



SUMMARY MINUTES OF THE BOARD OF DIRECTORS

Monday, March 10, 2014 (18:30 hours) Board Room

ATTENDANCE

Present:

Sylvie Bélanger
Jo-Anne Beninger
* Dr. Klère Bourgault
Collin Bourgeois
* Cynthia Désormiers
Priscille Desjardins
Julie Duhaime
Howard Longfellow
Léo Malette
Janet Parsons
Daniel Richard
* Jo-Ann Lennon-Murphy

Regrets:

* Dr A. Béhamdouni
* Dr. Richard Katsuno
Charles Goulard
Eric Stevens

- Non-voting Board members

Participant: Ryan Jeffers, Chief Financial Officer

1. Call to Order & Welcome

The Chair, Collin Bourgeois confirmed quorum and called the meeting to order at 18:35 hours.

2. Approval of the Agenda & Declaration of Pecuniary Interest

Moved by Priscille Desjardins, seconded by Julie Duhaime

« THAT THE AGENDA OF THE REGULAR MEETING OF THE BOARD OF DIRECTORS HELD MONDAY, MARCH 10, 2014, BE ACCEPTED AS PRESENTED. »

Carried. M.14-09

- **No conflict of interest or pecuniary interest declared.**

3. Presentation : Engineering Department

Danny Putman provided the Board with an overview of the Engineering Department scope of work, responsibilities, workforce and staffing coverage, preventive maintenance schedules, the 2014/15 budget and challenges, as well as projected major capital projects, which include the main air conditioning, the water distribution system, new electrical system for the hospital, and the addition of a new generator and electrical panels.

4. Chief Executive Officer's Report

The CEO's March report was available on the portal for everyone's review.

5. Approval of Previous Minutes of the Board (2014 01 27)

Moved by Daniel Richard, seconded by Sylvie Bélanger

« THAT THE MINUTES OF THE REGULAR MEETING OF THE BOARD OF DIRECTORS HELD MONDAY, JANUARY 27TH, 2014 BE ACCEPTED AS PRESENTED. »

Carried. M.14- 10

SUMMARY MINUTES OF BOARD OF DIRECTORS
Monday, March 10, 2014

6. Medical Staff

1. Medical Advisory Committee Minutes (2013 12 19)

Moved by Janet Parsons, seconded by Léo Malette

« THAT THE MINUTES OF THE MEDICAL ADVISORY COMMITTEE MEETING HELD
DECEMBER 19th, 2013 BE ACCEPTED AS PRESENTED»

Carried. M.14-11

2. Approval of recommendations arising of MAC Minutes

Moved by Léo Malette, seconded by Janet Parsons

THAT THE FOLLOWING CREDENTIAL COMMITTEE RECOMMENDATIONS ARISING FROM
THE OCTOBER 17TH, 2013 MEETING BE APPROVED (IN BLOCK) ...

Carried. M.14-12

3. Chief of Staff Report (verbal)

Dr. Bourgault informed the group that:

- We are using the patient experience and perceptions of patient expectations to redesign our model of quality of care delivery for patients in the Emergency Department. We are exploring a number of strategies including tips and reference tools as well as customer service training for staff and physicians along with a take home message.
- To help serve our community better, we are making efficient use of our community Family Health team and having our family doctors and regular ER physicians provide most of the ED coverage in the forthcoming months, which will assist with continuity of care. As a result, HFO services will no longer be needed. .
- Some issues with the Patch-4-Patch Program were identified and are being addressed.

7. Quality Assurance & Risk Management

1. Quality Improvement Plan (QIP) 2014-2015

The following documents were distributed to members for review:

- The Pay for Performance Report 2013/14 documents for the West Nipissing General Hospital are included in the QIP
- The 2014/15 QIP Improvement targets and initiatives were discussed. S. Bélanger communicated that the Health Care Quality Committee met (HCQC) recently met to undertake a final review of the Quality Improvement Plan to be submitted to Health Quality Ontario (HQO), NE LHIN and posted on our Hospital website by April 1st, 2014, as part of the obligations of the ECFAA.

C. Désormiers noted that we are working towards reducing our Alternate Level of Care (ALC) days to be in line with the provincial average of 14 percent. Moved by Priscille Desjardins, seconded by Sylvie Bélanger

«**WHEREAS** THE WEST NIPISSING GENERAL HOSPITAL MUST HAVE IN PLACE A QUALITY IMPROVEMENT PLAN THAT IS COMPLIANT WITH THE EXCELLENT CARE FOR ALL ACT, 2010 (ECFAA),

LET IS BE RESOLVED THAT THE BOARD OF DIRECTORS APPROVES THE QUALITY IMPROVEMENT PLAN (QIP) FOR THE FISCAL YEAR 2014-2015. »

Carried. M.14-13

2. Policy 730-42 - Quality Improvement and Risk Management

CEO reported that the Board policy in place was reviewed and revised in accordance with the directives of Accreditation Canada. Moved by Sylvie Bélanger, seconded by Priscille Desjardins

SUMMARY MINUTES OF BOARD OF DIRECTORS
Monday, March 10, 2014

« THAT THE BOARD OF DIRECTORS APPROVES REVISIONS TO THE BOARD POLICY #730.42 'QUALITY IMPROVEMENT AND RISK MANAGEMENT' AS PRESENTED. »

Carried. M.14-14

3. Policy 100-43 - Confidentiality and Access to Information

The revised policy #100.43 «Confidentiality and Access to Information» Policy was provided as information; copies of which were included with the Agenda. C. Désormiers noted that the policy was revised to include electronic documentation in accordance with applicable laws governing the protection of personal Health Information.

4. Policy 100-75 - Consent Concerning Personal Health Information

The revised policy #100.75 « Consent Concerning Personal Health Information » Policy was provided as information; copies of which were included with the Agenda. The policy was revised in accordance with applicable laws governing the protection of personal Health Information.

5. Policy 100-37 - Consent

The revised policy #100.37 «Confidentiality and Access to Information» Policy was provided as information; copies of which were included with the Agenda. C. Désormiers noted that the policy was reviewed by our Health Records Coordinator and revised in accordance with the Health Care Consent Act.

6. Policy 100-19 - Patient Relations/Complaints

The revised policy #100.19 « Patient Relations/Complaints » Policy was provided as information; copies of which were included with the Agenda. C. Désormiers explained that the policy was reviewed as part of our Accreditation process.

7. Criminal Record Check - New Board Policy 730-57

C. Désormiers proposed a new best practice to assist the WNGH in ensuring due diligence needed for the safety and well being of the public receiving our services.

She advised that a Criminal Record Check (CRC) is a precautionary measure designed to assess and ascertain that a Board member or a candidate being considered for the Board is suitable to the position that involves a high degree of trust and having any direct spending authority and/or access to documents and information of a confidential and sensitive nature.

Moved by Sylvie Bélanger, seconded by Daniel Richard

« THAT THE BOARD OF DIRECTORS APPROVES REVISIONS TO THE BOARD POLICY #730.57 'CRIMINAL RECORD CHECK' AS PRESENTED. »

Carried. M.14-15

Our Administration will initiate the request for Board Members to complete the Criminal Record Check (CRC) to be submitted to the WN Police Detachment.

8. Sentinel Events / Near Misses & Adverse Events Q4 Report

The latest statistics for the Sentinel Report covering October/November/December 2013 were included in the member's packages.

9. Complaints Report Q3 Revised and Q4 2013

The latest statistics for the revised Q3 Complaint Report covering July/August/September and Q4 report covering October/November/December 2013 were included in the member's packages.

10. Patient Stories from ER and LTC

C. Désormiers pointed out that the Hospital places great value on the patient/family experience level in its engagement for continuous quality improvement.

SUMMARY MINUTES OF BOARD OF DIRECTORS
Monday, March 10, 2014

As evidence, she shared two letters from family members expressing their gratitude for the enhanced quality of care provided by dedicated staff and physicians.

11. Quality Based Procedures/ Services Reviews Briefing Note

C. Désormiers reported on the two components to Health Services Funding Reform (HSFR); the Health Based Allocation Method (HBAM), which provides funding by case-mix utilization and cost and implementation of Quality Based Procedures (QBPs) where the Hospital will be reimbursed according to volume and types of patients treated.

WNGH will be reviewing data and case costing in an effort to be prepared for potential funding changes. HSFR for QBPs and HBAM will be included as a standing item on the Board agenda and could also be discussed at appropriate board committees (HCQC, Finance & Audit).

12. The Consent Agenda - Briefing Note

C. Désormiers proposed a new section to the Agenda for board meetings. She explained that the «Consent Agenda» ensures efficiency and effectiveness for approval of regular or routine matters, and items requiring a decision that come before the board where no discussion or debate is anticipated.

Cynthia advised members that the items and materials proposed to be dealt with under the Consent Agenda portion may be moved out of the Consent Agenda section or deleted at the request of any member of the board prior to approval of the Agenda.

Moved by Daniel Richard, seconded by Howard Longfellow

«**WHEREAS** THE WNGH BOARD OF DIRECTORS SUPPORTS THE ADOPTION OF A CONSENT AGENDA, AND

WHEREAS THE WNGH BOARD OF DIRECTORS HAS THE LIBERTY TO REMOVE ITEMS UNDER THE CONSENT AGENDA

LET IT BE RESOLVED THAT THE WNGH BOARD OF DIRECTORS SUPPORTS THE AMENDMENTS OF THE 2014 WNGH CORPORATION BY-LAWS TO REFLECT THIS SPECIAL RULE OF ORDER.»

Carried. M.14-16

13. Life or Limb – No Refusal - Revised Policy 301-45

CNO J. Lennon-Murphy explained that this policy and the repatriation component was revised to support the LHIN's directives and clear internal process with regards to the 'no refusal for life and limb emergencies' for receiving HUB hospitals.

Moved by Daniel Richard, seconded by Sylvie Bélanger

« THAT THE BOARD OF DIRECTORS APPROVES REVISIONS TO THE MEDICAL STAFF POLICY #301.45 'LIFE OR LIMB – NO REFUSAL' AS PRESENTED. »

Carried. M.14-17

14. Patient Repatriation from HUB Hospitals - Revised Policy 301-46

CNO J. Lennon-Murphy explained that the repatriation component of this policy was revised to support the Ministry guideline that supports the concept of care closer to home.

Moved by Sylvie Bélanger, seconded by Daniel Richard

« THAT THE BOARD OF DIRECTORS APPROVES REVISIONS TO THE MEDICAL STAFF POLICY #301.46 'PATIENT REPATRIATION FROM HUB HOSPITALS' AS PRESENTED. »

Carried. M.14-18

SUMMARY MINUTES OF BOARD OF DIRECTORS
Monday, March 10, 2014

8. Human Resources

▪ 2013 Performance Review Compliance

- a) The latest statistics for the year covering 2013 were included in the member's packages. Dec 31st, 2013 our coordinators attained 100 % compliance in completing employee performance appraisal.
- b) As part of the process of evaluation, C. Désormiers reported that she will report to the board on her goals and objectives 2013/14 performance results and include proposed objectives for the upcoming year.

9. Finance

.1 Adoption of the Previous Minutes

Moved by Janet Parsons, seconded by Léo Malette

« THAT THE MINUTES OF THE FINANCE AND AUDIT COMMITTEE MEETING HELD JANUARY 22ND, 2014 BE ACCEPTED AS PRESENTED. »

Carried. M.14-19

In the absence of the February minutes of the Finance and Audit Committee, CFO R. Jeffers briefed the Board on the following proposed recommendations by the Finance and Audit Committee.

.2 January Financial Statements

Moved by Léo Malette, seconded by Janet Parsons

« THAT ON THE RECOMMENDATION OF THE FINANCE AND AUDIT COMMITTEE RECOMMEND, THE BOARD OF DIRECTORS APPROVES THE JANUARY 2014 FINANCIAL STATEMENTS AS PRESENTED. »

Carried. M.14-20

.3 Budget 2014-2015

Moved by Janet Parsons, seconded by Léo Malette

« THAT ON THE RECOMMENDATION OF THE FINANCE AND AUDIT COMMITTEE, THE BOARD OF DIRECTORS ACCEPTS THE 2014-2015 FISCAL YEAR OPERATING BUDGET FOR REVENUES AND EXPENDITURES, AS PRESENTED. »

Carried. M.14-21

.4 Capital Plan 2014-2015

R. Jeffers commented that the three major capital projects are based on the on-site VFA Facility Condition Assessment Project (FCAP) and requirement list reports. At the request of the Board, the VFA-FCAP and requirement list reports will be posted on our board web portal, as information.

Moved by Janet Parsons, seconded by Léo Malette

« THAT ON THE RECOMMENDATION OF THE FINANCE AND AUDIT COMMITTEE, THE BOARD OF DIRECTORS ACCEPTS THE WEST NIPISSING GENERAL HOSPITAL CAPITAL PLAN FOR THE FISCAL YEAR 2014-2015, AS PRESENTED. »

Carried. M.14-22

.5 HAPS 2014-2015 Submission

Moved by Léo Malette, seconded by Janet Parsons

« **WHEREAS** THE NE LHIN HAS DIRECTED THE WEST NIPISSING GENERAL HOSPITAL TO ASSUME A ZERO PERCENT INCREASE AS ITS INDICATIVE PLANNING NUMBER (IPN) FOR THE 2014-15 FISCAL YEAR,

SUMMARY MINUTES OF BOARD OF DIRECTORS
Monday, March 10, 2014

LET IT BE RESOLVED THAT ON THE RECOMMENDATION OF THE FINANCE AND AUDIT COMMITTEE, THE BOARD OF DIRECTORS ACCEPTS THE WEST NIPISSING GENERAL HOSPITAL ANNUAL PLANNING SUBMISSION (HAPS) 2014-15 AS PRESENTED.»

Carried. M.14-23

10. Ethics Committee

.1 Approval of Minutes (December 2013)

Moved by Howard Longfellow, seconded by Sylvie Bélanger

« THAT THE MINUTES OF THE MEETING OF THE WEST NIPISSING GENERAL HOSPITAL ETHICS COMMITTEE HELD DECEMBER 9TH, 2013, BE ACCEPTED AS PRESENTED »

Carried. M.14-24

.2 Recommendations Arising from previous meeting (March 2014)

The minutes are not available at this time, however, electronic copies of the documents to support the following recommendations were provided.

Moved by Howard Longfellow, seconded by Daniel Richard

«THAT THE REVISED HOSPITAL POLICY NO. 100.73 «ETHICS AND DECISION MAKING FRAMEWORK » BE ACCEPTED AND APPROVED AS PRESENTED. »

Carried. M.14-25

Moved by Howard Longfellow, seconded by Daniel Richard

« THAT THE BOARD OF DIRECTORS OF THE WEST NIPISSING GENERAL HOSPITAL APPROVES THE RESEARCH ETHICS BOARD (REB) RENEWAL STUDY FOR THE PRE-HOSPITAL EVALUATION AND ECONOMIC ANALYSIS OF DIFFERENT CORONARY SYNDROME TREATMENT STRATEGIES (PREDICT) AT THE WEST NIPISSING GENERAL HOSPITAL, TO BE CARRIED OUT BY THE ST. MICHAEL'S HOSPITAL AFFILIATED WITH THE UNIVERSITY OF TORONTO. »

Carried. M.14-26

Moved by Howard Longfellow, seconded by Sylvie Bélanger

«THAT THE BOARD OF DIRECTORS OF THE WEST NIPISSING GENERAL HOSPITAL APPROVES THE NEW APPROVED PROTOCOL OF THE STUDY ON WOMEN DIAGNOSED WITH DUCTAL CARCINOMA IN SITE (DCIS) AT THE WEST NIPISSING GENERAL HOSPITAL, TO BE PERFORMED BY THE ONTARIO INSTITUTE FOR CANCER RESEARCH AT SUNNYBROOK HEALTH SCIENCES CENTRE IN COLLABORATION WITH THE INSTITUTE FOR CLINICAL EVALUATIVE SCIENCES (ICES) »

Carried. M.14-27

11. Alliance Centre Advisory Committee Meeting (February 2014)

Moved by Howard Longfellow, seconded by Julie Duhaime

« THAT THE MINUTES OF THE MEETING OF THE WEST NIPISSING GENERAL HOSPITAL ALLIANCE CENTRE ADVISORY COMMITTEE HELD FEBRUARY 11TH, 2014 BE ACCEPTED AS PRESENTED.»

Carried. M.14-28

12. Foundation Board Meeting (November 2013)

Moved by Julie Duhaime, seconded by Howard Longfellow

« THAT THE MINUTES OF THE MEETING OF THE WEST NIPISSING GENERAL HOSPITAL FOUNDATION BOARD HELD NOVEMBER 20TH, 2013 BE ACCEPTED AS PRESENTED.»

Carried. M.14-29

SUMMARY MINUTES OF BOARD OF DIRECTORS
Monday, March 10, 2014

13. Board Chair

We received a 92% response from last month's "Board Effectiveness Survey" → results were positive.

14. Correspondence

.1 Senior Friendly Hospital (SFH) Evaluation of Indicators

The Regional Geriatric Program of Toronto SFH Indicators Working Group provided a formal note of appreciation for our hospital's participation in the Senior Friendly Hospital Indicator Evaluation Study, implementation and evaluation of the indicators.

.2 NE LHIN Collaborative Capacity Analysis of the NE CCAC

The NELHIN correspondence was shared with the board members. There was discussion among the Board members to have a meeting with NE LHIN CEO Louise Paquette to discuss our challenges related to community supports. Cynthia has suggested we wait until the assessment and report is available.

.3 CEO Quality & Patient Safety Series Certificate

C. Désormiers provided members with the official letter she received on behalf of the Canadian Healthcare Association in attestation for her successful completion of the Governing for Quality and Patient Safety Series.

15. Adjournment

Moved by Priscille Desjardins, seconded by Léo Malette

«THAT THE REGULAR MEETING OF THE BOARD OF DIRECTORS OF MONDAY, MARCH 10th, 2014
BE ADJOURN AT 20:35 HOURS. »

Carried. M.14-30

«ORIGINAL SIGNED»

Collin Bourgeois, Chair

«ORIGINAL SIGNED»

Cynthia Désormiers, Secretary
President & CEO