraine Sharp, who has joined our Medical Staff Association executive.

- MAC reviews clinical concerns monthly at our table. Our leaders continue to advance and refine best practices: for example, best practices in prescribing and administering our medications, communication strategies for our teams within our various inpatient and outpatient care units, daily care plans, etc.

President & CEO Leadership Report

The [President & CEO Leadership Report](#) to the Board provides updates on activities at SAH for March. The following are highlights from the report:

- Sault Area Hospital was one of 22 hospitals across Canada selected by Choosing Wisely Canada to participate in the initial Cohort of their Using Labs Wisely Learning Collaborative. This is a national effort to reduce the use of unnecessary laboratory tests, share best practices and data, and take leadership in reshaping health care delivery.
- SAH has been approved to offer the medication Paxlovid, a new treatment of mild-to-moderate COVID-19 in adults at high risk for progression to severe COVID-19.

Next Board Meeting

The next regular meeting of the Board will be held on **April 25, 2022**.

If you have any questions or comments, please don't hesitate to contact me through Jennifer Doyle, Executive Assistant SAH Board of Directors, at doylej@sah.on.ca.

Sharon Kirkpatrick