

PRESENT: M. Balcaen, D. Carrie (Chair), J. Diamond (arrived at 5:25 p.m.), Dr. S. Foidart, Dr. B. Kyle (arrived at 5:46 p.m.), Dr. J.K. MacDonald, D. Makowsky (for K. Dawe), S. Moreau, J. Reid, D. Schwartz and B. Siciliano

REGRETS: K. Dawe, C. Gasparini, D. Paypompee, and T. Stevens

AGENDA ITEMS	DISCUSSION	ACTION
1. Call to Order	D. Carrie, Board Chair, called the meeting to order at 5:02 p.m. <ul style="list-style-type: none"> J. Diamond, new Board Member, was welcomed and roundtable introductions were held. 	Called to Order
2. Adoption of Agenda	Moved by J. Reid and seconded by D. Schwartz that the agenda be approved as circulated	Motion #15/11/1 carried
3. Declaration of Conflict of Interest	There were no declarations of conflict of interest.	None Declared
4. Adoption of Minutes	Moved by J. Reid and seconded by S. Moreau that the minutes of the Regular Meeting of the Board of Directors held on October 8, 2015 be approved as circulated.	Motion #15/11/2 carried
5. Education	<p>5.1 Patient Satisfaction Survey Results</p> <p>M. Balcaen presented on the 2015 Patient Satisfaction Survey Results (presentation appended). The survey was conducted from June 17 – September 30, 2015 and 389 surveys were returned. A seven-point scale is used and responses were collated so that 1-3 represents those who were unsatisfied, 4 are neutral, and 5-7 are satisfied. The following was noted:</p> <ul style="list-style-type: none"> The wording to question #1 and #13 will be reviewed to ensure it is accurate and appropriate. Within the next year more patients will be able to utilize Room Service, and it is hopeful that the response to this question will increase for the next survey. LWDH has greatly improved on question #13: “I am aware of the Aboriginal services in the hospital.” Provincial data will be provided in the presentation to the Board next year for benchmarking purposes. 	<p>Information</p> <p>K. Hales</p>
6. Business Arising	None	
7. Committee Reports	<p>7.1 Ownership/Linkages</p> <p>J. Reid reported:</p> <ul style="list-style-type: none"> Some members are having a difficult time attending a noon hour meeting, so will try an evening meeting. The next meeting will be held on November 12, 2015 at 4:45 p.m. Attended the Grassy Narrows Health Fair and the Morningstar Fall Feast, which were great events. 	Information
	<p>7.2 Governance</p> <p>J. Reid reported:</p> <ul style="list-style-type: none"> Orientation session will be held on Friday, November 13th from 12:00 – 9:00 p.m. All Board Members are encouraged to 	Information

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	attend. <ul style="list-style-type: none"> The next meeting will be held on November 12, 2015 at 4:15 p.m. 	
	7.3 Building a Future No report.	
	7.4 Quality D. Carrie reported: <ul style="list-style-type: none"> Meeting was held on October 29th, and a more in-depth presentation on the Patient Satisfaction Survey Results was given. L. Ronnebeck presented on hand hygiene audit results and c-difficile rates. Both had very strong results. The committee is currently seeking one new member from the LWDH staff who is not a member of the CNO or CPSO. 	Information
	7.5 Nominating D. Carrie reported: <ul style="list-style-type: none"> Committee is meeting with a prospective candidate on Monday. 	Information
	7.6 Governance Accreditation B. Loepky reported: <ul style="list-style-type: none"> LWDH is currently waiting for the final report and award allocation from Accreditation Canada. This information will be provided to the Board once received. 	Information
8. Consent Agenda	Moved by D. Schwartz and seconded by J. Reid that the Consent Agenda be approved.	Motion #15/11/3 carried
9. Monitoring CEO Performance	9.1 EL-3 Financial Condition & Activities Moved by J. Reid and seconded by D. Schwartz that the Board of Directors has assessed the monitoring report on EL-3 Financial Condition & Activities and found that it demonstrated compliance with a reasonable interpretation of the policy, with the exception of the Opening Statement, Item #1, and Item #5. Efforts to move toward a balanced budget before the end of the 2016 fiscal period have been provided.	Motion #15/11/4 carried
	9.2 EL-9 Leadership Capacity & Continuity Moved by J. Reid and seconded by S. Moreau that the Board of Directors has assessed the monitoring report on EL-9 Leadership Capacity and Continuity and found that it demonstrated compliance with a reasonable interpretation of the policy. <ul style="list-style-type: none"> It was noted that the Chief of Staff does not complete the CCHL designation program. This will be corrected in the next report. 	Motion #15/11/5 Carried B. Siciliano
10. Executive Limitations Items	10.1 EL-3 Financial Condition & Activities - Review After review and discussion of policy EL-3 Financial Condition & Activities, it was agreed that Senior Management would review item #1.1 and #5, and would bring a recommendation to the next meeting.	Senior Management
	10.2 EL-9 Leadership Capacity & Continuity - Review	

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	After review and discussion of policy EL-9 Leadership Capacity & Continuity, it was agreed that Senior Management would review item #3 re: including Physician Management Institute courses for the Chief of Staff, who does not participate in CCHL or ACHE's professional development sessions.	Senior Management
11. Monitoring Board Performance	11.1 BC-2 Accountability of the CEO The monitoring report on BC-2 Accountability of the CEO, completed by D. Paypompee, was deferred.	Deferred
	11.2 BC-1 Unity of Control The monitoring report on BC-1 Unity of Control, completed by D. Paypompee, was deferred.	Deferred
	11.3 BC-3 Delegation to the CEO The monitoring report on BC-3 Delegation to the CEO, completed by S. Moreau, was reviewed.	Information
12. Information Requested by the Board	13.1 President & CEO Report M. Balcaen reviewed his report as circulated (attached). In addition: <ul style="list-style-type: none"> LWDH met over 96% of the Accreditation Canada standards. A media release will be completed once the final report and award is received. Board Directors were asked to review the Minister of Health and Long-Term Care's closing speech that was given at Health Achieve, which was circulated by email. D. Makowsky provided an update on the debriefing session that was held for the community-wide Code Orange Drill, which was a great exercise and a great opportunity to review and revise procedure/policy 13.2 Chief of Staff Report Dr. J.K. MacDonald reviewed his report as circulated (attached). 13.3 VP Patient Services Report D. Makowsky, on behalf of K. Dawe, reviewed the VP Patient Services Report as circulated (attached). 13.4 VP Mental Health and Addictions Programs Report B. Siciliano reviewed his report as circulated (attached). It was noted that this was the first time Mental Health and Addictions Programs was included in the Accreditation Canada Survey. 12.5 VP Corporate Services Report C. Gasparini's report was circulated (attached). M. Balcaen reported that LWDH has received written notice from the MOHLTC of grant approval for the OR/CSR Renovation Project. D. Carrie will be signing the agreement.	Information
13. Adjournment	The regular meeting was adjourned at 6:24 p.m.	Adjourned

Chair

President & CEO

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