Geraldton District Hospital

Minutes of the

### Regular Board Meeting

Held in the Boardroom, Tuesday, February 3, 2015 at 5:30 p.m.

Present: Jamie McPherson Dale Randa Dorene Boulanger

Voting Willy Anton Shirley Tyance Audrey Johnston

Suzanne Lafrance Victor Chapais Melanie Lankin (T)

Chico Tschajka

Non-Voting Kurt Pristanski Sylvie Duranceau Cathy King

Diane Lauzon (recorder)

Regrets:

Voting

Regrets: Dr. Zufelt Laurie Heerema Dr. Laine

Non-Voting

Guest: Cathleen Larsen

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

**Current Vacancies (voting): 1 Elected 0 Appointments Total 1**

**Total Board Members (voting): 10 Present: 10 Attendance: 100%**

|  |  |
| --- | --- |
| 1. CALL TO ORDER | |
| * 1. The meeting was called to order at 5:31 p.m., by the Chair, Jamie McPherson.   ● J. McPherson thanked D. Boulanger for chairing the last Board meeting.    **1.2 Correspondence:**  1.2.1 TBRHSC re: Strategic Plan  ● J. McPherson highlighted the letter, noting that there will only be one strategic planning session now.  ● J. McPherson noted that correspondence was received from the OHA Minister of Health introducing patients first - the next phase of the action plan for health care. The four pillars of the plan include:  -Access  -Connect  -Inform  -Protect   * 1. **Education:**   1.3.1 Tour of Nursing Departments:  ● C. King provided a tour of the Acute Care, Long-Term Care and Emergency departments. |  |
| 2. ADOPTION OF THE AGENDA | |
| ● J. McPherson asked if there were any amendments to the agenda.  ● D. Lauzon noted that the date in item 8.2 should be Jan. 16/15 (not Jan. 16/14).  ● It was requested to remove item 4.2 from the consent agenda and move it to 8.3.  ● Item 5.6 was moved ahead of item 4.0.  ● It was requested to add item 8.4, Reports of Governance to Governance Session in Terrace Bay.  **It was moved by C. Tschajka and seconded by W. Anton to approve the agenda as amended.** | **Carried** |
| **3. DECLARATION OF CONFLICTS OF INTEREST** | |
| ● None. |  |
| **4. CONSENT AGENDA** | |
| **4.1 Regular Meeting, January 13, 2015:**  **4.2 Board of Directors QI Team Notes – January 7, 2015:**  ● Moved to item 8.3    **4.3 Healthier Community Advisory Committee Minutes – January 22, 2015:**  **4.4 CNO Report:**  **4.5 CCS Report:**  **It was moved by D. Boulanger and seconded by C. Tschajka to accept the Consent Agenda as amended (4.2 to 8.3).** | **Carried** |
| **5 BUSINESS ARISING FROM MINUTES** | |
| **5.1 Board Vacancy: Update:**  ● C. Tschajka was pleased to announce that Dean Burke has accepted to sit on the Board.  ● K. Pristanski will contact D. Burke to set an orientation date.  ● C. Tschajka added that D. Burke sounded very enthusiastic about becoming a GDH Board member.  **It was moved by C. Tschajka and seconded by A. Johnston to appoint Dean Burke to the Board of Directors until the Annual General Meeting.**  **5.2 COS Evaluation: Policy:**  ● K. Pristanski noted that the information contained in the policy was taken from the Guide to Good Governance.  ● Members reviewed the attached policy and made minor revisions.  **It was moved by W. Anton and seconded by C. Tschajka to approve the Chief of Staff Evaluation policy, as amended.**    **5.3 COS Evaluation: COS Secured - Update:**  ● K. Pristanski reported that he contacted 3 Chiefs of Staff. Two have declined the offer to provide an evaluation and one said maybe.  ● **K. Pristanski will follow-up with the COS who previously responded “maybe”. If the COS declines, he will continue looking for another who would be interested in conducting the evaluation.**  **5.4 NW LHIN re: Merger – Update:**  ● J. McPherson reported that the GDH Board met with the Nipigon hospital Board in Beardmore. A conference call followed with the LHIN representative.  ● The LHIN informed those in attendance that a letter would be received last Monday. An email has since been received stating that the topic would be discussed at an upcoming LHIN Board meeting. An email was received following the LHIN Board meeting stating that a letter would be forthcoming. The letter has yet to be received. **Once the letter is received, it will be included in the next Board package.**  ● J. McPherson noted that in the meantime, a firm must be hired to start the CEO recruitment process.  ● He added that following the Beardmore meeting, a steering committee was formed, consisting of the Board Chairs, Vice-Chairs and CEOs from both hospitals.  ● He added that the NW Health Alliance has been assigned by the LHIN to be the facilitator of the steering committee.  ● D. Randa reported that the LHIN verbally agreed they would fund the merger but nothing has been received in writing yet.  **5.5 Administration Bylaw:**  ● Deferred.  **5.6 MOHLTC LTC Home Inspection Action Plan:**  ● The item was discussed ahead of 4.0.  ● C. Larsen noted that there were two inspectors on site for a two-week period; therefore the inspection was very thorough. She added that there were many areas the inspectors were not familiar with; resulting in many items requiring clarification.  ● J. McPherson requested that specific dates be added to the target deadlines on the action plan.  ● C. Larsen went over the document item by item.  ● She noted that some items will remain ongoing for a long period of time.  -WN #1: the Program was put in writing and submitted to the Ministry last week.  ● Some changes and clarifications will be made to the action plan.  ● D. Randa noted that the Board kept hearing how bad the report was but after C. Larsen’s review of the action plan, it is not as bad as it previously thought. He inquired if some of the concerns were related to the scope of practice (PSWs replaced many RPNs).  ● C. Tschajka concurred that the actual report looked bad but having looked at the action plan helped understand and lessen the negative thoughts.  ● C. Larsen noted that it was not a fun experience; there were many red flags and the inspectors were not very experienced. However, it was definitely a learning experience.  ● Members concurred that looking at the actual report last month was very discouraging. Following the review of the action plan has shed some light.  ● J. McPherson was very pleased with the actions. Members concurred.  ● J. McPherson does not agree to with a two-week inspection, especially when accreditation surveyors assess the entire hospital in 4 days total.  ● Members were pleased with C. Larsen and happy with her presentation.  ● **The item will be added to business arising for monthly review of the completion date progresses.** | **Carried**  **Carried** |
| **6. CAPITAL PLAN ED RELOCATION PROJECT UPDATE** | |
| ● K. Pristanski highlighted the update/schedule.  ● J. McPherson noted that staff should be kept up-to-date of the plans. |  |
| **7. NEW BUSINESS** | |
| 7.1 Governance Process Policies and Procedures (BOD-GP1 - 19):  ● Members reviewed the attached policies.  ● BOD-GP1, Code of Conduct, was revised.  ● It was noted that Board Linkages with Other Organizations policy (BOD-GP8) should be added to the cycle agenda for yearly consideration.  It was moved by A. Johnston and seconded by S. Lafrance to approve the Governance Process policies and procedures as reviewed and amended (BOD-GP1). | **Carried** |
| **8. LINKAGES AND PARTNERSHIPS** | |
| 8.1 Geraldton District Hospital Auxiliary (GDHA):  ● M. Lankin reported that the GDHA held their AGM on January 18. Election of officers took place.  -President: Myrna Letourneau  -Vice-President: vacant  -Treasurer: Kathryn Legault  -Secretary/Past President: Dorothy Friske  -Board Representative: Melanie Lankin  ● M. Lankin reported that a membership drive was held recently at No Frills and 75 new memberships were received.  ● She also reported that the Constitution and By-Laws of the Geraldton District Hospital Auxiliary was revised. D. Lauzon will obtain a copy of the Constitution and a list of the Executive and she will then forward to all Board members.  ● M. Lankin added that the GDHA will be funding an AccuVein device, as well as 2 medical waist bands (restraints) for the Hospital.  It was moved by M. Lankin and seconded by W. Anton that the report from the Auxiliary be accepted.  8.2 Quality Improvement Committee Meeting – January 16/15:  ● A. Johnston noted that the date on the first page of the minutes should be 2015, not 2016.  ● She noted that the next meeting is scheduled for February 20 for a period of 3 hours to review both QIPs.  ● Quality Improvement Committee members all noted that they cannot attend the meeting on that date.  ● D. Lauzon will get alternate dates from K. Popowich and poll the Board members for the best available date.  ● A. Johnston asked if there were any questions regarding the minutes.  It was moved by A. Johnston and seconded by D. Boulanger that the report from the Quality Improvement Committee be accepted.  8.3 Board of Directors QI Team Notes – January 7, 2015:  ● A. Johnston noted that three (3) events were attended in January and should be included on the scorecard.  ● D. Lauzon will amend accordingly.  It was moved by A. Johnston and seconded by V. Chapais that the report from the Board of Directors QI Team be accepted.  8.4 Reports of Governance to Governance Session in Terrace Bay:  ● C. Tschajka reported that overall it was a good meeting. He noted that Ed Enge from the Atikokan General Hospital was very specific and blunt about his concerns. C. Tschajka listed some of the concerns and agreed that E. Enge expressed the feelings felt by most people in attendance. He added that the Hospital is often criticizing the LHIN but we should stop doing so and start thinking positive. He also reported that he thinks it is a good idea for the 5 area hospital (+ NOSP) CEOs and Board Chairs to keep meeting every two months.  ● A. Johnston inquired if NOSP is trying to be blocked from the LHIN. K. Pristanski responded that in the Integration Scenario Planning Committee would not include NOSP. Apparently all mental health agencies will be reviewed together later this year.  ● A. Johnston noted that the Board should expect a good report from Gwen Dubois, following the session. A. Johnston added that it was a very good session.  ● K. Pristanski reported that Ed Enge (Atikokan General Hospital) is trying to develop their own hub for the Atikokan area but it is difficult because all the other Boards are not located in Atikokan.  ● A follow-up meeting is planned with the 6 Boards. | **Carried**  **Carried**  **Carried** |
| **9. MEDICAL STAFF** | |
| **9.1 Physician Privileges:**  **● K. Pristanski will follow-up regarding Dr. Crawford’s privileges.**  **It was moved by S. Tyance and seconded by D. Randa that the Board approves the physician privileges, as listed.** | **Carried** |
| **10. CHIEF EXECUTIVE OFFICER (CEO) REPORT** | |
| ● K. Pristanski highlighted his report.  ● Second Quarter Financial Statements: the government did not take into consideration the ONA wage increase for the RN at the Nakina Station for the last 2 years. Although the Nakina Nursing Station is well over budget, Board members concurred not to reduce staffing at this time. K. Pristanski and L. Heerema will follow-up.  ● C. Tschajka noted his concern with the increased behaviour incidents in 2014.  ● M. Lankin noted that it was nice to see such decrease with the medication errors. She also noted that some totals did not balance on the spreadsheet. **K. Pristanski will follow-up with K. Popowich.**  ● Capital Budget: K. Pristanski reported that the LTC floor renovations will begin tomorrow; followed by the administration flooring area.  ● K. Pristanski asked if there were any other questions regarding his report.  **It was moved by A. Johnston and seconded by D. Boulanger that the CEO report be accepted.** | **Carried** |
| **11. ROUND-TABLE DISCUSSION** | |
| ● A. Johnston noted that she appreciated the detailed information in the CCS report. She also noted that it was a good meeting.  ● D. Boulanger noted that perhaps the next time a department tour is scheduled it should take place prior to the dinner.  ● V. Chapais apologized to the members about missing meetings recently. He noted that he is in a new position at work and his schedule changes on a daily basis; therefore it is difficult to commit to other things.  ● S. Tyance noted that it was a good meeting. |  |
| **12. BI-MONTHLY MEETING SELF-EVALUATION:** | |
| ● Members were reminded to complete the self-evaluation and hand it in to D. Lauzon.  ● The summary will be reviewed at the next meeting. |  |
| **13. TERMINATION OF REGULAR BOARD MEETING** | |
| **It was moved W. Anton and seconded by D. Boulanger that the regular meeting be adjourned at**  **7:50 p.m.** | Carried |