

LAKE OF THE WOODS DISTRICT HOSPITAL
Regular Meeting of the Board of Directors
Thursday, April 2, 2015
Lake of the Woods District Hospital Boardroom

PRESENT: B. Anderson, M. Balcaen, D. Carrie, K. Dawe, C. Gasparini, Dr. B. Kyle, Dr. J.K. MacDonald, S. Moreau, J. Reid, F. Richardson (Chair), B. Siciliano, and T. Stevens

REGRETS: D. Monteith, D. Paypompee, and Dr. R. Scatliff

AGENDA ITEMS	DISCUSSION	ACTION
1. Call to Order	F. Richardson, Chair, called the meeting to order at 5:05 p.m.	Called to Order
2. Adoption of Agenda	Moved by J. Reid and seconded by B. Anderson that the regular meeting agenda be approved as circulated.	Motion#15/4/1 Carried
3. Declaration of Conflict of Interest	D. Carrie declared a conflict of interest re: Item #8.1.	Conflict of Interest Declared
4. Adoption of Minutes	Moved by B. Anderson and seconded by J. Reid that the minutes of the Regular Meeting of the Board of Directors held on March 5, 2015 be approved as circulated.	Motion#15/4/2 carried
5. Business Arising	None	
6. Education	<p>6.1 Director Peer and Self-Assessment</p> <p>D. Carrie, on behalf of the Governance Committee of the Board, presented on the draft Director Peer and Self-Assessment (presentation appended). This document is required for the upcoming Accreditation Canada Survey. The committee looked at a number of samples, and the tool being presented was determined to be better option. Following review and discussion, it was the consensus that:</p> <ul style="list-style-type: none"> For the Peer Assessment, all Board Members, Ex-officios, and Senior Managers will complete the assessment and will be included in the ratings. Responses will be submitted to K. Hales, Executive Assistant. For the Self-Assessment the data will be aggregated and responses will be submitted to F. Richardson, Board Chair. <p>The first assessment using this template will be conducted in May prior to the June meeting.</p>	Information
7. Committee Reports	<p>7.1 Ownership/Linkages</p> <p>J. Reid reported:</p> <ul style="list-style-type: none"> Had a productive meeting with Birchwood Terrace, which included information about their 20 facilities in southern Ontario. Next community visit is on April 18, 2015 with the Hospital Auxiliary. Six (6) LWDH staff members are attending to present on the services LWDH provides. Continue to invite organizations to meet. 	Information
	<p>7.2 Governance</p> <p>Moved by J. Reid and seconded by D. Carrie that the Board of Directors approves the <i>Director Peer and Self-Assessment</i> as recommended by the Governance Committee and as presented by Dean Carrie.</p>	Motion#15/4/3 carried
	<p>7.3 Building a Future</p> <p>C. Gasparini reported:</p> <ul style="list-style-type: none"> Official approval from the Ministry of Health (MOH) has not been received. Recent correspondence via teleconference suggested that LWDH can move onto the next step, which is planning. 	Information

AGENDA ITEMS	DISCUSSION	ACTION
	<ul style="list-style-type: none"> More information on the staging and costing needs to be provided to the MOH. Will be presented to the LHIN for their endorsement at their April Board Meeting. Hoping to have official approval by the next LWDH Board Meeting. 	
	<p>7.4 Quality</p> <p>F. Richardson reported:</p> <ul style="list-style-type: none"> No critical incidents to report during the month. M. Stevenson provided a review of a quality incident that utilized the Code of Ethics and Ethical Framework to address concerns re: compliance, behavior, and staff/patient safety with a Dialysis patient. <p>Moved by J. Reid and seconded by B. Anderson that the Board of Directors approves the 2015-2016 Lake of the Woods District Hospital's Quality Improvement Plan (QIP) as presented.</p>	<p>Information</p> <p>Motion#15/4/4 carried</p>
	<p>7.5 Nominating</p> <p>B. Anderson reported:</p> <ul style="list-style-type: none"> Two applications have been received that will be considered at the next committee meeting. Recommendations will be brought forward at May's Board Meeting. 	Information
	<p>7.7 Governance Accreditation</p> <p>No update.</p>	
8. Consent Agenda	<p>D. Carrie declared a conflict of interest re: Item #8.1 and left the room.</p> <p>Moved by B. Anderson and seconded by J. Reid that the Consent Agenda be approved.</p>	Motion#15/4/5 carried
9. Executive Limitations Items	<p>9.1 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>	Information
	<p>9.2 EL-1 Planning: Hospital Strategic Plan – Review</p> <p>After review and discussion of policy EL-10 Significant Service Changes, it was agreed that there was no need to revise the policy at this time.</p> <ul style="list-style-type: none"> The schedule will be revised so this monitoring report is due annually in June to ensure the required information is available. 	<p>Information</p> <p>Update Schedule</p>
	<p>9.3 EL-7 Communication and Support to the Board – Review</p> <p>After review and discussion of policy EL-7 Communication and Support to the Board, it was agreed that there was no need to revise the policy at this time.</p>	Information
	<p>9.4 EL-12 Ethical Behaviour – Review</p> <p>After review and discussion of policy EL-12 Ethical Behaviour, it was agreed that there was no need to revise the policy at this time.</p>	Information
10. Monitoring CEO Performance	<p>10.1 EL-5 Treatment of Clients</p> <p>Moved by D. Carrie and seconded by J. Reid 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 item #6.2 for the Surgical Site Infection Prevention Indicator, and acceptable plans to attain compliance have been provided.</p>	Motion #15/4/6 carried

AGENDA ITEMS	DISCUSSION	ACTION
	10.2 EL-1 Planning: Hospital Strategic Plan Moved by B. Anderson and seconded by D. Carrie that the Board of Directors has assessed the monitoring report EL-1 Planning: Hospital Strategic Plan and found that it demonstrated compliance with a reasonable interpretation of the policy.	Motion #15/4/7 carried
	10.3 EL-7 Communication and Support to the Board Moved by D. Carrie and seconded by B. Anderson that the Board of Directors has assessed the monitoring report EL-7 Communication and Support to the Board and found that it demonstrated compliance with a reasonable interpretation of the policy, with the exception of item #2, and an acceptable plan to attain compliance has been provided.	Motion #15/4/8 carried
	10.4 EL-12 Ethical Behaviour Moved by J. Reid and seconded by B. Anderson that the Board of Directors has assessed the monitoring report EL-12 Ethical Behaviour and found that it demonstrated compliance with a reasonable interpretation of the policy.	Motion #15/4/9 carried
11. Monitoring Board Performance	11.1 GP-12 Board Linkage with Community The monitoring report on GP-12 Board Linkage with Community, completed by S. Moreau, was reviewed and discussed.	Information
	11.2 GP-15 Board Succession Planning The monitoring report on GP-15 Board Succession Planning will be reviewed at the next meeting of the Board of Directors.	Deferred
12. Information Requested by the Board	12.1 President & CEO Report M. Balcaen reviewed his report as circulated (attached). <ul style="list-style-type: none"> It was noted that normally F. Richardson attends the Rural and Northern Hospital Conference as he is on the committee and attends free of charge. Board Members do not normally attend. 12.2 Chief of Staff Report Dr. J.K. MacDonald reviewed his report as circulated (attached). 12.3 VP Patient Services Report K. Dawe reviewed her report as circulated (attached). 12.4 VP Mental Health and Addictions Programs Report B. Siciliano reviewed his report as circulated (attached). <ul style="list-style-type: none"> It was noted that 89 clients completed the Needle Exchange Survey. 12.5 VP Corporate Services Report C. Gasparini reviewed her report as circulated (attached). Projecting that the deficit will stay fairly constant for the last month; but will not know until the final data is received.	Information
13. Adjournment	The regular meeting was adjourned at 6:19 p.m.	

Chair

President & CEO

/kh