

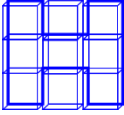
Lake of the Woods District Hospital

Regular Meeting of the Board of Directors

Meeting Information

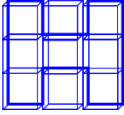
Date: March 12, 2020	Location: LWDH Training Centre Classroom	Chairperson: Wendy Cuthbert	Admin Support: Kaila Stepanik
Time Meeting Called to Order: 5:08 p.m.		Time Meeting Adjourned: 6:33 p.m.	
Present:			
W. Cuthbert, Chair	R. Boutette	N. Brown	R. Bulman
J. Diamond	L. Haney	A. Hoffmeister	B. Lundy (via t/c)
Dr. J.K. MacDonald	D. Makowsky (arrived at 5:56 p.m.)	C. O'Flaherty	W. Peterson
R. Racette	J. Reid	F. Richardson	E. Stach
Guests:			
Tim Davidson, 89.5 The Lake	D. Forsyth, LWDH	L. Hollis, LWDH	E. Mudry, LWDH
Dr. S. Moore, LWDH (arrived at 6:04 p.m.)			
Absent/Regrets :			
Dr. S Pedersen	Dr. L. Noack		

AGENDA ITEMS	DISCUSSION	ACTION
1. Call to Order	W. Cuthbert, Chair, called the meeting to order at 5:08 p.m.	Called to Order
	1.1. Attendance and Welcome W. Cuthbert welcomed everyone to the meeting. The traditional lands of the Anishinaabe of Treaty Three and the Métis Nation were acknowledged.	Information
	1.2. Approval of Agenda Moved by N. Brown and seconded by E. Stach that the regular meeting agenda be approved as circulated, with items #5.1 and #6.1 being addressed following item #3 Consent Agenda, and the addition of item #6.3 COVID-19.	Motion #20/3/1 Carried with Revisions
	1.3. Declaration of Conflict of Interest There were no declarations of conflict of interest.	None
2. Education 2.1. Rapid Access Addiction Medicine (RAAM) Clinic	<ul style="list-style-type: none"> • D. Forsyth, Director for Mental Health and Addictions Programs, was present for this portion of the meeting and presented on the Rapid Access Addiction Medicine (RAAM) Clinic. • In addition to the presentation, an article was circulated for more information titled: "A Guide to Rapid Access Addiction Medicine (RAAM) Clinics". • With OHTs, it is unknown what additional funding will be available for mental health and addictions programs. • Work continues on the development of key indicators to measure, as well as ensuring continuity of care between the agencies. • Has not yet gone live; continue to develop clinical pathways, policies, and procedures. • Local education event was discussed and is a great way to build capacity. • Staffing model was reviewed. LWDH will be funding the physician services. <p>D. Forsyth left the meeting at 5:40 p.m.</p>	Information
3. Consent Agenda	Moved by N. Brown and seconded by F. Richardson that the Consent Agenda be approved:	



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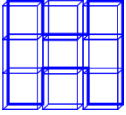
AGENDA ITEMS	DISCUSSION	ACTION
	<p>Minutes:</p> <p>3.1 Board of Directors: February 13, 2020 (draft)</p> <p>3.2 Patient and Family Advisory Committee: February 3, 2020 and March 2, 2020 (draft)</p> <p>3.3 Quality Committee of the Board: February 28, 2020 (draft) and March 9, 2020 (draft)</p> <p>3.4 Governance and Nominating Committee: February 19, 2020 and March 6, 2020 (draft)</p> <p>Other:</p> <p>3.5 President and CEO Report – no report</p> <p>3.6 VP Corporate Services Report</p> <p>3.7 VP Patient Care and CNO Report</p>	<p>Motion #20/3/2 Carried</p>
<p>4. Quality and Patient Safety (Standing Item): 2020-2021 Quality Improvement Plan (QIP)</p>	<p>The following documents were circulated: Narrative, Progress Report, and the Work Plan. These are the final drafts that will be submitted to Health Quality Ontario (HQO).</p> <p>Moved by E. Stach and seconded by J. Reid that the Board of Directors approves the 2020-2021 Quality Improvement Plan, including the Narrative, Work Plan, and Progress Report, with correction to page 3 of the Progress report re: time.</p>	<p>Motion #20/3/3 Carried with Correction</p>
<p>5. Accreditation Canada Submission</p>	<ul style="list-style-type: none"> • The report submitted to Accreditation Canada on March 10 was circulated for information. • All recommendations re: Required Organization Practices (ROPs) were embedded into the QIP to ensure regular monitoring. • E. Mudry worked closely with an Accreditation Canada Specialist on this submission; it is expected to meet the needs of Accreditation Canada <p>E. Mudry left the meeting at 5:49 p.m.</p>	<p>Information</p>
<p>6. Strategy Items</p> <p>6.1. Cultural Safety and Humility Training</p>		<p>Deferred</p>
<p>6.2. Operational Review Update</p>		<p>Deferred</p>
<p>6.3. All Nations Hospital Project Update</p>	<ul style="list-style-type: none"> • C. O'Flaherty circulated a briefing note on the All Nations Hospital Project. • An update was provided on the work done to-date at the Steering Committee, Project Planning Team, and Clinical Planning Sessions. • A lot of engagement is underway in the communities and on-site with the consultants on the current and future services for the new hospital. • Consultants will be returning on March 24th and 25th to validate the information received to-date. • Will be meeting with the Prime Consultants to look at site selection criteria in preparation for the Steering Committee. 	<p>Information</p>
<p>7. Decision Items</p> <p>7.1. Quality and Patient Safety (Standing Item): 2020-2021 Quality Improvement Plan (QIP)</p>	<p>Discussed above under Item #4</p>	
<p>7.2. Current Board Vacancies and Board Director</p>	<p>N. Brown provided an update on the last Governance and Nominating Committee. Following discussion, it was Moved by E. Stach and seconded by R. Bulman that the Board of Directors approves the Governance and</p>	



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Recruitment Advertisement	<p>Nominating Committee recommendation that the two (2) Director vacancies be reserved for Indigenous representation and/or knowledge. These vacancies will remain unfilled until a suitable candidate could be recruited. This will be reviewed in October if the positions have not been filled.</p> <p>The revised advertisement for Board Director recruitment was circulated and approved; will include the translated piece from Kenora Chiefs Advisory (KCA), which was received this afternoon.</p>	<p>Motion #20/3/4 Carried with Revision</p> <p>Approved</p>
7.3. CEO Evaluation Tool	<p>Clarification provided re: process. The following groups/individual would complete the tool:</p> <ol style="list-style-type: none"> 1. Board of Directors as a whole 2. Chief of Staff 3. Direct Leadership Team (Vice Presidents and Mid Managers) 4. Service Leads of all LWDH departments <p>The current draft is for internal use only and would be completed during year one (1) and two (2) of the CEO's term.</p> <p>Moved by L. Haney and seconded by W. Peterson that the Board of Directors approves the internal CEO Evaluation Tool and process as circulated.</p>	<p>Motion #20/3/5 Carried</p>
7.4. H-SAA Amending Agreement to June 30, 2020	<p>Moved by F. Richardson and seconded by R. Boutette that the Board of Directors approves the H-SAA Amending Agreement to June 30, 2020.</p>	<p>Motion #20/3/6 Carried</p>
7.5. M-SAA Amending Agreement to June 30, 2020	<p>Moved by W. Peterson and seconded by R. Boutette that the Board of Directors approves the M-SAA Amending Agreement to June 30, 2020.</p>	<p>Motion #20/3/7 Carried</p>
7.6. Chief of Staff Evaluation Tool	<ul style="list-style-type: none"> • The draft Chief of Staff Evaluation Tool was circulated and reviewed. The tool will be completed by the Professional Staff as a whole (including locums, courtesy, and dentists); the tool will be revised to reflect this. • Dr. J.K. MacDonald will review and submit feedback prior to the next Governance and Nominating Committee Meeting. 	<p>K. Stepanik</p> <p>Dr. MacDonald Add to Governance</p>
8. Discussion Items 8.1. Accreditation Canada Submission	<p>Discussed above under item #5</p>	
8.2. Annual Staff Survey	<ul style="list-style-type: none"> • Governance and Nominating Committee decided to proceed with Accreditation Canada's Worklife Pulse Tool survey. The next survey will be rolled-out in January 2021. This will allow for a data comparison over three surveys, and will assist with measuring any staff morale improvements. • Executive Team will lead the survey, and will continue to look at creating an internal tool that can be completed on an annual basis moving forward. 	<p>Information</p> <p>Executive Team</p>
8.3. COVID-19	<p>The following documents were circulated in the meeting:</p> <ol style="list-style-type: none"> 1. Ministry of Health (MOH) Situation Report #46 COVID-19 2. Northwestern Health Unit (NWHU) COVID-19 Updates for Northwestern Ontario 3. Public Health Ontario (PHO) COVID-10 How to Self-monitor 4. MOH COVID-19 What you need to know to help you and your family stay healthy 5. Kenora Catholic District School Board Notice of Families and System Partners 6. NWHU Letter to Parents <ul style="list-style-type: none"> • LWDH will be referring individuals seeking more information to the organizations listed above. 	<p>Information</p>



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	<ul style="list-style-type: none">• Decisions are starting to be made re: school closures and travel.• LWDH is enacting its Pandemic Plan to help plan and prepare for what may come.• Screening of inpatients and outpatients is underway.	
9. Next Meetings	<ul style="list-style-type: none">• <u>Governance & Nominating</u>: March 31, 2020 at 2:30 p.m. in the Boardroom• <u>Board Meeting</u>: April 9, 2020 at 5:00 p.m. in the Training Centre Classroom	Information
10. Adjournment	Moved by R. Boutette and seconded by W. Peterson that the regular meeting be adjourned at 6:33 p.m.	Adjourned

Chair

President & CEO