

MINUTES

Board of Directors Meeting

Wednesday, September 24, 2025

5:00 p.m.

Pembroke Regional Hospital, Boardroom, Tower C (C142)

Attendance					
P = Present R = Regrets					
Voting Directors	P	R	Non-Voting Directors	P	R
Dean Sauriol, Chair	✓		Sabine Mersmann, President & CEO	✓	
Neil Nicholson, Vice Chair	✓		Dr. Declan Rowan, Chief of Staff	✓	
David Unrau, Past Chair	✓		Dr. Amanda Williamson, President of Professional Staff	✓	
Amy Sicoli, CHSO Designate		✓	Beth Brownlee, VP Clinical Services / CNE	✓	
Suli Adams	✓		Resources (Non-Voting)		
Clay Deighton	✓		Scott Coombes	✓	
Dr. Colin Macpherson	✓		Brent McIntyre	✓	
Dr. Constance McLeese	✓		Carolyn Levesque	✓	
Matthew Neadow	✓		Recorder		
Les Scott	✓		Sarah Mellish	✓	
Shelley Sheedy	✓				
Richard Wilson	✓				
Lisa Edmonds, Foundation Chair	✓				
Diana Gagné, President of Hospital Auxiliary	✓				

	Agenda Items	Lead
1.0	Board Education Session – Tour of New Chemotherapy Area	The Board was provided with a tour of the new Chemotherapy area. A grand opening of the space is being planned for October 29, 2025.
2.0	Call to Order, Welcome New Members, and Opening Comments	Dean Sauriol called the meeting to order at 5:30 p.m. and introductions were made by all in attendance.
2.1	Opening Reflection	<p>Neil Nicholson led the Board in the new opening reflection.</p> <p>It was noted that this new reflection was developed by the Board Ethics Committee and was included in the consent agenda for the Board's consideration. There were no concerns brought forward with the new reflection and it was agreed that it is a good representation of the Board's focus.</p>
2.2	Land Acknowledgement	<p>Dean Sauriol read the new Land Acknowledgement.</p> <p>It was noted that this new Land Acknowledgement Statement was also developed by the Board Ethics Committee and was included in the consent agenda for the Board's consideration. The Board was in agreement that this was a well developed statement and there were no concerns with its adoption.</p>

3.0	Adoption of Agenda	Motion 1	Moved by David Unrau, seconded by Dr. Colin Macpherson, that the Agenda of the September 24, 2025 Board Meeting be accepted as presented. CARRIED
4.0	Declaration of Conflicts of Interest		A call for declarations of conflicts of interest was made. No conflicts of interest were declared.
5.0	President and CEO's Report		
	<ul style="list-style-type: none"> • Welcome Back • Exciting Summary of the Work Being Done by Kids Come First 		<p>Sabine Mersmann welcomed everyone back after the summer break and welcomed new Board Members and Community Representatives on Board Committees.</p> <p>In early June, Sabine Mersmann was excited to be a part of the Annual General Meeting for Kids Come First, a collaborative of more than 70 organizations; youth and family partners; nearly 1,100 physicians; and many other individuals including children, youth, and families working to connect high-quality care for children and youth in the Champlain region in order to simplify their journey across the health and social system, providing them with easy access to the right care, at the right time, in the right place.</p> <p>It was a great opportunity to learn about many of the great initiatives underway including expansion of vaccination clinics in the region, expanded work on the availability of home and community care for pediatric patients and how an expanded scope of practice for Personal Support Workers may benefit our region's young patients and their families.</p> <p>In terms of our expanded involvement, we are one of 12 hospitals that have put together a joint submission to Ontario Health offering to help alleviate Surgical wait times for pediatric patients by taking on cases outside of CHEO. The proposal has received support from Ontario health and is now at the table of a committee at the Ministry that reviews special projects. We have great hope that it will be funded for next fiscal year,</p>
	<ul style="list-style-type: none"> • Exploring Ways to Enhance Partnership with Queensway Carleton Hospital 		Over the summer months, Dean Sauriol and Sabine Mersmann met with QCH President and CEO Dr. Andrew Falconer and QCH Board Chair Chad Schella to discuss ways the two hospitals could further collaborate.
	<ul style="list-style-type: none"> • Opportunities for Collaboration with Renfrew Victoria Hospital 		Last month, Sabine Mersmann also welcomed Suzanne Madore, President and CEO of St. Francis Memorial Hospital and Renfrew Victoria Hospital for a tour and a fruitful conversation about opportunities for collaboration between our three hospitals.

	<ul style="list-style-type: none"> • PRH Receives the Using Blood Wisely Hospital Designation • Accreditation 2027: Our Journey Ahead • PRH Recognized by Trillium Gift of Life Network (TGLN) • Financial Milestones for Project Horizon • New Funding for Nurse-Led Critical Care Response Team 	<p>PRH recently received the designation as a Using Blood Wisely Hospital which symbolizes a commitment to red blood cell stewardship and to the continuous pursuit of quality improvement by reducing unnecessary red blood cell transfusions. In achieving this designation, we are now part of a select group of 160 hospitals that is making a difference for patients, donors and Canada's blood supply. Our participation in this program will also count as an organizational quality improvement initiative when we are next up for accreditation.</p> <p>PRH is excited to begin preparing for our upcoming Accreditation Survey in 2027. This will be a short notice survey conducted by Accreditation Canada, meaning we'll receive just 10 days' notice before the assessment begins. The approach is designed to provide a real-time snapshot of our operations and culture and it gives us a unique opportunity to demonstrate the exceptional work we do every day. The survey will assess over 2000 standards across the organization and preparation will include departmental reviews and self-assessments, giving us the chance to reflect, align and elevate our practices as well as identify opportunities to improve, embracing new best practices and continuing to deliver safe, high-quality care.</p> <p>For the period of 2024-2025 PRH has received two awards recognizing our hospital's ongoing support of organ and tissue donation. First, for the seventh time, we have received the Hospital Achievement Award – Provincial Routine Notification Rate for achieving a 100% routine notification rate in 2024/25. We will also be receiving an Award of Excellence for meeting or exceeding the provincial target for routine notification as set by Ontario Health (TGLN) for four or more consecutive years. For the 2024-2025 time frame, members of our health care team made 127 notifications to Ontario Health (TGLN) resulting in seven tissue donors which ultimately enhanced the lives of many.</p> <p>Over the summer, a couple of investment milestones were met as part of our journey to Epic. Specifically, the final sign off on the funding loan for the project took place, and we made our first significant payment towards the project.</p> <p>Pembroke Regional Hospital has received over half a million in new dollars from the Ministry of Health for the launch of a Nurse-Led Critical Care Response Team (CCRT). This team will bring added critical care expertise to our general units, offering faster support when a patient's condition begins to decline. The nurse-led CCRT will complement our existing services by providing timely re-assessment and follow-up for patients who</p>
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	<ul style="list-style-type: none"> • PRH Receives Over \$2.4 Million in HIRF Dollars • Securing the ED • PRH Welcomes Five Project SEARCH Interns 	<p>have recently transferred out of the ICU. Led by experienced critical care nurses and supported by our Intensivists and interdisciplinary teams, the model has proven successful in other Ontario hospitals and will be a valuable addition to our care at PRH.</p> <p>Planning is now underway, with a goal to have the team operating 24/7 within the next nine months. This is an exciting step forward for patient care, and we look forward to working with our clinical teams to shape how the service will work best for our hospital.</p> <p>We recently received confirmation that our hospital will be provided with just over \$2.4 million in one-time funding for the 2025-2026 fiscal year through the Health Infrastructure Renewal Fund (HIRF). Our hospital is extremely grateful to be receiving this funding which will be put to good use as we repair and renew some of our patient-facing infrastructure. With four buildings, varying in age, this money is essential to helping keep our operations going and keeping both our patients and staff safe.</p> <p>As part of work being done to enhance safety in our Emergency Department, I'm pleased to share that the doors adjacent to triage which lead into the back of the department are now equipped with a controlled locking mechanism (swipe card access) - similar to those that we have on Acute Mental Health and in Surgical Day Care.</p> <p>This change will enhance patient privacy and confidentiality, strengthen safety and security, and help reduce unnecessary traffic and noise, ultimately contributing to a calmer, more therapeutic environment for patients and staff alike.</p> <p>Our nursing staff, patient service attendants and security guards will monitor and support access for patients and visitors.</p> <p>In addition, as of August 18th, we now have overnight onsite security coverage Monday through Friday. Additional team members will be onboarded in the coming weeks to support expanded coverage across all nights of the week and 24/7 coverage on statutory holidays and weekends.</p> <p>Earlier this month, we welcomed five Project SEARCH interns to our team who will be with us for the next 10 months.</p> <p>Project SEARCH is a school to work transition program for students aged 18-21 with intellectual and developmental disabilities. The program enables them to</p>
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	<ul style="list-style-type: none"> • Welcome to Dr. Cameron Leafloor, Intensivist • New Peer Support Program Brings Hope and Healing to Stroke Patients and Their Caregivers at Pembroke Regional Hospital 	<p>find competitive employment by immersing them in the employment environment. We are thrilled to partner with the Renfrew County District School Board (RCDSB), Community Living Upper Ottawa Valley, and Petawawa Military Family Resource Centre (PMFRC) on this program. This initiative highlights our commitment to addressing unmet needs in our community, particularly by supporting a group that, despite their many talents and capabilities, often faces underemployment.</p> <p>We are very pleased to welcome Dr. Cameron Leafloor to our Emergency Department (ED) and Intensive Care Unit (ICU) as a full-time Intensivist.</p> <p>In partnership with March of Dimes Canada, the Pembroke Regional Hospital recently launched Hospital Peer Connections, a compassionate and empowering peer support program for stroke patients and their caregivers. Hospital Peer Connections is a unique in-hospital program developed by March of Dimes Canada that connects stroke survivors and caregivers with trained peer volunteers who have lived experience with stroke.</p>
6.0	Patient Story	Beth Brownlee provided an overview of a patient story.
7.0	Strategic Matters – Generative Discussion	
7.1	Accreditation Update	Beth Brownlee provided a <u>presentation</u> on the upcoming Accreditation Survey process taking place in the spring of 2027. The Board Executive Committee will be receiving further information on the preparation for this survey in November.
7.2	Epic – High Level Update	<p>Scott Coombes provided the Board with an <u>update</u> on the Epic journey so far. It was noted that there will be a lot of training provided for staff.</p> <p>A discussion was held on the use of Epic for primary care physicians and it was confirmed that conversations are currently being held on this topic with the local primary care physicians.</p> <p>A question was raised concerning the possibility of any cybersecurity events that could occur during the implementation phase and it was noted that The Ottawa Hospital is continuing to implement additional methods to advance cybersecurity.</p>

8.0	Business/Committee Matters – Generative Discussion	
8.1	Whistleblower Policy	<p>Brent McIntyre provided the Board with a <u>presentation</u> on the new Whistleblower Policy being implemented at Pembroke Regional Hospital. The launch of the new policy will be a trial run and the content will be evaluated on a regular basis.</p> <p>A discussion was held on the level of information that should be reported to the Board and it was agreed that the Board should be notified of high level events and that they would also appreciate quarterly reports on trends. This will be added to the Resource and Audit Committee under the Human Resources Report in the future when available.</p>
8.2	Budget Update	<p>Scott Coombes provided an <u>update</u> on the fiscal forecast for 2025/26 noting that PRH's updated forecast for 2025/26 reflects a balanced budget.</p> <p>PRH received a fiscal 2025-26 funding package in August that included a 3% funding increase, Critical Care Response Teams funding, and increase QBP volumes.</p> <p>Health Infrastructure Renewal Funding (HIRF) was recently received in the amount of \$2.4 million for fiscal 2025/26.</p>
8.3	Cybersecurity Debrief	This item was deferred to the next meeting in November.
8.4	MAC Update – Departmental Divisions	Dr. Declan Rowan noted that the current Chief of Surgery is stepping down from the position and discussions are in progress regarding the recruitment of an interim replacement. As the department is so large with a number of different specialties, discussions have been held around dividing the different departments and creating division heads for each. The new Professional Staff By-Laws allow for this and these positions would support the Chief of Surgery in their work and would allow the opportunity to grow physician leadership within the hospital.
8.5	Update from the Board Quality and Patient Safety Committee (<i>if any</i>)	There were no updates at this time.
8.6	Update from Resource and Audit Committee (<i>if any</i>)	There were no updates at this time.
9.0	Consent Agenda	
9.1	Board of Directors	<ul style="list-style-type: none"> Verified the Board Minutes of June 11 and July 9, 2025

9.2	Medical Advisory Committee	<ul style="list-style-type: none"> Received the minutes from the Medical Advisory Committee meetings held July 23 and September 17, 2025 and approved the following motions: <ul style="list-style-type: none"> that the Board of Directors accepts the recommendation of the Medical Advisory Committee that the following new Courtesy reapplications be approved: <p><u>Courtesy Reapplications:</u></p> <p>Dr. Asmis, Timothy – Medical Oncology (TOH)</p> <p>Dr. Awan, Arif – Medical Oncology (TOH)</p> <p>Dr. Bariciak, Erika – Neonatology (CHEO)</p> <p>Dr. Ben Fadel, Nadya – Pediatrics (CHEO)</p> <p>Dr. Bosse, Dominick – Medical Oncology (TOH)</p> <p>Dr. Bourque, Pierre Raymond – Neurology (TOH)</p> <p>Dr. Brule, Stephanie – Medical Oncology (TOH)</p> <p>Dr. Canil, Christina – Medical Oncology (TOH)</p> <p>Dr. Clemons, Mark – Medical Oncology (TOH)</p> <p>Dr. Cole, Katherine – General Practice (TOH)</p> <p>Dr. Daboval, Thierry – Pediatrics (Montfort)</p> <p>Dr. Drodge, Karen – Medical Oncology (TOH)</p> <p>Dr. Feberova, Jana – Pediatrics (CHEO)</p> <p>Dr. Ferretti, Emanuela – Pediatrics (CHEO)</p> <p>Dr. Fulcher, Jill – Hematology (TOH)</p> <p>Dr. Glenwood, Goss – Medical Oncology (TOH)</p> <p>Dr. Goodwin, Rachel – Medical Oncology (TOH)</p> <p>Dr. Godfrit, Joanna – Medical Oncology (TOH)</p> <p>Dr. Harrold, JoAnn – Pediatrics (CHEO)</p> <p>Dr. Hilton, John – Medical Oncology (TOH)</p> <p>Dr. Hsu, Tina – Medical Oncology (TOH)</p> <p>Dr. Jonker, Derek – Medical Oncology (TOH)</p> <p>Dr. Khalife, Roy – Hematology (TOH)</p> <p>Dr. Lambert, Wendy – Medical Oncology (TOH)</p> <p>Dr. Laurie, Scott – Medical Oncology (TOH)</p> <p>Dr. Lawrence, Sarah – Pediatrics (CHEO)</p> <p>Dr. Lemyre, Brigitte – Pediatrics (CHEO)</p> <p>Dr. Mack, Johnathan – Hematology (TOH)</p> <p>Dr. McCurdy, David – Gastroenterology (TOH)</p> <p>Dr. McGee, Sharon – Medical Oncology (TOH)</p> <p>Dr. Moore, Gregory – Pediatrics (CHEO)</p> <p>Dr. Moore, Sara – Medical Oncology (TOH)</p>
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Dr. Ng, Terry – Medical Oncology (TOH)
 Dr. Nicholas, Garth – Medical Oncology (TOH)
 Dr. Ong, Michael – Medical Oncology (TOH)
 Dr. Reaume, Martin – Medical Oncology (TOH)
 Dr. Redpath, Stephanie – Pediatrics (CHEO)
 Dr. Rouvinez-Bouali, Nicole – Pediatrics (CHEO)
 Dr. Rushton, Moira – Medical Oncology (TOH)
 Dr. Savard, Marie-France – Medical Oncology (TOH)
 Dr. Sehdev, Sandeep – Medical Oncology (TOH)
 Dr. Soltys, Katherine – Medical Oncology (TOH)
 Dr. Song, Xinni – Medical Oncology (TOH)
 Dr. Srikanthan, Amirrtha – Medical Oncology (TOH)
 Dr. Steward, David – Medical Oncology (TOH)
 Dr. Tinmouth, Alan – Hematology (TOH)
 Dr. Toupin, Melissa – Hematology (TOH)
 Dr. Vickers, Michael – Medical Oncology (TOH)
 Dr. Villeneuve, Pierre – Hematology (TOH)
 Dr. Weberpals, Johanna – Medical Oncology (TOH)
 Dr. Wheatley-Price, Paul – Medical Oncology (TOH)

- that the Board of Directors accepts the recommendation of the Medical Advisory Committee that the following New Courtesy (GTR Teleradiology) be approved:

New Courtesy Applications (GTR Teleradiology):

Dr. Ahmed, Mussanna – Diagnostic Imaging (Radiology)
 Dr. Bruni, Silvio – Diagnostic Imaging (Radiology)
 Dr. Bushara, Maryann – Diagnostic Imaging (Radiology)
 Dr. Chan, Michael – Diagnostic Imaging (Radiology)
 Dr. Chen, Yingming – Diagnostic Imaging (Radiology)
 Dr. Cranstoun, Kelly – Diagnostic Imaging (Radiology)
 Dr. Durrant, Eric – Diagnostic Imaging (Radiology)

Dr. Hosseinpour, Shahob – Diagnostic Imaging (Radiology)
 Dr. Lai, Patrick – Diagnostic Imaging (Radiology)
 Dr. Maghdoori, Babak – Diagnostic Imaging (Radiology)
 Dr. Menezes, Terence – Diagnostic Imaging (Radiology)
 Dr. Mishra, Siddarth – Diagnostic Imaging (Radiology)
 Dr. Napoleone, Marc – Diagnostic Imaging (Radiology)
 Dr. Nasser, Ali – Diagnostic Imaging (Radiology)
 Dr. Pasyk, Michael – Diagnostic Imaging (Radiology)
 Dr. Patel, Nirav – Diagnostic Imaging (Radiology)
 Dr. Patil, Kedar – Diagnostic Imaging (Radiology)
 Dr. Shah, Keyur – Diagnostic Imaging (Radiology)
 Dr. Singh, Navneet – Diagnostic Imaging (Radiology)
 Dr. Yoon, Yoongchul – Diagnostic Imaging (Radiology)

- that the Board of Directors accepts the recommendation of the Medical Advisory Committee that the following New Courtesy Applications be approved:

New Courtesy Applications:

Dr. Gilgamesh, Eamer – Surgery (General / Peds CHEO)
 Dr. Khatami, Alireza – Diagnostic Imaging (Nuclear Medicine)
 Dr. Leung, Eugene – Diagnostic Imaging (Nuclear Medicine)
 Dr. Nassim, Mark – Family Practice
 Dr. Wiefels, Christiane - Diagnostic Imaging (Nuclear Medicine)
 Dr. Zeng, Wanzhen – Diagnostic Imaging (Nuclear Medicine)

- that the Board of Directors accepts the recommendation of the Medical Advisory Committee that the following New Term Applications be approved:

New Term Applications:

Dr. Brockman, Joseph – Emergency Medicine

		<p>Dr. Chubbs-Payne, Adam – Hospitalist Medicine Dr. Fagir, Ahmed – Diagnostic Imaging (Radiology) Dr. Ferrier, Erin – Hospitalist Medicine Dr. Ghossein, Jamie – Critical Care (ICU) Dr. Huneault, Lysa – Diagnostic Imaging (Radiology) Dr. Nolan, Madeleine – Hospitalist Medicine Dr. Zhang, Yongjian (Jack) – Anesthesia</p> <ul style="list-style-type: none"> that the Board of Directors accepts the recommendation of the Medical Advisory Committee that the following New Associate Applications be approved: <p><u>New Associate Applications:</u> Dr. Alshahabi, Salwa – Family Practice Dr. Leafloor, Cameron – Critical Care (ICU) Steadman, Emily – Obstetrics & Gynecology (Midwifery)</p>
9.3	Board Quality and Patient Safety Committee	<ul style="list-style-type: none"> Received the minutes from the Board Quality and Patient Safety Committee meeting held September 9, 2025
9.4	Resource and Audit Committee	<ul style="list-style-type: none"> Received the minutes from the Resource and Audit Committee meeting held June 10, 2025
9.5	Board Ethics Committee	<ul style="list-style-type: none"> Received the minutes from the Board Ethics Committee meeting held July 8, 2025 and notes from the electronic vote held and approved the following motions: <ul style="list-style-type: none"> that the Board of Directors accepts the recommendation of the Board Ethics Committee and approves the new Land Acknowledgement Statement as presented. that the Board of Directors accepts the recommendation of the Board Ethics Committee and approves the new Opening Reflection for the Board of Directors as presented.
9.6	Fiscal Advisory Committee	<ul style="list-style-type: none"> Received the minutes from the Fiscal Advisory Committee meeting held September 3, 2025
9.7	Foundation Report	<ul style="list-style-type: none"> Received the Foundation Report
9.8	Auxiliary Report	<ul style="list-style-type: none"> Received the Auxiliary Report
10.0	Open Forum	There were no items brought forward for discussion during the open forum.

11.0	Next Meeting	<i>Next Board Meeting on Wednesday, November 26, 2025 at 5:00 p.m. – Boardroom, Tower C (C142)</i>
11.1	Board Committee Meetings Calendar	The Board Committee Meetings Calendar was attached for information.
11.2	Attendance Record	The attendance record was attached for information
12.0	Adjournment Motion 2	Moved by Shelley Sheedy, seconded by Lisa Edmonds, that the meeting be adjourned at 6:38 p.m. CARRIED



D. Sauriol, Board Chair



S. Mersmann, President & CEO