Geraldton District Hospital

Minutes of the

### Regular Board Meeting

Held in the Boardroom, Tuesday, February 6, 2018 at 5:30 p.m.

Present: Jamie McPherson Dorene Boulanger Myrna Letourneau

Voting Mark Wright Willy Anton Chico Tschajka

Ralph Humphreys (T)

Non-Voting Lucy Bonanno Sylvie Duranceau Dr. Ryan Zufelt

Adam Kolisnyk (T) Sandra Penner (recorder)

Regrets: Terry Popowich Sheri Taylor Marlo Sobush

Voting Kathryn Legault

Regrets: Laurie Heerema Dr. Roy Laine

Non-Voting

Guests:

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

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

**Total Board Members (voting): 11 Present: 7 Attendance: 64%**

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| CALL TO ORDER | | |
| **1.1.1 Welcome and Chair’s Opening Remarks:**  ● The meeting was called to order at 5:30 p.m., by the Chair, J. McPherson.  ● J. McPherson read the Treaty Acknowledgement.  ● J. McPherson announced that S. Taylor has resigned from the Board but will recommend a replacement.  **1.1.2 Accreditation Update:**  ● I. McPherson presented the Pre-Survey Documentation for Surveyors. This document lists the types of reports the surveyors will be looking for. The Strategic Plan is one of the largest, which is now complete.  ● I. McPherson reported the surveyors may stop in at any committee meetings taking place during their time here.  ● Dr. Zufelt offered to attend the QIC meeting during that time to assist in guiding the discussion.  ● I. McPherson presented the Accreditation Primer Decision Guidelines and Accreditation Decision Guidelines which are the items the surveyors look at to determine accreditation.  ● Antimicrobial may be an area of concern during this accreditation as it was flagged during our last survey.  ● Dr. Zufelt explained the meaning of Antimicrobial is to choose the right antibiotics to treat certain conditions. The challenge is our transition from hand written orders to pre-printed orders to electronic orders. It is the evolution of technology over the last 5 to 10 years. Dr. Zufelt feels the standard is being met but it is difficult to capture it and he feels the number of locums that serve our area also makes this a challenge. He does not feel this is something we are not doing adequately.  ● I. McPherson noted that the surveyors and how they interpret data can also make a difference.  ● Education for staff will occur in early May, as I. McPherson would like to hold it as close to accreditation as possible.  ● M. Letourneau asked if there would be a training session for the board and I. McPherson feels the board has a good understanding of their roles and responsibilities.  **1.1.3. QIP Indicators**  ● J. McPherson noted this is from the old QIP. All areas have targets which we are hoping to update with the direct compensation changes. J. McPherson notes he is working with other hospitals but they have not provided the information as of yet. This will be addressed at a later time. |  | |
| 2.0 DECLARATION OF CONFLICTS OF INTEREST | | |
| ● None Declared |  | |
| **3.0 ADOPTION OF THE AGENDA** | | |
| ● J. McPherson asked if there were any amendments to the agenda.  ● Tree of Life  It was moved by V. Tschajka and seconded by W. Anton that the agenda be approved as amended per Resolution 1-2018. | **RES 1** | |
| |  |  |  | | --- | --- | --- | | **4.0 PRESENTATIONS** |  | | | **4.1 Patient Stories**  ● L. Bonanno noted there were no patient stories from this month.  ● It was noted that V. Chapais is going to be joining the future Board of Directors meeting as the hospital PFA (Patient Family Advocate) representative. |  |   **5.0 CORRESPONDENCE** | | |
| **5.1 North West LHIN Memo – Accountability Agreements:**  ● North West LHIN Memorandum dated January 11, 2018 presented.  **5.2 Vital Role of Hospitals in Northern Communities:**  ● A leaflet for the Vital Role of Hospitals in Northern Communities was presented.  ● M. Letourneau inquired what did SRN and for and it was noted Small Rural Northern.  **5.3 Behavioural Supports Program:**  ● The signed acceptance for the LHIN LTC Behavioural support funding was presented. The funding will be $14,000 for this year and $ 34,000 per year thereafter.  ● S. Duranceau noted the hard part is to find someone to fill the position. Manitouwadge had a part RAI who was able fill the position there. |  | |
| **6.0 EDUCATION** | | |
| **6.1 Action Plan:**  ● L. Bonanno presented the 2018 – 2022 Action Plan.  ● J. McPherson noted these are the targets which L. Bonanno and the senior leaders created.  ● L. Bonanno noted she met with the senior managers multiple times to generate this document.  ● **Sandra to bring the updated document back to the board quarterly – starting in September**.  ● J. McPherson noted if anyone has question send them to L. Bonanno. |  | |
| **7.0 CONSENT AGENDA** | | |
| **7.1 Regular Board Meeting Minutes – January 9, 2018:**  **7.2 MAC Meeting Minutes - January 25, 2018:**  **7.3 Anishnabe Meeting Minutes – January 26, 2018:**  **7.4 CCS Report:**  **7.5 CNE Report:** | **RES 2** | |
| **8.0 ITEMS LIFTED FROM CONSENT AGENDA** | | |
| 8.1 Regular Meeting Minutes  ● D. Boulanger noted on Pg 3 Item 8 – Bullet 2 that it should state ‘Geraldton Municipal Council’ in place of Geraldton District Hospital Board of Directors’.  8.2 MAC Meeting Minutes  ● D. Boulanger noted on Pg 3 Item 5.1 – Bullet 2 the word ‘outliars’ should be ‘outliers’.  ● S. Duranceau noted on Pg 4 Item 7.3 OPP Blood Draws – there was a meeting held with the Staff Sergeant Gordon in this regard. L. Bonanno reported the OPP is looking at hiring someone who is qualified to complete the blood draws at the OPP station. | **RES 3** | |
| **9.0 BUSINESS ARISING FROM MINUTES** | | |
| **9.1 Executive Limitation Policies (BOD-EXL1-8 & 12-16)**  **(Updated for inclusion in your Board of Directors Binders)**:  ● C. Tschajka noted the title of BOD-EXL5 needs the word ‘Client’ updated to ‘Patient / Resident’.  ● S. Penner to update and include in the next Board Package.  ● M. Letourneau inquired as to why the Public Reporting section on the website was not up to date and S. Penner noted it is in progress.  9.2 Executive Limitation Policies (BOD-EXL9 Public Image) - Revised:  ● L. Bonanno presented the revised policy.  ● The Board was satisfied with the body of the policy but noted the footer of the document needs to have ‘January 2018’ removed from the Reviewed section.  ● S. Penner to revise and include in the next Board Package.  It was moved by C. Tschajka and seconded by D. Boulanger to approve the Policy BOD-EXL9 as amended.  9.3 Executive Limitation Policy (BOD-EXL10 Investment)  ● To be reviewed at the next meeting of the Board of Directors.  9.4 Executive Limitation Policy (BOD-EXL11 Whistle-Blower)  ● A. Kolisnyk suggested a change and it was requested to bring the revised document to the next meeting.  ● J. McPherson recommended to add the ‘the CEO has the right to independent review’ to the policy. | **Carried** | |
| 1. **CAPITAL PLAN / CFO REPORT** | | |
| ● A. Kolisnyk presented his reports. He noted we need to change spending to maintain the current ratio.  Jamie noted when he is presenting the capital plan in March there should be funds taken out of the account and it is necessary to balance the two accounts.  ● A. Kolisnyk stated we should have a capital plan 3 years out.  ● A. Kolisnyk noted he has contacted a number of financial institutions regarding the investments and notes there will be tax penalties if we switch companies due to the gains becoming taxable. The only difference would be if Investors Group has a fee for switching providers.  ● J. McPherson inquired if Caisse Populaire had been contacted.  ● A. Kolisnyk would like to bring investors group to the March board meeting.  ● J. McPherson would like the representative here in person.  ● A. Kolisnyk reported as of January 31 73% of the items were complete for the capital budget.  ● A. Kolisnyk reported HAPS submission was completed and an update will be provided at the March meeting  ● A. Kolisnyk noted the management team has been using the risk scoring tool now for some time, and addresses issues several times per month.  ● A. Kolisnyk provided his vision for the finance department noting currently it is very silent were accountants sit behind computers. He wants to change the focus from internal report generating to a department that supports the other departments and to change the thinking from internal to external. He noted then we can become a business partner with the other departments.  ● J. McPherson feels this is the right direction.  ● A. Kolisnyk noted under financial control there are no funds in Geraldton District Hospital that are not invested in some kind of interest bearing account.  ● A. Kolisnyk outlined the variance report on page 47 and it was noted the donations had increase and this could be due to the on line donation link on the website.  ● The Board members had no questions from the variance summary  ● D. Boulanger noted we are still running in a deficit in Nakina and J. McPherson noted this is the closest to balanced it has been for quite some time.  ● C. Tschajka noted he likes the use of colours in the reports.  ● A. Kolisnyk reviewed the Risk Management report and feels we are under reporting in some areas.  ● J. McPherson noted he would like the top 5 items, regardless of category to come to the Board as they should be aware of the highest risks even if they are all in the same category.  ● M. Wright feels from the board level they need to be aware of risks with operational and financial impact.  ● J. McPherson noted that items that the board may have to answer to later are the ones that need to be brought to this meeting.  ● J. McPherson noted he would like to see 2 separate reports for the next couple months from L. Bonanno and A. Kolisnyk.  ● A. Kolisnyk left the meeting at 6:50 pm. |  | |
| |  |  |  | | --- | --- | --- | | **11.0 NEW BUSINESS** | | | | **11.1 Strategic Plan 2018 – 2022**  **●** L. Bonanno presented the finalized Strategic Plan and brochure to the Board. She noted the Strategic plan has been sent for translation.  **● It was requested S. Penner bring a copy of the page 3 and 7 without the printing error to the next board meeting.**  ● J. McPherson noted he would like a letter sent to the management staff to thank them for their hard work.    **11.2 Communication Plan – April 2018**  ● L. Bonanno reported she would like all of the documents completed for April 1 and to have the unveiling in the spring**.**  ● J. McPherson noted we will need a date that triggers all of this  ● **J. McPherson would like the dates in the plan for the March meeting.**  ● C. Tschajka inquired on pg 59 what is it the managers are to discuss with their staff teams.  ● L. Bonanno noted the managers are to speak to their teams regarding PFCC (Patient and Family Centered Care) as this is an ongoing item. Managers will need to constantly speak to their staff to make this ingrained.  ● M. Letourneau inquired if the PFCC sample stories could be put on website?  ● L. Bonanno noted that other hospitals do not do this as in small communities it would be easy to identify the individual.    **11.3 Event Report (Oct – Dec 2017)**  **● No questions**  **11.4 Tree of Life**  ● It was noted that R. Humphreys, W. Anton and M. Letourneau **met to determine who they felt would qualify for nominations to be** included in the tree of life from the Board of Directors and they have 2 names, J. McPherson and D. Thibault as the nominees.  **It was moved by M. Letourneau and seconded by D. Boulanger to nominate the two candidates as presented to be included in the Volunteer Tree of Life nominations.** | | **Carried** |   **12.0 LINKAGES & PARTNERSHIPS** | | |
| **12.1 QIC Meeting Minutes and Score Card – January 18, 2018**  ● D. Boulanger inquired regarding Item 6 if we were one of the 5 pilot facilities for the Online Medication Reconciliation system and S. Penner noted we were not one of the chosen facilities.  ● M. Letourneau noted on the score card the Board was not scoring well under Educational events.  ● It was noted that there was no retreat and no OHA meeting in Thunder Bay last year.  ● J. McPherson inquired with L. Bonanno if we are going to be hosting the Board Retreat in the fall of 2018 and L. Bonanno noted we will be.  ● J. McPherson reminded members that anything that is tied to the board would count for education sessions.  ● J. McPherson noted he will be attending the Rural and Northern Health Care Conference in May.  ● D. Boulanger noted the attendance at Board of Director meetings is going down.  **12.2 HCAC Meeting Minutes: January 24, 2018**  ● J. McPherson noted lots of discussion on Health Links.    **12.3 Geraldton Hospital Auxiliary Report**  ● M. Letourneau presented the report from the Geraldton District Hospital Auxiliary. The AGM was held on January 15, 2018 and there were no changes to the executive committee.  ● This year the Auxiliary will be working to purchase a sleeper chair.  ● The Penny auction will be taking place March 10th and will be set up 1 week ahead at Master Print.  ● The Auxiliary Membership drive is now underway.  It was moved by M. Letourneau and seconded by D. Boulanger that the report from the Auxiliary be accepted as presented. | **RES 4** | |
| **13.0 CEO REPORT:** | | |
| ● L. Bonanno reported that the for the ER project they have not approved the chemo area yet as they are stating we need approval from the College of Pharmacists, and they are saying they do not do that. The paperwork will continue but no shovel to ground until the ministry approves the chemo area. J. McPherson noted this is at the provincial level.  **13.1 Public Consultation**  ● For information – J. McPherson noted the attachment provided is what was posted on the Hospital website in regards to the Executive Compensation Public Consultations and noted he will be monitoring for highlights. | **RES 5** | |
| |  |  | | --- | --- | | **14.0 DECISION OF BOARD:** | | | 14.1 Physician Privileges | **RES 6** | | |  |  | | --- | --- | | **15.0 ROUND TABLE DISCUSSION** | | | ● D. Boulanger commented the Board needs to look at meeting attendance.  ● R. Humphreys noted the switch over with the Finance department to external is great to see.  ● W. Anton noted it was a good meeting. |  | | | | |  |  | | --- | --- | | **16.0 MONTHLY MEETING EVALUATION** | | | ● J. McPherson requested members complete the evaluations provided in their meeting package and return to S. Penner. |  | | | | | |
| |  |  | | --- | --- | | **17.0 TERMINATION OF REGULAR BOARD MEETING** | | | ● J. McPherson terminated the regular Board meeting at 7:35 p.m. | **RES 7** | | | |
| **18.0 IN CAMERA MEETING** | | |
| ● J. McPherson moved the Board meeting to in Camera at 7:36 p.m. | | RES 8 |
| **19.0 TERMINATION OF IN CAMERA MEETING** | | |
| ● J. McPherson terminated the In Camera Board meeting at 7:52 p.m. | RES 9 | |
| **20.0 MEETING WITH MANAGEMENT (CEO ONLY)** | | |
| ● Nothing to report at this time |  | |
| **21.0 MEETING WITHOUT MANAGEMENT** | | |
| ● Nothing to report at this time |  | |

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Board Chair Signature