



#### 4. Adoption of Agenda

The Board reviewed the agenda and there were no additions brought forward.

**Moved by L. Sigurdson, seconded by D. Erickson**

**BE IT RESOLVED THAT:**

**The agenda be adopted as presented.**

**MOTION CARRIED: 09.2026.02.4.0**

#### 5. Attendance

M. Polinuk provided roll call.

D. Erickson, A. Jonasson, L. Sigurdson and J. Romanow joined virtually.

C. Typliski and P.A. Wainwright sent regrets.

All other Board of Directors attended in person at the Selkirk United Church.

**Moved by A. Jonasson, seconded D. Fiebelkorn**

**BE IT RESOLVED THAT:**

**The Board of Directors excused C. Typliski and P.A. Wainwright. All other Board of Directors are in attendance virtually and in person at the February 26, 2026, meeting.**

**MOTION CARRIED: 09.2026.02.5.0**

#### 6. Adoption of previous Board minutes (January 22, 2026)

The January 22, 2026, Board of Directors minutes were reviewed.

**Moved by D. Erickson, seconded by A. Jonasson**

**BE IT RESOLVED THAT:**

**The minutes from January 22, 2026, Board meeting be adopted as presented.**

**MOTION CARRIED: 09.2026.02.6.1**

#### 7. Business Arising – None

#### 8. New Business

##### 8.1 Interlake Eastern Health Foundation (IEHF) Update

Michele Polinuk, Board Chair, welcomed Averill Stephenson, Executive Director of the Interlake Eastern Health Foundation (IEHF), to the meeting.

Debbie Fiebelkorn, Board Liaison to the Interlake Eastern Health Foundation, formally introduced Averill to the Board of Directors. Debbie highlighted several key initiatives and accomplishments under Averill's, including the successful launch of a major lottery campaign, advancement of endowment fund

development and the recruitment of new Board members with expertise in finance, leadership, and community development.

Averill Stephenson, Executive Director, Interlake Eastern Health Foundation (IEHF), provided an overview of the Foundation's activities, strategic priorities, and impact.

A. Stephenson outlined the IEHF Strategic Plan (2024–2027), emphasizing alignment with IERHA priorities and a focus on advancing community health through investments in equipment, facility improvements, staff recruitment and training, and programs that improve health outcomes and reduce disparities. Key strategic priorities include increasing awareness, improving processes, enhancing donor stewardship, and increasing fundraising capacity.

Highlights included increased staff engagement through initiatives such as the \$5 Club, expanded internal participation in the 50/50 payroll raffle, and regular engagement with IERHA leadership and staff. In 2025, the Foundation supported 13 community and health-related programs across the region.

A. Stephenson reported positive fundraising trends, noting growth in donations through targeted holiday campaigns and tangible, project-based fundraising efforts. Donations have exceeded the fiscal year 2026 budgeted target, resulting in increased grant disbursements. She also highlighted the Foundation's progress in legacy and endowment giving, sharing an example of how an endowment fund is supporting ongoing palliative care staff training and development.

Governance and operational improvements were noted, including updated policies, revised terms of reference, clarified Board and committee roles, and enhanced processes between IEHF and IERHA. Early planning for the 2027–2030 strategic plan was also discussed, including the launch of a new Development Sub-Committee.

Challenges identified include increasing public awareness, donor prospect generation, re-engagement of new donors, and capacity to scale operations. Averill concluded by encouraging collaboration with the Board and IERHA leadership to share stories, identify funding gaps, and support future fundraising initiatives.

Opportunity for questions was provided.

M. Polinuk, Board Chair, thanked Averill on behalf of the Board for her leadership and the significant progress made in growing the Interlake Eastern Health Foundation. Appreciation was expressed for her continued efforts in supporting the Interlake-Eastern Regional Health Authority (IERHA) region, facilities, and programs to enhance the delivery of exceptional patient care close to home.

A. Stephenson thanked the Board and left the meeting at 1:50 p.m.

## **8.2 2026-2031 Strategic Plan and 2026/2027 Annual Operating Plan**

M. Ellis, CEO, presented the 2026-2031 Strategic Plan & 2025/26 Annual Operating Plan.

Included in the package is a copy of the aligned two separate documents: the revised Five-year Strategic Plan (2026-2031) and the Annual Operating Plan (2026-2027). Both documents are expected to meet the requirements provided in the planning guidance document set out by Manitoba Health.

M. Ellis noted that from our draft submission to Manitoba Health, the validation process/feedback letter was received and it has been incorporated into the documents.

#### 2026-2031 Strategic Plan

M. Ellis, CEO, shared the 2026–2031 Strategic Plan to the Board of Directors. The presentation outlined legislative requirements under The Health System Governance and Accountability Act, which mandates that health authorities prepare and submit a strategic and operational plan annually to the Minister for approval.

The Board was provided with an overview of the planning process and key milestone dates, including receipt of provincial planning guidelines, engagement of senior leadership, a Board and Senior Leadership strategic planning session, and submission of draft materials to Manitoba Health.

It was noted that the Strategic Plan is a five-year plan and has been updated to reflect the 2026–2031 planning horizon.

Management reviewed planning guidance requiring Service Delivery Organizations to develop two separate but aligned documents: the revised five-year Strategic Plan and the Annual Operating Plan (AOP), including associated templates. The required structure and content of the Strategic Plan were summarized, including population health needs, service delivery models, challenges and opportunities, vision, mission, values, a strategic plan-on-a-page, a multi-year strategic program plan, and a Truth and Reconciliation Action Plan.

The Board was advised where required content is published and maintained, including the organization’s online Strategic Plan and the Manitoba Health planning templates.

Opportunity for questions was provided.

Following discussion, a motion was brought forward for Board approval of the 2026–2031 Strategic Plan.

**Moved by L. Sigurdson, seconded by C. Seymour**

**BE IT RESOLVED THAT:**

**The Board of Directors approves the 2026-2031 Strategic Plan as presented.**

**MOTION CARRIED: 09.2026.02.8.2A**

#### 2026/2027 Annual Operating Plan

M. Ellis, CEO, shared the 2026/2027 Annual Operating Plan (AOP) to the Board of Directors, noting that the document was previously referred to as the Annual Health Plan. The presentation reviewed the structure and required components of the AOP, as guided by Manitoba Health, including the Executive Summary, current year program plan, activity projections and minimum service volumes, health human resources, medical remuneration, summary budget, Business Case Appraisal Process (BCAP), and organizational risks.

Key program priorities for 2026/2027 were highlighted, including initiatives aimed at improving patient flow and reducing emergency department wait times; strengthening health human resources through targeted recruitment and training programs; advancing Indigenous health strategies; enhancing addiction, mental health, and suicide prevention services; improving regional cancer screening and immunization outreach; and advancing capital, digital health, and housing partnerships.

Opportunity for questions was provided.

Following discussion, a motion was brought forward for Board approval of the 2026/2027 Annual Operating Plan.

**Moved by J. Romanow, seconded by A. Jonasson**

**BE IT RESOLVED THAT:**

**The Board of Directors approves the 2026-2027 Annual Operating Plan as presented.**

**MOTION CARRIED: 09.2026.02.8.2B**

## **9. Chair's Report**

The Board Chair shared the following in her report:

- Reminder that the Board Skills, Knowledge, and Training Matrix policy and evaluation were at the November Board meeting, and the minutes reflecting this approval were accepted at the January Board meeting. Next steps will be to distribute the Skills, Knowledge, and Training Matrix to all Board members following the Board meeting with a requested completion date of February 20, 2026.

A summary profile of the Board's collective skills, knowledge, and training will be compiled following receipt of all submissions. This summary will be used to identify the Board's overall strengths and to inform education and professional development planning for the upcoming fiscal year.

- The Chief Executive Officers and Board Chairs of the Service Delivery Organizations (SDOs) have been invited to attend a health meeting with Premier Wab Kinew and Minister of Health Uzoma Asagwara on March 2, 2026, at the Legislative Building.

## **10. Chief Executive Officer Report**

The November 2025 CEO Report was distributed and reviewed for information.

M. Ellis, CEO, provided an executive summary overview to the Board on progress around the current provincial initiatives; accountability and oversight initiatives, local community engagement and operational table updates; and operational program updates aligned with the purpose, vision, values and strategic priorities of our organization's strategic plan. Key highlights include:

- The Chief Executive Officer, along with members of the Senior Leadership Team, attended the second accountability meeting with the Department of Housing, Addictions and Homelessness. An overview of the Department's three core areas was provided: Housing and Homelessness; Mental Health and Addictions; and Substance-Related Harms Reporting.
  - It was noted that legislative changes to The Regional Health Authorities Act, now enacted as The Health System Governance and Accountability Act, have resulted in enhanced oversight mechanisms, including the establishment of a Performance and Oversight Division within Manitoba Health, Seniors and Long-Term Care (MHSLTC).
  - It was shared that oversight of Regional Health Authorities has evolved over the past four years and now includes regular engagement with provincial partners. This includes monthly financial review meetings with Manitoba Health Seniors and Long-Term Care (MHSLTC), bi-monthly meetings to review organizational performance, outcomes, and improvement initiatives, and ongoing accountability discussions with the Housing, Addictions and Homelessness Department

- focused on mental health services, addictions programming, and housing-related projects and outcomes.
- IERHA Communications will be issuing a community invitation to attend guided tours of the Ashern Lakeshore General Hospital Emergency Department in March 2026.
    - It was noted that the first patient day for the new 26-bed inpatient unit took place on May 6, 2025. The first patient day for the newly expanded Emergency Department space is anticipated on March 2, 2026.
    - This phase of the Emergency Department (ED) project involves the conversion of the former inpatient unit space into expanded ED facilities. The existing 2,400 square feet of ED space is being expanded by an additional 5,400 square feet, resulting in a total of 7,800 square feet upon completion. The project will increase ED treatment spaces from five to a total of 13, representing eight net-new treatment spaces.
    - Additional project enhancements include the introduction of new digital systems, an automated medication distribution system, and the addition of a dedicated patient calm room.
  - The design phase of the Eriksdale Emergency Department redevelopment project is complete and that the Project Construction Manager contract has been awarded, with construction planning and tendering readiness now underway. The project will enhance care flow through a centrally located central care station and co-located Emergency Department; improve patient privacy, confidentiality, safety, and security; and incorporate strong infection prevention and control measures. Additional highlights include family space for inpatients, increased natural lighting in inpatient rooms, Emergency Department physician accommodation and dedicated staff areas, enhanced accessibility with additional accessible washrooms, and updated mechanical and electrical systems throughout the facility.
  - Workforce development planning is underway in support of the new Personal Care Home in Lac du Bonnet. IERHA Human Resources is working in collaboration with Lac du Bonnet community leadership to support the development of a local workforce. A jointly developed community survey has been distributed throughout Lac du Bonnet and surrounding areas to assess local training needs and employment preferences, with the results intended to inform future recruitment and training strategies.

Opportunity for questions was provided.

## **11. Committee Reports**

### **11.1 Finance Committee of the Whole**

The January 22, 2026, Finance Committee minutes were approved by the Board at the February 25, 2026, Finance Committee (of the Whole) meeting.

Financial statements for the period ending November 30 and December 31, 2025, were reviewed and accepted at the February 25, 2026, Finance Committee (of the Whole) meeting.

### **11.2 Audit Committee**

No report. Next meeting is scheduled for March 26, 2026.

### **11.3 Quality and Patient Safety Committee of the Whole**

No report. Next meeting is scheduled for February 26, 2026.

### **11.4 Education, Policy and Planning Committee**

No report. Next meeting is scheduled for March 19, 2026.

## **12. Liaison Reports**

### **12.1 Ethics**

No report.

### **12.2 Interlake Eastern Health Foundation**

D. Fiebelkorn shared under 8.1 Interlake Eastern Health Foundation agenda item.

## **13. For Information - None**

## **14. Next Meeting**

- Thursday, March 26, 2026 @ 1:45 p.m.  
Selkirk United Church – 202 McLean Ave., Selkirk, MB

## **15. In Camera - None**

## **16. Adjournment**

Moved by L. Sigurdson, the meeting be adjourned at 2:39 p.m.