

**LAKE OF THE WOODS DISTRICT HOSPITAL**  
**Regular Meeting of the Board of Directors**  
**Thursday, February 6, 2014**  
**Hospital Boardroom**

**PRESENT:** D. Carrie, C. Gasparini, G. Kakeeway, D. Monteith, M. Mymryk, H. Redsky (via teleconference), J. Reid, F. Richardson (Chair), Dr. M. Spencer, and T. Stevens

**REGRETS:** B. Anderson, M. Balcaen, K. Dawe, Dr. J.K. MacDonald

**ABSENT:** Dr. R. Scatliff

AGENDA ITEMS	DISCUSSION	ACTION
1. <b>Call to Order</b>	F. Richardson, Chair, called the meeting to order at 5:01 p.m.	Information
2. <b>Adoption of Agenda</b>	<b>Moved</b> by J. Reid and <b>seconded</b> by G. Kakeeway that the regular meeting agenda be approved as circulated.	Motion#14/2/1 Carried
3. <b>Adoption of Minutes</b>	<b>Moved</b> by J. Reid and <b>seconded</b> by D. Carrie that the minutes of the Regular Meeting of the Board of Directors held on January 9, 2014 be approved as circulated.	Motion#14/2/2 Carried
4. <b>Business Arising</b>	No business arising.	
5. <b>Education</b>	<b>5.1 Current Program Activities of the Schedule 1 Program and the Suicide Risk Assessment Tool Initiative</b> <ul style="list-style-type: none"> <li>D. Forsyth presented on the "Lake of the Woods District Hospital Schedule 1 Program Description" (presentation appended).</li> <li>Psychiatry is a 19 bed unit, but can only accommodate 15 patients at one time due to personalized care needs. Occupancy rate averages 46%. Unit is staffed by: two (2) Psychiatrists and one (1) family physician with training in mental health; a Psychiatrist is on call 24/7.</li> <li>It was noted that those patients who do not have a primary care physician must utilize the Emergency Department for follow-up care.</li> <li>Dr. S. Reed-Walkiewicz presented on "Suicide Risk Assessments ... When, How, Why?" (Presentation appended). Dr. Reed-Walkiewicz has presented to LWDH staff members; Training is available via OTN. This project is in the pilot phase.</li> </ul>	Information
6. <b>Committee Reports</b>	<b>6.1 Ownership/Linkages Committee</b> D. Monteith reported: <ul style="list-style-type: none"> <li>Currently developing the presentation for the Spring Governance Showcase that is being held in Toronto, ON on April 11, 2014.</li> <li>Will be meeting with the Board of Directors of the Changes Recovery Home on February 10, 2014.</li> <li>Will be meeting with Obashkaandagaang First Nation on February 18, 2014.</li> </ul>	Information
	<b>6.2 Governance Committee</b> H. Redsky reported: <ul style="list-style-type: none"> <li>Discussed education and current Board subscriptions at January's meeting.</li> <li>Results from the GCE Self-evaluation Tool will be reviewed at the next meeting.</li> </ul>	Information

	<b>6.3 Building a Future</b>  No Report	Information
	<b>6.4 Quality</b>  F. Richardson reported: <ul style="list-style-type: none"> <li>• Currently meeting our QIP target with ALC rates. Doing well despite the closure of the interim beds at Pinecrest.</li> <li>• Out of the 11 indicators: six (6) targets have been met; two (2) targets are still underway, but are currently being met; and currently waiting for data on three (3) indicators</li> <li>• Currently preparing the QIP for 2014-15.</li> </ul>	Information
	<b>6.5 Nominating Committee</b>  F. Richardson reported: <ul style="list-style-type: none"> <li>• No meeting since last Board Meeting.</li> <li>• Annual advertisements for Board Members have been placed in the local newspapers, Wawatay, and faxed to First Nations Band Offices and Aboriginal communities.</li> </ul>	Information
	<b>6.6 CEO Compensation and Evaluation Committee</b>  F. Richardson reported: <ul style="list-style-type: none"> <li>• OHA has scheduled a teleconference at 11:30 a.m. on Friday February 7, 2014 re: "Possible Changes to Executive Compensation." Board Members are welcome to attend.</li> </ul>	Information
<b>7. Consent Agenda</b>	<b>Moved</b> by G. Kakeeway and <b>seconded</b> by J. Reid that the Consent Agenda be approved.	Motion#14/2/3 carried
<b>8. Executive Limitations Items</b>	<b>8.1 EL-1 Planning: Hospital Strategic Plan</b>  The review of policy EL-1 Planning: Hospital Strategic Plan will be deferred until the LWDH Strategic Plan (2014-2017) is completed.	Deferred
	<b>8.2 E-2 Information for Positive Lifestyle Choices</b>  After review and discussion of policy E-2 Information for Positive Lifestyle Choices, it was agreed that there was no need to revise the policy at this time.	Information
	<b>8.3 E-3 Partners Have Enhanced Capacity</b>  After review and discussion of policy E-3 Partners have Enhanced Capacity, it was agreed that there was no need to revise the policy at this time.	Information
<b>9. Monitoring CEO Performance</b>	<b>9.1 EL-1 Planning: Hospital Strategic Plan</b>  The review of the monitoring report on EL-1 Planning: Hospital Strategic Plan will be deferred until the LWDH Strategic Plan (2014-2017) is completed.	Deferred
	<b>9.2 E-2 Information for Positive Lifestyle Choices</b>  <b>Moved</b> by D. Carrie and <b>seconded</b> by J. Reid that the Board of Directors has assessed the monitoring report on E-2 Information for Positive Lifestyle Choices and found that it demonstrated compliance with a reasonable interpretation of the policy.  It was noted that use of personal success stories of the Gambling Program may assist in promotion and development of the program.	Motion#14/2/4 carried

	<b>9.3 E-3 Partners Have Enhanced Capacity</b>  <b>Moved</b> by J. Reid and <b>seconded</b> by D. Carrie that the Board of Directors has assessed the monitoring report on E-3 Partners Have Enhanced Capacity and found that it demonstrated compliance with a reasonable interpretation of the policy.	Motion#14/2/5 carried
<b>10. Monitoring Board Performance</b>	<b>10.1 BC Global Board-CEO Relationship</b>  The monitoring report on BC Global Board-CEO Relationship, completed by J. Reid, was reviewed.	Information
	<b>10.2 GP-11 Charge to the Chief of Medical Staff</b>  The monitoring report on GP-11 Charge to the Chief of Medical Staff, completed by F. Richardson, was reviewed.  GP-11 Charge to the Chief of Medical Staff will be sent to the Governance Committee for review of Item #4.	Information  To the Governance Committee
	<b>10.3 GP-19 Ethical Framework</b>  The monitoring report on GP-19 Ethical Framework, completed by H. Redsky, was reviewed.	Information
	<b>10.4 BC-5 Complaints re: CEO or Chief of Staff</b>  The monitoring report on BC-5 Complaints re: CEO or Chief of Staff was not received by T. Stevens.	Deferred
<b>11. Governance Process Items for Decision</b>	<b>11.1 Foundation Nominations for Approval</b>  <b>Moved</b> by D. Carrie and <b>seconded</b> by J. Reid that the Board of Directors approves the nomination of Wil Derouard to the Lake of the Woods District Hospital Foundation's Board of Directors.	Motion#14/2/6 carried
<b>12. Information Requested by the Board</b>	<b>12.1 President &amp; CEO Report</b>  No report.  <b>12.2 Chief of Staff Report</b>  Dr. MacDonald's report will be reviewed In Camera.  <b>12.3 VP Patient Services Report</b>  K. Dawe's report was circulated for review (attached).  <b>12.4 VP Community Programs Report</b>  M. Mymryk reviewed the report as circulated (attached).  <b>12.5 VP Corporate Services Report</b>  C. Gasparini reviewed the report as circulated (attached).	Information
<b>13. Adjournment</b>	The regular meeting was adjourned at 7:11 p.m.	Adjourned

Chair

President & CEO

/kh