 Geraldton District Hospital

Minutes of the

### Regular Board Meeting

Held in the Boardroom at the Geraldton District Hospital, Tuesday, September 10, 2019 at 5:30 p.m.

Present: Dorene Boulanger Victor Tschajka Jamie McPherson

Voting Cheryl Checkley Kathryn Legault Ralph Humphreys

Willy Anton Terry Popowich Mark Wright

Sanna Humphreys

Non-Voting Lucy Bonanno Laurie Heerema Adam Kolisnyk

Dr. Ryan Zufelt Brigitte Ouellette Dr. Roy Laine

Ian McPherson Jena Goulet (recorder)

Regrets: Mandy LaBelle

Voting

Regrets:

Non-Voting

Guests: Scott Potts Albert Tjong (T) Lindy Roy

# 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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| CALL TO ORDER | | | | |
| **1.1 Welcome and Chair’s Opening Remarks:**  ● The meeting was called to order at 5:37 p.m., by the Chair, D. Boulanger.  ● D. Boulanger read the Treaty Acknowledgement.  **1.2 Appointment of Cheryl Checkley**  ● D. Boulanger introduced C. Checkley as the newest member of the Board.  ● C. Checkley expressed that she is the new Rep. for First Nations  **It was moved by V. Tschajka and seconded by W. Anton to accept the Appointment as presented.**  **CARRIED**  **1.3 RBC Investment Update**  ● A. Tjong presented and explained the charts for the GDH’s investments.  ● The bulk of investments are in Canadian bonds (2.5 million), 1 million is in GIC’s, and 1 million is in high interest savings which are completely liquid.  ● 3 other slices are equity held in Canadian, American, and International stocks. GDH equity is at 12%.  ● J. McPherson asked if our policies state that our equity should not exceed 10%. A. Tjong states that we are within our variance but, will check the policy to be sure that it is allowed.  ● Equity markets are doing really well for 2019. The portfolio is slowly growing.  ● T. Popowich inquired about what is being done with the $285,000 return. A. Kolisnyk says a new capital list is being prepared. L. Bonanno suggested that some of the funds should be kept for landscaping once the ER Project is complete.  ● M. Wright asked when the Board can see the new capital list. A. Kolisnyk assured him that it can be done for the next Board meeting. | | | **RES 73** | |
| 2.0 DECLARATION OF CONFLICTS OF INTEREST | | | | |
| ● Nothing declared. | | |  | |
| **3.0 ADOPTION OF THE AGENDA** | | | | |
| ● D. Boulanger asked if there were any amendments to the agenda.  ● Add 7.5 – ER Ad Hoc Committee Meeting Minutes – August 19, 2019 11.6, add 7.5  ● Add 11.6 – Treasurer’s Position  **It was moved by T. Popowich and seconded by V. Tschajka that the agenda be approved as amended.**  **CARRIED** | | | **RES 74** | |
| **4.0 PRESENTATIONS** | | | | |
| **4.1 Performance Management System**  ● L. Roy states that the 360 Assessment is a system that will be implemented for all Managers by request of the Board.  ● The Performance Management System will evaluate the competencies that are expected with questions that go along with them.  ● L. Roy expresses that these are very thoughtful and specific questions to help managers identify areas for improvement and highlight areas where they excel.  ● L. Roy is working with Brown Consulting and the System should be completed by mid-October. Results of the assessment should be ready for presentation for the Board meeting in November.  ● The 360 Assessment should be done every two to three years but it will be revisited in 12 months from the initial assessment since this is a new program.  ● T. Popowich asked when the assessments will be performed. Fiscal year or calendar year?  ● L. Roy states that fiscal year (end of March) would be easiest to have assessments done.  **4.2 GDH Website Presentation**  ● I. McPherson gave a tour of the site  ● V. Tschajka noticed that there are no Cree or Ojibway language options.  ● I. McPherson states that these options are not available for Chrome. He will look into other options in order to have the languages available on the site.  ● I. McPherson showed the Board members how to navigate the site.  ● Comment cards will be available to fill out online in the near future.  ● The hospital will be able to keep ER Project progress up to date for the public.  **4.3 Staff Satisfaction Survey Results**  ● I. McPherson very happy with results. More staff participation and feedback.  ● There was an increase in participation with 223 comments made by staff. This helped greatly when forming the action plan.  ●The staff surveys are a good outlet for staff to communicate.  ● We achieved 77% satisfaction, which is 1% higher than last time.  **4.4 Staff Satisfaction Survey – Action Plan**  ● I. McPherson says that the action plan was mostly based from feedback and comments made by staff.  ● 2 Areas of Improvement were carried over from the 2017 Action Plan. 2 new Areas were added: Bullying in the Workplace and Education/Training.  ● Many items are already in action.  ● J. McPherson asked who is in charge of making sure improvements are being met and if there are due dates for completion. L. Bonanno expresses that it can be very difficult for one person to be held accountable for all staff and that the Action Plan is being done as a group effort.  ● J. McPherson asked when the Board will see the progress of the plan. L. Bonanno assured him that it will be looked into as to when results can be presented.  ● V. Tschajka asked where the bullying is taking place. L. Bonanno expressed that the bullying is occurring between staff members and that a plan is being made to rectify it.  **4.5 ER Project Updates**  ● S. Potts presented the most up to date information on the ER Project. He explained the key activities and upcoming activities which are outlined.  ● Ministry gave their approval July 31st, 2019 and awarded a grant increase of approximately $18,000,000 based on a cost savings of $1,300,000. The savings are to be used towards change orders and complications that may arise.  ● Tom Jones was awarded the contract and excavation began September 9th, 2019.  ● The amending agreement was signed off by L. Bonanno but we have not heard back from the ministry.  ● As progress certificates are produced, they are sent to the ministry in order to release more funds for the project.  ● Committee meetings and site construction meetings between contractors, architects, engineers, and hospital managers are being held frequently to ensure the project is moving forward and issues are being resolved.  ● Focus right now is excavation with concrete starting in the next two weeks.  ● The Board inquired when the project will be completed. S. Potts replied that an 18 month schedule was submitted, bringing us into Spring of 2021.  ● T. Popowich asked if there is a penalty system in place for missed due dates. S. Potts states that there is not.  ● M. Wright asked if S. Potts will be on site often. S. Potts replied that he will have as much site presence as possible during the project.  ● The Board asked when the official announcement will be made. M. Wright says that he will have a better idea about the date by tomorrow  ● V. Tschajka inquired about pictures being taken of the progress. S. Potts states that the contractors will be taking pictures as they go.  ● M. Wright thanked S. Potts for all of the work so far and for making sure this project is getting done.  ● S. Potts also spoke about the sprinkler system. This will be a phase schedule to start Summer 2020. He will work with Tom Jones and a subcontractors to make sure it is well executed as to disturb residence as little as possible.  **4.6 Patient Stories**  ● L. Bonanno expressed a complaint from the Longlake #58 Reserve.  ● L. Bonanno and L. Heerema have looked into it and are meeting with the affected member and an Elder from the band at a later date to resolve the issue. | | |  | |
| **5.0 CORRESPONDENCE** | | | | |
| 5.1 Thank you card – M. Marino    5.2 Thank you letter – M. Hebert  5.3 Thank you card – K. Lawson  5.4 Thank you card – C. Duvall  5.5 Donation – Calgary Foundation  ● M. Wright explained that there is a mining company that is working in the area and that they gave the hospital a $15,000 donation.  ● L. Bonanno expressed that this will be used towards the Chemo Hood.  5.6 NW Ontario Hospital – Electronic Patient Reports | | |  | |
| **6.0 EDUCATION** | | | | |
| **6.1 Guide to Good Governance – Chapter 5 pg. 99 - 106**  ● Page 99 – J. McPherson asked if all hospitals do credentialing the same way. L. Bonanno disclosed that yes, it is all done the same way.  ● Page 101 – the Public Hospital Act is used for credentialing.  ● Page 105 – J. McPherson inquired about the MAC By Law, asking if the committee is supposed to be comprised of physicians only or if there are other committee members allowed. The Board explained that physicians are the only members allowed to vote.  **6.2 Board Retreat 2019**  ● L. Bonanno expressed that there will be no Board Retreat this year. She attended a meeting with all CEO’s east of Thunder Bay and there is a lot of confusion currently regarding OHTs.  ● A discussion took place about the meeting and what current issues are happening in the region.  **6.3 Financial Management & Budgeting**  ● Educational information presented to the Board for reading. | | |  | |
| **7.0 CONSENT AGENDA** | | | | |
| **7.1 Regular Board Meeting Minutes – June 4, 2019:**  ● Nothing noted.  **7.2 Medical Advisory Committee Meeting Minutes – Next meeting September 19, 2019**  ● Nothing noted.  **7.3 CCS Report:**  ● Nothing noted.  **7.4 CNE Report:**  ● Nothing noted.  **7.5 ER Project Ad Hoc Committee Meeting Minutes – August 19, 2019**  **●** D. Boulanger asked why the landscaping is not being funded by the project. T. Popowich explained that the funding was for the building and not for the surroundings. L. Bonanno expressed that she is working with the architect to come up with something beautiful for the hospital grounds.  **It was moved by V. Tschajka and seconded by T. Popowich to accept the Consent Agenda as amended.**  **CARRIED** | | | **RES 75** | |
| **8.0 ITEMS LIFTED FROM CONSENT AGENDA** | | | | |
| **8.1 ER Project Ad Hoc Committee Meeting Minutes**  **●** A discussion was had about if the ER Project Ad Hoc Committee Meeting Minutes belongs in the Consent Agenda or if it should be moved elsewhere during the Board Meeting. It was agreed that it should stay in the Consent Agenda.  **It was moved by J. McPherson and seconded by R. Humphreys to accept the Consent Agenda as stated.**  **CARRIED** | | | **RES 76** | |
| **9.0 BUSINESS ARISING FROM MINUTES** | | | | |
| **9.1**  ● Nothing noted. | | |  | |
| 1. **CAPITAL PLAN / CFO REPORT** | | | | |
| **10.1 Finance & Patient Statistics – Q1**  ● The Geraldton District Hospital is in a very comfortable position.  ● Page 5 – Revenues – interest income is being used organizationally.  ● The hospital expenses are under budget.  ● The plan for the surplus is going to be put into the capital projects.  ● The financial position of the hospital is in very good shape with an upwards trend.  ● The hospital has had a positive cash flow since May/June.  ● T. Popowich asked where the surplus is being applied. A. Kolisnyk explained that the Chemo Hood was paid for by the donation made by the Calgary Foundation. Therefore, the plan is to use the surplus to update the nursing residence one room at a time. There is no timeline yet. Management is looking into contractors and quotes at the moment.  **10.2 Risk Management**  ● A. Kolisnyk stated that for the most part, everything has stayed the same.  ● The Board addressed the humidity control issues in pharmacy. A. Kolisnyk explained that management is looking at a large scale project for a long term solution.  ● It was suggested that the hospital use the staff educator more to help cut down on costs.  ● T. Popowich asked if all staffing positions are full. He suggested using the surplus to hire more staff. L. Bonanno expressed that the hospital is very highly staffed for such a small hospital already. Management is addressing the staffing issues in LTC and has invested in a few new staff members already  ● S. Humphreys asked if there is a lack of negative pressure rooms. L. Heerema explained that the new ER will have a new isolation room with updated technologies. The staff is properly trained in handling isolation patients so there is very low risk of spreading infection. | | |  | |
| |  |  |  | | --- | --- | --- | | **11.0 NEW BUSINESS** | | | | **11.1 Board Planning Cycle 2019-2020 (Draft)**  ● D. Boulanger noticed that December is a very light month.  ● J. McPherson suggested that Staff Survey Reviews be added to December.  **11.2 Board Committees & Representatives (Draft)**  ● I. McPherson to replace A. Kolisnyk’s position on the Audit Committee and the Quality Improvement Committee.  ● T. Popowich to be added to the HCAC Committee.  ● C. Checkley to the added to the Nominating Committee and the Quality Improvement Committee. She is already a member of the HCAC Committee through work.  ● S. Humphreys to be added to the Nominating Committee, the HCAC Committee, and the Quality Improvement Committee.  **11.3 Board Members’ Roles and Responsibilities**  ● Signed and handed in to J. Goulet by all Board Members.  **11.4 Confidentiality Agreement**  ● Signed and handed in to J. Goulet by all Board Members.  **11.5 Incident Reports (RL6) – May to July 2019**  ● T. Popowich voiced his concerns with the number of falls in LTC. L. Heerema explained that the patients’ conditions are progressing which means that they require more assistance. This causes falls to happen more frequently.  **11.6 Treasurer’s Position**  ● J. McPherson declared a conflict since I. McPherson is temporarily taking over the CFO position.  ● Once J. McPherson left the room, the Board voted that K. Legault act as an Interim Treasurer while I. McPherson is acting as CFO.  **It was moved by M. Wright and seconded by T. Popowich to accept the Appointment of Kathryn Legault as Interim Treasurer to replace Jamie McPherson.** | | **RES 76-A** |   **12.0 LINKAGES & PARTNERSHIPS** | | | | |
| **12.1 QIC Meeting Minutes and Score Card – June 20, 2019**  ● Nothing noted.  ● Score card not attached.  ● The next QIC meeting is scheduled for September 19, 2019.    **12.2 HCAC Meeting Minutes – June 12, 2019**  ● The Board showed interest in the possible Meals on Wheels program.  ●There were numerous concerns raised about having a truck that can keep food fresh, safe food handling, prices, and volunteer staffing.  ● The next HCAC meeting is scheduled for September 25, 2019.  **12.3 Geraldton District Hospital Auxiliary Report**  ● S. Humphreys mentioned that there is a bake sale taking place on Saturday, September 28th, 2019.  It was moved by R. Humphreys and seconded by J. McPherson that the Linkage and Partnership reports be accepted as discussed.  CARRIED | | **RES 77** | | |
| **13.0 CEO REPORT:** | | | | |
| ● L. Bonanno discussed that the Geraldton District Hospital has a new part time physician starting.  ● L. Bonanno also mentioned that the AGM report was sent out in the mail, the website was finished and is happy that meetings are starting up again after the summer break.  ● website finished  ● L. Bonanno stated that the mock Code Orange drill went well.  ● The Code Green from August 28th, 2019 was discussed. L. Bonanno explained that it was a staff error that caused a poisonous gas that circulated very quickly. The entire hospital needed to be evacuated and it was executed by all staff sufficiently and everyone worked together well. L. Heerema assured the Board members that Ministry of Labour and the Ministry of Health were both notified.  **It was moved by J. McPherson and seconded by W. Anton that the report from the CEO be approved as presented.**  CARRIED | | **RES 78** | | |
| |  |  | | --- | --- | | **14.0 DECISION OF BOARD:** | | | **14.1 Physician Privileges**  ● Deferred until October 2019. MAC Meeting being held September 19, 2019. |  | | |  |  |  | | --- | --- | --- | | **15.0 ROUND TABLE DISCUSSION** | | | | ● Both C. Checkley and S. Humphreys were welcomed to the Board of Directors.  ● All members agreed that the meeting went well.  ● C. Checkley and S. Humphreys expressed that they are both excited to be a part of the Board.  ● R. Kolisnyk expressed that he enjoyed his time with the hospital and the Board. He is very proud of the work that has been accomplished with the help of Management and the Board of Directors.  ● Everyone is looking forward to the new year. |  | | | | | | |
| |  |  |  |  |  |  |  | | --- | --- | --- | --- | --- | --- | --- | | |  |  | | --- | --- | | **16.0 MONTHLY MEETING EVALUATION** | | | ● The Evaluation summary was provided to members. They were filled out and handed back to J. Goulet. |  | | | | | **17.0 IN CAMERA MEETING** | | | | ● No In Camera Meeting held. |  | | | **18.0 TERMINATION OF IN CAMERA MEETING** | | | | ● Nothing to report. |  | | | **19.0 MEETING WITH MANAGEMENT (CEO ONLY)** | | | | ● Nothing to report at this time. |  | | | | | | |
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Board Chair Signature