.Geraldton District Hospital

Minutes of the

### Regular Board Meeting

Held in the Hospital Boardroom, Tuesday, January 8, 2013 at 6:00 p.m.

Present: Victor Chapais Jamie McPherson Willy Anton

Voting Shirley Tyance Shannon Kristjanson Audrey Johnston

Marla Michel (T) Dale Randa Melanie Lankin

Chico Tschajka

Non-Voting Kurt Pristanski Sylvie Duranceau Dr. Laine

Diane Kampela (recorder)

Regrets: Deanna Thibault

Voting

Regrets:

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: 10 Attendance: 91%**

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| 1. CALL TO ORDER | |
| * 1. The meeting was called to order at 5:59 p.m., by the Chair, Victor Chapais.   ● V. Chapais wished everyone a Happy New Year.  ● V. Chapais reported that he received nomination forms from the Volunteer Tree of Life Committee. The deadline for submission is March 1, 2013.  ● K. Pristanski reported that a few Board members should meet to discuss potential nominations.  ● M. Lankin, S. Tyance, V. Chapais and K. Pristanski will participate in the nomination process.  ● **K. Pristanski will set meeting dates for everyone to choose from.**  **1.2 Correspondence:**  1.2.1 NW LHIN re: Chronic Care Hospital Funding  ● K. Pristanski reported that the Hospital received one-time funding of $1,300 to support Chronic Care.  1.2.2 NW LHIN re: Managing Obstetrical Risk Funding  ● K. Pristanski reported that the Hospital received funding for small rural hospitals in the amount of $21,325 (x3 years) to provide nursing and medical staff OBS education.  1.2.3 NW LHIN Invitation: Governance to Governance Session  ● A brief discussion took place regarding the LHIN mandating Board members to attend the session. Most Board volunteers have full-time jobs and it is difficult to get away during work days.  ● A. Johnston, V. Chapais, Dr. Laine and K. Pristanski will attend the Governance session on January 30/13.  ● **D. Kampela will submit the registration and make reservations.**  **1.3 Guide to Good Governance, Chapter 8:**  ● V. Chapais asked if there were any comments regarding Chapter 8: Board Structures and Processes.  ● Some Board members thought it was an extremely long chapter.  ● It was noted that the Frequently Asked Questions were very good.  ● Members agreed that the GDH Board structure and process is very close to what is listed in the manual.  ● New Board members noted it was a lot of information to comprehend but it was good information.  ● **Chapter 9 will be reviewed at the next meeting.** |  |
| 2. ADOPTION OF THE AGENDA | |
| ● V. Chapais asked if there were any amendments to the agenda.  ● The following item was added to the agenda:  7.4 Volunteer Tree of Life  **It was moved by J. McPherson and seconded by A. Johnston to approve the agenda as amended.** | **Carried** |
| **3. DECLARATION OF CONFLICTS OF INTEREST** | |
| ● None. |  |
| **4. ADOPTION OF MINUTES** | |
| **4.1 Regular Meeting, December 4, 2012:**  ● V. Chapais asked if there were any errors or omissions in the December 4, 2012 regular Board meeting minutes.  **It was moved by W. Anton and seconded by C. Tschajka to accept the minutes as presented.** | **Carried** |
| **5 BUSINESS ARISING FROM MINUTES** | |
| **5.1 CEO Position Description/Executive Committee:**  ● K. Pristanski noted that this item was left on the agenda as a reminder.  ● He added that an Executive Committee meeting would be scheduled in the near future to review the CEO position description in comparison to other hospitals.  **5.2 Mission, Vision, Values Stencil:**  ● K. Pristanski noted that he received a stencil picture from J. McPherson as an example.  ● K. Pristanski reported that the Hospital will be purchasing an automated machine that will be placed in the main lobby vestibule that will have the Mission, Vision, Values Statement; as well it will remind anyone entering the facility the importance of hand hygiene and any other important messages.  ● The cost of this machine will be approximately $8,000 (+ the cost of the software) and will meet the accessibility standards.  **5.3 Health Care Organizations Letter:**  ● Members reviewed the letter.  ● V. Chapais noted that he spoke to Rob Stinchcombe, Board Chair of NW CCAC and he felt it was a good letter.  ● K. Pristanski reported that there was some reluctance from two of the five invited partners. Other partners could be added later. The proposal was sent to the LHIN last week, within the deadline.  ● K. Pristanski briefed the Board members on a couple of other district and regional projects submitted by other hospitals. |  |
| **6. NEW BUSINESS** | |
| **6.1 Executive Limitations Policies and Procedures:**  ● S. Kristjanson noted that she found the policies to be written in a negative manner. Most of the policies say “shall not” numerous times.  ● S. Duranceau reported that the wording was based on the Model that was used at the time the policies were developed.  ● Policies BOD-EXL1 through 16 were reviewed.  ● Policy BOD-EXL2: item 6 needs to be revised to reflect the proper Regulation and Section. **K. Pristanski will revise.**  ● Policy BOD-EXL6: A. Johnston noted that the volunteers should be aware of the policy. **K. Pristanski will send a copy of it to the Auxiliary President and the Chair of the Hospice Committees (Geraldton and Longlac).**  ● Policy BOD-EXL10: J. McPherson noted that when the Executive Committee members met with the investment organizations, it was suggested to review this policy. K. Pristanski responded that the policy was based on Thunder Bay Regional Health Sciences Centre’s policy. **K. Pristanski will verify with TBRHSC to see if they have since updated their investment policy.**  ● Policy BOD-EXL11: J. McPherson inquired if there should be a reference on the policy. **K. Pristanski will add one.** A. Johnston noted that the volunteers should also be made aware of this policy. **K. Pristanski will send a copy to the Auxiliary President and the Chair of the Hospice Committees (Geraldton and Longlac).**  **It was moved by M. Lankin and seconded by S. Kristjanson that the Board approve the Executive Limitations policies and procedures as reviewed and amended.** | **Carried** |
| **7. LINKAGES & PARTNERSHIPS** | |
| **7.1 Geraldton Hospital Auxiliary:**  ● M. Lankin reported that the Auxiliary AGM will be held on January 21/13 at the 55+ Centre. At that time the revised Constitution will be approved. **M. Lankin will then forward D. Kampela a copy to include in the February package.**  **It was moved by M. Lankin and seconded by A. Johnston that the Report from the Geraldton District Hospital Auxiliary be accepted.**  7.2 Board of Directors QI Team Meeting Notes:  ● K. Pristanski asked if there were any questions regarding the notes and the score card.  It was moved by W. Anton and seconded by C. Tschajka that the Report from the Board of Directors QI Team be accepted.  7.3 Quality Improvement Committee Minutes – Dec. 19/12:  ● A. Johnston asked if there were any questions regarding the minutes.  ● One typo was noted.  ● A lengthy discussion took place regarding comment cards.  -Is what the Hospital is doing the best way?  ● S. Duranceau explained how the blitz was done in the past.  ● A few Board members suggested that the comment card topic go back to the managers for further discussion.  ● A. Johnston reminded the QIC members that the next meeting is scheduled for Thursday, January 17/13.  It was moved by A. Johnston and seconded by J. McPherson that the Report from the Quality Improvement Committee be accepted.  7.4 Volunteer Tree of Life Ad Hoc Committee:  ● A. Johnston reported that the Volunteer Tree of Life Ad Hoc Committee met on January 4/13. She briefed the members about the meeting.  ● She reported that the Volunteer Social will be held on Monday, April 22/13. The deadline for nominations is Friday, March 1/13.  ● Six groups received the package and each group can nominate a maximum of 2 volunteers.  **It was moved by A. Johnston and seconded by M. Lankin that the Report from the Volunteer Tree of Life Ad Hoc Committee be accepted.** | **Carried**  **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 asked if there were any questions regarding her report.  ● One member asked if the Hospital would continue to have locums if there is a full complement of physicians.  ● S. Duranceau responded that locums will only be utilized to fill vacations; therefore with a full complement of physicians locums would still be needed but not as many as in past years.  **It was moved by C. Tschajka and seconded by W. Anton that the CCS report be accepted.** | **Carried** |
| **11. CEO REPORT** | |
| ● K. Pristanski asked if there were any questions regarding his report.  ● Greenstone Family Health Team: it was noted that this was the second meeting in a row to be cancelled due to lack of quorum.  ● HIRF: K. Pristanski explained that the Hospital received $69,725 for a project in priority categories 1 to 3, as determined by facility assessment engineers contracted by the government. The generator project was in the priority 1 category.  **It was moved by A. Johnston and seconded by S. Kristjanson that the CEO report be accepted.** | **Carried** |
| **12. ROUND-TABLE DISCUSSION** | |
| ● M. Michel said that she is leery about driving the Nakina highway at night during the winter months. She added that it is difficult to hear on the telephone with all the papers being shuffled and suggested that the microphones be raised.  ● W. Anton inquired when a meeting would take place to discuss ideas for the upcoming Hospital anniversary. K. Pristanski responded that a meeting would be scheduled in the near future with a couple members from the Health, Wellness, Reward and Recognition Team.  ● Dr. Laine reported that the Hospital has been desperate for beds over the last week. He asked what happens to the ALC patients if we run out of beds for the ill patients. Are the ALC patients sent home? K. Pristanski responded that should this be the case, then the Chief of Staff would review and access the other physicians’ patients and discharge the least ill patients, if possible. Some ALC patients perhaps can be sent home, otherwise patients will be placed in the hallways.  ● A lengthy discussion resulted regarding ALC patients. |  |
| **13. BI-MONTHLY MEETING SELF-EVALUATION:** | |
| ● V. Chapais reminded the members to complete their evaluation and return it to D. Kampela.  ● The summary will be reviewed at the next meeting. |  |
| **14. TERMINATION OF REGULAR BOARD MEETING** | |
| **It was moved M. Lankin and seconded by W. Anton that the regular meeting be adjourned at 7:25 p.m.** | Carried |