



Red Lake Margaret Cochenour Memorial Hospital

Board of Governors MINUTES

DATE: Thursday, December 9, 2010
TIME: 5:30 p.m.
PLACE: Hospital Board Room

PRESENT:	Dr. Vic Aniol	Chief of Staff
	Ms. Terry Bursey	
	Mr. Peter Koch	
	Ms. Lori Kowalchuk	
	Ms. Alana Procyk	Past Chair
	Ms. Arlene Swanwick	
	Ms. Eleanor Vachon	Chair
	Ms. Marion Whitton	
	Ms. Deikel Orocu	IT/Finance Administrator
Ms. Debbie Larson	Chief Nursing Officer	
Ms. Annwyl Shewchuk	Professional Practice Co-ordinator	
REGRETS:	Anne Billard	
	Ms. Tammy Cameron	
	Ms. Leah Gentes	
	Ms. Cathy Kaczmarek	Vice Chair
	Ms. Janice Mullin	Chief Executive Officer
	Mr. Dave Wilson	
Dr. Diane Zielke	President, Medical Staff	

1. CALL TO ORDER

The meeting was called to order by Ms. Vachon at 5:34 p.m.

1.2 ACCEPTANCE OF AGENDA

MOTION NO.: 10-32 Moved: M. Whitton Seconded: P. Koch

That the agenda be accepted as amended.

VOTE FOR MOTION 10-32; Carried

1.3 DECLARATION OF CONFLICT OF INTEREST

There was no conflict of interest declared.

2. CONSENT AGENDA

2.1 Adoption of Minutes

The following motion was brought forward:

MOTION NO.: 10-33 Moved: A. Procyk Seconded: L. Kowalchuk
That the Minutes of the Board of Governors Meeting held November 11, 2010 be accepted as presented.

VOTE FOR MOTION 10-33; Carried

3. BUSINESS ARISING

3.1 Closure of the OR

The closure of the OR was discussed at the last Board sub committee meeting. An in depth motion prepared by Ms. Larson was distributed and reviewed by members; revisions were made.

The following motion was brought forward:

MOTION NO.: 10-34 Moved: P. Koch Seconded: A. Procyk
That Whereas the RLMCM Hospital has not had a Surgeon available to provide surgical services to the community since 1997;
And Whereas the recruitment of a Surgeon in the future is unlikely;
And Whereas the operating room and surgical equipment no longer meets safety standards;
And whereas the MOHLTC no longer provides funding for a surgical program at the RLMCM Hospital;
And Whereas the RLMCM Hospital is classified as a Level 1 facility providing Emergency, Inpatient and Outpatient Care and does not include Surgical services as a Core Service;
The Board of Directors of the RLMCM Hospital move to officially and publicly announce the closure of the Surgical Services Program.

VOTE FOR MOTION 10-34; Carried

It was agreed that Corporate members will be notified at the Annual General Meeting as well placing the information in the next newsletter for the public.

4. NEW BUSINESS

4.1 Round up Legislation

A summary of legislative changes was included for information. The Board will be informed of further updates as they arise.

4.2 Physician Credentialing

A list of the Hospital's credentialed physicians was distributed for information. The following motion was brought forward:

MOTION NO.: 10-35 Moved: V. Aniol Seconded: A. Procyk
That the list of credentialed physicians for 2010/2011 be accepted as presented.

VOTE FOR MOTION 10-35; Carried

4.3 OHA 2010 Prototype Board-Appointed Professional Staff By-Laws

An OHA Bulletin has been e-mailed to all hospitals. OHA has advised representatives that they are meeting with the Ontario Medical Association to discuss the 2010 OHA Hospital

Board Appointed Professional Staff By-Laws and have advised hospitals not to move forward with the legislation until the meetings have been completed.

5. QUALITY AND PATIENT SAFETY

5.1 Summary of discussion from Committee Meeting

The first set of minutes from the Quality of Care and Patient Safety Committee were reviewed. Ms. Shewchuk provided a verbal report outlining the hospital's quality and safety initiatives that are implemented.

6. GOVERNANCE COMMITTEE

6.1 Education

Ms. Larson spoke to Katie Miller, OHA representative regarding the possibility of future Board training. She is currently attempting to arrange a session for February/March in Dryden. Kathy Bryk, Board member for Dryden was approached to help and is reluctant to provide an education session. The Board was reminded of the webcast scheduled for December 10th, 11:00 a.m. in the Boardroom on the topic of Balanced Governance Scorecard.

7. FINANCE COMMITTEE

7.1 Financial statements ending October 31, 2010

Ms. Orocu provided a powerpoint presentation outlining the financial statements:

- ✓ Total revenue of \$4,247,525
- ✓ Over budget due to timing of funding/expense for Nursing Grad Initiative
- ✓ Total expense of \$4,089,702
- ✓ Salaries are over budget, Benefits are over budget, Supplies are under budget
- ✓ Year to date surplus of \$147,834
- ✓ Other votes – surplus of \$154,090

The following motion was brought forward:

MOTION NO.: 10-36 Moved: T. Burse Seconded: M. Whitton

That the financial statements ending October 31, 2010 be accepted as presented.

VOTE FOR MOTION 10-36; Carried

8. MEDICAL ADVISORY COMMITTEE

Draft November 25, 2010 minutes were distributed.
A few questions were asked which were answered.

9. REPORTS

9.1 CEO Report

- ✓ Ms. Larson's report was included in packages. It was noted that the Hospital is now underway with the Municipalities mandatory recycling program. A letter has been forwarded to the Municipality asking as a not-for-profit organization to have billings reconsidered.
- ✓ Ms. Larson noted that the hospital is working with Open Source Order Sets, a company that provides tools, software and related technologies assisting hospitals. The orders are standardized and will assist with maintaining patient safety in the E.R. and inpatient care.

9.2 Foundation Report

- ✓ The Standard fundraiser luncheon was hosted December 9th at noon at the Legion. Lunch was by donation and all proceeds go to the Foundation.
- ✓ The Foundation is making the centre pieces for the Goldcorp Christmas party as a fundraiser.

11. INFORMATION

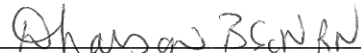
Information items were included in packages

12. ADJOURNMENT

The meeting adjourned at 6:44 p.m. for an in camera session.



Eleanor Vachon
Chair



Debbie Larson
Acting Secretary