

LAKE OF THE WOODS DISTRICT HOSPITAL
Regular Meeting of the Board of Directors
Thursday, December 3, 2015
LWDH Boardroom

PRESENT: M. Balcaen, D. Carrie (Chair), W. Cuthbert (at 5:05 p.m.), K. Dawe, J. Diamond, Dr. S. Foidart, C. Gasparini, Dr. B. Kyle, Dr. J.K. MacDonald, J. Reid, D. Schwartz, B. Siciliano, T. Stevens (arrived at 5:08 p.m.)

REGRETS: S. Moreau and D. Paypompee

AGENDA ITEMS	DISCUSSION	ACTION
1. Call to Order	D. Carrie, Board Chair, called the meeting to order at 5:04 p.m.	Called to Order
2. Recess	A recess of the regular meeting was called at 5:04 p.m. to move to the In Camera Session to address one agenda item.	Recess
3. Reconvene	The regular meeting was reconvened at 5:05 p.m. <ul style="list-style-type: none"> • W. Cuthbert, new Board Director, was welcomed to the Board. Roundtable introductions were held. 	Reconvened
4. Adoption of Agenda	Moved by D. Schwartz and seconded by J. Reid that the agenda be approved as circulated	Motion #15/12/1 carried
5. Adoption of Minutes	Moved by J. Reid and seconded by D. Schwartz that the minutes of the Regular Meeting of the Board of Directors held on November 5, 2015 be approved as circulated.	Motion #15/12/2 carried
6. Declaration of Conflict of Interest	There were no declarations of conflict of interest.	None Declared
7. Education	<u>Quality Healthcare Workplace Award (QHWA)</u> <ul style="list-style-type: none"> • S. Dziengo, Physiotherapist, presented on the 2015 Quality Healthcare Workplace Award (QHWA) (presentation attached). LWDH was awarded the gold designation for the 2015 QHWA. This is the second year in a row LWDH has achieved gold-level status; was awarded silver-designation in 2013. The highest level to achieve is platinum. It was noted that the standards of each award level become more difficult to achieve each year. A media release with photos (attached) was provided to the local media. Feedback on our last application was received and will be reviewed prior to the next application. • E. Mudry was commended for her hard work on the application. 	Information
8. Business Arising	None	
9. Committee Reports	9.1 Ownership/Linkages J. Reid reported: <ul style="list-style-type: none"> • Will be looking at a meeting where several organizations will be invited to attend. • A meeting with FHT physicians is currently being finalized. • Next meeting will be held on December 9, 2015 at 4:45 p.m. 	Information
	9.2 Governance J. Reid reported: <ul style="list-style-type: none"> • Next meeting will be held on December 9, 2015 at 4:15 p.m. • D. Carrie's Health Achieve Education Report was circulated and reviewed (appended). 	Information

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	<p>9.3 Building a Future</p> <p>No report.</p>	
	<p>9.4 Quality</p> <p>D. Carrie reported:</p> <ul style="list-style-type: none"> • There were presentations on the current financial status and Discharge Planning Checklist. • Reviewed the appeal process with regards to the Accreditation Canada Survey Report. • Next meeting is Thursday December 17th at 12:30 p.m. 	Information
	<p>9.5 Nominating</p>	Moved to In Camera
	<p>9.6 Governance Accreditation</p>	Moved to In Camera
<p>10. Consent Agenda</p>	<p>Moved by J. Reid and seconded by D. Schwartz that the Consent Agenda be approved.</p>	Motion #15/12/3 carried
<p>11. Monitoring CEO Performance</p>	<p>11.1 EL-4 Protection of Assets</p> <p>It was noted that all areas of high priority are always addressed first with regards to preventative maintenance.</p> <p>Moved by J. Diamond and seconded by J. Reid that the Board of Directors has assessed the monitoring report on EL-4 Protection of Assets and found that it demonstrated compliance with a reasonable interpretation of the policy, with the exception of Item #2 with regards to preventative maintenance. Acceptable plans to attain compliance have been provided.</p>	Motion #15/12/4 carried
<p>12. Executive Limitations Items</p>	<p>12.1 EL-4 Protection of Assets - Review</p> <p>After review and discussion of policy EL-4 Protection of Assets, it was moved by J. Reid seconded by J. Diamond that item #9 be deleted from policy EL-4 Protection of Assets</p>	Motion #15/12/5 Carried
	<p>12.2 EL-6 Treatment of Staff Compliance Report</p> <p>K. Dawe will provide this report for January's Board Meeting.</p>	Deferred
<p>13. Monitoring Board Performance</p>	<p>13.1 BC-2 Accountability of the CEO</p> <p>The monitoring report on BC-2 Accountability of the CEO, completed by D. Paypompee, was reviewed. It was determined that there was no need to revise the policy at this time.</p>	Information
	<p>13.2 BC-1 Unity of Control</p> <p>The monitoring report on BC-1 Unity of Control, completed by D. Paypompee, was reviewed. It was determined that there was no need to revise the policy at this time.</p>	Information
	<p>13.3 BC-4 Monitoring CEO Performance</p> <p>The monitoring report on BC-4 Monitoring CEO Performance, completed by D. Carrie, was reviewed. It was determined that there was no need to revise the policy at this time.</p> <p>It was noted that a monitoring report EL-1 Planning: Hospital Strategic Plan is completed on an annual basis.</p>	Information

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14. Governance Process Items for Approval	<p>14.1 Foundation Nomination for Approval</p> <p>Moved by D. Schwartz and seconded by J. Reid that the Board of Directors approves the nomination of Anthony Sharp to the Lake of the Woods District Hospital Foundation's Board of Directors.</p>	Motion #15/12/6
	<p>14.2 Administrative Staff By-law Revision for Approval</p>	Deferred
15. Executive Limitations Items for Approval	<p>15.1 EL-9 Leadership Capacity & Continuity Revisions</p> <p>Moved by J. Diamond and seconded by D. Schwartz that policy EL-9 Leadership Capacity & Continuity be revised by adding to item #3 "and the Physician Management Institute (PMI) for the Chief of Staff".</p>	Motion #15/12/7 carried
16. Information Requested by the Board	<p>16.1 President & CEO Report M. Balcaen reviewed his report as circulated (attached). K. Hales will develop a short online survey to evaluate the Board Orientation Session. A hospital tour for Board Directors will be scheduled prior to the next Board Meeting.</p> <p>16.2 Chief of Staff Report Dr. J.K. MacDonald's report will be reviewed in camera (attached).</p> <p>16.3 VP Patient Services Report K. Dawe reviewed her report as circulated (attached). In addition:</p> <ul style="list-style-type: none"> • Correction to report: there are currently nine (9) Alternate Level of Care (ALC) patients occupying acute care beds. • Bariatric equipment/chairs for patient care are being purchased as areas are updated. Unable to do all areas of the hospital all at once due to cost. <p>16.4 VP Mental Health and Addictions Programs Report B. Siciliano reviewed his report as circulated (attached).</p> <p>16.5 VP Corporate Services Report C. Gasparini reviewed her report as circulated (attached).</p>	K. Hales
13. Adjournment	The regular meeting was adjourned at 6:21 p.m.	Adjourned

Chair

President & CEO

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