

**LAKE OF THE WOODS DISTRICT HOSPITAL**  
**Regular Meeting of the Board of Directors**  
**Thursday, May 3, 2018**  
**Lake of the Woods District Hospital Boardroom**

**PRESENT:** M. Balcaen, W. Cuthbert, D. Carrie, J. Diamond (arrived at 5:06 p.m.), D. Makowsky, J. McKibbon, C. O'Flaherty, J. Reid (Chair), Dr. J. Retson, D. Schwartz, D. Segerts (via teleconference), B. Siciliano (arrived at 5:08 p.m.), E. Stach, and Dr. T. Wehner

**REGRETS:** C. Kokokopenace and Dr. J.K. MacDonald

**GUESTS:** P. Dryden-Holmstrom (left at 5:40 p.m.)

AGENDA ITEMS	DISCUSSION	ACTION
1. Call to Order	J. Reid, Chair, called the meeting to order at 5:00 p.m.	Called to Order
2. Adoption of Agenda	<b>Moved</b> by D. Schwartz and <b>seconded</b> by E. Stach that the regular meeting agenda be approved as circulated.	Motion #18/5/1 Carried
3. Adoption of Minutes	<b>Moved</b> by E. Stach and <b>seconded</b> by W. Cuthbert that the minutes of the Regular Meeting of the Board of Directors held on April 5, 2018 be approved as circulated.	Motion #18/5/2 Carried
4. Declaration of Conflict of Interest	There were no declarations of conflict of interest.	None Declared
5. Education	<p><b>Managed Alcohol Program (MAP):</b></p> <ul style="list-style-type: none"> <li>• P. Dryden-Holmstrom presented on the Managed Alcohol Program (MAP), which began on January 23, 2017 and is ran out of the Morningstar Centre. Information was circulated.</li> <li>• The MAP is based on a harm reduction model and is an alcohol replacement therapy. The MAP is a 24/7 program with housing provided in Morningstar.</li> <li>• The following was reviewed: <ul style="list-style-type: none"> <li>○ Community partnerships.</li> <li>○ Criteria to meet to become a client of the MAP.</li> <li>○ Structure of the MAP.</li> <li>○ Performance indicators; data is showing a decrease in the number of repeat visits to the LWDH Emergency Department.</li> <li>○ Challenges with access to long-term care for clients; work is ongoing with long-term care facilities to improve this partnership and meet the needs of clients.</li> <li>○ MAP has 10 beds, but there is no capacity at Morningstar to increase the number of beds.</li> <li>○ Looking at capacity to work with the upcoming Community Justice Centre.</li> </ul> </li> <li>• It was noted that the MAP is a good news story that should be communicated to the public.</li> </ul>	Information
6. Business Arising	<p><b>2018-19 Funding Formula with Small Hospital Designation</b></p> <p>An update was provided on how the change in designation to a Small Hospital will affect the LWDH. In summary, the QBP and HBAM funding is now part of the hospital's base budget and cannot be clawed back. The LWDH received an overall 2.2% increase for the next fiscal year. The only elective components to the hospital's funding are for elective total knees and cataracts; these we will continue to be paid per procedure completed.</p>	Information
7. Committee Reports	<p><b>7.1 Executive</b></p> <p>J. Reid reported:</p> <ul style="list-style-type: none"> <li>• J. McKibbon will be attending OHA's Board Advanced Leadership Conference in Toronto, ON on May 10 – 11, 2018.</li> </ul>	Information

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	<ul style="list-style-type: none"> <li>LWDH will continue to advocate for webcast education events to save on travel costs.</li> <li>As noted in the CEO Report, funding for the Kenora Area Healthcare Recruiter will continue on an annual basis in the amount of \$15,000 (\$10,000 from LWDH budget and \$5,000 from the Board's budget), and will be evaluated annually.</li> </ul>	
	<p><b>7.2 Community Connections Committee</b></p> <p>J. Reid reported:</p> <ul style="list-style-type: none"> <li>The LWDH Board will be contacting the NWLHIN for a board-to-board meeting.</li> <li>Met with the Mental Health and Addictions Advisory Committee on April 10, 2018. It was noted that there are many beneficial programs being provided by that portfolio.</li> <li>The committee is currently drafting a list of community organizations to meet with as a group to maximize time.</li> <li>Everyone is invited to the LWDH Spring Feast tomorrow at 12 noon at Morningstar.</li> <li>The next meeting will be held on Wednesday, May 9, 2018 at 5:00 p.m.</li> </ul>	Information
	<b>7.3 Nominating</b>	Moved to In Camera
	<b>7.4 Quality</b> No report	
	<b>7.5 CEO Evaluation and Compensation</b> No report	
	<b>7.6 Building a Future</b> No report	
<b>8. Required Approvals Agenda</b>	<p><b>Moved</b> by D. Carrie and <b>seconded</b> by D. Schwartz that the Required Approvals Agenda be approved:</p> <ul style="list-style-type: none"> <li>Item 8.1: Broader Public Sector Accountability Act (BPSAA) Attestation.</li> </ul>	Motion #18/5/3 Carried
<b>9. Monitoring CEO Performance</b>	<b>9.1 EL-11 Environmental Impact</b>	Deferred
	<b>9.2 EL-8 Compensation and Benefits</b>	Deferred
	<p><b>9.3 EL-12 Ethical Behaviour</b></p> <p><b>Moved</b> by J. McKibbon and <b>seconded</b> by D. Carrie that the Board of Directors has assessed the monitoring report on EL-12 Ethical Behaviour and found that it demonstrated compliance with a reasonable interpretation of the policy.</p>	Motion #18/5/4 Carried
	<p><b>9.4 EL General Executive Constraint</b></p> <p><b>Moved</b> by D. Schwartz and <b>seconded</b> by W. Cuthbert that the Board of Directors has assessed the monitoring report on EL General Executive Constraint and found that it demonstrated compliance with a reasonable interpretation of the policy.</p>	Motion #18/5/5 Carried
	<p><b>9.5 EL-7 Communication and Support to the Board</b></p> <p><b>Moved</b> by D. Carrie and <b>seconded</b> by W. Cuthbert that the Board of Directors has assessed the monitoring report on EL-7 Communication and Support to the Board and found that it demonstrated compliance with a reasonable interpretation of the policy, with the exception of item #1 section d.) with regards to views of medical staff on clinical issues and item #6 with revisions. Explanations have been provided.</p> <p>It was suggested that a working group be established to look at information and communication to the Board. Following discussion, it was agreed that this</p>	Motion #18/5/6 Carried with Revisions

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	will be put on hold until the final Operational Review Report is received. It was noted that the main concern re: item #6 was with regards to communication to the public.	
<b>10. Executive Limitations Items</b>	<b>10.1 EL-11 Environmental Impact – Policy Review</b>	Deferred
	<b>10.2 EL-8 Compensation and Benefits– Policy Review</b>	Deferred
	<b>10.3 EL-12 Ethical Behaviour – Policy Review</b> Following review of EL-12 Ethical Behaviour, it was agreed that there was no need to revise the policy at this time.	Information
	<b>10.4 EL General Executive Constraint – Policy Review</b> Following review of EL General Executive Constraint, it was agreed that there was no need to revise the policy at this time.	Information
	<b>10.5 EL-7 Communication and Support to the Board – Policy Review</b> Following review of EL-7 Communication and Support to the Board, it was agreed that there was no need to revise the policy at this time.	Information
<b>11. Monitoring Board Performance</b>	<b>11.1 BC Global Board-CEO Relationship</b>	Deferred
	<b>11.2 BC-5 Complaints re: CEO or Chief of Staff</b>	Deferred
	<b>11.3 GP-8.1 Audit Committee Terms of Reference</b> The monitoring report on GP-8.1 Audit Committee Terms of Reference, completed by J. Reid, was reviewed and discussed. Following discussion, it was agreed that there is no need to revise the policy at this time. It was suggested that additional meetings be scheduled with management to discuss financial policies and the fiscal health of the organization.	Information To Audit Cttee
	<b>11.4 GP-8.5 Nominating Committee Terms of Reference</b> The monitoring report on GP-8.5 Nominating Committee Terms of Reference, completed by W. Cuthbert was reviewed. Following discussion, it was agreed that there is no need to revise the policy at this time.	Information
<b>12. Information Requested by the Board</b>	<b>12.1 President &amp; CEO Report</b> M. Balcaen's report was circulated. In addition: <ul style="list-style-type: none"> <li>• Discussion was held re: CEO transition plan and the heavy workload of the current Senior Managers. Strategies to address this were reviewed.</li> <li>• Update provided on the OPP incident that occurred on Thursday, April 26<sup>th</sup>. Emergency entrance doors are now locked at 8:30 p.m. for safety. Entrance is via intercom that is monitored by Switchboard.</li> <li>• M. Balcaen will contact each candidate for the Kenora-Rainy River District to request a meeting with the Board and Senior Management.</li> </ul> <b>12.2 Chief of Staff Report</b> Dr. J.K. MacDonald's report was circulated. <b>12.3 VP Patient Services Report</b> D. Makowsky's report was circulated. In addition: <ul style="list-style-type: none"> <li>• Video developed in partnership with ONA and the LWDH Foundation titled: <i>Your Nurse is not Just a Nurse</i> was viewed.</li> <li>• An update was provided on staffing and ongoing recruitment efforts.</li> </ul> <b>12.4 VP Mental Health and Addictions Programs Report</b> B. Siciliano's report was circulated.	M. Balcaen

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	<p><b>12.5 VP Corporate Services Report</b></p> <ul style="list-style-type: none"> <li>C. O’Flaherty’s report was circulated. No financials to report at this meeting; audited statements will be presented at the Annual General Meeting.</li> </ul>	
<b>13. Adjournment</b>	The regular meeting was adjourned at 7:13 p.m.	Adjourned

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Chair

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President & CEO

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