

Regular Meeting of the Board of Directors

Date:	Location:	Chairperson:	Admin Support:			
October 14, 2021	Virtual	Wendy Peterson	Kaila Stepanik			
Time Meeting Called to Order: 5:02 p.m.		Time Meeting Adjourned: 6:14 p.m.				
Present:						
Alison Farough, LWDH Director		Fred Richardson, LWDH Director				
Ashley Hoffmeister, Guest		Jaki Diamond, LWDH Director				
Brent Lundy, LWDH Vice-Chair		Joan Reid, LWDH Dire	Joan Reid, LWDH Director			
Charlene Chapman, LWDH Director		Nicole Brown, LWDH Director				
Cheryl O'Flaherty, VP Corporate Services and CFO		Ray Racette, President and CEO				
Donna Makowsky, VP Patient Care and CNO		Rita Boutette, LWDH Director				
Dr. Ben Wykes, Vice President of Medical Staff		Robert Bulman, LWDH Director				
Dr. Laurel Snyder, President of Medical Staff		Wendy Peterson, Board Chair				
Dr. Sean Moore, Chief of Staff						
Absent/Regrets:	Absent/Regrets:					
Logan Haney, LWDH Director						
Guests:						
Chief Lorraine Cobiness (arr	ived at 5:48 p.m.)					
Danica Farion						

	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.	Information
1.2.	Acknowledgement of Traditional Lands	The traditional lands of the Anishinaabe of Treaty Three and the Métis Nation were acknowledged.	
1.3.	Approval of Agenda	Moved by F. Richardson and seconded by N. Brown that the regular meeting agenda be approved as circulated.	Motion #21/10/1 Carried
1.4.	Declaration of Conflict of Interest	None.	None Declared
2.	Consent Agenda	Moved by R. Bulman and seconded by J. Reid that the Consent Agenda be approved as circulated:	
		Minutes: 2.1. Board of Directors: September 9, 2021 (draft) 2.2. Patient and Family Advisory Committee: September 13, 2021 (draft) 2.3. Governance and Nominating Committee: September 21, 2021 (draft) 2.4. Quality and Patient Safety Committee: September 29, 2021 (draft) Other: 2.5. CEO Report – deferred to November 2.6. Chief of Staff Report – deferred to November 2.7. VP Corporate Services Report – deferred to November 2.8. VP Patient Services Report – deferred to November 2.9. NWHU COVID-19 Weekly Summary 2.10 Regional Services Committee Meeting Briefing Note	Motion #21/10/2 Carried
_	Education Quality and Patient Safety (Standing Item) 2020 -2021 Patient Experience Survey Results	 Ashley Hoffmeister, Manager of Quality, Risk, and Clinical Information was invited to present on the 2020 – 2021 Patient Experience Survey Results for both inpatients (24 responses) and outpatients (455 responses). A. Hoffmeister will compile the data from past years so Directors can see a comparison. 	A. Hoffmeister

AGENDA ITEMS	AGENDA ITEMS DISCUSSION	
	The results overall were positive; LWDH staff were commended for their hard work during a difficult year.	
4. Strategy Items 4.1. All Nations Hospital Update	 Continue to work with the Ministry of Health on the Stage 1 submission. Responses to their questions have been submitted and the process continues to move forward. The All Nations Hospital Steering Committee met in September and a media release followed. LWDH, KCA, and WNHAC representatives will be travelling next week to Sioux Lookout Meno Ya Win Health Centre to learn about their traditional programs. This visit is to assist the LWDH with preparing a written business case to Ontario Health North for operational funding to expand the hospital's traditional programs. 	Information
4.2. Ontario Health Team (OHT) Update	 Information was circulated on the new Wiigaas Elder and Seniors Care Centre (formerly Birchwood Terrace), which his now owned by the Kenora Chiefs Advisory (KCA). Hope to have two strong long-term care facilities in our community with a care strategy implemented. They are currently planning with Pinecrest. Housing and Homelessness Working Group is a new committee that has started to meet. Currently developing a Terms of Reference. H. Wall (KDSB) has been invited to December's Board Meeting to an education session to provide an update on Kenora's housing and homelessness concerns. The OHT received funding approval to run a Virtual Urgent Care Clinic at the LWDH for a five (5) month pilot project. This clinic will commence in early November with the goal of diverting patients out of the ED and to meet the need of primary care in our community. Will be working with the All Nations Health Partners to staff the clinic, utilizing Nurse Practitioners. Will also be working with local clinics to assist with patient navigation and scheduling them with same- or next-day appointments with their primary care provider. Data will be collated to help evaluate the need for, and success of, the clinic. 	Information
5. Discussion Items 5.1. Strategic Planning	 R. Racette will draft a refreshed Interim Strategic Plan for review at the next Board Meeting. Many of the identified action items are moving forward. LWDH will be looking at developing a new Strategic Plan next fall. This has been put on-hold due to COVID-19 as there is a need to seek public input. 	R. Racette Add to Next Agenda
5.2. Resuming Board and Standing Committee Meetings In-person	 A briefing note was circulated and outlined the requirements of resuming in-person meetings, and what other regional hospitals were doing. Following discussion, it was agreed that the LWDH Board of Directors will continue to meet virtually to comply with the current visitor restriction policy in place, and to ensure the safety of all staff and patients. This item will be revisited in February 2022. 	Table to February 2022
5.3. A Message to Patients, Families, and Our Communities Media Release	 The media release titled: "A Message to Patients, Families, and Our Communities" was circulated for information. LWDH has noted an increase in verbal violence against staff, which is affecting morale, recruitment, and retention. It was noted that physical violence has a more consistent response and incidence of reporting, whereas verbal violence is under reported. The staff safety mechanisms in place were reviewed (i.e., Code White, Vocera, staff duress system, security, etc.). LWDH does have an Employee Assistance Program (EAP), which is offered through Human Resources, Managers, and the Staff Health Nurse. LWDH will continue to closely monitor this situation. 	Information

AGENDA ITEMS	DISCUSSION	ACTION
Decision Items 6.1. Professional Staff Privileges	Moved by R. Boutette and seconded by F. Richardson that the Professional Staff Privileges, for the year ending December 31, 2021, be approved as circulated.	Motion #21/10/3 Carried
6.2. Quality, Patient Safety, and Risk Management Committee Terms of Reference	 Moved by B. Lundy and seconded by F. Richardson that the Board of Directors approves the following revisions to the Quality, Patient Safety, and Risk Management Committee's Terms of Reference: Retitle the committee: "Quality, Patient Safety, and Risk Management Committee." Under Mandate items #1, 8, and 10, update them to read "quality, patient safety, and risk management". 	Motion #21/10/4 Carried
6.3. Addictions Service Lead	Moved by N. Brown and seconded by F. Richardson that the Board of Directors approves the recommendation from the Medical Advisory Committee that Dr. Sandra Sas be approved as Service Lead for Additions, effective immediately.	Motion #21/10/5 Carried
7. Next Meeting 8. Adjournment	Board Meeting: November 11, 2021, 2021, at 5:00 p.m. via Go To Meeting. Moved by R. Bulman that the regular meeting be adjourned at 6:14 p.m.	Information Adjourned

Chair President & CEO