



## SUMMARY MINUTES OF THE BOARD OF DIRECTORS Monday, September 8, 2014 (18:30 hours), Board Room

### ATTENDANCE

#### Present:

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

#### Regrets:

\* Dr. Richard Katsuno  
Léo Malette  
\* Dr A. Béhamdouni  
  
\* Non-voting Board members

### 1. Call to Order & Welcome

Collin Bourgeois called the meeting to order at 18:38 hours and welcome

### 2. Presentation : Board Orientation -

Cynthia Désormiers President & CEO provided the board with an overview of the Board Orientation Program at WNGH. The supporting documentation provides details on the Board committee structure, Board policies, Hospital By-laws, Hospital governance, mission, vision and set goals, the roles and responsibilities of the Board in quality of care and services, strategic planning, etc., a snapshot of the health care environment, hospital partners, and acronyms.

### 3. Approval of the Consent Agenda

Moved by Janet Parsons, seconded by Daniel Richard

« THAT THE CONSENT AGENDA FOR THE SEPTEMBER 8, 2014 BOARD OF DIRECTORS MEETING, BE APPROVED»

**Carried M-14-84**

### 4. Approval of the Regular Agenda

Moved by Janet Parsons, seconded by Julie Duhaime

« THAT THE REGULAR AGENDA OF THE MEETING OF THE BOARD OF DIRECTORS HELD MONDAY, SEPTEMBER 8TH, 2014, BE ACCEPTED AS PRESENTED. »

**Carried M-14-85**

### 5. Declaration of Pecuniary Interest - No conflict of interest were declared.

### 6. Consent Agenda Matters

No item that is listed under the Consent Agenda was removed or moved to the regular agenda.

#### .1 Chief Executive Officer's Report (C. Désormiers)

The September CEO's Newsletter was included in everyone's meeting package for information purposes.

.2 Minutes of June 16, 2014 Board Meeting

Moved by Julie Duhaime, seconded by Daniel Richard

« THAT THE MINUTES OF THE REGULAR MEETING OF THE BOARD OF DIRECTORS HELD MONDAY, JUNE 16TH, 2014 BE ACCEPTED AS PRESENTED. »

**Carried M-14-86**

.3 Medical Advisory Committee (MAC) Minutes of May 15, 2014

The minutes from the March MAC meeting was provided in everyone's meeting package for reference purposes. Moved by Jo-Anne Beninger, seconded by Howard Longfellow

« THAT THE MINUTES OF THE MEDICAL ADVISORY COMMITTEE MEETING HELD MAY 15TH, 2014 BE ACCEPTED AS PRESENTED. »

**Carried M-14-87**

1. Credential Recommendations Arising from the Minutes

Moved by Jo-Anne Beninger, seconded by Howard Longfellow

«THAT THE FOLLOWING CREDENTIAL COMMITTEE RECOMMENDATIONS ARISING FROM THE MARCH 20TH, 2014 MEDICAL ADVISORY COMMITTEE MEETING BE APPROVED (IN BLOCK) ...»

**Carried M-14-88**

.4 Finance and Audit Committee Minutes of May 29, 2014

Moved by Janet Parsons, seconded by Daniel Richard

«THAT THE MINUTES OF THE FINANCE AND AUDIT COMMITTEE MEETING OF MAY 29, 2014 BE ACCEPTED AS PRESENTED. »

**Carried M-14-89**

.5 Executive and Governance Committee Minutes of May 29, 2014

Moved by Howard Longfellow, seconded by Jo-Anne Beninger

« THAT THE MINUTES OF THE MEETING OF THE WEST NIPISSING GENERAL HOSPITAL EXECUTIVE AND GOVERNANCE COMMITTEE HELD MAY 29, 2014 BE ACCEPTED AS PRESENTED.»

**Carried M-14-90**

.6 Correspondence – Communiqué on Integrated Models of Care

A Communiqué from the LHIN was shared with the Board and CEO announcing changes focused on the Northeastern Ontario's health care system. Part of this transition is developing more integrated models of care. Health Links underway across our region are one part of this transition to provide more coordinated care, and other models that respond to the needs of patients.

.7 Meeting Effectiveness Survey Results (June 2014)

The Board of Directors June meeting effectiveness survey results report was provided in everyone's meeting package for information purposes.

.8 Quality 2014 Accreditation Satisfaction Surveys

The 2014 Accreditation patient/resident satisfaction survey reports were included in everyone's meeting package for information purposes.

Chief Nursing Officer and Accreditation Leader Jo-Ann Lennon-Murphy reported on data collected from the 2014 accreditation patient satisfaction surveys completed by 107 inpatients, 179 outpatients and 21 residents. Respondents were asked to indicate how satisfied they were with their stay/visit overall; its focus is on the patient/resident quality of service and satisfaction (experiences at the West Nipissing General Hospital).

.9 Briefing Note: Post Election

CEO Cynthia Désormiers provided in everyone's meeting package for information purposes a summary report of the Ontario post-election health priorities and ongoing business.

.10 Revised Policy # 730-35 Board Remuneration

.11 Revised Policy # 730-24 Commitment to Integration

.12 Revised Policy # 730-38 Community Needs Assessment

.13 Revised Policy # 730-31 Director Education

.14 Revised Policy # 730-20 Manner of Governing

.15 Revised Policy # 730-41 Naming Opportunities

.16 Revised Policy # 730-30 Political Contributions

.17 Revised Policy # 730-18 Chief of Staff Direction

.18 Policy # 730-36 Mission, Vision and Values

A review of the above-noted Board Policies revised resulted in the following resolution.

Moved by Eric Stevens, seconded by Priscille Desjardins

«THAT THE PROPOSED REVISIONS TO THE BOARD OF DIRECTORS POLICIES BE ACCEPTED (IN BLOCK) AS PRESENTED. »

**Carried M-14-91**

.19 Redundant Policy # 730-16 Global Executive Limitations

Proposed revisions to existing policies were reviewed and it has been recommended to remove the policy as being redundant. Moved by, Eric Stevens, seconded by Priscille Desjardins

«THAT THE BOARD OF DIRECTORS POLICY <# 730-16 GLOBAL EXECUTIVE LIMITATIONS>, BEING REDUNDANT, BE DELETED. »

**Carried M- 14-92**

## **7. Business/Committee Matters**

1. Chief of Staff - Medical Staff Report (Dr. K. Bourgault)

Dr. Bourgault reported on issues related to communication and exchange of information that have continued to be a significant problem over the summer. Some of these issues were caused by patients report not delivered in a timely manner in the referral process between hospitals and physicians. Other concerns reported in patient satisfaction complaints involve physician/healthcare professional/patient communication issues related to the patient expectation and perception of care.

2. Business Planning

The WNGH improvement Plan for 2014/15 highlights the key areas with a particularly focus on achieving a balanced or surplus financial position all the while maintaining quality within the continued tight financial envelope.

This process involves working closely with senior team and management team for the management of accounts and expenditures with front line staff involvement. We will demonstrate transparency by publishing our business plan to be available to the general public on the Hospital website.

Moved by Eric Stevens, seconded by Priscille Desjardins

«THAT THE WEST NIPISSING GENERAL HOSPITAL 2014-15 ANNUAL BUSINESS PLAN BE ACCPETED, AS PRESENTED. »

**Carried M- 14-93**

## **8. Quality Assurance & Risk Management**

### **.1 Risk Management – OHS Trends Review 2013**

The report on Occupational Health and Safety trends review for the 2013 reporting cycle was provided with the agenda package.

C. Désormiers emphasized that continuously collecting data or tracking other information with respect to health and safety is important in monitoring upward trends in injuries and incidents. As a result, healthy workplace strategies are being developed and measures have been put in place across the Hospital to control or decrease costs associated with injuries and illness and improve healthcare outcomes.

### **.2 Surge Capacity Plan 2014**

C. Désormiers reported that the Ministry of Health and Long-Term Care has mandated the hospitals within the LHIN networks to develop a surge capacity management plan to address above normal occupancy, demand beyond hospital capacity and major demand that overwhelms LHIN for an extended time where provincial resources are required.

The plan is a roadmap to establish preparedness within our own organization as it pertains to the management and the pre-determined processes to address each level of surge; the effective use of human resources, equipment & technology and to maximize physical capability and capacity to meet the critical and acute care needs. This plan is a key component of the WNGH emergency preparedness and response.

### **.3 Revised Policy # 730-32 Authorization of CEO Expenses**

### **.4 Revised Policy # 730-13 Board & Committee Meeting Attendance**

### **.5 Revised Policy # 730-21 Board Job Description**

### **.6 Revised Policy # 730-33 Board of Director Accountability**

### **.7 Revised Policy # 730-39 Broader Public Sector Accountability**

### **.8 Revised Policy # 730-10 Complaint Process**

### **.9 Revised Policy # 730-25 Confidentiality for Board of Directors**

### **.10 Revised Policy # 730-17 Executive Direction**

### **.11 Revised Policy # 730-43 Purchases Contracts and Leases**

### **.12 Revised Policy # 730-28 Removal of a Director**

### **.13 Revised Policy # 730-15 Signing Authority**

Proposed revisions to existing policies were reviewed and the policy #730-28 «Removal of a Director» was further amended to include «Failure to comply with the Public Hospitals Act, the Corporation's Letter Patent, By-Laws, Rules, code of conduct, policies...». C. Désormiers highlighted the importance of having a clearly defined process to follow for the removal of a board member in the bylaws.

Moved by Sylvie Bélanger, seconded by Howard Longfellow

«THAT THE PROPOSED REVISIONS TO THE FOLLOWING BOARD OF DIRECTORS POLICIES BE ACCEPTED AS PRESENTED. »

- # 730-10 COMPLAINT PROCESS
- # 730-13 BOARD & COMMITTEE MEETING ATTENDANCE
- # 730-15 SIGNING AUTHORITY
- # 730-17 EXECUTIVE DIRECTION
- # 730-21 BOARD JOB DESCRIPTION
- # 730-25 CONFIDENTIALITY FOR BOARD OF DIRECTORS
- # 730-28 REMOVAL OF A DIRECTOR
- # 730-32 AUTHORIZATION OF CEO EXPENSES
- # 730-33 BOARD OF DIRECTOR ACCOUNTABILITY
- # 730-39 BROADER PUBLIC SECTOR ACCOUNTABILITY
- # 730-43 PURCHASES CONTRACTS AND LEASES. »

**Carried M-14-94**

**9. Adjournment and Completion of Meeting Effectiveness Survey**

Directors were provided time to complete the survey at the closing of the meeting.

Moved by Priscille Desjardins, seconded by Eric Stevens

«THAT THE REGULAR MEETING OF THE BOARD OF DIRECTORS OF MONDAY, SEPTEMBER 8th, 2014 BE ADJOURN AT 20:10 HOURS. »

**Carried M-14-95**

«Original signed»

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Collin Bourgeois, Chair

«Original signed»

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Cynthia Désormiers, President and CEO