

LAKE OF THE WOODS DISTRICT HOSPITAL
Regular Meeting of the Board of Directors
Thursday, February 5, 2004, 6:04 p.m. Hospital Boardroom

PRESENT: M. Balcaen, A. Cameron, B. Fairfield, H. Kasprick, R. Lamb, M. Lundin, K. MacDonald, S. Moore, F. Penner (Chair), S. Proudlove, S. Reed-Walkiewicz, J. Reid, P. Sarsfield, D. Schwartz, L. Brown, L.A. Brown, M. Mymryk

REGRETS: J. Kowbel, H. Hulsbosch, J. McDonald

AGENDA ITEMS	DISCUSSION	ACTION
A. AGENDA	The agenda was accepted as circulated.	Accepted
B. MINUTES OF PREVIOUS MEETING	Moved by J. Reid and seconded by M. Lundin that the minutes of the regular meeting of the Board of Directors held on January 8, 2004 be accepted as circulated.	Motion #04/2/1 Carried
C. BUSINESS ARISING OUT OF THE MINUTES	There was no business arising out of the minutes.	Information
D. NEW BUSINESS		
D.1 Committee Reports		Information
Patient Care	J. Reid reviewed the minutes of the meeting of January 15, 2004.	
Corporate Planning	In the absence of J. Kowbel, the minutes of the meeting of January 22, 2004 were reviewed by S. Proudlove.	Information
Resource Planning & Utilization	Minutes of the meeting of January 28, 2004 were reviewed by H. Kasprick. It was noted that long awaited financial software is now being implemented. M. Balcaen highlighted absence statistics noting that the implementation of an attendance management program and a staff physiotherapy education program have resulted in a significant decrease in employee sick time (22% better than provincial average). It was suggested that a letter be sent to B. Chisholm, Manager of Physiotherapy, congratulating him on the success of that program. Moved by J. Reid and seconded by H. Kasprick that Cheryl O'Flaherty, Manager of Finance, be given approval for Internet Email, telephone and fax access to provide instructions to the CIBC Securities, Inc. for the investments (mutual funds) for Lorraine Newton, as recommended by the Resource Planning & Utilization Committee.	Motion #04/2/2 carried
Governance	Minutes of the meeting held on January 29, 2004 were reviewed by F. Penner.	
Aboriginal Health Advisory	Minutes of the meeting of January 23, 2004 were reviewed by M. Balcaen. Although it was noted in the minutes that there is a commitment by Medical Services for 24/7 patient transfer service to and from the reserves, Dr. Moore reported that this does not in fact happen. A. Cameron will meet with S. Moore to discuss and follow up.	A. Cameron
	Moved by J. Reid and seconded by M. Lundin that the Board of Directors accept the reports of the following committees as presented: Patient Care, Corporate Planning, Resource Planning & Utilization, Governance, and Aboriginal Health Advisory.	Motion #04/2/3 carried
D.2 Hospital Report 2003	M. Balcaen provided details and comparative statistics for both Acute and Emergency Department Care as reported in the recently released Hospital Report 2003. Generally this hospital, categorized as a	Information

	<p>community hospital, is within the provincial average for most areas. This is the case for most of the 92 Ontario hospitals participating in this voluntary process. Only three hospitals from Northwestern Ontario (Thunder Bay, Dryden and LWDH) are participating in the report. Of significant note is the fact that data collected for this report is approximately 18 months old and approximately 20% of surveys distributed for patient satisfaction were returned.</p> <p>Acute Care: Four quadrants are reported on and include system integration and change for which there are 10 indicators, clinical utilization and outcomes - 12 indicators, patient satisfaction - 8 indicators and financial performance and condition - 8 indicators. In most areas this hospital scored in the average range. Dr. Moore reported that development and implementation in the area of standardized protocols, the indicator receiving below average ranking, has taken place within the last year and continues. Care provided by other caregivers (radiology, laboratory, etc.) ranked above average as did a number of indicators within financial performance.</p> <p>Emergency Department Care: The same four quadrants are reported on with respective indicators as follows – 7, 4, 6, 4. As with the acute care results, rankings were average although due to a number of variables in specific areas, this did not accurately reflect actual practice. Explanations for variances were provided by M. Balcaen and physicians present.</p> <p>The full report is available on the following web site: www.hospitalreport.ca</p> <p>As the result of this report, management is investigating areas of below average ranking and complimented those staff responsible for areas achieving above average ranking.</p>	
E. AJOURNMENT	Moved by D. Schwartz that the meeting be adjourned at 7:32 p.m.	

Chair
/sw

Executive Director