.Geraldton District Hospital

Minutes of the

### Regular Board Meeting

Held in the Hospital Boardroom, Tuesday, December 4, 2012 at 6:00 p.m.

Present: Victor Chapais Deanna Thibault (T) Jamie McPherson

Voting Willy Anton Shirley Tyance Shannon Kristjanson

Audrey Johnston Melanie Lankin Chico Tschajka

Non-Voting Kurt Pristanski Sylvie Duranceau Diane Kampela (recorder)

Regrets: Dale Randa Marla Michel

Voting

Regrets: Dr. Laine

Non-Voting

# Board Composition (voting): 9 Elected 2 Appointments Total 11

**Current Vacancies (voting): 0 Elected 0 Appointments Total 0**

**Total Board Members (voting): 11 Present: 9 Attendance: 82%**

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| 1. CALL TO ORDER | |
| * 1. The meeting was called to order at 6:06 p.m., by the Chair, Victor Chapais, following the annual Board picture.   ● V. Chapais highlighted the Accreditation memo and congratulated the Hospital staff on attaining Accreditation “without condition”.  ● V. Chapais reported that there will be a candle ceremony on December 6 at 5:00 p.m. in front of the Geraldton Post Office in memory of the 14 women killed at École Polytechnique in Montréal in 1989.  ● V. Chapais also reported that the LHIN received one-time funding. K. Pristanski elaborated on the funding and noted that the North West hospitals will be meeting for the 3rd time tomorrow to discuss how to best utilize the funds. Hospitals or groups of hospitals and other partners must apply for the one-time funds by January 4/13.  ● V. Chapais reported that he received an OHA bulletin regarding the Ontario Government and the Ontario Medical Association having a tentative Physician Services Agreement.  ● V. Chapais noted that he also received an OHA bulletin regarding critical incidents. K. Pristanski responded that the Hospital has a critical incident policy and procedure in place.  **1.2 Correspondence:**  1.2.1 Ministry of Health: Approved Nakina Budget  ● K. Pristanski reported that the attached was confirmation of funding received for the Nakina Clinic.  1.2.2 NW LHIN Annual Open House Invitation  ● If anyone wishes to attend the Open House, please advise D. Kampela so she can confirm how many people will be attending.  **1.3 Guide to Good Governance, Chapter 7:**  ● V. Chapais asked if there were any comments regarding Chapter 7: Board Composition, Education and Evaluation.  ● A. Johnston noted that everything was covered in the “frequently asked questions” on page 142.  ● A. Johnston noted that the Nomination Committee should ensure they review the guidelines listed on page 135 to ensure they are up to par.  ● K. Pristanski noted that the Board follows the legislation for voting rights.  ● K. Pristanski explained the difference between Chief of Medical Staff (COS) and President of Medical Staff (PMS). The COS represents the Hospital Board, while the POM represents the physicians.  ● J. McPherson noted that as explained on page 140, the Board is in sync with the key performance indicators (KPI).  ● K. Pristanski reported that the Board members’ maximum term of 9 years is average. |  |
| 2. ADOPTION OF THE AGENDA | |
| ● V. Chapais asked if there were any amendments to the agenda.  **It was moved by M. Lankin and seconded by W. Anton to approve the agenda as presented.** | **Carried** |
| **3. DECLARATION OF CONFLICTS OF INTEREST** | |
| ● None. |  |
| **4. ADOPTION OF MINUTES** | |
| **4.1 Regular Meeting, November 13, 2012:**  ● V. Chapais asked if there were any errors or omissions in the November 13, 2012 regular Board meeting minutes.  ● It was noted that in item 7.2, J. McPherson attended an “education seminar”, not a conference.  **It was moved by A. Johnston and seconded by C. Tschajka to accept the minutes as amended.** | **Carried** |
| **5 BUSINESS ARISING FROM MINUTES** | |
| **5.1 CEO Position Description:**  ● A. Johnston asked if K. Pristanski could request position descriptions from other hospitals, such as Sioux Lookout, for comparison and then have the Executive Committee revise the CEO job description and bring it back to the Board.  ● C. Tschajka reported that he googled CEO job descriptions and the results he found were very similar to the position description the Hospital currently has.  ● A couple of minor changes were made to the position description.  ● **K. Pristanski will request a job description from other hospitals and a meeting with the Executive Committee will take place in January to revise the job description.**  **5.2 Verification of Education on Score Card:**  ● K. Pristanski verified with D. Kampela and the education session for J. McPherson was corrected. |  |
| **6. NEW BUSINESS** | |
| **6.1 Mission, Vision, Values Statement:**  ● K. Pristanski noted that the Statement is reviewed once a year by the Board and every 3-4 years by the community through the Strategic Planning process.  ● A. Johnston inquired if the Statement should be revised to include a statement regarding accessibility, as reported in S. Duranceau’s Director of Clinical Services report.  ● Members concurred to add “accessibility” in the fourth line of the Values.  ● J. McPherson felt that there should be a statement regarding workplace violence/harassment. Members felt that such a statement is covered under the words “safe” (first line of Values and “safe and healthy”, the fourth line of Values).  ● Members inquired about the Statement being posted in the Hospital. D. Kampela responded that there are about a dozen copies of the Statement posted throughout the building.  ● A brief discussion took place regarding stenciling the Mission on a window at the Hospital’s main entrance. **K. Pristanski will research such a stencil.**  **It was moved by C. Tschajka and seconded by S. Tyance that the Board of Directors approves the Mission, Vision and Values Statement as amended.**  ● The Mission policy and procedure was reviewed. One revision was made; “disabilities” was added to the first bullet.  **It was moved by S. Kristjanson and seconded by A. Johnston that the Board of Directors approves the Mission policy and procedure as amended** | **Carried**  **Carried** |
| **7. LINKAGES & PARTNERSHIPS** | |
| **7.1 Geraldton Hospital Auxiliary:**  ● M. Lankin reported that as of November 19/12, the Auxiliary has 200 members.  ● She also reported that the Constitution was revised. **She will provide D. Kampela a copy to be included in next month’s package.**  **It was moved by M. Lankin and seconded by C. Tschajka that the Report from the Geraldton District Hospital Auxiliary be accepted.**  7.2 Board of Directors QI Team Meeting Notes:  ● K. Pristanski reported that there was no quorum at the November meeting. The next meeting is scheduled for tomorrow.  ● A. Johnston said that she believes there should be one more Board member on the Team.  ● J. McPherson agreed to be a Team member, starting in January.  7.3 Quality Improvement Committee Minutes – Nov. 22/12:  ● A. Johnston asked if there were any questions regarding the minutes.  ● A couple of typos were noted.  ● Board members were pleased to see there were 0 medication errors in the LTC unit for the month of November.  It was moved by A. Johnston and seconded by W. Anton that the Report from the Quality Improvement Committee be accepted.  7.4 Healthier Community Advisory Committee Meeting – Nov. 8/12:  ● K. Pristanski asked if there were any questions regarding the minutes.  ● J. McPherson noted that he was pleased to see that Dan Levesque, a LHIN Board member, is now also a member of the HCAC. K. Pristanski added that due to a conflict of interest, D. Levesque cannot vote.  **It was moved by A. Johnston and seconded by W. Anton that the Report from the Healthier Community Advisory Committee be accepted.** | **Carried**  **Carried**  **Carried** |
| **8. MEDICAL STAFF** | |
| **8.1 Physician Privileges:**  ● There were no physician privileges to be approved this month. |  |
| **9. CHIEF NURSING OFFICER (CNO) REPORT** | |
| ● No report. |  |
| **10. CHIEF CLINICAL SERVICES (CCS) REPORT** | |
| ● S. Duranceau elaborated on the Integrated Accessibility Standards Regulation as stated in her report.  ● She reported that the Board is mandated to adopt a statement of commitment by January 1, 2013. The statement of commitment will need to be included in a hospital policy, in the accessibility multi-year plan, as well as the hospital’s website.  ● Members reviewed the proposed statement of commitment and were in agreement of utilizing it.  **It was moved by M. Lankin and seconded by S. Kristjanson that the Board of Directors adopts the Accessibility Statement of Commitment as listed in the CCS Report.**  **It was moved by J. McPherson and seconded by S. Kristjanson that the CCS report be accepted.** | **Carried**  **Carried** |
| **11. CEO REPORT** | |
| ● K. Pristanski asked if there were any questions regarding his report.  ● Employee Health, Wellness, Reward and Recognition Team: K. Pristanski reported that for the Hospital’s 50th anniversary next year he will provide pictures with captions to the newspaper. J. McPherson suggested that there be hospital tours available and we should consider having a booth at the Geraldton trade show with poster boards for display. Members agreed to form an Ad Hoc Committee for the 50th anniversary. Interested members are: J. McPherson, S. Kristjanson, S. Tyance, W. Anton and K. Pristanski. K. Pristanski will organize an Ad Hoc Committee meeting sometime in the new year.  ● Greenstone Family Health Team: Members were disappointed and concerned with the lack of quorum at the GFTH Board meetings. Members inquired if the Board is liable for the GFHT not meeting regularly. K. Pristanski responded that the Hospital is not liable. The GFHT are simply tenants of the Hospital, they are not part of the Corporation. Several Board members had concerns with the appointment booking system at the GFHT. It was noted that personal letters should be sent to the GFHT expressing their disappointment. K. Pristanski reported that sometime in the future, funding for the GFHT will come from the LHIN. D. Thibault reported that while she was Hospital Board Chair and attending the GFHT Board meetings, their Bylaws were reviewed and members discussed eliminating the Hospital appointments.  ● NW LHIN BluePrint Meeting: K. Pristanski reported that there was a follow-up videoconference to the November 14 meeting. He participated on the videoconference meeting, along with S. Duranceau and Nancy Proteau.  ● MOHLTC Transformation Fund: K. Pristanski reported that the LHIN gave an extension to January 4/13 to submit proposals. He added that there are about 20 proposals considered at this time. Some are individual proposals, some are district and some are regional. K. Pristanski inquired if the Board would be in agreement of a proposal for $200,000 to hire a facilitator to explore options to get the Hub started for the transformation.  **It was moved by A. Johnston and seconded by C. Tschajka that the Board of Directors are in agreement of a $200,000 proposal to hire a consultant to help the Hospital with the process of the Hub transformation.**  ● **K. Pristanski and V. Chapais will draft a letter to all the Board Chairs of the local health care organizations inviting them as participants/partners in this initiative.** The invitations will be cc’d to the North West LHIN.  **It was moved by A. Johnston and seconded by S. Kristjanson that the CEO report be accepted.** | **Carried**  **Carried** |
| **12. ROUND-TABLE DISCUSSION** | |
| ● J. McPherson noted that it was nice that everyone had comments at this evening’s meeting.  ● A. Johnston stated that it was a good meeting, everyone took part.  ● S. Tyance noted that it was a good meeting.  ● W. Anton noted that it was a good meeting.  ● C. Tschajka noted that it was a good meeting.  ● D. Thibault said that she was sorry she could not attend the meeting in person. |  |
| **13. BI-MONTHLY MEETING EVALUATION:** | |
| ● V. Chapais asked if there were any comments or questions regarding the evaluation summary.  ● There were none. |  |
| **14. TERMINATION OF REGULAR BOARD MEETING** | |
| **It was moved M. Lankin and seconded by S. Tyance that the regular meeting be adjourned at 7:39 p.m.** | Carried |