

LAKE OF THE WOODS DISTRICT HOSPITAL
Regular Meeting of the Board of Directors
Thursday, September 6, 2012
Hospital Boardroom

PRESENT: B. Anderson, M. Balcaen, Dr. J. Beveridge, K. Dawe, Dr. K. MacDonald, M. Matheson, O. Mejia, D. Monteith, A. Pringle, F. Richardson (Chair), T. Stevens, C. Gasparini, M. Mymryk

REGRETS: G. Kakeeway

GUESTS: Darlene Furlong, VP Patient Care Services DRHC
 Dr. Jim Arthurs, Medical Officer of Health, Northwestern Health Unit

AGENDA ITEMS	DISCUSSION	ACTION
1. Call to Order	F. Richardson, Chair, called the meeting to order at 5:00 p.m.	
2. Adoption of Agenda	Moved by D. Monteith and seconded by B. Anderson that the regular meeting agenda be approved as circulated.	Motion#12/9/1 carried
3. Adoption of Minutes	Moved by D. Monteith and seconded by B. Anderson that the minutes of the regular meeting of the Board of Directors held on June 7, 2012 be approved as circulated.	Motion#12/9/2 carried
4. Business Arising	No business arising.	
5. Education	<p>5.1 Accreditation Trial Survey Run</p> <p>D. Furlong, Senior VP Patient Services at Dryden Regional Health Centre and surveyor for Accreditation Canada, provided a presentation outlining suggestions that the board may want to consider in preparing for accreditation (presentation attached). As a "trial run", sample questions were then presented to board members for response and included topics around orientation process for new board members, recruitment process, board matrix, regularly monitored indicators, how budget decisions are made, ethical framework, CEO evaluation and resource involvement.</p> <p>In addition, all Board members were encouraged to engage in the conversation or response to surveyor questions.</p>	Information
	<p>5.2 Northwestern Ontario Health Unit – Dr. J. Arthurs</p> <p>Dr. J. Arthurs, Medical Officer of Health, provided board members with a power point presentation (attached) on the current strategic direction of the Northwestern Health Unit. The key message of the presentation was an acknowledgement of the fact that healthcare is currently overcome by chronic disease and although the primary focus of the NWHU is that of promotion of healthy lifestyles, other healthcare providers can play a partnership role in making a difference in the health of our community. As the system exists, there is duplication of services which can be more effectively/efficiently provided through collaboration and innovation.</p> <p>After discussion it was recommended that Dr. Arthurs and M. Balcaen initiate dialogue to explore potential opportunities. It was noted that the Board has acknowledged that the hospital exists to provide quality acute care while prevention and education is the mandate of other organizations, funded to do so.</p> <p>Dr. Arthurs also informed board members that the final draft of the NWHU's 4 year strategic plan has been completed and follows a</p>	Information

	balanced scorecard approach to measuring health unit services and activities. The annual report format has also been changed to that of a public health report card and follows the trend to more public accountability.	
6. Committee Reports	<p>Board Orientation</p> <p>Dates for Board Orientation were confirmed for Friday, October 12 from 5:00 – 9:00 p.m. and Saturday, October 13 from 9:00 a.m. – 4:00 p.m.</p> <p>Michael Watts, hospital legal counsel, will present on Friday evening via videoconference and Jim Clarke and Lesley Brown will co-facilitate the Saturday session.</p> <p>Committee Membership 2012/13</p> <p>After discussion, 2012/13 Committee memberships were set and initial meeting dates scheduled (attached to these minutes).</p>	Information
7. Consent Agenda	Moved by D. Monteith and seconded by B. Anderson that the Consent Agenda be approved.	Motion#12/9/3 carried
8. Executive Limitations Items	<p>8.1 EL-2 Planning - Financial - Review</p> <p>After review and discussion of policy EL-2 Planning - Financial, it was agreed that there was no need to revise the policy at this time.</p>	No change
	<p>8.2 EL-5 Treatment of Clients - Review</p> <p>After review and discussion of policy EL-5 Treatment of Clients, it was agreed that there was no need to revise the policy at this time.</p>	No change
9. Monitoring CEO Performance	<p>9.1 EL-2 Planning - Financial</p> <p>Moved by B. Anderson and seconded by D. Monteith that the Board of Directors has assessed the monitoring report on EL-2 Planning - Financial and found that it demonstrated compliance with a reasonable interpretation of the policy with the exception of the Opening Statement and Item #2. Monthly reports relating to both areas of non-compliance will be provided to the Board by Management with recommendations on how compliance with requirements will be achieved within the timeframes stipulated by the LHIN.</p>	Motion#12/9/4 carried
	<p>9.2 EL-5 Treatment of Clients</p> <p>Moved by A. Pringle and seconded by D. Monteith that the Board of Directors has assessed the monitoring report on EL-5 Treatment of Clients and found that it demonstrated compliance with a reasonable interpretation of the policy with the exception of Items #5, #6.1, #6.2. Acceptable plans to attain compliance have been provided and will be confirmed in the next monitoring report to be submitted in March 2013.</p> <p>In response to a comment that there is a perception that many complaints are not heard, it was confirmed that there is a mechanism in place that ensures a complete review/investigation of any complaints submitted. It was suggested that processes in place for patient satisfaction evaluation be presented as board education at an upcoming board meeting.</p>	Motion#12/9/5 carried

10. Monitoring Board Performance	10.1 GP-9 Board & Committee Expenses The monitoring report on GP-9 Board & Committee Expenses, completed by D. Monteith, was reviewed.	Information
11. Information Requested by the Board	11.1 President & CEO Report M. Balcaen reviewed his report as circulated (attached). 11.2 Chief of Staff Report Dr. MacDonald reviewed his report as circulated (attached). Those items of a confidential nature will be reviewed in-camera. 11.3 VP Patient Services Report K. Dawe reviewed her report as circulated (attached). 11.4 VP Community Programs Report M. Mymryk reviewed her report as circulated (attached). 11.5 VP Corporate Services Report C. Gasparini reviewed her report as circulated (attached).	Information
12. Adjournment	The regular meeting was adjourned at 8:28 p.m.	

Chair

President & CEO

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