



HDGH Board of Directors Meeting

September 23, 2026

HDGH, 1453 Prince Road

Administrative Boardroom - 2nd Floor - East Wing - EW-2312



September 23, 2026, HDGH Board of Directors Meeting

Agenda

4:30PM	1.0 Call to Order		P. Soulliere
	1.1 Land Acknowledgement and Prayer/Reflection - 3		P. Soulliere
	1.2 Confirmation of Quorum		P. Soulliere
	1.3 Declaration of Conflict of Interest/Duty		P. Soulliere
4:35PM	2.0 Board Education; Accreditation Overview	Information	Melissa Sooley
5:00PM	3.0 Consent Agenda	Approval	P. Soulliere
	Motion: to approve the Consent Agenda for the September 23, 2026, HDGH Board of Directors Meeting, consisting of the recommendations and reports		
	3.1 Items for Approval		
	3.1.1 Agenda; September 23, 2026		
	3.1.2 Minutes of the Previous Meeting; June 24, 2026 - 4		
	4.0 Board Decisions/Oversight		
	5.0 Executive Highlights		
5:05PM	5.1 Chief of Staff Report	Information	Dr. A. Steen
5:10PM	5.2 Chief Nursing Executive (CNE) Officer Report - 7	Information	S. Landry
5:15PM	5.3 President and Chief Executive Officer Report	Information	B. Marra
5:20PM	5.4 Board Chair Report	Information	P. Soulliere
5:25PM	6.0 Adjournment/Termination of Meeting		P. Soulliere
	Next Meeting: November 25, 2026		
5:25-5:35PM	Break and Media Questions		



Land Acknowledgement

Board Chair:

I would like to begin our meeting by acknowledging that we are on Land that has been inhabited by Indigenous Peoples from the beginning.

As settlers, we are grateful for the opportunity to be here and to be able to provide the services that we do and we thank all the generations of Indigenous People who have taken care of this Land for thousands of years.

We specifically recognize the original territory of the Council of Three Fires Confederacy, the three Anishinaabe (Ah-nish-in-ah-bay) Nations – Ojibwe (O-jib-way), Odawa (O-da-wa), and Potawatomi (Pot-a-wata-me).

Prayer

Enlighten each one of us as we are called to help and
serve those around us,

May our decisions and actions bring forth justice and healing.

May we embrace those around us with the same tenderness
that we ourselves require,

We pray for God's supportive love, wisdom and peace in all we do.

Amen

Directors Present

P. Soulliere, Chair, K. Bortolin, J. Clark, C. Gallant, M. Galvin, L. Haugh, N. Kara (virtual), R. Modestino, R. Pellerito, C. Stan, M. Winterton, S. Wisdom

Directors Absent

None.

Ex-Officio Present

F. Bagatto, CHI Director, L. Lombardo, Vice Chair & CHI Director B. Masotti, Patient Family Advisory Rep., K. Roy, Patient Family Advisory Rep., B. Marra, Chief Executive Officer (by phone), S. Landry, Chief Nursing Executive, Dr. A. Steen, Chief of Staff (virtual)

Ex-Officio Absent

Dr. K. Levang, President Professional Staff

Administration Present

T. Caston (Recording Secretary), T. Kotyk, S. Laframboise, S. McGeen

Guests

Nicole Crozier, Dir. Comms & Mission, Lori Kempe, Executive Lead, Lead Agency, Child & Youth Mental Health

1.0 Call to Order

The Board Chair called the meeting to order at 4:30PM

1.1 Land Acknowledgement & Prayer/Reflection

The Chair read the land acknowledgement followed by the prayer.

1.2 Confirmation of Quorum

Confirmed.

1.3 Declaration of Conflict of Interest/Duty

None.

1.4 Approval of Agenda; June 24, 2026

Upon motion duly made, seconded, and unanimously carried, the Agenda for the June 24, 2026, be approved as presented.

1.5 Recognition of Outgoing Board Members

The Chair recognized John Clark and Kathy Roy and thanked them for their dedication on the Board of Directors.

2.0 Board Education

2.1 Lead Agency Annual Report

L. Kempe, Executive Lead, Lead Agency, Child & Youth Mental Health circulated the *Windsor Essex Child & Youth Mental Health Multi-Year Plan Initiative Report Year 2 2025/2026 infographic*; the strategic, community-driven framework designed to address regional health service gaps and improve care systems for residents aged 0-18. Highlights were provided on Core Service Provider Initiatives, Community Partner Initiatives, Community Training facilitated

by Lead Agency, and Community Impact of Assertive Community Treatment for Children (ACT-C; RCC) which included a testimony “Ethan’s Story”.

L. Kempe left at 4:44PM

2.2 Living our Legacy; Strengthening our Legacy

N. Crozier, Director of Communications & Mission presented on *Living Our Mission Strengthening our Legacy*. An overview was provided on HDGH’s foundational history outlining how HDGH carries out Mission today. Highlights were provided on including but not limited to Patient Benevolent Fund; HDGH Clothing Closet; the Regional Children’s Centre Daily Breakfast Program; Essential Care Partners; Employee Benevolent Fund; the Peer Support Team; EAP Services; and Benefits and Pension. A spotlight was also provided on the care HDGH extends into the community such as RCC Families at Christmas; Unit Way; Food Drives; Christmas Luncheons; and Donate Your Kicks.

N. Crozier left at 5:00PM

3.0 Consent Agenda

The Chair asked if anyone wished to remove anything from the Consent agenda to the full agenda for discussion. No items were removed.

3.1 Items for Approval

3.1.1 Minutes of the Previous Meetings; May 27, 2026

THAT the Minutes of the May 27, 2026, Hôtel-Dieu Grace Healthcare Board of Directors meeting be approved as presented.

3.1.2 French Language Services Plan

THAT the French Language Services Plan be approved as presented.

Upon motion duly made, seconded, and unanimously carried, the June 24, 2026, Consent Agenda, consisting of the recommendations be approved as presented.

4.0 Board Decisions/Oversight

None.

5.0 Executive Highlights

5.1 Chief of Staff Report

No updates were provided.

5.2 Chief Nursing Executive (CNE) Report

S. Landry provided updates to the enclosed report (pg. 18) Hospital to Home (H2H). Since the coordinated approach with WRH, HDGH’s occupancy rate is down from 90% to 80%; trends continue to be monitored.

5.3 President & Chief Executive Officer Report

No report provided; the June 25th launch of the 2025/2026 Annual Report was highlighted as a key communication update.

5.4 Board Chair Report

No updates were provided.

6.0 Date of Next Meeting

September 26, 2026 (Board Meeting & Plenary Session)

7.0 Adjournment

The Board Chair adjourned the open meeting.

Bill Marra, Secretary

Pat Soulliere, Board Chair



CNE Report for Board of Directors Meeting

☐ FOR DECISION ☐ FOR ACTION ☒ FOR INFORMATION ☐ FOR TRACKING

Date:

September 8, 2026

Author:

T. Caston on behalf of
S. Landry, VP Restorative Care, CNE

Subject:

CNE Report – September 2026

UPDATE

September marks the joyful bridge from summer to autumn and in healthcare marks our annual operational shift from summer tempo into our high-capacity fall cycle of surge planning, influenza and COVID-19 vaccination campaigning

Surge Planning

HDGH has begun reviewing bed capacity, staffing schedules, and outlining protocols to manage anticipated over-occupancy in acute care. Preparation for administering flu and COVID-19 booster shots to our healthcare professionals and inpatients to protect staff and our vulnerable population. Access and Flow is being reviewed with community partners for admission and discharge processes and to review any efficiencies within the process and Surge planning for the upcoming season. Lastly as a component HDGH's Hospital Sector Stabilization Plan (HSSP), we have notified Ontario Health that we will not operationalize any additional unfunded beds as we have in the past. All surge planning and response strategies will be strictly managed within our existing bed count unless funded appropriately.

Best Practice Spotlight Organization (BPSO) - Update

HDGH has officially begun its journey toward becoming a Registered Nurses' Association of Ontario (RNAO) Best Practice Spotlight Organization (BPSO). Following a successful kickoff event in June, significant progress has been made to establish the foundation for implementation across the organization. To date, 50 BPSO Champions representing a variety of disciplines have completed champion training and are actively supporting the adoption of best practices within their areas.

In preparation for implementation, current-state assessments and opportunity analyses have been completed to identify quality improvement priorities, address gaps in practice, and celebrate existing successes. Over the next three years, HDGH will focus on implementing three RNAO Best Practice Guidelines:

- People-Centred Care
- Transitions in Care and Services
- Engaging Clients Who Use Substances

This work reflects HDGH's ongoing commitment to advancing evidence-based practice, fostering interdisciplinary collaboration, and improving outcomes and experiences for patients, residents,



clients, and families..

Geriatric Mental Health Outreach (GMHOT) Geriatric Mental Health Outreach Team (GMHOT)
Program optimization continues and process changes are being reviewed and put in place.

Wound Warriors

The Wound Warrior Program continues to strengthen skin and wound care practices across HDGH through ongoing education, mentorship, and support for frontline staff. In March, HDGH participated in the annual Hillrom International Pressure Ulcer Prevalence (IPUP) Study. Results demonstrated a 3.4% decrease in hospital-acquired pressure injuries, reflecting the positive impact of the Wound Warrior initiative and the commitment of frontline teams to evidence-informed prevention strategies. These results highlight the value of the monthly work undertaken by our Wound Warriors and the continued focus on education, surveillance, and quality improvement to enhance patient outcomes.

Respectfully Submitted by:
Shannon Landry, Vice President of Restorative Care & Chief Nursing Executive