

**LAKE OF THE WOODS DISTRICT HOSPITAL**  
**Regular Meeting of the Board of Directors**  
**Thursday, February 2, 2017**  
**Lake of the Woods District Hospital Boardroom**

**PRESENT:** M. Balcaen, D. Carrie, J. Diamond, C. Gasparini, Dr. B. Kyle (left at 5:45 p.m.), Dr. J.K. MacDonald, D. Makowsky, S. Moreau (arrived at 5:20 p.m.), J. Reid (Chair), D. Schwartz, B. Siciliano, and Dr. M. Spencer

**REGRETS:** W. Cuthbert

**GUESTS:** R. Young (Q104), S. Lamb (DMN), and A. Siroishka (89.5)

**ABSENT:** D. Paypompee

AGENDA ITEMS	DISCUSSION	ACTION
<b>1. Call to Order</b>	J. Reid, Chair, called the meeting to order at 5:00 p.m.	Called to Order
<b>2. Adoption of Agenda</b>	<b>Moved</b> by D. Schwartz and <b>seconded</b> by J. Diamond that the regular meeting agenda be approved with the revision to Item #7.4, which will be moved to In Camera.	Motion #17/2/1 Carried with Revision
<b>3. Adoption of Minutes</b>	<b>Moved</b> by J. Diamond and <b>seconded</b> by D. Schwartz that the minutes of the Regular Meeting of the Board of Directors held on January 5, 2017 be approved as circulated.	Motion #17/2/2 Carried
<b>4. Declaration of Conflict of Interest</b>	There were no declarations of conflict of interest.	None Declared
<b>5. Education</b>	<p><b>5.1 Managed Alcohol Program (MAP)</b></p> <p>B. Siciliano presented on the Managed Alcohol Program (MAP) that commenced on Monday, January 23, 2017 in the Morningstar Centre (presentation attached). There are currently three (3) patients enrolled in the program and results have been positive so far. The program can accommodate a maximum of 10 patients. LWDH received annualized funding from the LHIN to run this program. The interprofessional clinical path of the MAP was reviewed. Data will be collected to review effectiveness of the program in a variety of areas. A question and answer period was held. Expectation is that at the conclusion of the program, with proper supports in place, patients will be able to transition to the community.</p>	Information
<b>6. Business Arising</b>	None.	
<b>7. Committee Reports</b>	<p><b>7.1 Executive</b></p> <p>J. Reid reported:</p> <ul style="list-style-type: none"> <li>• The revised Ends were circulated to staff and physicians for feedback, which will be discussed further In Camera.</li> </ul>	Information
	<p><b>7.2 Ownership/Linkages</b></p> <p>J. Reid reported:</p> <ul style="list-style-type: none"> <li>• Reviewed mental health organizations that the committee can meet with.</li> <li>• The meeting with Treaty #3 was cancelled, and J. Reid is trying to reschedule.</li> <li>• Reminder that the committee will be meeting with the Kenora Sexual Assault Centre on February 6, 2017 at 5:30 p.m. in the LWDH Boardroom.</li> <li>• Next meeting will be held Wednesday February 8, 2017 at 5:00 p.m. in the LWDH Boardroom.</li> </ul>	Information
	<p><b>7.3 Quality</b></p> <p>J. Reid reported:</p> <ul style="list-style-type: none"> <li>• The Patient Satisfaction Survey Results the 2017-18 Quality Improvement</li> </ul>	Information

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	Plan (QIP) Targets were reviewed. <ul style="list-style-type: none"> <li>Concerns with current ALC rates were discussed.</li> </ul>	
	<b>7.4 CEO Evaluation and Compensation</b>	Moved to In Camera
	<b>7.5 Nominating</b> D. Schwartz reported: <ul style="list-style-type: none"> <li>Recruitment is underway for Board Directors, and advertisements have been placed. Looking to fill three (3) Aboriginal Director positions and one (1) vacancy. Please discuss the opportunity with friends and colleagues who may be interested. It was noted that legal expertise on the Board would be beneficial, but is not essential.</li> </ul>	Information
	<b>7.6 Building a Future</b> No report.	
<b>8. Consent Agenda</b>	<b>Moved</b> by D. Schwartz and <b>seconded</b> by J. Diamond that the Consent Agenda be approved.	Motion #17/2/3 Carried
<b>9. Monitoring CEO Performance</b>	<b>9.1 E-2 Information for Positive Lifestyle Choices</b> <b>Moved</b> by D. Carrie and <b>seconded</b> by J. Diamond that the Board of Directors has assessed the monitoring report on E-2 Information for Positive Lifestyle Choices and found that it demonstrated compliance with a reasonable interpretation of the policy, with the expectation that the next monitoring report include more information on item #4.	Motion #17/2/4 Carried
	<b>9.2 E-3 Partners Have Enhanced Capacity</b> <b>Moved</b> by J. Diamond and <b>seconded</b> by D. Carrie that the Board of Directors has assessed the monitoring report on E-3 Partners Have Enhanced Capacity and found that it demonstrated compliance with a reasonable interpretation of the policy, with the expectation that the next monitoring report include a more expansive definition of "access."	Motion #17/2/5 Carried
<b>10. Executive Limitations Items</b>	<b>10.1 E-2 Information for Positive Lifestyle Choices – Review</b> After review of E-2 Information for Positive Lifestyle Choices, it was noted that all Ends policies are currently under revision, and will be discussed further In Camera.	Information
	<b>10.2 E-3 Partners Have Enhanced Capacity – Review</b> After review of E-3 Partners Have Enhanced Capacity, it was noted that all Ends policies are currently under revision, and will be discussed further In Camera.	Information
<b>11. Monitoring Board Performance</b>	<b>11.1 GP-7 Board Committee Principles</b>	Deferred
	<b>11.2 GP-5 Board Job Description</b>	Deferred
<b>12. Information Requested by the Board</b>	<b>12.1 President &amp; CEO Report</b> M. Balcaen reviewed his report as circulated (attached).  <b>12.2 Chief of Staff Report</b> Dr. MacDonald reviewed his report as circulated (attached). Report on the services the LWDH contracts out to other organizations for compensation will be provided for information at an upcoming meeting.  <b>12.3 VP Patient Services Report</b> D. Makowsky reviewed her report as circulated (attached). An update was provided on ALCs. There are currently 15 ALC patients in-hospital. LWDH has	Information       C. Gasparini and Dr. J.K. MacDonald

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	<p>received Category 1A Crisis Designation Status for 14 days, until February 14, 2017. Will continue to be monitored.</p> <p><b>12.4 VP Mental Health and Addictions Programs Report</b>            B. Siciliano reviewed his report as circulated (attached). Continue to meet with key community partners re: a high-risk youth strategy for Kenora that includes enhanced capacity of LWDH staff; a children’s mobile crisis response; and a residential stabilization unit for children outside of the hospital. Proposal has been submitted to the NWLHIN for 24/7 social work coverage in hospital; will continue to keep the Board updated.</p> <p><b>12.5 VP Corporate Services Report</b>            C. Gasparini reviewed her report as circulated (attached). An update was provided on the OR/MDR Capital Renovation Project. Communication is ongoing, and a media release was provided to the media representatives present to assist with communication to the public (attached).</p>	
<b>14. Adjournment</b>	The regular meeting was adjourned at 6:16 p.m.	Adjourned

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 Chair

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 President & CEO

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