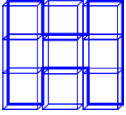


## Lake of the Woods District Hospital Regular Meeting of the Board of Directors

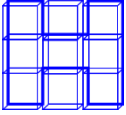
<b>Date:</b> September 10, 2020	<b>Location:</b> Virtual	<b>Chairperson:</b> Wendy Peterson	<b>Admin Support:</b> Lesley Hollis
<b>Time Meeting Called to Order:</b> 5:00 p.m.		<b>Time Meeting Adjourned:</b> 6:15 p.m.	
<b>Present:</b>			
R. Racette	C. O'Flaherty	W. Peterson	Dr. L. Noack
J. Diamond	L. Haney	B. Lundy	J. Reid
Dr. S. Pedersen	N. Brown	F. Richardson	R. Boutette
D. Makowsky	A. Hoffmeister		
<b>Guests:</b>			
M. Aiken (Q104) (arrived 6:00)	T. Davidson CJRL	Charlene Kissick (left 5:55)	Stuart Walter - media
<b>Absent/Regrets:</b>			
R. Bulman			

AGENDA ITEMS	DISCUSSION	ACTION
<b>1. Call to Order</b>	Chairperson W. Peterson called the meeting to order at 5:02 p.m.	Called to Order
	<b>1.1. Attendance and Welcome</b> Chairperson welcomed everyone to the meeting. The traditional lands of the Anishinaabe of Treaty Three and the Métis Nation were acknowledged.	Information
	<b>1.2. Approval of Agenda</b> <b>Moved</b> by R. Boutette and <b>seconded</b> by N. Brown that the regular meeting agenda be approved as circulated.	Motion #20/9/1 Carried
	<b>1.3. Declaration of Conflict of Interest</b> There were no declarations of conflict of interest. Disclosed as information, not as conflict of interest, regarding agenda Item 2.6, R. Boutette noted she is the Chairperson of the Board of CMHA Kenora.	None
<b>2. Consent Agenda</b>	<b>Moved</b> by A. Hoffmeister and <b>seconded</b> by L. Haney that the Consent Agenda be approved: <b>Minutes:</b> 2.1. Board of Directors: June 11, 2020 (draft) 2.2. Board to Board Meeting with KCA: June 19, 2020 (draft) 2.2. Governance Discussion: June 25, 2020 (draft) 2.3. Governance and Nominating Committee: August 26, 2020 (draft) 2.5. Special Board Meeting re: Chief of Staff Selection: August 28, 2020 (draft) <b>Other:</b> 2.6. CMHA Kenora set to become operation service provider for Kenora's Emergency Shelter Aug. 1 2.7. CEO Report 2.8. VP Patient Care Report 2.9. VP Corporate Services Report 2.10. Chief of Staff Report 2.11. Letter to Service Leads 2.12. 2019-2020 Annual Report	Motion #20/9/2 Carried
<b>3. Strategy Items</b> 3.1. Cultural Safety & Humility Training	<ul style="list-style-type: none"> <li>• R. Racette provided an update on mandatory Cultural Safety &amp; Humility Training. Spring and summer training was deferred due to COVID-19.</li> <li>• Meeting with Seven Generations Education Institute to discuss scheduling fall sessions.</li> </ul>	Information



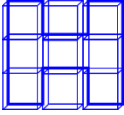
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AGENDA ITEMS	DISCUSSION	ACTION
	<ul style="list-style-type: none"> <li>• It is the goal to train all staff, board members, committee members and medical staff in two (2) years; however future training schedules will be dependent on the COVID-19 pandemic.</li> <li>• Virtual training was considered, however as course content is emotional and based on connectedness, it was recommended by Seven Generations Education Institute that in-person training be approved as it would be most beneficial to our staff.</li> <li>• As we are in a pandemic, we referred to our Infection Control &amp; Occupational Health departments for guidance. The following guidelines have been set for the in-person training:               <ul style="list-style-type: none"> <li>a) limiting the number of participants in each session,</li> <li>b) all participants will wear masks,</li> <li>c) all participants will be physically distanced,</li> <li>d) all catering services have been suspended.</li> </ul> </li> </ul>	
3.2 Operational Review Update	<ul style="list-style-type: none"> <li>• Several Values Refresh sessions have been scheduled. As of September 9<sup>th</sup>, eight (8) focus groups, totaling forty five (45) people have participated.</li> <li>• A summary report with all observations will be circulated; this information will assist in developing a survey for staff.</li> <li>• As the importance of engaging staff and partners is outlined in the Operational Review, senior members of the Leadership Team purposely did not participate.</li> <li>• The goal is for staff to be confident that the values are truly theirs.</li> </ul>	Information
3.3 All Nations Hospital Project Update	<ul style="list-style-type: none"> <li>• C. O'Flaherty provided an update on the All Nation Hospital project.</li> <li>• Nearing completion of Stage 1A – the future clinical services plan.</li> <li>• Next will be moving into Stage 1B – development of the scheduler plans, which eventually becomes part of the master plan.</li> <li>• The data from these stages will then be analyzed to let us know what square footage is required for the new hospital.</li> <li>• Currently working with landscapers and architects. It is a Ministry requirement to submit 3 site options including a complete business case for each potential site.</li> <li>• The Steering Committee evaluated and approved a site evaluation matrix.</li> <li>• The Steering Committee also worked with elders in the community to ensure we are respecting all cultural factors site for each potential site. The Steering Committee has consulted for spiritual ceremonies to aid in decision making.</li> <li>• Endeavoring submission of a final report to the prime consultant by November 30<sup>th</sup>.</li> <li>• Colliers Project Leaders has been tasked with developing a timeline of key decision points for the next several months so that LWDH and their Board of Directors, Kenora Chiefs Advisory and their Board of Directors, and the All Nations Hospital Steering Committee have sufficient time for review and decision making.</li> <li>• Currently anticipating that the project is on budget and maintaining timelines.</li> <li>• R. Racette added that as part of the current phase, we had technical reviews and assessments of all of our current buildings and systems. This report will also be analyzed by the Steering Committee and prime consultants.</li> </ul>	Information
3.4 Board Function	<ul style="list-style-type: none"> <li>• W. Peterson took a moment to all the board members for continued support and commitment.</li> <li>• W. Peterson noted letters were recently sent to all newly appointed service</li> </ul>	Information



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AGENDA ITEMS	DISCUSSION	ACTION
	<p>leads.</p> <ul style="list-style-type: none"> <li>• A “Meet the Board” article has been submitted to the hospital newsletter.</li> <li>• W. Peterson noted she has been attending webinars regarding board governance and one discussion was related to board members sitting on the hospital pandemic table. Small discussion ensued and our directors feel the updates provided by the hospital are thorough and sufficient.</li> </ul>	
<p><b>4. Discussion Items</b> 4.1. Quality &amp; Patient Safety (Standing Item) Committee Update</p>	<ul style="list-style-type: none"> <li>• W. Peterson recently met with Quality and Risk manager E. Mudry and interim Chief of Staff Dr. S. Pederson on August 25<sup>th</sup> to discuss the quality connection between the board and the hospital.</li> <li>• Work has begun to refresh the mission, vision, values and eventually the strategic plan will be refreshed as well.</li> <li>• This work will update changes to quality structure and monitoring, it will also clarify the oversight role of the board.</li> </ul>	Information
4.2 COVID-19 Update: Mandatory Masks	<ul style="list-style-type: none"> <li>• Even though the hospital wasn’t mandated under the mandatory mask order, we assessed our buildings to see how we could continue to protect patients and staff.</li> <li>• Leadership at the hospital actively supported the Northwestern Health Unit’s decision to implement mandatory masks on August 17<sup>th</sup>.</li> <li>• We evaluated all units as well as meeting rooms for capacity and safety. We have adjusted our policies accordingly.</li> <li>• Although our area is the lowest in the province for positive COVID-19 cases, it is anticipated that we will be in the pandemic for another year.</li> </ul>	Information
4.2.1 COVID-19 and Board meetings going forward	<ul style="list-style-type: none"> <li>• Logistics of future board meeting were discussed. Small discussion followed and all board members quickly agreed that as we are currently in a pandemic, it was the most feasible and responsible decision to continue to meet virtually whenever possible.</li> <li>• Discussed opportunities for board directors to meet independently after meetings to discuss concerns or questions. Providing a virtual platform after meetings was discussed as a viable option.</li> </ul>	Information
4.3 TBRHSC Regional Services Committee of the Board of Directors	<ul style="list-style-type: none"> <li>• R. Racette presented on a new regional initiative looking for formal board support. This is the first structure of this type for northwestern Ontario. Other current regional initiatives include Pharmacy and Information Technology (I.T.).</li> <li>• The benefits of regional funding opportunities and program highlights were discussed. Other benefits will include consistent communication between regional CEO’s as well as having a committee where all hospital boards are represented.</li> <li>• The purpose of the Regional Services Committee of the Board of Directors would be to make recommendations to their governing body, which is the TBRHSC Board of Directors.</li> <li>• Dr. S. Pederson expressed his supports to the initiative as one avenue to improve system efficiency. N. Brown also expressed support in the initiative and noted the potential benefit to the All Nations Hospital planning and local Ontario Health Team.</li> <li>• F. Richardson expressed interest in representation on the Committee.</li> <li>• Motion by N. Brown and seconded by J. Reid to support the terms of reference for TBRHSC Regional Services Committee of the Board of Directors.</li> <li>• Motioned by J. Reid and seconded by J. Diamond that F. Richardson serves on the TBRHSC Regional Services Committee of the Board of Directors for a term of one (1) year.</li> <li>• <b>Board education on regional programs was requested.</b></li> </ul>	<p>Motion #20/9/3 Carried</p> <p>Motion #20/9/4 Carried</p>



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AGENDA ITEMS	DISCUSSION	ACTION						
<b>5. Decision Items</b> 5.1. Board Standing Committee Membership	<ul style="list-style-type: none"> <li>Board Standing Committee were based upon a survey results and reviewed by the Governance and Nominating Committee.</li> <li>Moved by B. Lundy and seconded by R. Boutette that chairpersons for the following committees be approved as noted:               <table border="1" data-bbox="483 401 1245 499"> <tr> <td>R. Bulman</td> <td>Audit and Finance Committee</td> </tr> <tr> <td>L. Haney</td> <td>Quality and Patient Safety Committee</td> </tr> <tr> <td>F. Richardson</td> <td>Board Governance and Nomination</td> </tr> </table> </li> </ul>	R. Bulman	Audit and Finance Committee	L. Haney	Quality and Patient Safety Committee	F. Richardson	Board Governance and Nomination	Motion #20/9/5 Carried
R. Bulman	Audit and Finance Committee							
L. Haney	Quality and Patient Safety Committee							
F. Richardson	Board Governance and Nomination							
<b>6. Next Meeting(s)</b>	<u>Board Meeting:</u> virtually October 8, 2020 at 5:00 p.m.	Information						
<b>7. Adjournment</b>	<b>Moved</b> by J. Diamond and <b>seconded</b> by A. Hoffmeister that the regular meeting be adjourned at 6:15 p.m.	Adjourned						

\_\_\_\_\_  
Chair

\_\_\_\_\_  
President & CEO