

**BOARD OF DIRECTORS MEETING**  
**OPEN SESSION**  
 Thursday, September 25, 2025  
 5:30 pm – La Verendrye General Hospital / Webex

**A G E N D A**

Item	Description	Page
1.	Call to Order – 5:30 pm – Indigenous Acknowledgment & Reading of the Mission Statement 1.1 Quorum 1.2 Conflict of Interest and Duty	
2.	Consent Agenda 2.1 Board Minutes – June 17, 2025 * Pg 4 2.2 Board Chair & Senior Leadership General Report – D. Clifford, H. Gauthier, D. Harris, C. Larson, J. Ogden, Dr. L. Keffer * Pg 7 2.3 Governance Committee Report – B. Norton 2.4 Audit & Resources Committee Report – B. Norton * Pg 9 2.5 Quality Safety Risk Committee Report – M. Kitzul * Pg 12 2.6 Auxiliary Reports * Pg 14	
3.	Motion to Approve the Agenda	
4.	Patient / Resident Safety Moment	
5.	Business Arising - None	
6.	New Business 6.1 Board Member Consolidated Confidentiality, Accountability & Roles & Responsibility Statement – Annual Signing * Pg 15	
7.	Opportunity for Public Participation	
8.	Move to In-Camera	
9.	Other Motions/Business	
10.	Date and Location of Next Meeting: October 30, 2025	
11.	Termination	

\* denotes attached in board package / \*\*denotes circulated under separate cover / \*\*\* denotes previously distributed




**BOARD OF DIRECTORS MEETING  
ANTICIPATED MOTIONS – OPEN SESSION**

**Thursday, September 25, 2025**

3.	Motion to Approve the Agenda	THAT the RHC Board of Directors approve the Agenda as circulated/amended
8.	Move to In-Camera	THAT the RHC Board of Directors move to in camera session at (time)
9.	Other Motions/Business	
11.	Termination	THAT the RHC Board of Directors meeting be terminated at (time)

Indigenous Acknowledgment:

*Riverside acknowledges that the place we are meeting today is on the traditional lands of the Anishinaabeg people, within the lands of Treaty 3 Territory, as well as the home to many Métis.*



**VISION**  
Caring, Together

**MISSION**  
Improving The Health of Our Communities

**VALUES**  
Progressive • Integrity • Caring • Accountable

**STRATEGIC PILLARS**

**ONE RIVERSIDE**  
Supporting a consistent and enabling organizational culture

**INVESTING IN THE PEOPLE WHO SERVE**  
Creating a plan to strategically leverage human resources

**TOMORROW'S RIVERSIDE TODAY**  
Making investments today, to support Riverside tomorrow

**STRIVING TO EXCEL IN EQUITY, DIVERSITY & INCLUSION**  
We will support EDI in all we do

 **Riverside  
Health Care**









## Board Chair, Chief of Staff & Senior Leadership – September 2025 Open Session

### Strategic Pillars & Directions

#### Investing in Those Who Serve - Strategically Leveraging our Human Resources

- **Rainy River (RR) Physician Locum Contract**  
A Physician Locum Contract has been completed for each of the RR Clinic and the RR Health Centre (ER, Acute, LTC). These agreements that were vetted through legal, our Chief of Staff, and Quality Lead are being rolled out this month (September 2025). Previously, no agreement was established for the locums in Rainy River as the RNPGA is not active in this community at this time.

#### One Riverside - Promoting a Consistent and Empowering Culture

- **Activation Enhancement**  
A proposal for enhancement of the activation program at Rainycrest has been approved. In addition to the addition of staff to enhance resident support there is also a blend of equipment being purchased to enhance resident experience. Some of the equipment additions include laundry and handyman life stations, VR glasses for resident use, additional companion pets, a bus stop and bench, snozlen lights, items to enhance the 'home' atmosphere, nail salon, popcorn machine, and theatre system for Hallet Hall.
- **Substance Use Disorders Integrated Care Pathway (SUD ICP)**  
Ontario Health's Mental Health and Addictions Centre of Excellence is leading an initiative to build a comprehensive and connected mental health and addictions system. As part of this initiative Riverside Health Care has been selected to host the lead role in establishing a substance use disorders (SUD) clinical program. This program's focus is to improve the health and well-being of those individuals that use substances. This improvement will be achieved through improved access to quality, compassionate care by enhancing the primary and community care services and creating increased integration across the continuum of care. The program will also be focused on development of integrated care pathways for people who use substances, beginning in emergency departments (EDs), and ensuring intervention at critical points along the journey.

The core components of care within the SUD ICP include Supportive Environments, Peer Support, Substance Use Healthcare, Harm Reduction, and Care Transitions and Navigation. Riverside anticipates annual funding of \$650k over 3 years to support this program. The funding will be utilized to support SUD in the ER, inpatient units, RAAM clinic, harm reduction or withdrawal management services and is designed as a collaboration between our organization, Northwestern Health Unit, Giishkaandago'Ikwe Health Services, and Gizhewaadiziwin Health Access Centre (GHAC) and the District of Rainy River Services Board (DRRSB).

- **Hospital to Home (H2H) Program**  
RHC has submitted an application to participate in the H2H program. The program will support our organization in managing post-discharge home supports up to 16 weeks. This new program creates an increased linkage between the hospital and home care services to deliver a more integrated health care service delivery model. Our program will provide care coordination, personal support services, homemaking services, and work in collaboration with our Indigenous Health Service Partners to deliver care in the home. While our team already provides overflow home care nursing services and district wide community and assisted living services, this program will enhance our post-discharge role.

RHC has also elected to join the Remote Care Monitoring program out of the Ottawa Hospital (see previous board report). This program is fully funded through the Ottawa Hospital and will add another layer of home supports for our clients. Our RHC team that will lead the H2H initiative includes the FLO coordinator, CSS manager, Health Services Navigator and ALC Community Nurse.

Currently, the most significant ALC management issue includes clients that require higher levels of care to return home. The H2H program will enable our organization to manage delivery of required supports, ensuring the right amount of care is delivered at the right time. This approach will both enable patients to return home sooner and also support our ALC clients remaining in their homes for as long as possible.

#### Tomorrow's Riverside Today - Investing Today to Support Tomorrow

- **Ontario Health Team**
  - Primary care application for the district to be submitted in next round. This will focus on unattached clients through GHAC first (due to OPAC concerns) and then to the Fort Frances Family Health Team (FFFHT) to assist in attachment.
  - Consultants have been hired for next planning steps in terms of RAAM clinic evolution.

**Board Chair, Chief of Staff & Senior Leadership – September 2025**  
**Open Session**

- Western Management Consultants has been hired to conduct a strategic engagement that will reflect OHT priorities. They are meeting with Riverside on October 3, 2025, after they tour some of the RHC sites. The Specialty & Diagnostic shuttle will bring them to the Rainy River site for a tour, circle past our other sites, and then go to LVGH where they will complete their tour and meet with leadership.
- **Master Program and Capital Plan**  
The Master Program & Capital Planning project has been initiated with Colliers. The Colliers team is collecting historical documentation and working with our project liaison (Julie Loveday) to better understand the current service delivery model across our district and plan future stakeholder and visioning engagements.
- **ALC Supports**  
Currently, RHC has an ALC Community Nurse in Fort Frances. We have applied for an ALC Community Nurse in Rainy River to balance the service delivery model and a Social Worker in Fort Frances to enhance supports to clients and patients.

**Striving To Excel in Equity, Diversity & Inclusion (EDI)**

- **Indigenous Training**  
Five separate Indigenous Cultural Awareness training sessions are being held for management and full-time staff. These sessions that will supplement our existing EDI training will be provided by Robert Horton of Seven Generations. These day long sessions will be held at La Place Rendez Vous between October and December. Each session will consist of 50 staff for a total of 250 staff over the five sessions. Further sessions will be scheduled in 2026 as we continue to advance this training for the remainder of staff.

Thank you to the Riverside Team for their submissions, they are invaluable in the preparation of this report.

Respectfully Submitted,

Diane Clifford, Board Chair  
Dr. Lucas Keffer, Chief of Staff  
Diana Harris, Chief Nursing Executive  
Carla Larson, Chief Financial, Information & Technology Officer  
Joanne Ogden, Quality Assurance & OHT Executive Lead  
Henry Gauthier, President & CEO  
RHC Directors, Managers & Supervisors



**Audit & Resources Committee Report – September 2025**

2.4.1 Financial Report – August 2025 \*



**Operating Revenue & Expense Summary  
April 1, 2025 to August 31, 2025**

		April 1, 2025 to March 31, 2026 Annual Budget	April 1, 2025 to March 31, 2026 Adjusted Annual Budget (with Agency Costs)	2025-2026 YTD Budget	2025-2026 YTD Adjusted Budget (with Agency Costs)	2025-2026 YTD Actual	Overall Change	Overall Change Adjusted Budget (with Agency Costs)	YTD Actual Percent (%) Over(Under) YTD Budget	YTD Actual Percent (%) Over(Under) YTD Adjusted Budget (with Agency Costs)
<b>Fund Type 1 - OH Funded - Hospital Services</b>										
<b>REVENUE</b>										
OH - Base Funding	A-1	\$33,784,517	\$33,959,137	\$14,161,729	\$14,234,926	\$13,976,281	(\$185,448)	(\$258,645)	-0.55%	-0.76%
QBP Funding	A-2	\$1,078,300	\$1,078,300	\$452,000	\$452,000	\$966,869	\$514,869	\$514,869	47.75%	47.75%
Other Funding (19*) - Bundled Care, Hospice, Oncology Drug Reimbursement	A-3	\$2,496,065	\$2,496,065	\$1,046,296	\$1,046,296	\$885,576	(\$160,720)	(\$160,720)	-6.44%	-6.44%
OH - One Time Funding	A-4	\$625,127	\$625,127	\$262,040	\$262,040	\$296,170	\$34,130	\$34,130	5.46%	5.46%
MOHLTC - One Time Funding	A-5	\$354,426	\$354,426	\$148,568	\$148,568	\$140,276	(\$8,292)	(\$8,292)	-2.34%	-2.34%
Other Revenue MOHLTC - HOCC	A-6	\$847,404	\$847,804	\$355,213	\$355,381	\$403,465	\$48,252	\$48,084	5.69%	5.67%
Paymaster	A-7	\$0	\$0	\$0	\$0	\$0	\$0	\$0	#DIV/0!	#DIV/0!
Cancer Care Ontario	A-8	\$12,722	\$12,722	\$5,333	\$5,333	\$3,518	(\$1,815)	(\$1,815)	-14.26%	-14.26%
Recoveries & Miscellaneous	A-9	\$2,467,200	\$2,467,200	\$1,034,196	\$1,034,196	\$804,561	(\$229,635)	(\$229,635)	-9.31%	-9.31%
Amortization of Grants/Donations Equipment	A-10	\$731,350	\$731,350	\$306,566	\$306,566	\$312,982	\$6,416	\$6,416	0.88%	0.88%
OHIP Revenue & Patient Revenue from Other Payers	A-11	\$2,284,781	\$2,284,781	\$957,730	\$957,730	\$1,004,333	\$46,602	\$46,602	2.04%	2.04%
Differential & Copayment	A-12	\$932,877	\$932,877	\$391,042	\$391,042	\$383,135	(\$7,907)	(\$7,907)	-0.85%	-0.85%
<b>TOTAL REVENUE</b>	<b>A-13</b>	<b>\$45,614,769</b>	<b>\$45,789,789</b>	<b>\$19,120,711</b>	<b>\$19,194,076</b>	<b>\$19,177,166</b>	<b>\$56,454</b>	<b>(\$16,910)</b>	<b>0.12%</b>	<b>-0.04%</b>
<b>EXPENDITURES</b>										
Compensation - Salaries & Wages	A-14	\$26,077,132	\$26,077,132	\$10,930,962	\$10,930,962	\$9,526,130	(\$1,404,832)	(\$1,404,832)	-5.39%	-5.39%
Compensation - Purchased Service	A-15	\$572,660	\$2,572,660	\$240,047	\$1,078,403	\$3,058,759	\$2,818,712	\$1,980,356	492.21%	76.98%
Benefit Contributions	A-16	\$7,301,597	\$7,301,597	\$3,060,669	\$3,060,669	\$2,630,173	(\$430,496)	(\$430,496)	-5.90%	-5.90%
Future Benefits	A-17	\$71,000	\$71,000	\$29,762	\$29,762	\$12,240	(\$17,522)	(\$17,522)	-24.68%	-24.68%
Medical Staff Remuneration	A-18	\$2,604,262	\$2,604,262	\$1,091,650	\$1,091,650	\$1,325,850	\$234,200	\$234,200	8.99%	8.99%
Nurse Practitioner Remuneration	A-19	\$544,665	\$544,665	\$228,312	\$228,312	\$295,967	\$67,655	\$67,655	12.42%	12.42%
Supplies & Other Expenses	A-20	\$8,626,606	\$8,626,606	\$3,616,084	\$3,616,084	\$3,693,536	\$77,452	\$77,452	0.90%	0.90%
Amortization of Software Licenses & Fees	A-21	\$195,887	\$253,324	\$82,112	\$106,188	\$90,645	\$8,533	(\$15,543)	4.36%	-6.14%
Medical/Surgical Supplies	A-22	\$1,435,851	\$1,435,851	\$601,877	\$601,877	\$724,965	\$123,088	\$123,088	8.57%	8.57%
Drugs & Medical Gases	A-23	\$2,825,169	\$2,825,169	\$1,184,249	\$1,184,249	\$1,015,025	(\$169,224)	(\$169,224)	-5.99%	-5.99%
Amortization of Equipment	A-24	\$1,264,810	\$1,264,810	\$530,181	\$530,181	\$529,561	(\$620)	(\$620)	-0.05%	-0.05%
Rental/Lease of Equipment	A-25	\$252,174	\$252,174	\$105,706	\$105,706	\$83,500	(\$22,206)	(\$22,206)	-8.81%	-8.81%
Bad Debts	A-26	\$175,000	\$175,000	\$73,356	\$73,356	\$85,000	\$11,644	\$11,644	6.65%	6.65%
<b>TOTAL EXPENSE</b>	<b>A-27</b>	<b>\$51,946,813</b>	<b>\$54,004,250</b>	<b>\$21,774,965</b>	<b>\$22,637,398</b>	<b>\$23,071,351</b>	<b>\$1,296,385</b>	<b>\$433,953</b>	<b>2.50%</b>	<b>0.80%</b>
<b>SURPLUS/(DEFICIT)</b>	<b>A-28</b>	<b>(\$6,332,044)</b>	<b>(\$8,214,461)</b>	<b>(\$2,654,254)</b>	<b>(\$3,443,322)</b>	<b>(\$3,894,185)</b>	<b>(\$1,239,931)</b>	<b>(\$450,863)</b>	<b>19.58%</b>	<b>5.49%</b>
<b>Fund Type 1 - OH Funded - Rainy River Clinic</b>										
<b>REVENUE</b>										
MOH Funding	B-1	\$2,920,208	\$2,920,208	\$1,224,087	\$1,224,087	\$1,224,087	(\$0)	(\$0)	0.00%	0.00%
Nurse Practitioner Funding thru RHC	B-2	\$122,853	\$122,853	\$51,497	\$51,497	\$44,292	(\$7,205)	(\$7,205)	-5.86%	-5.86%
Recoveries & Miscellaneous	B-3	\$0	\$0	\$0	\$0	\$0	\$0	\$0	#DIV/0!	#DIV/0!
<b>TOTAL REVENUE</b>	<b>B-4</b>	<b>\$3,043,061</b>	<b>\$3,043,061</b>	<b>\$1,275,584</b>	<b>\$1,275,584</b>	<b>\$1,268,379</b>	<b>(\$7,205)</b>	<b>(\$7,205)</b>	<b>-0.24%</b>	<b>-0.24%</b>
<b>EXPENDITURES</b>										
Rainy River Clinic Salaries	B-5	\$295,497	\$295,497	\$123,866	\$123,866	\$123,122	(\$744)	(\$744)	-0.25%	-0.25%
Rainy River Clinic Benefits	B-6	\$76,272	\$76,272	\$31,972	\$31,972	\$33,672	\$1,700	\$1,700	2.23%	2.23%
Physician Remuneration	B-7	\$2,095,122	\$2,095,122	\$878,229	\$878,229	\$1,062,566	\$184,337	\$184,337	8.80%	8.80%
Physician Travel	B-8	\$190,066	\$190,066	\$79,672	\$79,672	\$83,477	\$3,805	\$3,805	2.00%	2.00%
Nurse Practitioner Expenditures	B-9	\$226,026	\$226,026	\$94,745	\$94,745	\$44,292	(\$50,453)	(\$50,453)	-22.32%	-22.32%
Other Sundry	B-10	\$8,112	\$8,112	\$3,400	\$3,400	\$4,803	\$1,403	\$1,403	17.29%	17.29%
Rainy River Clinic Rent	B-11	\$75,758	\$75,758	\$31,756	\$31,756	\$22,520	(\$9,236)	(\$9,236)	-12.19%	-12.19%
Rainy River Clinic Software	B-12	\$76,208	\$76,208	\$31,945	\$31,945	\$26,424	(\$5,521)	(\$5,521)	-7.24%	-7.24%
<b>TOTAL EXPENSE</b>	<b>B-13</b>	<b>\$3,043,061</b>	<b>\$3,043,061</b>	<b>\$1,275,584</b>	<b>\$1,275,584</b>	<b>\$1,400,876</b>	<b>\$125,292</b>	<b>\$125,292</b>	<b>4.12%</b>	<b>4.12%</b>
<b>SURPLUS/(DEFICIT)</b>	<b>B-14</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>	<b>(\$132,497)</b>	<b>(\$132,497)</b>	<b>(\$132,497)</b>	<b>#DIV/0!</b>	<b>#DIV/0!</b>



**Operating Revenue & Expense Summary**  
**April 1, 2025 to August 31, 2025**

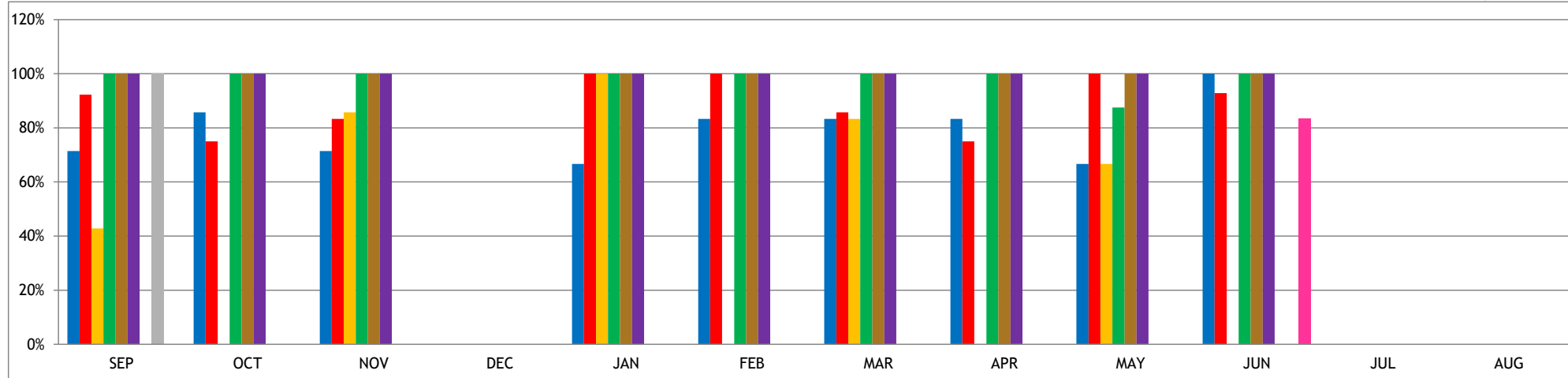
		April 1, 2025 to March 31, 2026 Annual Budget	April 1, 2025 to March 31, 2026 Adjusted Annual Budget (with Agency Costs)	2025-2026 YTD Budget	2025-2026 YTD Adjusted Budget (with Agency Costs)	2025-2026 YTD Actual	Overall Change	Overall Change Adjusted Budget (with Agency Costs)	YTD Actual Percent (%) Over(Under) YTD Budget	YTD Actual Percent (%) Over(Under) YTD Adjusted Budget (with Agency Costs)
<b>Fund Type 2 - OH Funded - Counselling &amp; Non Profit Housing Programs</b>										
<b>Mental Health - Case Management - Housing - Addictions - Problem Gambling</b>										
TOTAL REVENUE	C-1	\$2,529,663	\$2,529,663	\$1,060,379	\$1,060,379	\$963,361	(\$97,018)	(\$97,018)	-3.84%	-3.84%
TOTAL EXPENSE	C-2	\$2,529,663	\$2,529,663	\$1,060,379	\$1,060,379	\$999,029	(\$61,350)	(\$61,350)	-2.43%	-2.43%
SURPLUS/(DEFICIT)	C-3	\$0	\$0	\$0	\$0	(\$35,668)	(\$35,668)	(\$35,668)	#DIV/0!	#DIV/0!
<b>Fund Type 3 - Other Ministry/Agency Funded - Non Hospital Services</b>										
<b>Family Violence &amp; Non Profit Supportive Housing Bricks &amp; Mortar</b>										
TOTAL REVENUE	D-1	\$684,845	\$684,845	\$287,072	\$287,072	\$186,864	(\$100,208)	(\$100,208)	-14.63%	-14.63%
TOTAL EXPENSE	D-2	\$684,845	\$684,845	\$287,072	\$287,072	\$189,147	(\$97,925)	(\$97,925)	-14.30%	-14.30%
SURPLUS/(DEFICIT)	D-3	\$0	\$0	\$0	\$0	(\$2,283)	(\$2,283)	(\$2,283)	#DIV/0!	#DIV/0!
<b>Fund Type 2 - OH Funded - RainyCrest Community Support Services</b>										
<b>(Home Support, Assisted Living, Adult Day, Meals on Wheels)</b>										
TOTAL REVENUE	E-1	\$3,201,384	\$3,201,384	\$1,341,950	\$1,341,950	\$1,341,950	(\$0)	(\$0)	0.00%	0.00%
TOTAL EXPENSE	E-2	\$3,201,384	\$3,201,384	\$1,341,950	\$1,341,950	\$1,419,018	\$77,068	\$77,068	2.41%	2.41%
SURPLUS/(DEFICIT)	E-3	\$0	\$0	\$0	\$0	(\$77,068)	(\$77,068)	(\$77,068)	#DIV/0!	#DIV/0!
<b>Fund Type 2 - OH Funded - RainyCrest Long Term Care</b>										
TOTAL REVENUE	F-1	\$15,330,585	\$15,330,585	\$6,426,245	\$6,426,245	\$6,234,702	(\$191,543)	(\$191,543)	-1.25%	-1.25%
Compensation	F-2	\$9,265,810	\$10,013,462	\$3,884,025	\$4,197,424	\$4,624,724	\$740,699	\$427,300	7.99%	4.27%
Purchased Service	F-3	\$0	\$781,103	\$0	\$327,421	\$973,626	\$973,626	\$646,204	#DIV/0!	82.73%
Benefits	F-4	\$2,580,947	\$2,580,947	\$1,081,877	\$1,081,876	\$1,007,312	(\$74,565)	(\$74,564)	-2.89%	-2.89%
Nurse Practitioner	F-5	\$149,394	\$417,394	\$62,623	\$174,962	\$167,104	\$104,481	(\$7,858)	69.94%	-1.88%
Medical Staff Remuneration	F-6	\$50,096	\$50,096	\$20,999	\$20,999	\$14,809	(\$6,190)	(\$6,190)	-12.36%	-12.36%
Supplies	F-7	\$1,669,915	\$1,669,915	\$699,992	\$699,992	\$709,582	\$9,590	\$9,590	0.57%	0.57%
Service Recipient Specific Supplies	F-8	\$0	\$0	\$0	\$0	\$0	\$0	\$0	#DIV/0!	#DIV/0!
Sundry	F-9	\$1,404,535	\$1,669,535	\$588,750	\$699,832	\$624,452	\$35,702	(\$75,381)	2.54%	-4.52%
Equipment	F-10	\$572,484	\$672,484	\$239,973	\$281,891	\$43,749	(\$196,224)	(\$238,142)	-34.28%	-35.41%
Contracted Out	F-11	\$61,561	\$61,561	\$25,805	\$25,805	\$1,411	(\$24,394)	(\$24,394)	-39.63%	-39.63%
Building & Grounds	F-12	\$62,735	\$217,735	\$26,297	\$91,270	\$142,948	\$116,651	\$51,678	185.94%	23.73%
TOTAL EXPENSE	F-13	\$15,817,478	\$18,134,232	\$6,630,340	\$7,601,473	\$8,309,717	\$1,679,377	\$708,244	10.62%	3.91%
SURPLUS/(DEFICIT) including unfunded liabilities	F-14	(\$486,893)	(\$2,803,647)	(\$204,095)	(\$1,175,227)	(\$2,075,015)	(\$1,870,920)	(\$899,787)	384.26%	32.09%
Less: Unfunded Future Benefits	F-15	\$0	\$0	\$0	\$0	(\$31,606)	(\$31,606)	(\$31,606)	#DIV/0!	#DIV/0!
Less: Unfunded Amortization Expense	F-16	\$0	\$0	\$0	\$0	\$0	\$0	\$0	#DIV/0!	#DIV/0!
SURPLUS/(DEFICIT) excluding unfunded liabilities	F-17	(\$486,893)	(\$2,803,647)	(\$204,095)	(\$1,175,227)	(\$2,106,621)	(\$1,902,526)	(\$931,393)	390.75%	33.22%
<b>Operating Surplus(Deficit) - Hospitals &amp; Long Term Care ONLY</b>		<b>(\$6,818,937)</b>	<b>(\$11,018,108)</b>	<b>(\$2,858,349)</b>	<b>(\$4,618,549)</b>	<b>(\$6,000,806)</b>				
<b>Total Operating Margin - Hospitals &amp; Long Term Care ONLY</b>		<b>-11.19%</b>	<b>-18.03%</b>	<b>-11.19%</b>	<b>-18.03%</b>	<b>-23.61%</b>				



**Quality, Safety, Risk Committee Report – September 2025**

2.5.1 Board Quality Metrics \*

# BOARD OF DIRECTORS - QUALITY METRICS - 2024-2025



**INDICATORS:**

- Participation A** - # of voting board members attending board meetings monthly.
- Participation B** - # of voting board members attending committee meetings monthly.
- Reflection A** - # of completed board meeting evaluation surveys bi-monthly.
- Reflection B** - # of members that complete the board self-assessment questionnaire annually (June).
- Decision Making** - # of board decisions made by detailed briefing notes/supporting documentation done monthly.
- Education A** - # of education sessions at board meetings monthly.
- Education B** - # of board meeting agenda items related to integration, quality or strategy monthly.
- Composition** - # of categories in the skills based board matrix met annually (March).
- Compliance** - # of new directors that attend board orientation annually (Sept).

INDICATOR	SEP	OCT	NOV	DEC	JAN	FEB	MAR	APR	MAY	JUN	JUL	AUG	YTD Actual	Target	Variance	Notes
1. Participation A	71%	86%	71%	#DIV/0!	67%	83%	83%	83%	67%	100%	#DIV/0!	#DIV/0!	79%	75%	4%	
2. Participation B	92%	75%	83%	#DIV/0!	100%	100%	86%	75%	100%	93%	#DIV/0!	#DIV/0!	90%	75%	15%	
3. Reflection A	43%	#DIV/0!	86%	#DIV/0!	100%	#DIV/0!	83%	#DIV/0!	67%	#DIV/0!	#DIV/0!	#DIV/0!	75%	100%	-25%	
4. Reflection B										83%			83%	100%	-17%	
5. Decision Making	100%	100%	100%	#DIV/0!	100%	100%	100%	100%	88%	1	#DIV/0!	#DIV/0!	99%	90%	9%	
6. Education A	100%	100%	100%	#DIV/0!	100%	100%	100%	100%	100%	1	#DIV/0!	#DIV/0!	113%	100%	13%	min of 1 session/mtg
7. Education B	100%	100%	100%	#DIV/0!	100%	100%	100%	100%	100%	1	#DIV/0!	#DIV/0!	100%	100%	0%	min of 2 items/mtg
8. Composition							0%						0%	89%	-89%	0/18 met (in green zone) - due to Board vacancies
9. Compliance	100%	#DIV/0!	#DIV/0!										#DIV/0!	90%	#DIV/0!	Board Orientation took place in September 2024



## Auxiliary Report – September 2025

### Emo

No Report.

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### La Verendrye General Hospital

A brief summary of LVGH Auxiliary activities submitted by M. Cumming, LVGH Auxiliary President:

- First major fundraiser of the year is a fall luncheon - *Pumpkins & Plaid* - that will be held Sunday, October 26<sup>th</sup> at the Legion. Save the date. Ticket information will be out soon. Hope to see a table (or 2!) filled with RHCFC Board and staff!!
  - Held our quarterly "*Coffee & Conversation*" to update membership on Auxiliary activities and to brainstorm ideas/volunteer for aspects of the *Pumpkins & Plaid* event.
  - In the tradition of supporting each of the major Riverside fundraising campaigns, LVGHA has made a very significant pledge of **\$100,000** towards the Lights, Camera, DIAGNOSIS campaign. This is certainly very ambitious, but we are confident that our members and the community will continue to support the work of the Auxiliary as they have for the past 70+ years. Our plan is to fulfill the pledge by our next AGM.
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### Rainycrest

No Report.

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### Rainy River

The Rainy River Health Centre Auxiliary met on September 3, 2025, with the following highlights:

- A membership drive is taking place this fall with mailbox inserts, posters and social media posts.
- The capital equipment list was reviewed by members and three items discussed. It was decided that more information is needed, therefore, the decision is being tabled until the October meeting.
- Members will be selling quilt tickets at the Post Office one day per week for the quilt draw taking place in December.
- We have two tables reserved for the 2025 Walleye Tournament, taking place on September 19th and 20th, where we will be selling quilt tickets, Nevada tickets and Tuck Shop items.
- The Senior Active Living Fair will be taking place on October 30th in Rainy River. Our auxiliary has one table booked where we will be selling Tuck Shop merchandise. We will also be donating a door prize item for the Fair.
- We continue to provide welcome gifts for long term care patients from our Tuck Shop inventory.



## BOARD MEMBER CONSOLIDATED CONFIDENTIALITY, ACCOUNTABILITY AND ROLES AND RESPONSIBILITIES STATEMENT

### BOARD MEMBER CONFIDENTIALITY STATEMENT

#### **Riverside Health Care Facilities Inc. By-laws - Article 10:**

*" Every Director, officer, Medical and Dental Staff member, Board committee member, and employee of the Corporation shall respect the confidentiality of matters:*

- a) brought before the Board or any Board committee; or*
- b) dealt with in the course of the employee's employment, or Medical or Dental Staff member's activities in connection with the Corporation, keeping in mind that unauthorized statements could adversely affect the interests of the Corporation."*

#### **Board Governance Policy GOV-G&S-020 – RHC Board Confidentiality Policy:**

*The directors owe to the corporation a duty of confidence not to disclose or discuss with another person or entity, or to use for their own purpose, confidential information concerning the business and affairs of the corporation received in their capacity as directors unless otherwise authorized by the board.*

#### **Responsibility**

*Every director shall ensure that no statement not authorized by the board is made by him or her to the press or public.*

#### **Confidential Matters**

*All matters that are the subject of closed sessions of the board are confidential until disclosed in a session of the board that is open to the public.*

*All matters that are before a committee or task force of the board are confidential unless they have been determined not to be confidential by the chair of the relevant committee or task force.*

*All matters that are the subject of a session of the board that is open to the public are not confidential.*

#### **Public/Media Statement**

*Notwithstanding that information disclosed or matters dealt with in a session of the board that was open to the public are not confidential, no director shall make any statement to the press or the public in his or her capacity as a director unless such statement has been authorized by the board.*

### BOARD MEMBER ACCOUNTABILITY STATEMENT

The Riverside Health Care (RHC) Board of Directors is accountable to members of the Corporation for acting consistently with the Articles of Incorporation, the By-laws, applicable legislation, the common law as it governs healthcare organizations and the achievement of its mission and vision. The Directors exercise the power vested in them in good faith and honesty in order to further the purposes for which the corporation was created. They act in what they consider to be the best interests of the organization, each exercising his or her unfettered discretion in decision making; ex-officio directors fulfill the same duty to the corporation. Directors

do not place themselves in a position where their personal interests conflict with those of the Corporation.


The Directors establish objectives that are within the capacity of the Corporation’s plant and resources. The board strives to maintain a balance within its medical and other staff to ensure a broad base of expertise while attaining the most efficient utilization of the facilities and resources of the Corporation.

In choosing between competing demands on scarce resources, the Board of Directors has established the following accountabilities.

To Members of the Corporation	For acting consistently with the Articles of Incorporation, the By-laws, applicable legislation, the common law as it governs corporations and the achievement of its mission and vision
To Patients/Clients/Residents	For safe, family-centered care and best practices
To Ministry of Health & Long-Term Care	For expenditure management compliance with policies and regulations, data quality and performance management
To Ontario Health	For compliance to accountability agreements and applicable legislation
To Fundraising	For donor stewardship and support
To Staff, Volunteers and Medical Staff	For transparent processes of CEO and Chief of Staff evaluation
To Partners	For collaboration
To Communities We Serve	For advocacy, communication and expectation management

**BOARD MEMBER CODE OF CONDUCT**

Directors are required to engage one another and both staff and physicians in accordance with Riverside Health Care’s Vision, Mission and Values. More specifically, Directors are expected to:



**PRINCIPLES OF CONDUCT**

<p><b>CARE</b></p> <ul style="list-style-type: none"> <li>Treat others as you would like to be treated</li> <li>Uphold Privacy and Confidentiality</li> <li>Know your clients’ needs</li> <li>Communicate openly and effectively</li> <li>Support a learning journey</li> </ul>	<p><b>COMPASSION</b></p> <ul style="list-style-type: none"> <li>Be courteous</li> <li>Be empathetic</li> <li>Be attentive</li> <li>Be open-minded</li> <li>Be kind</li> <li>Ensure a supportive, safe, and comfortable environment</li> </ul>	<p><b>COMMITMENT</b></p> <ul style="list-style-type: none"> <li>Work as a team</li> <li>Build relationships and trust</li> <li>Understand your role and responsibilities</li> <li>Take responsibility for your actions and for yourself</li> <li>Making Learning your attitude</li> </ul>
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## WORKPLACE BULLYING, HARRASSMENT AND VIOLENCE – ORG-HRM-ERL-701

Riverside Health Care (RHC) recognizes the dignity and worth of everyone in our organization. We are committed to ensuring a work environment that is healthy, safe, secure and respectful of each individual. Each Director is subject to the Workplace Bullying, Harassment, and Violence Policy of the organization.

### BOARD MEMBER ROLES & RESPONSIBILITIES STATEMENT

#### ***Responsibility of the Board:***

The board is responsible for the overall governance of the affairs of Riverside Health Care (RHC).

Each Director is responsible to act honestly, in good faith and in the best interests of the organization and in so doing, to support the organization in fulfilling its mission and discharging its accountabilities.

#### ***Strategic Planning and Mission, Vision and Values:***

- The board participates in the formulation and adoption of the organization's mission, vision and values.
- The board ensures that the organization develops and adopts a strategic plan that is consistent with the organization's mission and values, which will enable the organization to realize its vision. The board participates in the development of, and ultimately approves the strategic plan.
- The board oversees organization operations for consistency with the strategic plan and strategic directions.
- The board receives regular briefings or progress reports on implementation of strategic directions and initiatives.
- The board ensures that its decisions are consistent with the strategic plan and the organization's mission, vision and values.
- The board annually conducts a review of the strategic plan as part of a regular annual planning cycle.

#### ***Quality and Performance Measurement and Monitoring:***

- The board is responsible for establishing a process and a schedule for monitoring and assessing performance in areas of board responsibility including:
  - Fulfillment of the strategic directions in a manner consistent with the mission, vision and values
  - Oversight of management performance
  - Quality of patient care and organizational services
  - Financial conditions
  - External relations
  - Board's own effectiveness
- The board ensures that management has identified appropriate measures of performance.
- The board monitors organization and board performance against board-approved performance standards and indicators.
- The board ensures that management has plans in place to address variances from performance standards indicators, and the board oversees implementation of remediation plans.

#### ***Financial Oversight:***

- The board is responsible for stewardship of financial resources including ensuring availability of, and overseeing allocation of, financial resources.

- The board approves policies for financial planning and approves the annual operating and capital budget.
- The board monitors financial performance against budget.
- The board approves investment policies and monitors compliance.
- The board ensures the accuracy of financial information through oversight of management and approval of annual audited financial statements.
- The board ensures management has put measures in place to ensure the integrity of internal controls.

***Oversight of Management including Selection, Supervision and Succession Planning for the President & CEO and Chief of Staff:***

- The board recruits and supervises the President & CEO by:
  - Developing and approving the President & CEO job description
  - Undertaking a President & CEO Recruitment process and selecting the President & CEO
  - Reviewing and approving the President & CEO's annual performance goals
  - Reviewing the President & CEO performance and determining President & CEO compensation
- The board ensures succession planning is in place for the President & CEO and senior management.
- The board exercises oversight of the President & CEO's supervision of senior management as part of the President & CEO's annual review.
- The board develops a process for selection and review of the Chief of Staff and ensures the process is implemented and followed.
- The board reviews Chief of Staff performance and sets Chief of Staff compensation.
- The board develops, implements and maintains a process for the selection of department chiefs and other medical leadership positions as required under the Corporation by-laws or the Public Hospitals Act.

***Risk Identification and Oversight:***

- The board is responsible to be knowledgeable about risks inherent in the organizations operations and ensure that appropriate risk analysis is performed as part of board decision-making.
- The board oversees management's risk management program.
- The board ensures the appropriate programs and processes are in place to protect against risk.
- The board is responsible for identifying unusual risks to the organization for ensuring that there are plans in place to prevent and manage such risks.

***Stakeholder Communication and Accountability:***

- The board identifies organizational stakeholders and understands stakeholder accountability.
- The board ensures the organization appropriately communicates with stakeholders in a manner consistent with accountability to stakeholders.
- The board contributes to the maintenance of strong stakeholder relationships.
- The board performs advocacy on behalf of the organization with stakeholders where required in support of the mission, vision and values and strategic directions of Riverside Health Care (RHC).

***Governance:***

- The board is responsible for the quality of its own governance.

- The board establishes governance structures to facilitate the performance of the board's role and enhance individual director performance.
- The board is responsible for the recruitment of a skilled, experienced and qualified board.
- The board ensures ongoing board training and education.
- The board periodically assesses and reviews its governance through periodically evaluating board structures including board recruitment processes and board composition and size, number of committees and their Terms of Reference, processes for appointment of committee chairs, processes for appointment of board officers and other governance processes and structures.

**Legal Compliance:**

- The board ensures that appropriate processes are in place to ensure compliance with legal requirements.

**Amendment:**

- This statement may be amended by the board.

I, \_\_\_\_\_, agree to comply with the Riverside Health Care (RHC) Board Confidentiality Policy, code of conduct and accountability statement.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

Original: 09/08

Reviewed: 09/11; 01/18, 09/18, 05/19, 09/20, 09/21, 09/22, 09/23, 06/24, 06/25

Revised: 05/14, 09/18, 05/19, 10/20, 09/23, 06/25