

LAKE OF THE WOODS DISTRICT HOSPITAL
Regular Meeting of the Board of Directors
Thursday, November 2, 2006, Hospital Boardroom

PRESENT: M. Balcaen, A. Cameron, J. Clarke, B. Fairfield, H. Kasprick, J. Kowbel, R. Lamb, M. Lundin, J. Reid (Acting Chair), D. Schwartz, L. Brown, C. Gasparini, M. Mymryk

REGRETS: Dr. K. MacDonald, Dr. S. Moore, F. Penner, P. Sarsfield, E. Skead

AGENDA ITEMS		ACTION
1. Call to Order	J. Reid, Acting Chair, called the meeting to order at 5:05 p.m.	
2. Meeting Effectiveness Survey	Meeting evaluation surveys from both the OHA and the Governance Coach were distributed in packages for completion by Board members for submission at the end of the meeting.	
3. Adoption of Agenda	Moved by D. Schwartz and seconded by J. Kowbel that the regular meeting agenda be adopted as circulated.	Motion#06/11/1 Carried
4. Adoption of Minutes	Moved by M. Lundin and seconded by D. Schwartz that the minutes of the regular meeting of the Board of Directors held on October 5, 2006 be adopted as circulated.	Motion#06/11/2 Carried
5. Education	M. Balcaen, L. Brown and J. Reid provided details of the Accreditation survey which took place between October 15 and 18, 2006. Nine focus groups were established and prepared for the survey. Feedback from the surveyors was positive although recommendations for improvement are anticipated in a number of areas. Positive mention was made of our services including the volunteer program, physician leadership, progress in implementation of the new patient safety standards, and development of clinical pathways. The clinical teams in turn found the survey to be a very positive experience. The report is expected in early December. The Board offered its congratulations and thanks to all the teams and others involved in the survey. A letter of congratulations will be forwarded to staff from the Board once final results are received.	Information
6. Governance Process Items for Decision	6.1 GP-16 Handling of Operational Complaints After Board review of policy GP-16 Handling of Operational Complaints, it was agreed that there was no need to change the policy. It was confirmed that this policy outlines the process for Board members to follow should they be in receipt of a complaint which requires the attention of management.	
7. Board-CEO Relationship	7.1 EL-3 Protection of Assets After Board review of policy EL-3 Protection of Assets, it was agreed that there was no need to change the policy. C. Gasparini will confirm in her upcoming monitoring report on EL-3 whether "personnel" as noted in #2 includes volunteers. 7.2 EL-6 Communication & Support to the Board After Board review of policy EL-6 Communication & Support to the Board, it was agreed that there was no need to change the policy.	C. Gasparini

<p>8. Consent Agenda</p>	<p>Moved by J. Kowbel and seconded by R. Lamb that the consent agenda be approved.</p> <p>1. M. Balcaen noted that the recommendation for honorary privileges for Dr. Kyle was made in recognition of his contribution to the hospital and community over the course of his employment here. This is a title only.</p> <p>2. C. Gasparini provided board members with a brief explanation of the budget process required of hospitals and provided additional details to the covering memo attached to the submission document. M. Balcaen and C. Gasparini will meet with the Ministry of Health representatives tomorrow by teleconference to discuss details of our submission.</p>	<p>Motion#06/11/3 carried</p>
<p>9. Monitoring CEO Performance</p>	<p>9.1 EL-1 Financial Planning</p> <p>Moved by D. Schwartz and seconded by M. Lundin that the Board of Directors has read and accepted the monitoring report on EL-1 Financial Planning.</p> <p>#3 – It was noted that at the time of the writing of this report, the hospital was non compliant in that operating ratio was not at 1:1. Since that date compliance has been reached. It was suggested that this policy be revised on next review to reflect MOH guidelines which allow ratios between .8 and 2.0.</p> <p>9.2 EL-3 Protection of Assets</p> <p>Review and approval of EL-3 Protection of Assets was deferred to the December meeting.</p> <p>9.3 EL-4 Treatment of Clients</p> <p>Moved by J. Kowbel and seconded by R. Lamb that the Board of Directors has read and accepted the monitoring report on EL-4 Treatment of Clients.</p> <p>Comments included: Item 1. L. Brown will discuss with J. Moore whether evaluation of complaints from clients with disabilities only is encompassing enough evidence for this item. It was confirmed that although an attempt to reach resolution to all complaints is made, this is not always possible. Item 8. Further evidence of compliance subsequent to the writing of this report was provided verbally by the accreditation surveyors. Item 8.2 Mention was made of the fact that infection rates as recorded in this report are very good in comparison to other facilities.</p> <p>9.4 EL-6 Communication & Support to the Board</p> <p>Moved by M. Lundin and seconded by D. Schwartz that the Board of Directors has read and accepted the monitoring report on EL-6 Communication & Support to the Board.</p> <p>Title to include policy name.</p>	<p>Motion#06/11/4 Carried</p> <p>Deferred to December meeting</p> <p>Motion#06/11/5 Carried</p> <p>Motion#06/11/6 Carried</p>

	<p>9.5 EL-7 Compensation & Benefits</p> <p>Moved by J. Clarke and seconded by J. Kowbel that the Board of Directors has read and accepted the monitoring report on EL-7 Compensation & Benefits.</p>	Motion#06/11/7 Carried
10. Information Requested by the Board	<p>10.1 CEO Report</p> <p>M. Balcaen's report was circulated for review. (Attachment #2) Additional items:</p> <p>ER Department Funding Announcement – As part of a provincial initiative to alleviate pressures in ER departments, LWDH will receive \$73,200 for process improvements in the ER. M. Balcaen noted with concern that this amount is dramatically less than other hospitals in the province as we did not qualify within categories for small hospitals and hospitals located in population growth areas. Subsequent to the announcement, M. Balcaen has written to the Ministry of Health with a request for an explanation of criteria used and to re-examine our allocation. Mr. Balcaen will continue to lobby the government while in Toronto next week attending the OHA convention and will update Board members on those discussions. Dr. Moore, Chief of Staff has contacted the Ontario Medical Association.</p> <p>Discussion took place regarding this hospital's current designation as a community hospital and whether in fact that is appropriate.</p> <p>10.2 Chief of Staff Report</p> <p>M. Balcaen reviewed details of correspondence from Dr. Sean Moore in which he advises the board that he will be resigning his position as Chief of Staff effective March 1, 2007. A recommendation for his replacement will be presented to the board for consideration.</p>	
11. Adjournment	Moved by H. Kasprick seconded by J. Kowbel that the regular meeting be adjourned at 6:22 p.m.	Motion#06/11/8 carried

Chair
/sw

Chief Executive Officer