

**LAKE OF THE WOODS DISTRICT HOSPITAL**  
**Regular Meeting of the Board of Directors**  
**Thursday, September 5, 2013**  
**Hospital Boardroom**

**PRESENT:** B. Anderson, M. Balcaen (via telephone), K. Dawe, C. Gasparini, G. Kakeeway, Dr. J.K. MacDonald, D. Monteith, M. Mymryk, A. Pringle, H. Redsky, J. Reid, F. Richardson (Chair), Dr. M. Spencer

**REGRETS:** K. Roehrig and T. Stevens

**GUEST(S):** Dr. M. Christensen, Dentist

AGENDA ITEMS	DISCUSSION	ACTION
1. <b>Call to Order</b>	F. Richardson, Chair, called the meeting to order at 5:02 p.m.	
2. <b>Adoption of Agenda</b>	<b>Moved</b> by D. Monteith and <b>seconded</b> by B. Anderson that the regular meeting agenda be approved as circulated.	Motion#13/9/1 Carried
3. <b>Adoption of Minutes</b>	<b>Moved</b> by A. Pringle and <b>seconded</b> by D. Monteith that the minutes of the Regular Meeting of the Board of Directors held on June 6, 2013 be approved as circulated.	Motion#13/9/2 Carried
4. <b>Business Arising</b>	No business arising.	
5. <b>Education</b>	<p><b>5.1 The Role of Dentistry</b></p> <p>Dr. M. Christensen, Dentist, provided a presentation on the causes and effects of "Baby Bottle Tooth Decay." Dr. Christensen briefly outlined the process of getting patients into the Hospital Operating Room; obtaining consent is the most difficult obstacle. The teeth are pulled or repaired all at once, while the child is under general anesthesia. At LWDH stainless steel crowns are utilized because they are widely researched and have a high success rate. Standard of care has increased, and as a result dentists do not have as many adult patients with serious tooth decay that requires procedures done in the LWDH OR. The Province of Ontario and the NWHU have focused on the education of parents, which has been beneficial.</p>	Information
6. <b>Committee Reports</b>	<p><b>Committee Membership 2013/14</b></p> <p>After discussion, 2013/14 Committee memberships were set and initial meeting dates scheduled (attached to these minutes).</p>	Information
	<p><b>6.1 Ownership/Linkages Committee</b></p> <p>The next meeting is scheduled for Wednesday September 11, 2013 at 4:30 p.m.</p>	Information
	<p><b>6.2 Governance Committee</b></p> <p>The next meeting is scheduled for Wednesday September 11, 2013 at 12:00 p.m.</p>	Information
	<p><b>6.3 Building a Future</b></p> <p>No report.</p>	
	<p><b>6.4 Quality</b></p> <p>F. Richardson reported:</p> <ul style="list-style-type: none"> <li>M. Stevenson presented on ER Wait Times for Admitted Patients and L. Mychalyszyn presented on the Current ALC Rates. LWDH is doing well in both of these areas.</li> </ul>	Information

	<ul style="list-style-type: none"> <li>B. Chisholm presented on the Inpatient and Outpatient Falls Subcommittee.</li> <li>B. Loepky noted that there were a total of 53 near-miss incidences reported for April 2013, which illustrates a culture of safety within the LWDH.</li> <li>The next meeting is scheduled for Tuesday September 17, 2013 at 12:30 p.m.</li> </ul>	
	<b>6.5 Governance Accreditation</b> No report.	
	<b>6.6 Nominating Committee</b> The next meeting is scheduled for Wednesday September 18, 2013 at 12:00 p.m.	Information
	<b>6.7 CEO Compensation and Evaluation Committee</b> No report.	
<b>7. Consent Agenda</b>	<b>Moved</b> by B. Anderson and <b>seconded</b> by D. Monteith that the Consent Agenda be approved.	Motion#13/9/3 carried
<b>8. Executive Limitations Items</b>	<b>8.1 EL-2 Planning - Financial - Review</b> After review and discussion of policy EL-2 Planning - Financial, it was agreed that there was no need to revise the policy at this time.	No change
	<b>8.2 EL-5 Treatment of Clients - Review</b> After review and discussion of policy EL-5 Treatment of Clients, it was agreed that there was no need to revise the policy at this time.	No change
<b>9. Monitoring CEO Performance</b>	<b>9.1 EL-2 Planning - Financial</b> <b>Moved</b> by D. Monteith and <b>seconded</b> by A. Pringle that the Board of Directors has assessed the monitoring report on EL-2 Planning - Financial and found that it demonstrated compliance with a reasonable interpretation of the policy.  Dr. J.K. MacDonald noted that these monitoring reports will be more difficult to complete in the future due to the Health System Funding Reform, which is unsettled, uncertain, and therefore problematic.	Motion#13/9/4 carried
	<b>9.2 EL-5 Treatment of Clients</b>  <b>Moved</b> by D. Monteith and <b>seconded</b> by B. Anderson that the Board of Directors has assessed the monitoring report on EL-5 Treatment of Clients and found that it demonstrated compliance with a reasonable interpretation of the policy with the exception of Item #1.1,  K. Dawe utilized data from the partially completed Patient Satisfaction Surveys. When the Survey is completed, the Board will be updated with the results	Motion#13/9/5 carried
<b>10. Monitoring Board Performance</b>	<b>10.1 GP-13 Board Linkages with Other Organizations</b> The monitoring report on GP-13 Board Linkages with Other Organizations, completed by A. Pringle, was reviewed.	Information

	<b>10.2 BC-2 Accountability of the CEO</b>  The monitoring report on BC-2 Accountability of the CEO, completed by H. Redsky, was reviewed.	Information
<b>11. Governance Process Items for Decision</b>	<b>11.1 Foundation Nomination for Approval</b>  <b>Moved</b> by A. Pringle and <b>seconded</b> by D. Monteith that the Board of Directors approves the nomination of Lois Bailey to the Lake of the Woods District Hospital Foundation Board of Directors.	Motion#13/9/6 carried
<b>12. Information Requested by the Board</b>	<b>11.1 President &amp; CEO Report</b>  M. Balcaen reviewed his report as circulated (attached).  <b>11.2 Chief of Staff Report</b>  Dr. MacDonald reviewed his report as circulated (attached). Those items of a confidential nature will be reviewed In Camera.  In addition, Dr. MacDonald noted a 6% increase in patients utilizing Telehealth and the Ontario Telemedicine Network (OTN). LWDH recently transferred the care of patients from Cancer Care Manitoba to Thunder Bay; 80% of these patients were seen on-site at LWDH by a visiting Oncologist, and 20% were done via OTN.  <b>11.3 VP Patient Services Report</b>  K. Dawe reviewed her report as circulated (attached). To date, 307 Patient Satisfaction Surveys have been received, and would like 450-500 responses.  <b>11.4 VP Community Programs Report</b>  M. Mymryk reviewed her report as circulated (attached).  <b>11.5 VP Corporate Services Report</b>  C. Gasparini reviewed her report as circulated (attached).  A brief update on the rental space was given.	Information
<b>13. Adjournment</b>	The regular meeting was adjourned at 6:30 p.m.	Adjourned

Chair

President & CEO

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