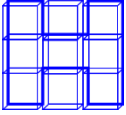


Lake of the Woods District Hospital Regular Meeting of the Board of Directors

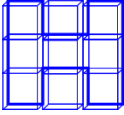
Date: October 8, 2020	Location: Virtual	Chairperson: Wendy Peterson	Admin Support: Kaila Stepanik
Time Meeting Called to Order: 5:02 p.m.		Time Meeting Adjourned: 6:30 p.m.	
Present:			
F. Richardson	R. Racette	C. O'Flaherty	J. Reid
A. Hoffmeister	B. Lundy	R. Bulman	W. Peterson, Chair
L. Haney	R. Boutette	Dr. L. Noack	Dr. S. Pedersen (arrived at 5:05 p.m.)
J. Diamond (arrived at 5:25 p.m.)			
Guests:			
M. Aiken (Q104)			
Absent/Regrets:			
N. Brown	D. Makowsky	Dr. L. Snyder	

AGENDA ITEMS	DISCUSSION	ACTION
1. Call to Order	W. Peterson, Chair, called the meeting to order at 5:02 p.m.	Called to Order
1.1. Attendance and Welcome	W. Peterson welcomed everyone to the meeting. Dr. Laurel Snyder, Vice President of Medical Staff, was welcomed to the table; she sent regrets for this evening's meeting.	Information
1.2. Acknowledgement of Land Rights	The traditional lands of the Anishinaabe of Treaty Three and the Métis Nation were acknowledged.	
1.3. Approval of Agenda	Moved by R. Bulman and seconded by L. Haney that the regular meeting agenda be approved as circulated.	Motion #20/10/1 Carried
1.4. Declaration of Conflict of Interest	There were no declarations of conflict of interest.	None
2. Consent Agenda	<p>Moved by A. Hoffmeister and seconded by F. Richardson that the Consent Agenda be approved:</p> <p>Minutes:</p> <ul style="list-style-type: none"> 2.1. Board of Directors: September 8, 2020 (draft) 2.2. Governance and Nominating Committee: September 28, 2020 (draft) <p>Other:</p> <ul style="list-style-type: none"> 2.3. CEO Report 2.4. VP Patient Care Report 2.5. VP Corporate Services Report 2.6. Chief of Staff Report 2.7. ANHP Media Release: COVID-19 Assessment Centre Continues to Operate Weekdays 8:30 a.m. – 3:30 p.m. 2.8. News Release: Ontario Investing in Hospital Upgrades and Repairs in Kenora-Rainy River 2.9. ANHP Media Release: Kenora Assessment Centre Receives Updates COVID-19 Testing Guidance from the Province of Ontario 2.10. LWDH Chief of Staff Announcement 	Motion #20/10/2 Carried
3. Strategy Items		
3.1. Cultural Safety & Humility Training	<ul style="list-style-type: none"> • R. Racette provided an update on the Anishinaabe Engagement Training, which is commencing next week. LWDH and Seven Generations Education Institute (SGEI) are ensuring that all COVID-19 protocols are being followed to ensure the safety of the staff and trainer. • The title of the training has been changed to: "Anishinaabe 	Update Agenda



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AGENDA ITEMS	DISCUSSION	ACTION
	<p>Engagement Training”.</p> <ul style="list-style-type: none"> The positive COVID-19 cases announced last week resulted in this week’s training sessions being postponed. The testing conducted as a result of these positive cases have all returned as negative; great news for our community. It was noted that scheduling these sessions was the result of strong team work between management and staff; there has been a high interest in training. The LWDH Board Directors are welcome to participate. 	
3.2 Operational Review Update		Deferred
3.3 All Nations Hospital Project Update		Moved to In Camera
<p>4. Discussion Items</p> <p>4.1. Quality & Patient Safety (Standing Item): COVID-19 Update</p>	<ul style="list-style-type: none"> R. Racette provided an update on COVID-19, and a presentation was reviewed. It was noted that the second wave is showing less hospitalizations than the first wave; the actions taken by the Province of Ontario were reviewed. It was noted that the restrictions imposed by the Province are not applicable to hospitals. LWDH’s ALC numbers and recent positive cases were reviewed. Kenora is doing really well with great cooperation from the community. LWDH’s Pandemic Table continues to meet on a weekly basis. It was noted that some options developed at the start of the pandemic to deal with a surge of COVID-19 are no longer available (i.e. Transitional Care Unit at Pinecrest and the Isolation Centre at the Keewatin Area). Other space options in the community are being looked into to accommodate this. Recent space changes throughout the LWDH were reviewed; continually working to ensure LWDH can meet a COVID-19 surge if needed. Detailed update provided on the Assessment Centre, recent volumes, and testing methods and capacity. LWDH has not had any admitted patients with COVID-19. 	Information
4.2. LWDH Anishinaabe Health Advisory Committee Refresh	<ul style="list-style-type: none"> The current Terms of Reference for the past Anishinaabe Health Advisory Committee was circulated for information. The goal is to repurpose this committee to create a structure that is operational and can make changes (i.e. consultation, decision-making, and change implementation). This need has been identified through the community engagement sessions that have been occurring for the planning for an All Nations Hospital. Would like to see representation from community partners, including: Kenora Chiefs Advisory (KCA), Waasegiizhig Nanaandawe'iyewigamig (WNHAC), Treaty #3, and Kenora Métis Council; could call on other community partners as needed. It was noted that this should be a monthly meeting with established goals that are tracked and measured. The Board agreed that this committee should be developed as outlined above. It was noted that there was strong interest from Board Directors in sitting on this committee; K. Stepanik will circulate the list to R. Racette and C. O’Flaherty. 	<p style="text-align: center;">Approved</p> <p style="text-align: center;">K. Stepanik</p>
4.3. LWDH Ethics Committee Reference	<p>The following documents were circulated for information:</p> <ol style="list-style-type: none"> LWDH Ethics Committee Terms of Reference St. Mary’s General Hospital Ethics Committee Terms of Reference 	



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AGENDA ITEMS	DISCUSSION	ACTION
	3. Accreditation Canada's Leadership Standards re: Ethics Committee 4. Perth and Smith Falls District Hospital Ethics Framework <ul style="list-style-type: none"> • Will still require Research Ethics to approve studies; can partner with universities for research approvals/guidance. • An Ethics Committee needs to add value with a clear purpose (i.e. provide assistance to front-line staff, organizing education). • There was strong interest from Board Directors to sit on this committee; K. Stepanik will circulate the list to R. Racette. • This committee would include Patient Advisors, once this role has been established. • The Board agreed to proceed in refreshing this committee. 	K. Stepanik Approved
4.4. Visitor Restriction Policy during COVID-19 Pandemic	<ul style="list-style-type: none"> • The current LWDH Visitor Restriction Policy during COVID-19 Pandemic was circulated for information. • W. Peterson provided an update from the last Patient and Family Advisory Committee (PFAC) Meeting. It was agreed that policies affecting patients and families will be drafted and brought to the PFAC table for review and input prior to final approval. • The need to clarify definitions for "visitor" and "care partners" was discussed. • LWDH acknowledges that family members are part of the care team and LWDH and professional staff have been very compassionate when considering exceptions under our current policy. • LWDH expressed a sincere thank you to the community for being respectful of the policies and procedures in place due to COVID-19. • It was agreed that the current policy is appropriate for our current state. 	Information
5. Decision Items 5.1. Recommendation from Governance and Nominating Committee re: New Director	Moved by J. Reid and seconded by B. Lundy that the Board of Directors approves the recommendation of the Governance and Nominating Committee, that Charlene Chapman be approved as interim Board Director to June 10, 2021. W. Peterson will draft a welcome letter and B. Lundy will oversee Mentorship.	Motion #20/10/3 Carried W. Peterson B. Lundy
5.2. Professional Staff Privileges	Moved by R. Boutette and seconded by J. Diamond that the Professional Staff Privileges, for the year ending December 31, 2020, be approved as circulated. Dr. S. Pedersen is currently doing a review of privileges for all department categories and some recommendations may follow. The goal is to have this completed prior to re-application time.	Motion #20/10/4 Carried Tentative Agenda Item
6. Next Meeting(s)	<u>Board Meeting</u> : November 12, 2020 at 5:00 p.m. via Go To Meeting.	Information
7. Adjournment	Moved by J. Diamond and seconded by R. Bulman that the regular meeting be adjourned at 6:30 p.m.	Adjourned

Chair

President & CEO