

**LAKE OF THE WOODS DISTRICT HOSPITAL
Regular Meeting of the Board of Directors
Thursday, December 6, 2007, 5:10 p.m. Boardroom**

PRESENT: B. Anderson, M. Balcaen, D. Baldwin, J. Clarke, C. Edie, Dr. K. MacDonald, M. Matheson, B. McCallum, O. Mejia, J. Reid (Chair), F. Richardson, L. Brown, C. Gasparini, M. Mymryk

REGRETS: A. Cameron, Dr. J. Kroeker, R. Lamb, Dr. S. Sas,

ABSENT: E. Skead

AGENDA ITEMS	DISCUSSION	ACTION
1. Call to Order	J. Reid, Chair, called the meeting to order at 5:00 p.m.	
2. Adoption of Agenda	Moved by M. Balcaen and seconded by F. Richardson that the regular meeting agenda be adopted with the addition of Item 8.1 - Wabaseemoong Visit; Item 8.2 – Staff Town Hall Meetings; Item 8.3 – Update on Community Linkages; Item 10.2 – Board Key Themes.	Motion#07/12/1 Carried
3. Election of Officers	Mr. Balcaen, Chief Executive Officer, assumed the position of Chair for the next portion of the meeting. Elections for the positions of Board Chair and Board Vice Chair for a one year term of office followed. Mr. Balcaen called for nominations from the floor for Board Chair. Moved by J. Clarke and seconded by Dr. K. MacDonald that Joan Reid be nominated for the position of Chair of the Board of Directors. There being no further nominations, Joan Reid was acclaimed Chair of the Board of Directors. Upon assuming the position of Chair, J. Reid thanked Board members for their support and called for nominations for the position of Vice Chair. Moved by B. Anderson and seconded by O. Mejia that Marge Matheson be nominated for the position of Vice Chair of the Board of Directors. There being no further nominations, Marge Matheson was acclaimed Vice Chair of the Board of Directors. Moved by F. Richardson and seconded by B. McCallum that Mark Balcaen be appointed Secretary-Treasurer of the Board of Directors.	Motion#07/12/2 Carried Motion#07/12/3 Carried Motion#07/12/4 carried
4. Self Evaluation of Governance Process	Meeting Monitor Report M. Balcaen reviewed his report as circulated (Attachment #1). D. Baldwin was appointed meeting monitor for the current meeting.	
5. Adoption of Minutes	Moved by B. Anderson and seconded by B. McCallum that the minutes of the regular meeting of the Board of Directors held on November 1, 2007 be adopted as circulated.	Motion#07/12/5 Carried
6. Business Arising	#5 M. Balcaen has contacted M. Copenace requesting that he contact Sioux Lookout for their template. Board members were informed that a number of cultural awareness sessions have recently been presented – Residential School Survivors by Merv and Tina Copenace and Smudging Ceremony. M. Copenace will be requested to circulate future session notices to Board. #6.1 GP and BC Monitoring Report Schedule to be circulated to Board members on Friday, December 7, 2007 by email.	S. Winter to contact M. Copenace S. Winter Information
7. Presentations	Dr. Sven Pedersen joined the meeting and provided Board members with information relating to the Family Health Network (FHN) and the Family Health Team (FHT) recently formed to improve physician recruitment which would in turn improve service availability to patients. Dr. Pedersen plays a major role in these organizations as the lead physician in the FHT, the President of the Kenora/Keewatin Medical Society, a managing partner of the Kenora Medical Associates and a board member of the not for profit	

	<p>corporation that operates the clinic building.</p> <p>The FHN was formed in April 2006 and consists of all 16 family physicians practicing in the community. Funding is based on a modified capitation system with bonuses for comprehensive and preventative care.</p> <p>The FHT was established to help provide more comprehensive service to patients. On paper, this system consists of para-health professionals only but in reality the team also includes physicians and other professionals. Earlier this year, Mr. R. Belair was hired as Executive Director of the Sunset Country Family Health Team. Computerization to network all clinic sites (Kenora, Keewatin, Daly) is currently underway.</p> <p>A number of issues of concern were identified by Dr. Pedersen and included the Rurality Index of Ontario (RIO), a complex formula based on a wide variety of criteria used to determine physician funding. A major factor in the RIO is distance from major referral centres and as Kenora is defined as a regional referral centre (number of specialists), physicians here are not eligible for funding associated with this. This is a major impediment to recruitment and lobbying of the government for a revision to this is being initiated. It was noted that being designated at a referral center in itself is a positive to recruitment and to patient care.</p> <p>Other issues of concern related to focused practice and exemptions for physicians practicing this way (ie. chemo and MECCA).</p> <p>In conclusion, Dr. Pedersen noted the importance of continued dialogue between the hospital and physicians. To this end it was suggested that informal meetings between the hospital board and the FHT board be scheduled regularly to discuss ways in which we may work together to enhance patient care.</p>	
8. Ownership/ Linkages	<p>8.1 Foundation Meeting Report</p> <p>J. Clarke informed Board members that the Strategic Plan Rollout was presented on November 21, 2007 to members of the Foundation Board. Issues identified included difficulties in fundraising for non visible projects such as roof repairs. A list of items purchased by the Foundation was provided to members.</p> <p>It was suggested that interest in partnering with the Foundation, the City of Kenora, LOWBIC and Lakehead University to investigate research and economic development opportunities should be explored. As a result of these discussions it was agreed that the two Boards would continue to meet informally on a quarterly basis. The next meeting is scheduled for February 13, 2008.</p>	Information
	<p>8.2 Site Visit to Wabaseemoong</p> <p>B. Anderson and J. Clarke accompanied by Jeff Leroux of Community Programs traveled to the community of Whitedog on November 29, 2007. Board members met with approximately 30 teachers and aides at the school followed by a meeting with Eric Fisher, Chief and Council. Board members were provided with good feedback relating to a number of issues including access to care (distance to Kenora and limited services available on reserve). Issues relating to perceived discrimination were also identified. A letter has been sent thanking Chief Fisher for allowing access to the community and a commitment to respond by January 31, 2008 to issues identified.</p> <p>P. Dryden-Holmstrom and J. Leroux were thanked for facilitating this visit. Board members, in conjunction with M. Copenace, are planning on a number of visits to other communities in the new year</p>	Information
	<p>8.3 Staff Town Hall Meeting</p> <p>J. Clarke reported that hospital staff members were provided with two opportunities to meet with Board members to hear results of their community engagement sessions and resulting strategic plan. Although 13 employees in total attended these sessions, it was suggested that additional sessions should be scheduled in the new year with the hope that attendance would</p>	Information

	<p>increase. It was noted that steps in the plan, developed by the Board, will be forwarded to administration and staff for consideration.</p> <p>Comments by staff included:</p> <ul style="list-style-type: none"> - Felt the strategic plan is going in the right direction. - Staff (speaking as stakeholders) wondered why they had not been invited to participate in the process prior to these dates. In response, Board members confirmed that improvement in this area will be a focus in their future work. - It was felt that rather than focusing on a new hospital, which would take years to come to fruition, more extensive renovations should be considered. - It was suggested that the Board consider working with Treaty #3 and the federal government to develop a distinctive model of care for First Nations clients. - Staff requested that they be more informed and requested a copy of the strategic plan. - Staff felt this was an interesting and valuable process. 	
	<p>8.4 Update on Community Linkages</p> <p>J. Clarke reported that, to date, Board members have made 378 individual contacts as part of their community engagement process. In November, meetings were held with the Kenora Ministerial Association (2nd meeting), the Hospital Foundation, Wabaseemoong Independent First Nations representatives, Hospital staff members (two occasions). A meeting took place with the Child Development Centre Board of Directors regarding Policy Governance.</p>	Information
9. Ends Items for Decision	<p>9.1 Revised Ends Policies for Approval</p> <p>Moved by D. Baldwin and seconded by B. Anderson that the Board of Directors approve the following policies as revised:</p> <ul style="list-style-type: none"> E Mission E-1 People Achieve Optimum Outcomes E-2 Information for Positive Lifestyle Choices E-3 Continuum of Services that Support Optimum Health <p>Comments: First bullet point in E – Mission Discussion took place regarding the concept of “centre of excellence” and whether the hospital can fulfill this requirement in a meaningful way. It was agreed that the term “center of excellence” requires additional discussion and definition.</p>	Motion#07/12/6 carried
10. Governance Process Items	<p>10.1 Revised Governance Policies for Approval</p> <p>Moved by F. Richardson and seconded by J. Clarke that the Board of Directors approve the following policies as revised:</p> <ul style="list-style-type: none"> GP-1 Vision & Values GP-12 Board Linkage with Community GP-18 Handling of Operation Complaints BC-4 Monitoring CEO Performance 	Motion#07/12/7 Carried
	<p>10.2 Board Key Themes</p> <p>A document, developed by J. Clarke, outlining the issues currently facing the Board of Directors was circulated for review. (Attachment #2) Areas identified in this chart which have to date been accomplished builds credibility for the Board and hospital. Board members asked to consider on which committees they would like to serve in 2008 and contact S. Winter before next meeting with their preferences.</p>	Board members to contact S. Winter
11. Executive Limitations Items	<p>11.1 Revised Executive Limitations Policies for Approval</p> <p>Moved by O. Kejia and seconded by J. Clarke that the Board of Directors approve the following policies as revised:</p> <ul style="list-style-type: none"> EL-4 Treatment of Clients EL-5 Treatment of Staff and Volunteers EL-10 Partnerships 	Motion#07/12/8 Carried

	Moved by M. Matheson and seconded by D. Baldwin that the Board of Directors approve the deletion of policy EL-13 Access to Primary Care.	Motion#07/12/9 Carried
	11.2 EL-2 Financial Condition & Activities After review of policy EL-2 Financial Condition & Activities, it was agreed there was no need to change the policy.	
	11.3 EL-5 Treatment of Staff & Volunteers After review of policy EL-5 Treatment of Staff & Volunteers, it was agreed there was no need to change the policy.	
12. Monitoring CEO Performance	<p>12.1 EL-2 Financial Condition & Activities</p> <p>Moved by J. Clarke and seconded by D. Baldwin that the Board of Directors has assessed the monitoring report on EL-2 Financial Condition & Activities and found that it demonstrated compliance with a reasonable interpretation of the policy.</p> <p>12.2 EL-5 Treatment of Staff & Volunteers</p> <p>Moved by M. Matheson and seconded by O. Mejia that the Board of Directors has assessed the monitoring report on EL-5 Treatment of Staff & Volunteers and found that it demonstrated compliance with a reasonable interpretation of the policy.</p> <p>Comments included:</p> <ul style="list-style-type: none"> - Board members questioned the evidence provided in #2 which stated that 100% of new staff has received orientation while results of the staff satisfaction survey indicate that 16% say they have not received the information needed to do their job properly. Discussion followed regarding relevance and wording of a number of questions in the staff satisfaction survey. It was noted that the OHA is investigating a survey similar to that currently being done to determine patient satisfaction which will evaluate staff satisfaction more effectively than the one now being used at LWDH. - Include the number of results out of possible results or total number of respondents. - Include definition of ratings on each report. M. Balcaen will consult with J. Moore regarding compliant, non compliant, partially compliant. - Need to identify how compliance will eventually be met if currently not compliant. - #1 - are policies reviewed on a schedule and how are they measured. - #1 - management was complimented on the increase in the number of performance appraisals completed. - #2 - evidence cited is not a measure of compliance. 	<p>Motion#07/12/10 carried</p> <p>Motion#07/12/11 carried</p>
13. Monitoring Board Performance	<p>13.1 GP-18 Ownership/Linkages Terms of Reference</p> <p>Moved by O. Mejia and seconded by D. Baldwin that the Board of directors has assessed the monitoring report on GP 18 Ownership/Linkages Terms of Reference and found that it demonstrated compliance with a reasonable interpretation of the policy.</p> <p>J. Clarke noted that section #1 – Product was the least in compliance and actions to improve this were identified on page 2 of the report. J. Clarke recommended that changes be made to the policy incorporating details in his monitoring report. The revised policy will be presented at the January meeting of the Board for consideration and approval.</p>	Motion#07/12/12 Carried
14. Information Requested by the Board	<p>14.1 CEO Report</p> <p>M. Balcaen's report was circulated for review. (Attachment #2)</p> <p>Additional comments:</p>	Information

	<p>Staff Recognition Event took place on November 27, 2007 where awards were presented to employees for 10, 15, 20, 25, and 30 years of service. Retirees were also recognized.</p> <p>In response to a question, M. Balcaen informed Board members that compensation and benefits of management staff are currently being discussed. General results of these discussions will be provided to Board members in January.</p> <p>14.2 OHA HealthAchieve Reports</p> <p>Written reports from F. Richardson, C. Edie, D. Baldwin and B. McCallum were provided to Board members in their meeting package for review. The importance of extracting information pertinent to the Board from these sessions was noted.</p>	
15. Adjournment	Moved by D. Baldwin that the regular meeting be adjourned at 8:16 p.m.	Motion#07/12/13 Carried

Chair

Chief Executive Officer

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