

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

PRESENT: M. Balcaen, D. Carrie, P. Dryden-Holmstrom, K. Dawe, C. Gasparini, G. Kakeeway, Dr. J.K. MacDonald, H. Redsky, J. Reid, and F. Richardson (Chair)

REGRETS: B. Anderson, D. Monteith, Dr. R. Scatliff, Dr. M. Spencer and T. Stevens

AGENDA ITEMS	DISCUSSION	ACTION
1. Call to Order	F. Richardson, Chair, called the meeting to order at 5:02 p.m.	Information
2. Adoption of Agenda	Moved by J. Reid and seconded by G. Kakeeway that the regular meeting agenda be approved as circulated.	Motion#14/3/1 Carried
3. Adoption of Minutes	Moved by G. Kakeeway and seconded by J. Reid that the minutes of the Regular Meeting of the Board of Directors held on February 6, 2014 be approved as circulated.	Motion#14/3/2 Carried
4. Business Arising	No business arising.	
5. Education	5.1 LWDH's Palliative Care Program <ul style="list-style-type: none"> J. Landsiedel, Palliative Care RN, presented on LWDH's Palliative Care Program. Palliative care is supportive care for people for which there is no cure. Service is provided to patients, families, and friends. Palliative care is a multidisciplinary team of LWDH staff and community partners. J. Landsiedel sees on average 6-8 patients per day, with 50 patients within the community. The roles within palliative care and the active roles within the community were reviewed. A proposal to extend J. Landsiedel's role into the community for supportive care in the home and nursing homes, including partnership(s) with community partners, was discussed. 	Information
6. Committee Reports	6.1 Ownership/Linkages Committee F. Richardson reported: <ul style="list-style-type: none"> Recently met with Obashkaandaang First Nation (Washagamis Bay), which was a very positive meeting. Discharge Planning was a main topic of discussion. Suggestions have been communicated to applicable LWDH staff who will be meeting with key individuals from the community. Met with the Changes Recovery Home Board of Directors, who will be meeting with LWDH staff for assistance with their reporting requirements. Next meeting will be held on March 19th to finalize the presentation for the Spring Governance Showcase. B. Anderson and F. Richardson will be presenting. 	Information
	6.2 Governance Committee H. Redsky reported: <ul style="list-style-type: none"> Currently working on the education for April's Board Meeting. Policy Governance training is being offered in Winnipeg, but would like to hold collective training the fall. Will be reporting on the GCE Board Self-assessment Survey results at April's meeting. 	Information

	<ul style="list-style-type: none"> A change to the by-laws re: Board Chair Term of Office will be put forward at the Annual General Meeting. GP-11 Charge to Chief of Medical Staff was reviewed. There will be no change to the policy and there will be a Monitoring Report due on an annual basis commencing June 2014. 	
	6.3 Building a Future C. Gasparini reported: <ul style="list-style-type: none"> Senior Management and F. Richardson will be meeting with the LHIN next week to discuss the proposal and to work on moving the process along. 	Information
	6.4 Quality F. Richardson reported: <ul style="list-style-type: none"> The 2013-14 QIP results were presented. Final summary will be submitted to Health Quality Ontario (HQP). Development of the 2014-15 QIP is almost complete. This year the Ministry has designated mandatory targets. Board Members interested in being a part of the Governance Accreditation Team can contact K. Hales. 	Information
	6.5 Nominating Committee F. Richardson reported: <ul style="list-style-type: none"> Met this month with a potential Board candidate. Continue to work on recruitment. No response received from newspaper advertisements. If anyone knows of a suitable candidate, contact F. Richardson. No further meetings scheduled. 	Information
	6.6 CEO Compensation and Evaluation Committee No report.	
7. Consent Agenda	Moved by J. Reid and seconded by G. Kakeeway that the Consent Agenda be approved.	Motion#14/3/3 carried
8. Executive Limitations Items	8.1 EL-1 Planning: Hospital Strategic Plan The review of policy EL-1 Planning: Hospital Strategic Plan will be deferred until the LWDH Strategic Plan (2014-2017) is completed.	Deferred
	8.2 EL-5 Treatment of Clients 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, with the exception of a grammatical correction to item 1.2. "1.2. Allow services to be delivered in a manner <i>which is</i> insensitive to the patients' culture."	Information
	8.3 EL-10 Significant Service Changes After review and discussion of policy EL-10 Significant Service Changes, it was agreed that this policy will be sent to the Governance Committee for review re: item #1, bullet 2, to look at the definition of "major negative impact."	To Governance Committee
9. Monitoring CEO Performance	9.1 EL-1 Planning: Hospital Strategic Plan 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
	9.2 EL-5 Treatment of Clients Moved by J. Reid and seconded by D. Carrie that the Board of	Motion#14/3/4

	<p>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 items #1.1, #2 (b), and #6.2 with regards to SSI.</p> <ul style="list-style-type: none"> Discussion was held re: whether item #2 needs to be re-worded, or if privacy breaches reporting fits into a different policy. 	carried
	<p>9.3 EL-10 Significant Service Changes</p> <p>Moved by J. Reid and seconded by D. Carrie that the Board of Directors has assessed the monitoring report on EL-10 Significant Service Changes and found that it demonstrated compliance with a reasonable interpretation of the policy.</p>	Motion#14/3/5 carried
10. Monitoring Board Performance	<p>10.1 BC-5 Complaints re: CEO or Chief of Staff</p> <p>The monitoring report on BC-5 Complaints re: CEO or Chief of Staff will be reviewed next month</p>	Deferred
	<p>10.2 GP-16 Handling Operational Complaints</p> <p>The monitoring report on GP-16 will be reviewed next month.</p>	Deferred
	<p>10.3 BC-6 CEO Compensation</p> <p>The monitoring report on BC-6 CEO Compensation, completed by J. Reid, was reviewed.</p>	Information
11. GP Items for Decision	No Governance Process Items for Decision.	
12. Information Requested by the Board	<p>12.1 President & CEO Report M. Balcaen reviewed the report as circulated (attached).</p> <p>12.2 Chief of Staff Report Dr. MacDonald reviewed the report as circulated (attached). Those items of a confidential nature will be reviewed In Camera.</p> <p>12.3 VP Patient Services Report K. Dawe reviewed the report as circulated (attached).</p> <p>K. Dawe provided an update re: ALC Patients. As of today there are seven (7) ALC patients in hospital: three (3) patients are waiting for long-term care, one (1) patient is palliative, one (1) patient is general rehabilitation, and two (2) patients are mental health patients.</p> <p>12.4 VP Community Programs Report P. Dryden-Holmstrom reviewed the report as circulated (attached).</p> <p>12.5 VP Corporate Services Report C. Gasparini reviewed the report as circulated (attached). Correction to report, the financials are for the period ending January 31, 2014. Those items of a confidential nature will be reviewed In Camera.</p>	Information
13. Adjournment	The regular meeting was adjourned at 6:37 p.m.	Adjourned

 Chair

 President & CEO

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