

**LAKE OF THE WOODS DISTRICT HOSPITAL**  
**Regular Meeting of the Board of Directors**  
**Thursday, January 7, 2016**  
**LWDH Boardroom**

**PRESENT:** M. Balcaen, D. Carrie (Chair), W. Cuthbert, K. Dawe, J. Diamond, Dr. S. Foidart, C. Gasparini, Dr. J.K. MacDonald, J. Reid, D. Schwartz, B. Siciliano, and T. Stevens (arrived at 5:10 p.m.)

**REGRETS:** Dr. B. Kyle, S. Moreau, and D. Paypompee

AGENDA ITEMS	DISCUSSION	ACTION
1. <b>Call to Order</b>	D. Carrie, Board Chair, called the meeting to order at 5:01 p.m.	Called to Order
2. <b>Adoption of Agenda</b>	<b>Moved</b> by J. Reid and <b>seconded</b> by W. Cuthbert that the agenda be approved as circulated.	Motion #16/1/1 carried
3. <b>Adoption of Minutes</b>	<b>Moved</b> by W. Cuthbert and <b>seconded</b> by J. Reid that the minutes of the Regular Meeting of the Board of Directors held on December 3, 2015 be approved as circulated.	Motion #16/1/2 carried
4. <b>Declaration of Conflict of Interest</b>	There were no declarations of conflict of interest.	None Declared
5. <b>Education</b>	The presentation on the Accreditation Canada Survey Report will be given at the next regular meeting.	Deferred
6. <b>Business Arising</b>	None	
7. <b>Committee Reports</b>	<p><b>7.1 Ownership/Linkages</b></p> <p>J. Reid reported:</p> <ul style="list-style-type: none"> <li>All Board Directors were invited to attend a meeting with the Family Health Network's Medical Staff on December 17<sup>th</sup>; a debriefing session was held on December 23<sup>rd</sup>.</li> <li>The next O/L Committee meeting will be held on January 13, 2016 at 4:30 p.m. in the LWDH Boardroom. M. Balcaen will be invited to attend.</li> </ul> <p>Following discussion, it was <b>moved</b> by J. Reid and <b>seconded</b> by D. Schwartz that the monitoring reports be posted on the external website effective in February 2016 following the Board Meeting.</p>	<p>Information</p> <p>Motion #16/1/3 carried</p>
	<p><b>7.2 Governance</b></p> <p>J. Reid reported:</p> <ul style="list-style-type: none"> <li>Governance Committee will no longer be held. Any action items related to governance will be discussed at the Executive Committee and/or the Board Meeting.</li> </ul>	Information
	<p><b>7.3 Building a Future</b></p> <p>C. Gasparini reported that the OR/MDRD Capital Renovation Project is moving along very well.</p>	Information

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	<b>7.4 Quality</b> D. Carrie reported: <ul style="list-style-type: none"> <li>B. Loeppky provided an update on the Accreditation appeal.</li> <li>A report on complaints submitted to the hospital was provided, and will be provided twice/year as per new legislation. The majority of the complaints, with the exception of recent ones, have been resolved.</li> <li>Presentation was given on the cultural care QIP indicator.</li> <li>The next meeting is scheduled for Tuesday January 19, 2016 at 12:00 p.m., followed by Executive at 1:00 p.m.</li> </ul>	Information
	<b>7.5 Nominating</b> No Report	
	<b>7.6 Governance Accreditation</b>  All Board Directors are invited to attend a review of the Governance Section in the Accreditation Report on Thursday January 14, 2016 at 4:30 p.m. in the LWDH Boardroom.	Information
<b>8. Consent Agenda</b>	<b>Moved</b> by J. Reid and <b>seconded</b> by D. Schwartz that the Consent Agenda be approved.	Motion #16/1/4 carried
<b>9. Monitoring CEO Performance</b>	<b>9.1 E-1 People Achieve Optimum Outcomes - Report</b>  <b>Moved</b> by D. Schwartz and <b>seconded</b> by J. Reid 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, with the exception of Item #2 (b) (c) and (d). The reasons for these non-compliances were reviewed and no further actions are planned.	Motion #16/1/5 carried
	<b>9.2 EL-6 Treatment of Staff Compliance Report</b>  <b>Moved</b> by D. Schwartz and <b>seconded</b> by J. Reid that the Board of Directors has assessed the compliance report on EL-6 Treatment of Staff and found that it demonstrated compliance with a reasonable interpretation of the policy.	Motion #16/1/6
<b>10. Executive Limitations Items</b>	<b>10.1 E-1 People Achieve Optimum Outcomes - Review</b>  After review and discussion of policy E-1 People Achieve Optimum Outcomes, it was determined that there was no need to revise the policy at this time.  The importance of qualitative data, and various ways to obtain this data, was discussed.	Information
<b>11. Monitoring Board Performance</b>	<b>11.1 GP-6 Chairperson's Role</b>  The monitoring report on GP-6 Chairperson's Role, completed by J. Reid, was reviewed. The Executive Committee will determine if this policy can be more concise.	To Executive Committee
	<b>11.2 GP-18 CEO Recruitment</b>	Deferred
	<b>11.3 BC Global Board-CEO Relationship</b>  The monitoring report on BC Global Board-CEO Relationship, completed by D. Schwartz, was reviewed. The Executive Committee will review the wording of this policy and determine if any revisions are required.	To Executive Committee

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<b>12. Governance Process Items for Approval</b>	<b>12.1 Foundation Nomination for Approval</b> <b>Moved</b> by J. Reid and <b>seconded</b> by J. Diamond that the Board of Directors approves the nomination of Holly Ann Friesen to the Lake of the Woods District Hospital Foundation's Board of Directors.	Motion #16/1/7
	<b>14.2 Administrative Staff By-law Revision for Approval</b>	Deferred
<b>13. Information Requested by the Board</b>	<b>13.1 President &amp; CEO Report</b> M. Balcaen reviewed his report as circulated (attached). In addition: <ul style="list-style-type: none"> <li>The response to our appeal has been received, and we will maintain "Accreditation" status. A presentation will be given at the next Board Meeting.</li> <li>The hospital tour will continue prior to the next Board Meeting at 4:00 p.m.</li> </ul> <b>13.2 Chief of Staff Report</b> Dr. J.K. MacDonald's reviewed his report as circulated (attached). <b>13.3 VP Patient Services Report</b> K. Dawe reviewed her report as circulated (attached). In addition: <ul style="list-style-type: none"> <li>An update was provided on the current number of Alternate Level of Care (ALC) patients in-hospital. We currently have 14 ALC patients: eight (8) are waiting for long-term care placement, with seven (7) waiting for Pinecrest-only where there are currently no beds available.</li> <li>As reported, LHIN funding for the Ambulatory Day Clinic (ADC) has been discontinued. It is believed that the NWLHIN is the only LHIN in Ontario that has hospitals doing ADC clinics. In other areas the CCAC is providing this service.</li> </ul> <b>13.4 VP Mental Health and Addictions Programs Report</b> B. Siciliano reviewed his report as circulated (attached). <b>13.5 VP Corporate Services Report</b> C. Gasparini reviewed her report as circulated (attached). In addition: <ul style="list-style-type: none"> <li>Senior Management continues to follow up with MOHLTC, NWLHIN, and the OHA re: the current financial situation.</li> <li>LWDH continues to project a \$1M deficit for this fiscal year.</li> <li>D. Carrie was impressed with the actions taken to reduce expenses, which continue to be under-budget. It is clearly an issue with revenue, and it is a shame that the current funding model continues to hurt us.</li> </ul>	Information
<b>13. Adjournment</b>	The regular meeting was adjourned at 6:01 p.m.	Adjourned

Chair

President & CEO

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