Geraldton District Hospital

Minutes of the

### Regular Board Meeting

Held in the Boardroom, Tuesday, April 4, 2017 at 5:30 p.m.

Present: Mark Wright Kathryn Legault Dorene Boulanger

Voting Sheri Taylor Myrna Letourneau Chico Tschajka

Non-Voting Lucy Bonanno Sylvie Duranceau Laurie Heerema

Diane Lauzon (recorder)

Regrets: Jamie McPherson Willy Anton Dean Burke

Voting Ralph Humphreys

Regrets: Dr. Roy Laine Dr. Ryan Zufelt

Non-Voting

Absent: Peter Shebagabow

Guests: Ian McPherson Al Gordon

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

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

**Total Board Members (voting): 11 Present: 6 Attendance: 55%**

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| CALL TO ORDER | |
| 1.1.1 Welcome and Chair’s Opening Remarks:  ● The meeting was called to order at 5:43 p.m., by the Acting Chair, M. Wright, following a tour of the support services departments.  ● Introductions were held for Al Gordon, OPP Staff Sergeant.  ● The staff Sgt. reported that the Greenstone OPP will be establishing community policing committees.  1.1.2 Accreditation Update: I. McPherson:  ● I. McPherson reviewed the attached document, page by page.  ● The following was noted.  1.3 Ethics Framework: I. McPherson noted that the Board can follow the Ethics Committee’s ethics framework and simply make a reference to the document at the bottom of the agenda. S. Duranceau noted that the Mission, Vision and Values statement also makes reference to ethics. **L. Bonanno will bring an example of something to document on the agenda for the next meeting.**  ● It was noted that most of the outstanding items on the list are on this evening’s agenda.  ● I. McPherson noted that follow-up items will be reviewed at the next meeting.   * 1. **Correspondence:**   1.2.1 OACCAC Agreement Transferring:  ● For member information.  ● L. Bonanno added that CCAC no longer exists. CCAC is now part of the LHIN.  1.2.2 Thank You Card from Adrian Agostino:  ● For member information.  ● L. Bonanno noted that the #1 criteria for the NOSM bursary is that the recipient be from the Greenstone region.   * 1. **Education:**   1.3.1 Tour of Support Services Department:  ● The tour was conducted at the start of the meeting. |  |
| 2.0 ADOPTION OF THE AGENDA | |
| ● The following items were added to the agenda.  8.7 Annual General Meeting  8.8 Bylaw No. 2  **It was moved by C. Tschajka and seconded by M. Letourneau to approve the agenda as amended.** | **Carried** |
| **3.0 DECLARATION OF CONFLICTS OF INTEREST** | |
| ● No declaration of conflicts. |  |
| **4.0 CONSENT AGENDA** | |
| **4.1 Regular Board Meeting Minutes – March 7, 2017:**  **4.2 Medical Advisory Committee Minutes – February 27, 2017:**  **4.3 Volunteers’ Tree of Life Ad Hoc Committee Notes – March 2, 2017:**  **4.4 Bylaw Ad Hoc Committee Notes – February 21 and March 20, 2017:**  **4.5 CCS Report:**  **4.6 CNO Report:**  **It was moved by D. Boulanger and seconded by C. Tschajka to accept the Consent Agenda as received.** | **Carried** |
| **5.0 ITEMS LIFTED FROM CONSENT AGENDA** | |
| ● None. |  |
| **6.0 BUSINESS ARISING FROM MINUTES** | |
| **6.1 Orientation for Committees:**  ● L. Bonanno reported that she spoke to Lydia, the hospital lawyer, and she was informed that there is no orientation required for committees. Board general orientation is sufficient. However, Terms of Reference from committees should be provided to each committee member.  ● The item can be removed from the agenda.  **6.2 Fort Frances Foundation Article:**  ● The article was forwarded to all Board members.  **6.3 HIROC Matrix:**  ● L. Bonanno reported that she contacted HIROC and a risk matrix is no longer being utilized because it does not eliminate risk. Instead, she was informed that the hospital Incident Management System (IMS), policies and procedures, quality improvement indicators and such all be reviewed annually.  ● L. Bonanno added that she was informed that due diligence and a common sense approach is what is being utilized as factors to help eliminate risks.  **6.4 Board-Adopted Governance Policies:**  ● L. Bonanno followed-up with Lydia, the hospital lawyer, about such but cannot remember her response. **She will report back at the next meeting.**  ● M. Wright noted that Board policies and procedures are indeed reviewed annually.  **6.5 Code of Conduct Policy:**  ● L. Bonanno reported that she spoke to Lydia, the hospital lawyer, about such policy and she was informed that the Board can utilize the same policy that is used for staff members for consistency. However the term Board members should be used instead of employee/staff.  ● M. Wright noted that the hospital should consider including the Code of Conduct as part of every employees’ contracts.  ● S. Duranceau responded that the letters of offer refer to hospital policies and procedures, as well as collective agreements.  **6.6 Complaint Against Board Members:**  ● L. Bonanno spoke to Lydia, the hospital lawyer, about such policy and Lydia said that she has never heard of such policy. Also, there is a section in the Bylaw that talks about complaints.  **6.7 Framed Prints:**  ● D. Lauzon reported that Master Print and Design would be in the framing business later in the summer.  **6.8 Investment Portfolio RFP:**  ● L. Bonanno reported that she will be hiring a Chief Financial Officer (CFO).  ● Once a CFO is hired, they will be given the task of a RFP for the investment portfolio.  **6.9 Ethics Framework – Clarification:**  ● This item was discussed at the start of the meeting with Ian McPherson.  **6.10 Wi-Fi Services to Patients:**  ● L. Bonanno reported that the North West Health Alliance (NWHA) is working on a Wi-Fi contract with Tbaytel for all area hospitals. Cost is a factor.  ● Members requested that L. Bonanno inquire with the NWHA as to why they chose to go with Tbaytel. **L. Bonanno will report back at the next meeting.** |  |
| **7.0 CAPITAL PLAN ED RELOCATION PROJECT UPDATE** | |
| ● L. Bonanno reported that there have been several meetings with the ED Planning Committee and architects.  ● L. Bonanno added that Stage 2 will be submitted to the MOHLTC tomorrow.  ● She added that she will be meeting with the architects in person next week.  ● L. Bonanno informed the Board that despite all efforts with cuts, the project cannot be maintained under $10 million because of mechanical and electrical infrastructures. The current cost of the project is $11.9M.  ● L. Bonanno read a covering letter to the Ministry requesting extra funding for mechanical and electrical infrastructure that is required for the ED project. She added that the mechanical and electrical infrastructure project is approximately $2M.  ● L. Bonanno also informed the Board that Dave Beazley, the project manager, recommended that she be in Toronto in case the Ministry requests a meeting regarding the request for separate funding. That way a face-to-face meeting can be done rather than via telephone.  ● A member inquired if Michael Gravelle can help in any way. L. Bonanno responded that she was not sure.  ● M. Wright added that the hospital should speak to the Ministry first and see how that goes. If needed, M. Gravelle’s office can then be contacted. |  |
| **8.0 NEW BUSINESS** | |
| 8.1 Governing Body Members Roles and Responsibilities:  ● L. Bonanno reported that this was completed. It will be included in the next Board meeting.  8.2 CEO Position Profile:  ● L. Bonanno informed the Board members that this needs to be looked at with J. McPherson.  8.3 Annual CEO Performance Objectives:  ● L. Bonanno reported that this will be included in the next meeting package.  8.4 Code Grey:  ● For members’ information.  8.5 Letters Patent and Governance Process Policy:  ● L. Bonanno discussed such with Lydia, the hospital lawyer, and was informed that the Letters Patent is fine as is.  ● There is no need to update it, unless we consider changing the mandate or amalgamating.  8.6 Board – CEO Relationship Policies: BOD-BC1 – 6:  ● Members reviewed the attached policies.  ● BOD-BC4: clarification was requested regarding “reasonable person”. M. Wright noted that J. McPherson had a concern with the policy but he will have to follow-up with him.  ● BOD-BC5: M. Wright inquired on behalf of J. McPherson if the list should be modified. M. Letourneau inquired about the health and safety of volunteers. S. Duranceau and L. Heerema responded that the Workplace Violence and Harassment Prevention policies and procedures include everyone.  ● BOD-BC6: M. Wright asked (on behalf of J. McPherson) when can the Board meet with Dr. Laine to review his Chief of Staff (COS) performance.  -L. Bonanno responded that she met with Dr. Laine and all of his indicators have been met.  -S. Duranceau noted that in the past, the previous CEO tried to find someone to conduct a COS performance but was unsuccessful. She added that it probably has been 15 years since a performance was done.  -M. Wright suggested to the CEO that an effort be made in checking for a third party to conduct such performance.  -M. Letourneau noted that there should be some kind of performance comparable to a CEO performance evaluation. She suggested a 360o performance evaluation. She also suggested contacting St. Joes to inquire how they conduct such evaluation.  -S. Duranceau added that COS performance evaluation is an accreditation recommendation.  -L. Bonanno will inquire with other CEOs as to how they conduct COS performance evaluation.  It was moved by M. Letourneau and seconded by C. Tschajka to approve the Board - CEO Relationship policies and procedures as reviewed and clarified.  8.7 Annual General Meeting:  ● L. Bonanno noted that a date for the AGM had to be chosen and that she and D. Lauzon chose Wednesday, June 28.  8.8 Bylaw No. 2:  ● A copy of Bylaw No. 2 was distributed.  ● L. Bonanno noted that the ad hoc committee met a few times (the notes were attached to the meeting package) to review the draft document.  ● L. Bonanno added that the document is for members’ review.  ● L. Bonanno added that the new Bylaw will have to be approved by the Board at the next meeting. | **Carried** |
| **9.0 LINKAGES AND PARTNERSHIPS** | |
| 9.1 QIC Meeting Minutes and Score Card – March 23, 2017:  ● M. Wright asked if there were any questions or concerns regarding the minutes.  It was moved by K. Legault and seconded by S. Taylor to approve the March 23/17 Quality Improvement Committee minutes as received.  9.2 Geraldton District Hospital Auxiliary (GDHA) Report:  ● M. Letourneau highlighted her report, noting that an extra 342 tickets were printed and sold for the penny auction.  It was moved by M. Letourneau and seconded by D. Boulanger that the report from the Auxiliary be accepted. | **Carried**  **Carried** |
| **10.0 MEDICAL STAFF** | |
| **10.1 Physician Privileges:**  ● None. |  |
| **11.0 CHIEF EXECUTIVE OFFICER (CEO) REPORT** | |
| ● M. Wright asked if there were any questions or concerns regarding the CEO report.  ● L. Bonanno briefed about the Friendship Centre partnership.  ● L. Bonanno also briefed about the NOSM interviews, noting that 2,000 applications were received and 400 applicants were interviewed for 64 openings.  **It was moved by C. Tschajka and seconded by K. Legault that the report from the CEO be accepted.** | **Carried** |
| **12.0 ROUND TABLE DISCUSSION** | |
| ● Board members all noted that M. Wright did a great job chairing the meeting and that it was a good meeting.  ● Board members also noted that it was nice to see Al Gordon in attendance and the great changes being made by the OPP.  ● L. Bonanno informed the Board members that a public presentation for the hospital’s LTC Home Recertification is being held on May 5 from 1:00 to 2:00 p.m. in the hospital boardroom. L. Heerema added that a LTC inspection was held recently and the home received 100% compliance. **Members suggested that an announcement be put in the newspaper and that J. McPherson send a letter to the LTC Nurse Manager.**  ● M. Wright thanked the Board members for making his task as Acting Chair easy. He added that the Municipality was successful in receiving funding for supportive housing. However, there is still a long process ahead. |  |
| **13.0 BI-MONTHLY MEETING EVALUATION SUMMARY:** | |
| ● Members reviewed the summary.  ● No concerns were raised. |  |
| **14.0 TERMINATION OF REGULAR BOARD MEETING** | |
| **It was moved by D. Boulanger and seconded by S. Taylor that the regular meeting be adjourned at 7:10 p.m.** | Carried |

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Board Chair Signature