

LAKE OF THE WOODS DISTRICT HOSPITAL
Regular Meeting of the Board of Directors
Thursday, February 1, 2018
Lake of the Woods District Hospital Boardroom

PRESENT: M. Balcaen, W. Cuthbert, D. Carrie, J. Diamond, Dr. J.K. MacDonald, D. Makowsky, J. McKibbon, C. O'Flaherty, J. Reid (Chair), D. Schwartz, B. Siciliano, and E. Stach

REGRETS: D. Segerts

ABSENT: C. Kokokopenace

GUESTS: A. Sirolshka (89.5 The Lake), R. Forbes (Q104), S. Lamb (DMN)

AGENDA ITEMS	DISCUSSION	ACTION
1. Call to Order	J. Reid, Chair, called the meeting to order at 5:01 p.m.	Called to Order
2. Adoption of Agenda	Moved by W. Cuthbert and seconded by D. Schwartz that the regular meeting agenda be approved as circulated.	Motion #18/2/1 Carried
3. Adoption of Minutes	Moved by D. Schwartz and seconded by W. Cuthbert that the minutes of the Regular Meeting of the Board of Directors held on January 4, 2018 be approved as circulated.	Motion #18/2/2 Carried
4. Declaration of Conflict of Interest	There were no declarations of conflict of interest.	None Declared
5. Business Arising	None.	
6. Education	<p>Patient Experience Survey Results for 2017</p> <ul style="list-style-type: none"> • M. Balcaen presented highlights from the 2017 Patient Experience Survey. Highlights were also provided to the guests in attendance, and will be posted on the LWDH external website. • The results were very positive again this year, and the staff and physicians were commended. • It was noted that the hospital returned to the in-house survey format this year. 225 survey responses were received, which is an improvement over last year's survey. The change in template makes it difficult to compare to last year's results. • The role of the LWDH Patient and Family Advisory Committee was reviewed; updates to the Board are provided in the VP Patient Care Report. 	Information
7. Committee Reports	<p>7.1 Executive</p> <p>J. Reid reported:</p> <ul style="list-style-type: none"> • M. Balcaen will follow up with M. Watts (Osler) on the draft Whistleblower Policy. 	M. Balcaen
	<p>7.2 Ownership/Linkages</p> <p>J. Reid reported:</p> <ul style="list-style-type: none"> • Will be a meeting on Monday February 5th at 5:00 p.m. with the LWDH Foundation in the LWDH Boardroom. Directors and Senior Managers were invited to attend. 	Information
	<p>7.3 Quality</p> <p>J. Reid reported:</p> <ul style="list-style-type: none"> • Update was provided on the last meeting, which included a review of incidents and QIP targets. • If Board Directors are interested in attending these committee meetings as an observer, please contact K. Stepanik. 	Information

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	<p>7.4 Nominating</p> <p>W. Cuthbert reported:</p> <ul style="list-style-type: none"> Meeting was held on January 8th. Advertising is underway through the Daily Miner and News, Kenora and District Chamber of Commerce, LWDHF Facebook Page, and has been faxed to Indigenous organizations and Band Offices. K. Stepanik will also forward to A. Gillis, Kenora Area Healthcare Recruiter, for posting on their social media pages. The Board Competency Matrix has been completed and will be reviewed at the next meeting, which will be held on Monday February 5th at 12 noon. 	K. Stepanik
	<p>7.5 CEO Evaluation and Compensation</p> <p>No report.</p>	
	<p>7.6 Building a Future</p> <p>No report.</p>	
<p>8. Required Approvals Agenda</p>	<p>Moved by J. McKibbon and seconded by W. Cuthbert that the Required Approvals Agenda be approved:</p> <ul style="list-style-type: none"> Item 8.1 Professional Staff Privileges. 	Motion #18/2/3 Carried
<p>9. Monitoring CEO Performance</p>	<p>9.1 E-1 Care Based on Best Practices</p> <p>Moved by E. Stach and seconded by J. Diamond that the Board of Directors has assessed the monitoring report on E-1 Care Based on Best Practices and found that it demonstrated compliance with a reasonable interpretation of the policy, with the exception of item #1.d. with regards to wait time for cataracts for one month during the year (May 2017) and the average wait time for priority 4 patients. Explanations have been provided. It was noted that Item #1.g. and #3 were compliant with the exception of Chart 19 where the satisfaction rate for sensitive to spiritual needs was 79%.</p>	Motion #18/2/4 Carried
<p>10. Executive Limitations Items</p>	<p>10.1 E-1 Care Based on Best Practices – Policy Review</p> <p>Following review of E-1 Care Based on Best Practices, it was moved by D. Schwartz and seconded by J. McKibbon that the opening statement be revised to read: “and is based on evidence-based practices”.</p>	Motion #18/2/5 Carried
<p>11. Monitoring Board Performance</p>	<p>11.1 BC Global Board-CEO Relationship</p>	Deferred
	<p>11.2 GP-19 Resolving Ethical Dilemmas</p> <ul style="list-style-type: none"> The monitoring report on GP-19 Resolving Ethical Dilemmas, completed by W. Cuthbert, was reviewed. Following discussion, it was agreed that there was no need to revise the policy at this time. Education request for more information on MAID will go to the Executive Committee. 	Information To Executive Committee
	<p>11.3 BC-5 Complaints re: CEO or Chief of Staff</p>	Deferred
<p>12. Governance Process Items for Decision</p>	<p>12.1 Revisions to GP-8, GP-8.3, GP-10, and Table of Contents</p> <p>Moved by D. Schwartz and seconded by W. Cuthbert that the Board of Directors approves the title change from the Ownership/Linkages (O/L) Committee to the Community Connections Committee (CCC), and the revisions of the following policies to reflect this title change:</p> <ul style="list-style-type: none"> GP-8 Board Committee Structure GP-8.3 Ownership Linkage Committee Terms of Reference GP-10 Investment in Governance Table of Contents 	Motion #18/2/6 Carried

