

LAKE OF THE WOODS DISTRICT HOSPITAL
Regular Meeting of the Board of Directors
Thursday, June 5, 2008, Boardroom

PRESENT: B. Anderson, M. Balcaen, D. Baldwin, A. Cameron, C. Edie, Dr. K. MacDonald, B. McCallum, O. Mejia, D. Munro, J. Reid (Chair), F. Richardson, L. Brown,
REGRETS: J. Clarke, R. Lamb, M. Matheson, Dr. S. Moore, S. Sas, R. Thompson, M. Mymryk, C. Gasparini
ABSENT: E. Skead

AGENDA ITEMS	DISCUSSION	ACTION
1. Call to Order	J. Reid, Chair, called the meeting to order at 5:51 p.m.	
2. Adoption of Agenda	Moved by F. Richardson and seconded by B. Anderson that the regular meeting agenda be adopted as circulated.	Motion#08/6/4 Carried
3. Self Evaluation of Governance Process	<p>3.1 Meeting Monitor Report</p> <p>The May 1, 2008 meeting monitor report, completed by R. Lamb was circulated for review (Attachment #1).</p> <p>3.2 June Meeting Monitor</p> <p>Dr. K. MacDonald was appointed meeting monitor for the current meeting.</p>	
4. Adoption of Minutes	Moved by B. Anderson and seconded by F. Richardson that the minutes of the regular meeting of the Board of Directors held on May 1, 2008 be adopted as circulated.	Motion#08/6/5 Carried
5. Business Arising	<p>5.1 Distribution of Information to the Media Update</p> <p>J. Reid reported that a final decision will be made pending the outcome of discussions with D. Edwards of TBRHSC and K. O'Brien, hospital legal counsel.</p>	Meeting to be scheduled
6. Education	<p>OHA Conference Reports</p> <p>R. Lamb's report was circulated.</p> <p>Additional information was provided verbally by F. Richardson and M. Balcaen. It was noted that common issues for rural and northern hospitals include funding shortfalls and recruitment/retention of health professionals. It is anticipated that these problems will continue and strategies to address them must be investigated. This board needs to be prepared for changes in the direction of healthcare in the province and the country. Interestingly, the distinction between rural and remote (isolation) hospitals was acknowledged.</p>	Information
7. Ownership/ Linkages	<p>7.1 Relationship Building with Aboriginal Communities</p> <p>To facilitate the continuation of community engagement activities with Wabaseemoong, a letter has been sent to Chief Eric Fisher requesting a return visit by Board representatives to that community. At a recent meeting with M. Copenace, ways to improve communications and service provision were discussed and included the scheduling of regular meetings between First Nations community representatives, hospital senior management and Board representatives.</p> <p>7.2 Ownership/Linkages Planning</p> <p>A draft 2008 Plan for Community Engagement has been developed by J. Clarke and circulated to board members for review and comment. The final document will be presented at the September Board meeting for approval.</p>	<p>Information</p> <p>Information</p>

8. Consent Agenda	Moved by D. Munro and seconded by D. Baldwin that the consent agenda be approved.	Motion#08/6/6 Carried
9. Executive Limitations Items	<p>9.1 E-1 People Achieve Optimum Outcomes – for Review</p> <p>M. Balcaen provided comments on specific sections of the policy.</p> <p>#5 – “Death with dignity” – This statement was difficult to evaluate for compliance as there is a willingness to meet the wishes of terminally ill patients but it is not theoretically possible. Although we as a hospital do whatever we reasonably can, there is no system of measurement for what is being done and currently no literature that deals with this issue in acute care hospitals in Canada.</p> <p>#6 – “Patients are aware of other care options after discharge.” This item is not unreasonable and in most cases, if not all, patients are made aware of care options after discharge. This may be verified by way of another patient survey or a random chart review, but it is felt that there are not currently the resources to accomplish this. It was noted that positive response rates to a question in the Hospital Report series which asks whether the individual knew who to call if they ran into difficulty after discharge are higher for LWDH than our peer hospitals and those within our LHIN.</p> <p>After review of policy E-1 People Achieve Optimum Outcomes, it was agreed that further review and possible revision should take place at the October meeting with Jan Moore.</p> <p>9.2 EL-4 Treatment of Clients – for Review</p> <p>After review of policy EL-4 Treatment of Clients, it was agreed that there was no need to change the policy.</p>	To be reviewed at Jan Moore session
10. Monitoring CEO Performance	<p>10.1 E-1 People Achieve Optimum Outcomes</p> <p>Moved by F. Richardson and seconded by B. Anderson that the Board of Directors has assessed the monitoring report on E-1 People Achieve Optimum Outcomes and found that it demonstrated compliance with a reasonable interpretation of the policy.</p> <p>10.2 EL-2 Financial Condition & Activities</p> <p>Moved by B. Anderson and seconded by D. Munro that the Board of Directors has assessed the monitoring report on EL-2 Financial Condition & Activities and found that it demonstrated compliance with a reasonable interpretation of the policy.</p> <p>10.3 EL-4 Treatment of Clients</p> <p>Moved by F. Richardson and seconded by D. Munro that the Board of Directors has assessed the monitoring report on EL-4 Treatment of Clients and found that it demonstrated compliance with a reasonable interpretation of the policy.</p>	<p>Motion#08/6/7 carried</p> <p>Motion#08/6/8 carried</p> <p>Motion#08/6/9 Carried</p>
11. Monitoring Board Performance	<p>11.1 GP-7 Board Committee Principles</p> <p>The monitoring report on GP-7 Board Committee Principles was circulated for review prior to the meeting. There were no recommendations for change or improvement cited in the report.</p>	Information
12. Information Requested by the Board	<p>12.1 President & CEO Report</p> <p>M. Balcaen reviewed his report as circulated. (Attachment #2).</p>	Information

	12.2 Chief of Staff Report	
	Dr. MacDonald's verbal report was provided at the incamera session.	
13. Adjournment	Moved by Dr. K. MacDonald and seconded by O. Mejia that the regular meeting be adjourned at 6:40 p.m.	Motion#08/6/10 Carried

Chair
/sw

Chief Executive Officer