

# Executive Limitations Monitoring Report EL General Executive Constraint Lake of the Woods District Hospital

May 4, 2017

**Board policy is indicated in bold typeface throughout.**

I hereby present my monitoring report on your Executive Limitations Policy EL “**General Executive Constraint**” according to the schedule set out. I certify that the information contained in this report is true, and represents reasonable achievement of the policy unless specifically stated otherwise.

Signed , CEO Date: April 28, 2017

**The Chief Executive Officer shall not cause or allow any practice, activity, decision, or organizational circumstance which is either unlawful, imprudent, or in violation of commonly accepted business and professional ethics or in contravention of Ontario or Federal legislation or regulations.**

CEO Interpretation:

I submit that the Board has comprehensively interpreted “imprudent” in its subsequent Executive Limitations policies. The evidence provided for those policies, taken comprehensively, provides evidence of compliance with the “imprudent” portion of this policy.

The Board has also to some degree interpreted “illegal” and “in violation” of commonly accepted business and professional ethics” in subsequent Executive Limitations policies, but I have further interpreted these statements as follows:

I interpret “illegal” to mean contrary to any provincial or federal law and/or regulation that applies to our organization. This included human rights, employment, and corporate law, as well as the Public Hospitals Act and the Regulations under that Act.

I interpret “commonly accepted business and professional ethics” to mean the currently published code of ethics for the Canadian College of Health Services Executives.

I interpret “cause or allow” to relate to any business acts of omission or commission by anyone in the organization.

I interpret “any practice, activity, decision, organizational circumstance” to include all business functions in my operational span of control, but to exclude governance, other than advising the board if I become aware of the board’s non-compliance with its own policies.

My data below provides evidence of compliance with this global provision.

Compliance with this policy will be demonstrated when there have been no successful fines, charges, penalties, or findings of unethical conduct to a recognized professional organization or regulated body against the CEO resulting from his own actions or inactions, concerning hospital related operations he had control and responsibility over.

Evidence: **Compliant**

I submit that the Board, through the use of external experts such as financial auditors and accreditation surveyors and their subsequent findings, has independently confirmed the CEO’s compliance with this policy. Note: the auditors report to the Audit Committee for 2016-17 will not be available until the end of May and is therefore unavailable for this monitoring report.

The organization has not been fined for any illegal activities, or human rights violations submitted by staff or patients. The hospital has a report from our liability insurers (HIROC) that indicates the disposition of any claims against the hospital. This report was discussed at a recent presentation from HIROC to the Board on March 30, 2017.

During the past year the hospital has not been cited, charged, or fined by the Federal or Provincial government for violation of any federal or provincial legislation or regulation.

A review of our records indicates that no fines or penalties have been assessed against the hospital.

The CEO or any of his senior managers has not been found in breach of the code of ethics by the Canadian College of Health Service Executives or the American College of Health Care Executives.