

**LAKE OF THE WOODS DISTRICT HOSPITAL**  
**Regular Meeting of the Board of Directors**  
**Thursday, June 4, 2015**  
**Minis Hall, Super 8 Motel, Kenora, ON**

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

**REGRETS:** Dr. R. Scatliff

AGENDA ITEMS	DISCUSSION	ACTION
1. Call to Order	F. Richardson, Chair, called the meeting to order at 5:14 p.m.	Called to Order
2. Adoption of Agenda	<b>Moved</b> by J. Reid and <b>seconded</b> by D. Monteith that the regular meeting agenda be approved as circulated.	Motion#15/6/1 Carried
3. Declaration of Conflict of Interest	There were no declarations of conflict of interest.	None Declared
4. Adoption of Minutes	<b>Moved</b> by D. Monteith and <b>seconded</b> by J. Reid that the minutes of the Regular Meeting of the Board of Directors held on May 7, 2015 be approved as circulated.	Motion#15/6/2 carried
5. Business Arising	None.	
6. Education	<b>6.1 Mock Accreditation Canada Survey</b> <ul style="list-style-type: none"> <li>Darlene Furlong was invited to assist LWDH and the Accreditation Teams in preparing for the Accreditation Canada Survey that is taking place in October 2015.</li> <li>There will be a focus on quality care, safety, and risk management.</li> <li>She recognized that the organization is undergoing change and encourages strong communication and involvement of staff in planning. The importance of rewarding, acknowledging, and encouraging staff was stressed.</li> <li>The Governance Accreditation Team will be reviewing the standards again in the fall. Encouraged to include all Board Directors so everyone is included and prepared.</li> <li>Ethical decision making, succession planning, and CEO/Chief of Staff evaluations were discussed.</li> </ul>	Information
7. Committee Reports	<b>5.1 Ownership/Linkages</b> J. Reid reported: <ul style="list-style-type: none"> <li>Meeting with the Kenora District Services Board on June 16, 2015 at 4:30 p.m. in the LWDH Boardroom, to review survey results on housing for homeless individuals within the district.</li> <li>Will be meeting with the Rotary Club on July 13, 2015 at the Lakeside Inn and Conference Centre.</li> </ul>	Information
	<b>5.2 Governance</b> Individual results from the Peer Assessment Survey have been circulated by email to each Director, President and Vice President of Medical Staff, and Senior Manager. D. Carrie reported on the aggregated Peer and Self-Assessment Survey Results (attached).	Information

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	Overall the results were very acceptable. The Governance Committee will be reviewing the data in September to determine if targeted education is required, and to determine if this will be used as an annual survey. Suggestions or questions are welcome and can be sent to the Governance Committee, through K. Hales.	
	<b>5.3 Building a Future</b>  C. Gasparini reported: <ul style="list-style-type: none"> <li>No formal approval from the MOHLTC has been received. Have had one more meeting to look at the staging to ensure services are maintained throughout the renovation.</li> </ul>	Information
	<b>5.4 Quality</b>  F. Richardson reported: <ul style="list-style-type: none"> <li>D. Makowsky presented on the Medication Reconciliation Audit Results on Transfer/Discharge for Quarter 4, and we are currently meeting this target.</li> <li>L. Hatfield-Johnston presented on ED Wait Times, and though it is a challenge, LWDH continues to be on the right track.</li> <li>The OR Stop-Go procedure, which is a patient safety initiative, was reviewed.</li> </ul>	Information
	<b>5.5 Nominating</b> No report.	
	<b>5.6 Governance Accreditation</b> No report.	
<b>8. Consent Agenda</b>	As per the majority vote of the Board, agenda item #8.1.1. Leave of Absence Request was removed from the Consent Agenda and moved to In Camera.  <b>Moved</b> by J. Reid and <b>seconded</b> by D. Monteith that the Consent Agenda be approved with the exception of item #8.1.1.	Moved to In Camera  Motion #15/6/3 carried
<b>9. Executive Limitations Items</b>	<b>7.1 EL-3 Financial Condition &amp; Activities – Review</b>  After review and discussion of policy EL-3 Financial Condition & Activities, it was agreed that there was no need to revise the policy at this time.	Information
	<b>7.2 GP-11 Charge to the Chief of Medical Staff - Review</b>  The review of GP-11 Charge to the Chief of Medical Staff has been deferred until September 2015.	Deferred
<b>10. Monitoring CEO Performance</b>	<b>8.1 EL-3 Financial Condition &amp; Activities</b>  <b>Moved</b> by D. Monteith and <b>seconded</b> by J. Reid 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 and Item #1. Explanations have been provided and acceptable plans to work toward compliance have been provided.	Motion #15/6/4 carried
	<b>8.2 GP-11 Charge to the Chief of Medical Staff</b>  The review of the monitoring report on GP-11 Charge to the Chief of Medical Staff has been deferred until September 2015.	Deferred

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11. Monitoring Board Performance	None.	
12. Governance Process Items for Decision	<p><b>12.1 Professional Staff By-law Revisions for Approval</b></p> <p>The revisions to the Professional Staff By-laws, with a memorandum, were circulated to all credentialed professional staff on March 5, 2015. They were reviewed at the last Medical Advisory Committee Meeting and it was noted that there were concerns re: changes to article 3.01 (c) (xv).</p> <p><b>Moved</b> by J. Reid and <b>seconded</b> by D. Monteith that the Board of Directors approves the revisions to the Professional Staff By-laws as circulated.</p>	Motion#15/6/5 Carried
	<p><b>12.2 Northwest Regional Appointment and Credentialing Policy and Procedure for Approval</b></p> <p><b>Moved</b> by D. Monteith and <b>seconded</b> by J. Reid that the Board of Directors approves the <i>Northwest Regional Appointment and Credentialing Policy and Procedure</i> as circulated.</p>	Motion#15/6/6 Carried
	<p><b>12.3 Application to Become a Board Member Form for Approval</b></p> <p><b>Moved</b> by J. Reid and <b>seconded</b> by D. Monteith that the Board of Directors approves the revisions to the Application to Become a Board Member Form, as recommended by the Nominating Committee of the Board.</p>	Motion#15/6/7 Carried
	<p><b>12.4 Revisions to GP-8.2 Executive Committee ToR and GP-8.6 Nominating Committee ToR</b></p> <p><b>Moved</b> by D. Monteith and <b>seconded</b> by J. Reid that the Board of Directors approves the revisions to policy GP-8.2 Executive Committee Terms of Reference and GP-8.6 Nominating Committee Terms of Reference as recommended by the Governance Committee of the Board.</p>	Motion#15/6/8 Carried
13. Information Requested by the Board	<p><b>11.1 President &amp; CEO Report</b> M. Balcaen reviewed his report as circulated (attached). In addition, more information was provided on the integration opportunities that were discussed at the LHIN Governance-to-Governance session.</p> <p><b>11.2 Chief of Staff Report</b> Dr. MacDonald reviewed his report as circulated (attached). Correction under nice to know information: "Canadian Society for Transfusion Medicine (CSTM)."</p> <p><b>11.3 VP Patient Services Report</b> K. Dawe reviewed her report as circulated (attached). In addition, there are currently 10 ALC patients in-hospital, with four (4) patients waiting for long-term care placement. Will be monitoring patient census on a regular basis.</p> <p><b>11.4 VP Mental Health and Addictions Programs Report</b> B. Siciliano reviewed his report as circulated (attached). In addition, he provided further detail on the clinical supervision model that</p>	Information

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	<p>Mental Health &amp; Addictions Programs will be moving toward.</p> <p><b>11.5 VP Corporate Services Report</b>  C. Gasparini reviewed her report as circulated (attached). C. Gasparini will circulate a fiscal report in July to Board Directors for information. In addition, C. Gasparini provided an update on the Annual Data Blitz Workshop that was held yesterday in Thunder Bay. It provided an opportunity for networking and information sharing. It was noted that there is the need to engage clinical staff and physicians on quality of information and correct coding.</p>	
<b>12. Recess</b>	A recess of the regular meeting was called at 6:25 p.m. to move to the In Camera session and the Annual General Meeting.	Recess
<b>13. Reconvene</b>	<p>The regular meeting was reconvened at 8:51 p.m.</p> <p>Dave Schwartz and Sallie Hunt, newly elected Board Directors, were present for this portion of the meeting. F. Richardson and B. Anderson were not present for this portion of the meeting.</p> <p><b>Election of Officers</b></p> <p>M. Balcaen, President and Chief Executive Officer, assumed the position of Chair for the next portion of the meeting. Elections for the positions of Board Chair and Board Vice Chair for a one year term of office followed.</p> <p>Mr. Balcaen called for nominations from the floor for Board Chair.</p> <p><b>Moved</b> by S. Moreau and <b>seconded</b> by D. Monteith that Dean Carrie be nominated for the position of Chair of the Board of Directors.</p> <p>There being no further nominations, <b>Dean Carrie was acclaimed Chair of the Board of Directors.</b></p> <p>Upon assuming the position of Chair, D. Carrie called for nominations for the position of Vice Chair.</p> <p><b>Moved</b> by S. Moreau and <b>seconded</b> by D. Paypompee that Joan Reid be nominated for the position of Vice Chair of the Board of Directors.</p> <p>There being no further nominations, <b>Joan Reid was acclaimed Vice Chair of the Board of Directors.</b></p> <p><b>Moved</b> by J. Reid and <b>seconded</b> by S. Moreau that Mark Balcaen be appointed as Secretary-Treasurer of the Board of Directors.</p>	<p>Reconvened</p> <p>Motion#15/6/9</p> <p>Motion#15/6/10</p> <p>Motion#15/6/11</p>
<b>14. Adjournment</b>	The regular meeting was adjourned at 8:54 p.m.	Adjourned

Chair

President & CEO

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