LAKE OF THE WOODS DISTRICT HOSPITAL Regular Meeting of the Board of Directors Thursday, September 7, 2017 Lake of the Woods District Hospital Boardroom

PRESENT: M. Balcaen, D. Carrie, J. Diamond, C. Gasparini, Dr. J.K. MacDonald, D. Makowsky, J.

McKibbon, J. Reid (Chair), D. Schwartz, D. Segerts, B. Siciliano (via teleconference), and

E. Stach

REGRETS: W. Cuthbert and C. Kokokopenace

GUESTS: R. Clayton (DMN), R. Forbes (Q104), A. Siroishka (89.5 The Lake), and A. Topp (BIG

Healthcare Inc.)

AGENDA ITEMS		DISCUSSION	ACTION
	Call to Order	 J. Reid, Chair, called the meeting to order at 5:00 p.m. Adam Topp (BIG Healthcare Inc.), Project lead for the Operational Review, was introduced. He was on-site today for the first Operational Review Steering Committee Meeting; the Operational Review has officially begun and is targeted for completion in January/February 2018. This review does include a governance review; some Board Directors will be interviewed. Recommendations re: governance process will be provided if required. The Project Team members were briefly reviewed. 	Called to Order
2.	Adoption of Agenda	Moved by D. Carrie and seconded by D. Segerts that the regular meeting agenda be approved as circulated.	Motion #17/9/1 Carried
3.	Adoption of Minutes	Moved by D. Segerts and seconded by D. Schwartz that the minutes of the Regular Meeting of the Board of Directors held on June 8, 2017 be approved as circulated.	Motion #17/9/2 Carried
	Declaration of Conflict of Interest	There were no declarations of conflict of interest.	None Declared
	Education	"Effective Governance for Quality and Patient Safety Education" by Dr. Ross Baker, University of Toronto The OHA video titled "Effective Governance for Quality and Patient Safety Education" with Dr. Ross Baker was viewed. The LWDH does have a Quality Improvement Plan (QIP) and a Quality Committee of the Board that meets every two (2) months. E. Mudry will be asked to present at a future education session on the QIP.	To Executive Committee
	Business Arising	None.	
7.	Committee Reports	7.1 Board Committee Membership for 2017 After discussion, the 2017-2018 Committee Membership was set and initial meeting dates scheduled. It was noted that the Building a Future Terms of Reference is likely to change following review after the scheduled site-visits.	
		Moved by D. Schwartz and seconded by D. Segerts that the Board Committee Membership for 2017-2018 be approved with the addition of J. Diamond and E. Stach to the Ownership/Linkages Committee.	Motion #17/9/3 Carried with addition
		 7.2 Executive J. Reid reported: Board Orientation will be held on Saturday October 14, 2017 from 8:00 a.m. – 4:00 p.m. with presentations from M. Watts (Osler) and R. Stringham (Governance Coach). Will ask to record the sessions for those who are unable to attend. 	Information

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	7.2 Ownership/Linkages No report.	
	7.3 Quality No report.	
	7.4 CEO Evaluation and Compensation	Moved to In Camera
	7.5 Nominating No report.	
	7.6 Building a Future No report.	
8. Consent Agenda	Moved by D. Segerts and seconded by D. Schwartz that the Consent Agenda be approved.	Motion #17/9/4 Carried
9. Monitoring CEO	9.1 EL-2 Planning: Financial	
Performance	Moved by D. Carrie and seconded by J. Diamond that the Board of Directors has assessed the monitoring report on EL-2 Planning: Financial and found that it demonstrated compliance with a reasonable interpretation of the policy.	Motion #17/9/5 Carried
	9.2 EL-5 Treatment of Clients	Deferred
10. Executive Limitations	10.1 EL-2 Planning: Financial – Review	
Items	After review of policy EL-2 Planning: Financial, it was agreed that there was no need to revise the policy at this time. Discussion was held re: item #5 and how to accurately determine what is "reasonable".	Information
	10.2 EL-5 Treatment of Clients – Review	Deferred
11. Monitoring	11.1 2017-2018 Monitoring Report Scheduled	
Board Performance	The 2017-2018 Monitoring Report Schedule was circulated for information.	Information
	11.2 GP-13 Board Linkage with Other Organizations	
	The monitoring report on GP-13 Board Linkage with Other Organizations, completed by J. Reid, was reviewed. Following discussion, it was agreed that there was no need to revise the policy at this time.	Information
	11.3 BC-2 Accountability of the CEO	Deferred
12. Information Requested by the Board	 12.1 President & CEO Report M. Balcaen reviewed his report as circulated. In addition: Meeting with Fort Qu'Appelle's All Nations' Healing Hospital has been rescheduled to Monday September 18, 2017. Site visits to the Yukon Hospitals have been discussed, and there could be the opportunity for one or two Directors to attend. M. Balcaen will look into this further and provide information as it comes available. 	Information M. Balcaen
	12.2 Chief of Staff Report Dr. MacDonald will review his report in camera. In addition, there are six (6) new NOSM 3 rd Year Clerks on-site until mid-April 2018.	
	12.3 VP Patient Services Report D. Makowsky reviewed her report as circulated. In addition, a detailed update was provided on the new security system and ID pass cards that go live on Monday September 11, 2017.	
	12.4 VP Mental Health and Addictions Programs Report B. Siciliano reviewed his report as circulated.	
	12.5 VP Corporate Services Report C. Gasparini reviewed her report as circulated. As of July 31, 2017, the LWDH	

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	is reporting a small operating surplus of \$6,628.00. Work continues with the MOHLTC and NWLHIN on a long-term solution for medium-sized hospitals. QBPs continue to be an area of concern as there is no way to control them. Discussion/clarification was provided on total revenues, impact of the IM/GP	
	Extender Program, and laboratory billings.	
13. Adjournment	The regular meeting was adjourned at 6:47 p.m.	Adjourned
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Chair	President & CEO
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