



## HALIBURTON HIGHLANDS HEALTH SERVICES (HHHS)

### MINUTES

#### REGULAR OPEN MEETING of the BOARD OF DIRECTORS

Thursday, February 26, 2026 / 2:00 pm / HHHS Boardroom - Haliburton

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Members:	Irene Odell, Board Chair* Al Aubry, Director* Mark Bell, Director* Kurtis Bishop, Director* Jennifer Dailoux, Director* Sharon Kaasalainen, Director *	Diana McNiven, Director* Connie Phillipson, Director* Charlotte Snider, Director* Clifford Ottaway, Director* Michael Tambosso, Director*
Ex-Officio:	Jen Burns West, Interim CEO Dr. Paul Faulkner, Chief of Staff	Victoria Miscio, Interim CNE & VP Dr. Ana Costea, Pres. of Medical Staff
Regrets:	Liz Danielson, Director	
Staff Resources:	Michel Henry, EA, Recorder	

\*counts toward quorum

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#### 1. **CALL TO ORDER**

Irene Odell, Chair, called the (Open) meeting to order at 2:08 pm.

**1.1 Quorum** – Quorum was confirmed.

**1.2 Review of Agenda** – The agenda was reviewed with no additional items suggested.

**1.3 Declarations of Conflict of Interest** – None declared.

#### 2. **CONSENT AGENDA**

Items identified as part of the consent agenda were pre-circulated and the related motions were presented as follows:

- MOTION:** That the draft minutes of the (Open) Board of Directors meeting of November 27, 2025 be approved as circulated.
- MOTION:** That the (OPEN) draft minutes of the Quality Committee meeting of February 10, 2026 be received as circulated.
- MOTION:** That the Appointment and Credentialing Policy POL.ADM.36844 be approved.
- MOTION:** That the Board of Directors, Community Members Policy POL.GOV.34787 be approved.

5. **MOTION:** That the Accessibility Design Reviews Policy POL.ALL.28817 be approved.
6. **MOTION:** That the Vision, Mission, Values, Objectives Policy POL.ALL.35057 be approved.
7. **MOTION:** That the Chiefs of Departments GU.ADM.34884 be approved.
8. **MOTION:** That the Whistleblowing Policy POL.ALL.26859 be approved.
9. **MOTION:** That the (OPEN) draft minutes of the Finance, Resources & Audit Committee meeting of February 12, 2026 be received as circulated. Typographical error noted.
10. **MOTION:** That the 2025-26 Q3 HR Dashboard be received as circulated.
11. **MOTION:** That the minutes of the Highland Wood Residents Council meeting of December 2025 be received.
12. **MOTION:** That the minutes of the Hyland Crest Residents Council meeting of December 2025 be received.
13. **MOTION:** That the minutes of the Hyland Crest Family Council meeting of January 2026 be received.
14. **MOTION:** That the minutes of the Highland Wood Residents Council meeting of January 2026 be received.
15. **MOTION:** That the minutes of the Hyland Crest Residents Council meeting of January 2026 be received.

It was noted that policies are reviewed by the Quality, Governance & Planning Committee and only if they have minor changes, are they included in the consent agenda. It was suggested that the track changes be included in the consent agenda.

Thereafter, there was a

**MOTION: THAT the Board of Directors approves motions 1 through 15 on the (Open) Consent Agenda**

Mark Bell/ Michael Tambosso, **CARRIED.**

### 3. **BOARD BUSINESS – QUALITY, GOVERNANCE & PLANNING COMMITTEE**

#### **3.1 Quality & Patient Safety Report Q3 2025/26**

Interim CNE Victoria Miscio reported the highlights of the Q3 report that was presented previously to the Quality, Governance & Planning Committee.

- 2 outbreaks
- P4R metrics declined due to respiratory season
- Falls with harm remain low
- 100% on Glo-Germ audit
- 7 concerns and 12 compliments for the quarter
- The number of surveys being completed is trending down significantly.

Following an opportunity for discussion, there was a

**MOTION: THAT the Board of Directors receives the Quality & Patient Safety Report Q3 2025/26.**

Al Aubry/Connie Phillipson, **CARRIED.**

### **3.2 2025-26 Goals & Objectives Q3**

Interim CEO Burns West reported on the goals and objectives achieved in the third quarter with some of the notable highlights being the completion of a majority of the goals and objectives, and being on target to meet the rest. It was further reported that there is now have a date for the laboratory accreditation, and a staff survey will be going out next month.

Following an opportunity for discussion, there was a

**MOTION: THAT the Board of Directors receives the 2025-26 Goals & Objectives for Q3.**

Connie Phillipson/Diana McNiven, **CARRIED.**

### **3.3 Board of Directors, Performance Evaluation, Board Chair & Individual Member:**

The Chair of the Quality, Governance & Planning Committee, Diana McNiven, addressed revisions to the performance evaluation forms and surveys, noting that the updates were made to enhance transparency. A discussion followed regarding the anonymity of the survey, with acknowledgement that many organizations—particularly in the private sector—are moving away from anonymous formats. It was recommended that Board members receive an early-year reminder about the year-end evaluations and that a debrief session be scheduled afterward.

Following an opportunity for discussion, there was a

**MOTION: THAT the Board of Directors approves the Board of Directors, Performance Evaluation, Board Chair policy POL.GOV.35865 and the Board of Directors Evaluation, Individual Member Policy POL.GOV.35866.**

Mark Bell/Connie Phillipson, **CARRIED.**

## **4. BOARD BUSINESS – FINANCE, RESOURCES & AUDIT COMMITTEE**

### **4.1 2025-26 Financial Statements Q3**

Interim CNE Jen Burns West reviewed the comprehensive financial package that had been pre-circulated. Expenses are higher, especially due to overtime and vacation backfill. Hope remains that pressure funding will be received from the Ministry of Long-Term Care. HHHS is projecting a \$.35 MM deficit at year-end without pressure funding.

Following an opportunity for discussion, there was a

**MOTION: THAT the Board of Directors receives the 2025-26 Financial Statements for Q3.**

Michael Tambosso/ Diana McNiven, **CARRIED.**

## **5. BOARD BUSINESS – EXECUTIVE COMMITTEE**

**5.1** There were no items to discuss.

## **6. REPORTS**

### **6.1 Report of the Executive Director, Haliburton Highlands Health Services Foundation**

Melanie Klodt Wong, Executive Director of the Haliburton Highlands Health Services Foundation, provided a report on the activities of the Foundation.

Following an opportunity for discussion, there was a

**MOTION: THAT the Board of Directors receives the report of the Haliburton Highlands Health Services Foundation.**

Diana McNiven/Sharon Kaasalainen, **CARRIED.**

### **6.2 Report of the Chief of Staff**

In addition to his written report, Dr. Paul Faulkner, Chief of Staff, reported that due to recent staffing changes, the department will need to rely on HFO for staffing more than originally thought.

Following an opportunity for discussion, there was a

**MOTION: THAT the Board of Directors receives the Report of the Chief of Staff.**

Connie Phillipson/ Kurtis Bishop, **CARRIED.**

### **6.3 Report of the Chief Executive Officer**

In addition to her pre-circulated written report, Jen Burns West, Interim CEO, noted the following highlights:

- X-ray equipment is being installed
- New flooring in hallway was laid
- Dr. Max Rannie will be coming in April
- 1200 patients now have primary care in our area - discussion took place on the length of time it now takes to see your family doctor – an inquiry with Kawartha Lakes Haliburton Ontario Health Team on metrics
- New website has been launched
- New repatriation guidelines mandated by Ontario Health may impact HHHS
- Digital supply chain now in place – saving about \$10,000 to 15,000 per month

Following an opportunity for discussion, there was a

**MOTION: THAT the Board of Directors receives the Report of the Interim President & CEO**

Charlotte Snider/Kurtis Bishop, **CARRIED.**

*Secretary's Note: From Stephanie MacLaren, Executive Director, Kawartha Lakes Haliburton Ontario Health Team re metrics regarding primary care:*

*"Yes, there will be - and they should be reflected in the regular key system performance metrics such as reduction of CTAS 4s/5s in ED, 30 day re-admits to hospital etc.*

*I am expecting that Primary Care will likely have some access metrics - they used to have to document 3<sup>rd</sup> next available appointment as an indicator of primary care access availability - but that metric would be a determination for OH. Access will be used as a balancing metric for attachment at some point down the road - just not sure what that metric is."*

### **6.4 Briefing Note – HHHS Corporate Membership February 2026**

A summary of applicants for corporate membership was reviewed.

**MOTION: THAT the Board of Directors approves the Annual Membership for those Applicants listed bringing the total to 28 Members.**

Mark Bell/Diana McNiven, **CARRIED.**

7. **OTHER BUSINESS**

7.1 Next Meeting Date: March 26, 2026

8. **FOR INFORMATION**

8.1 Letter of Support for Peterborough Regional Health Centre's Hybrid OR Initiative

9. **MOTION TO ADJOURN THE OPEN MEETING & MOVE INTO THE CLOSED MEETING**

*On a motion by Jen Dailoux, the open meeting adjourned at 3:00 pm.* Following a brief break, the closed portion of the meeting would commence at 3:10 pm.

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Chair

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Date