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

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

Makowsky, J. McKibbon, J. Reid (Chair), D. Schwartz, B. Siciliano, and E. Stach

REGRETS: D. Segerts

ABSENT: C. Kokokopenace

GUESTS: T. Davidson (89.5 The Lake), R. Forbes (Q104), S. Lamb (DMN) arrived at 5:29 p.m., E.

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1. Call to Order 2. Adoption of Agenda Adoption of Moved by W. Cuthbert and seconded by E. Stach that the regular meeting Agenda agenda be approved as circulated. 3. Adoption of Minutes 4. Declaration of Conflict of Interest 5. Education 6. Education 7. Surgical Safety Checklist (SSC) Compliance; 1. Surgical Site Indicators for 2017-18. 9. Venilator Associated Prievention (St.) Surgical Safety Checklist (SSC) Compliance; 2. Will add "Walt Time Indicators" to the Executive Committee Reports 8. Venilator Associated Premonia (VAP) Rate; and 9. Hospital Standardized Mortality Ratio (HSMR). 9. Acknowledged that Board Meetings abuse better use of this time were discussed and will be trialed. 1. Committee Reports 1. Comeniste on the Cuthor of Sassion as Whistleblower Policy. 1. Comenistion of Conflict of Interest. 1. Comenistion 1. Called to Order Motion #17/11/17 1. Called the Motion #17/11/12 1. Called the Motion #17/11/12 1. Carried 1. Motion #17/11/11/11 1. Carried 1. Motion #17/11/11 1. Carried	AGENDA ITEMS		DISCUSSION	ACTION
Agenda agenda be approved as circulated. 3. Adoption of Minutes Regular Meeting of the Board of Directors held on October 5, 2017 be approved as circulated. 4. Declaration of Conflict of Interest 5. Education Quality Improvement Plan (QIP) Erin Mudry, Manager of Quality/Risk/Education/Telemedicine, presented on the Quality Improvement Indicators that either mandated by Health Quality Ontario (HQO) and/or must be posted on the LWDH external website. The indicators reported on were: 1.) Clostridium Difficile (C-Diff); 2.) Methicillin Resistant Staphylococcus Aureus (MRSA); 3.) Vancomycin Resistant Entercoccus (VRE); 4.) Central Line-Associate Primary Blood Stream Infection (CLI) Rate; 5.) Surgical Site Infection (SSI) Prevention Rate; 6.) Hand Hygiene Compliance; LWDH rate before and after patient contact; 7.) Surgical Stafety Checklist (SSC) Compliance; 8.) Ventilator Associated Pneumonia (VAP) Rate; and 9.) Hospital Standardized Mortality Ratio (HSMR). • An update was provided on the 10 Quality Improvement Plan indicators for 2017-18. • Will add "Wait Time Indictors" to the Executive Committee agenda for a future education session. None. 7.1 Executive 2.1 Reid reported: • Orientation Session was held on October 14 th . • Acknowledged that Board Meetings have been lengthy and some approaches to make better use of this time were discussed and will be trialed. • There will be an upcoming education session on a Whistleblower Policy. • Need to look at updating the Vision and Values statements.	1.	Call to Order	J. Reid, Chair, called the meeting to order at 5:00 p.m.	Called to Order
3. Adoption of Minutes Moved by W. Cuthbert and seconded by E. Stach that the minutes of the Regular Meeting of the Board of Directors held on October 5, 2017 be approved as circulated. 4. Declaration of Conflict of Interest There were no declarations of conflict of interest. There were no declarations of conflict of interest. Quality Improvement Plan (QIP) Erin Mudry, Manager of Quality/Risk/Education/Telemedicine, presented on the Quality Improvement Indicators that either mandated by Health Quality Ontario (HQO) and/or must be posted on the LWDH external website. The indicators reported on were: 1.) Clostridium Difficile (C-Diff); 2.) Methicillin Resistant Staphylococcus Aureus (MRSA); 3.) Vancomycin Resis	2.	Adoption of	Moved by W. Cuthbert and seconded by E. Stach that the regular meeting	Motion #17/11/1
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			7.2 Ownership/Linkages	

AC	SENDA ITEMS	DISCUSSION	ACTION
		J. Reid reported:	Information
		 Committee met on October 11th to review the presentation, which is currently being revised; D. Schwartz is currently seeking feedback on content. 	
		 A meeting with Grand Chief Francis Kavanaugh and Treaty #3 has been scheduled for December 11, 2017 at 5:00 p.m. in the LWDH Boardroom. J. Reid attended the Fall Feast and spoke with P. Dryden-Holmstrom who suggested a Board education session by an Elder. Next O/L Meeting will be held on November 8, 2017 at 5:00 p.m. in the LWDH Boardroom. Currently working on scheduling a meeting with the Seniors Coalition; more information to follow. 	To Executive Committee
		7.3 Quality	
		No report. 7.4 CEO Evaluation and Compensation	
		7.4 CEO Evaluation and Compensation No report.	
		7.5 Nominating	
		No report.	
		7.6 Building a Future	
		No report.	
8.	Consent Agenda	Moved by J. McKibbon and seconded by W. Cuthbert that the Consent Agenda be approved.	Motion #17/11/3 Carried
9.	Monitoring	9.1 EL-6 Treatment of Staff and Volunteers	Carried
	CEO Performance	Moved by D. Schwartz and seconded by J. McKibbon that the Board of Directors has assessed the monitoring report on EL-6 Treatment of Staff and found that it demonstrated compliance with a reasonable interpretation of the policy, with the exception of the Opening Statement in the one (1) area of WHMIS, and item #1.1 relating to CPI training. Acceptable plans to attain compliance have been provided.	Motion #17/11/4 Carried
	9.2 EL-3 Financial Condition and Activities		
		Moved by J. McKibbon and seconded by E. Stach that the Board of Directors has assessed the monitoring report on EL-3 Financial Condition and Activities and found that it demonstrated compliance with a reasonable interpretation of the policy. 9.3 EL-9 Leadership Capacity and Continuity	Motion #17/11/5 Carried
		Moved by E. Stach and seconded by W. Cuthbert that the Board of Directors	
		has assessed the monitoring report on EL-9 Leadership Capacity and Continuity and found that it demonstrated compliance with a reasonable interpretation of the policy.	Motion #17/11/6 Carried
10.	Executive Limitations Items	After review of policy EL-6 Treatment of Staff and Volunteers- Review After review of policy EL-6 Treatment of Staff, it was moved by D. Schwartz and seconded by E. Stach that item #1 be revised to read: "including but not limited to nepotism and grossly preferential treatment for personal reasons."	Motion #17/11/7 Carried
		10.2 EL-3 Financial Condition and Activities - Review	Jamou
		After review of policy EL-3 Financial Condition and Activities, it was agreed that there was no need to revise the policy at this time.	Information
		10.3 EL-9 Leadership Capacity and Continuity – Review	
		After review of policy EL-9 Leadership Capacity and Continuity, it was agreed that there was no need to revise the policy at this time.	Information

AGENDA ITEMS	DISCUSSION	ACTION
11. Executive	11.1 Approval of Maintenance Contract for CT Scanner	
Limitations Items for Decisions	Moved by E. Stach and seconded by D. Schwartz that the Board of Directors approves the post warranty equipment maintenance contract for the new CT Scanner to Toshiba Canada Medical Systems Limited, in the amount of \$118,584 per year for 84 months (seven (7) years).	Motion #17/11/8 Carried
12. Monitoring	12.1 GP-17 Corporate Rules of Order	
Board Performance	The monitoring report on GP-17 Corporate Rules of Order, completed by J. Diamond, was reviewed. Following discussion, it was moved by E. Stach and seconded by W. Cuthbert that the Board of Directors approves the following revisions to policy GP-17 Corporate Rules of Order: 1. Item #2: Remove Board Chair so the statement reads: "Executive Secretary to the Board The Secretary to the Board is responsible for the timely and accurate production of Board meeting minutes." 2. Item #5: Replace "Consent Agenda" with "Required Approvals Agenda" throughout.	Motion #17/11/9 Carried as amended
	12.2 GP-14 Board Planning Cycle and Agenda Control	
	The monitoring report on GP-14 Board Planning Cycle and Agenda Control, completed by W. Cuthbert, was reviewed. Following discussion, it was agreed that there was no need to revise the policy at this time. K. Stepanik will ensure the "time being monitored" is accurate when submitted. 12.3 BC-1 Unity Control	Information
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	The monitoring report on BC-1 Unity Control, completed by D. Schwartz, was reviewed. Following discussion, it was moved by W. Cuthbert and seconded by E. Stach that the Board of Directors approves the following revision to policy BC-1 Unity of Control: 1. Item #2: Remove "a material amount of staff time or funds or are disruptive" and replace with: "an excessive amount of staff time or funds or which	Motion #17/11/10
	would be disruptive."	Carried
	12.4 BC-3 Delegation to the CEO The monitoring report on BC-3 Delegation to the CEO, completed by D. Carrie, was reviewed, Following discussion, it was agreed that there was no need to revise the policy at this time.	Information
13. Information Requested by the Board	 13.1 President & CEO Report M. Balcaen's report was circulated. Highlights have been provided to media and guests in an effort to maximize Board meeting time. 	Information
	13.2 Chief of Staff Report Dr. J.K. MacDonald's report will be reviewed in camera.	
	13.3 VP Patient Services ReportD. Makowsky's report was circulated.	
	13.4 VP Mental Health and Addictions Programs ReportB. Siciliano's report was circulated.	
	13.5 VP Corporate Services Report C. Gasparini's report was circulated. For Ministry reporting purposes, LWDH's operating margin for the period ending September 30, 2017 is a surplus of \$107,516.	
14. Adjournment	The regular meeting was adjourned at 6:11 p.m.	Adjourned

Chair	President & CEO
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