Geraldton District Hospital

Minutes of the

### Regular Board Meeting

Held in the Boardroom, Tuesday, March 7, 2017 at 5:30 p.m.

Present: Jamie McPherson Kathryn Legault Willy Anton

Voting Dorene Boulanger Dean Burke Ralph Humphreys

Sheri Taylor (T) Myrna Letourneau Chico Tschajka

Non-Voting Lucy Bonanno (T) Dr. Laine Dr. Zufelt

Diane Lauzon (recorder)

Regrets: Mark Wright

Voting

Regrets: Sylvie Duranceau Laurie Heerema

Non-Voting

Absent: Peter Shebagabow

Guest: Ian McPherson

# 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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| CALL TO ORDER | |
| 1.1.1 Welcome and Chair’s Opening Remarks:  ● The meeting was called to order at 5:32 p.m., by the Chair, J. McPherson.  ● The Treaty acknowledgement was read by the Chair.  1.1.2 Accreditation Update: I. McPherson:  ● I. McPherson reported that the accreditation discussion is a follow-up to the last meeting.  ● Members reviewed the attached document, page by page.  ● The following was noted.  1.3 Ethics Framework: I. McPherson noted that the ethics framework needs to be on the hospital website, as well as the Board agenda. Members decided to add the framework to the bottom of the agenda.  6.3 Environmental Scan: members noted that the history of past open houses/community forums indicates that not much response is received from the public. The hospital has a great deal of staff from all catchment areas.  8.3 Medical Bylaw: the Medical Bylaw document will be professionally revamped.  9.5 Resource Allocation: L. Bonanno informed the members that she utilizes HIROC’s matrix for decision-making and resource allocation. **She will show I. McPherson the document she utilizes to see if it is sufficient.**  9.8 Contingency Plans: **Code Grey will be attached to the next meeting package for review to see if preparations for disasters, such as generation failure, heating and cooling breakdowns, etc. is sufficient.**  ● Members reviewed the Governance Functioning Tool Action Plan.  ● I. McPherson noted that he may have other documents to include for review at the next meeting.  1.1.3 Quality Improvement Plan : I. McPherson:  ● I. McPherson highlighted the Progress Report. No concerns were raised.  ● I. McPherson highlighted the Narrative. The following was noted.  -Add Volunteer Coordinator/Discharge Planner to Patient/Resident/Client Engagement.  ● I. McPherson highlighted the changes from last year on the Work Plan.  ● I. McPherson noted that the QIP will go to the next QIC for approval and a final copy will be included in the April Board package (information sharing only).   * 1. **Correspondence:**   1.2.1 OHA re: Health System Capacity Pressures:  ● For member information.  1.2.2 NW LHIN re: Important Notice:  ● For member information.    1.2.3 Broader Public Sector Executive Compensation Memo:  ● J. McPherson informed he Board members that more guidelines will be coming out regarding executive compensation.  ● He added that he and L. Bonanno will be attending a conference call regarding executive compensation this Friday.  1.2.4 Thank You Card from Tiffany Connors:  ● For member information.   * 1. **Education:**   1.3.1 GTGG: Sample Governance Audit Questionnaire (part 1):  ● Members went over the attached questionnaire.  ● **It was requested to attach the Letters Patent to the next meeting package.**  1.3.2 Governance to Governance Session:  ● J. McPherson reported that he and L. Bonanno participated in the G2G session. He added that Laura Kokocinski read a PowerPoint presentation word for word. There was not much room for discussion.  ● Both J. McPherson and L. Bonanno noted that busy times are ahead. |  |
| 2.0 ADOPTION OF THE AGENDA | |
| ● The following item was added to the agenda.  8.5 Availability of Services to Patients  **It was moved by D. Boulanger 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 – January 10, 2017:**  **4.2 Regular Board Meeting Minutes – February 7, 2017:**  **4.3 Medical Advisory Committee Minutes – January 23, 2017:**  **4.4 Healthier Community Advisory Committee Minutes – January 26, 2017:**  **4.5 ED Planning Committee Notes: February 9, 2017:**  **4.6 CCS Report:**  **4.7 CNO Report:**  **It was moved by R. Humphreys and seconded by W. Anton 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:**  ● Deferred.  **6.2 Individual Assessment:**  ● J. McPherson informed the Board members that the individual assessment on the OHA site is now ready.  ● D. Lauzon will email the link to the survey to all members.  ● J. McPherson added that the results are anonymous.  ● He added that the annual Board survey will be completed in May.  ● The deadline for completion of the individual assessment will be March 22/17.  **6.3 Fort Frances Foundation Article:**  ● **D. Lauzon will send a reminder email to J. McPherson to forward the article to L. Bonanno and M. Wright.**  **6.4 Board-Adopted Governance Policies:**  ● J. McPherson reported that some items will come out of the Bylaw and be put into the form of a policy.  ● **In process. Leave on the agenda.**  **6.5 Draft 2017/18 Annual Planning Cycle and Agenda Control:**  ● Members reviewed the draft agenda and noted that the education blocks should be filled in.  ● It was noted that a tour of the support services departments will be conducted at the April meeting.  **It was moved by C. Tschajka and seconded by D. Boulanger that the Board of Directors approves the Board Planning Cycle and Agenda Control 2017-2018.**  **6.6 Governance Process Policies (BOD-GP1 -17):**  ● Members reviewed the policies.  ● BOD-GP1 Code of Conduct: #3 refers to the Bylaw. Is this still part of the amended Bylaw or will it be turned into a policy? **L. Bonanno will follow-up.** Discussion was held regarding Board members meeting attendance. Item #9 will be amended to read “in the event that attendance becomes a concern, the Board Chair may initiate the following measures.” Item #11 will be amended to include … at the next Board “in-camera” meeting.  ● BOD-GP2 Governance Process: **the policy will be reviewed and compared with the Letters Patent.**  ● BOD-GP9 Board Planning Cycle and Agenda Control: the Board discussed drafting the agenda by calendar year or fiscal year. In the end it was decided to draft the agenda at the September Board meetings.  ● BOD-GP11 Handling of Operational Complaints: members inquired about the process if the complaint is against a Board member. **L. Bonanno was asked to follow-up.**  ● BOD-GP13 Individual Board Member Assessment: the date was changed from January to March of each year.  ● BOD-GP14 Board Member Resignation Gift: item #2 was amended. Brief discussion was held regarding location for framing of prints. **D. Lauzon was requested to verify with Justin at Master Prints.**  ● BOD-GP16 Deputations/Presentations to the Board: items #1 and #4 were revised.  ● BOD-GP17 Conflict of Interest: #6 and the reference were deleted.  It was moved by S. Taylor and seconded by D. Burke to approve the Governance Process policies and procedures as reviewed and amended.  **6.7 Electronic Package:**  ● J. McPherson stated that it costs a great deal of money to mail the Board packages. He suggested that the package be emailed to everyone and those who wish to have a hard copy can pick it up from the hospital.  ● Members gave D. Lauzon their preferences. | **Carried**  **Carried** |
| **7.0 CAPITAL PLAN ED RELOCATION PROJECT UPDATE** | |
| ● L. Bonanno reported that the ED Planning Committee has another meeting this Thursday to review more drafts.  ● L. Bonanno added that she will be meeting with Dave Beazley later this week.  ● L. Bonanno reported that she received a letter of support from Cancer Care to help with the Stage 2 submission.  ● L. Bonanno added that things are moving along well. |  |
| **8.0 NEW BUSINESS** | |
| 8.1 Investment Portfolio RFP:  ● L. Bonanno noted that as discussed at the last meeting, it has been 5 years since the last RFP was done for the hospital investment portfolio.  ● Leave on agenda.  8.2 Ethics Framework:  ● J. McPherson noted that the Board needs to determine what they wish to have regarding ethics at the bottom of the agenda.  ● A brief discussion was held and it was decided that clarification is required from l. McPherson regarding exactly what is required for accreditation regarding ethics.  ● Discussed referring to the hospital’s ethics framework.  8.3 Patient Story:  ● L. Bonanno read a complaint email that she received. She omitted all names for confidentiality purposes.  ● L. Bonanno thanked Dr. Zufelt for his help in responding to the email/complaint.  ● L. Bonanno also read her response to the original email, which was sent following an investigation.  ● She also read the complaint’s response to her response.  ● D. Lauzon inquired if such stories should be discussed during the in-camera session. J. McPherson responded that permission is required to discuss patient stories and the discussion is supposed to be public.  ● L. Bonanno noted that permission was received to share the story but the complainant wished to have all names omitted.  ● J. McPherson noted that if members can figure out who the individual(s) is, they are not to mention it.  ● D. Lauzon informed the members that the complaint form is available on the hospital website.  8.4 Executive Compensation Report:  ● For member information.  ● J. McPherson and L. Bonanno will be attending the executive compensation update teleconference.  8.5 Availability of Services to Patients:  ● D. Boulanger was asked by an individual why Wi-Fi is not available to hospital patients.  ● D. Lauzon responded that Wi-Fi is not available to staff either.  ● L. Bonanno responded that Wi-Fi is costly.  ● J. McPherson requested that L. Bonanno inquire with other hospitals to see if they provide Wi-Fi to patients. |  |
| **9.0 LINKAGES AND PARTNERSHIPS** | |
| 9.1 QIC Meeting Minutes and Score Card – February 16, 2017:  ● J. McPherson asked if there were any questions or concerns regarding the minutes.  ● It was noted that it should be noted in item #1 that J. McPherson’s comments would be addressed throughout the meeting.  ● J. McPherson reported that with the new Bylaw, approval of the QIC minutes will not be required.  It was moved by R. Humphreys and seconded by K. Legault to approve the February 16/17 Quality Improvement Committee minutes as clarified.  9.2 Geraldton District Hospital Auxiliary (GDHA) Report:  ● M. Letourneau highlighted her report.  ● M. Letourneau brought the GDHA banner to show the Board members.  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:**  ● Dr. Laine highlighted the lengthy list of physician privileges.  **It was moved by C. Tschajka and seconded by W. Anton that the Board of Directors approves the list of physician privileges.** | **Carried** |
| **11.0 CHIEF EXECUTIVE OFFICER (CEO) REPORT** | |
| ● J. McPherson asked if there were any questions or concerns regarding the CEO report.  ● L. Bonanno briefed about the Surge Online Learning program.  **It was moved by D. Burke and seconded by K. Legault that the report from the CEO be accepted.** | **Carried** |
| **12.0 ROUND TABLE DISCUSSION** | |
| ● Board members all noted that it was a great meeting.  ● S. Taylor added that she enjoyed reviewing the governance policies. The review will also help her in her job. It was a good learning opportunity.  ● D. Boulanger added that it was good to be back in person at the meeting.  ● M. Letourneau added that everyone seems happy with the foot care services provided in the hospital. |  |
| **13.0 BI-MONTHLY MEETING EVALUATION:** | |
| ● J. McPherson reported that the meeting evaluation is to evaluate the February governance session.  ● **The summary will be reviewed at the next meeting.**  ● At this time, the Board moved to the in-camera session before adjourning the regular meeting.  ● Following the in-camera session, the Board then returned to the regular Board meeting  **It was moved by M. Letourneau and seconded by C. Tschajka that Jamie McPherson can sign the permanent contract on behalf of the Board of Directors, as amended in the in-camera meeting.** | **Carried** |
| **14.0 TERMINATION OF REGULAR BOARD MEETING** | |
| **It was moved by R. Humphreys and seconded by C. Tschajka that the regular meeting be adjourned at 7:49 p.m.** | Carried |

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Board Chair Signature