

Board of Governors Meeting MINUTES

Date: February 27, 2018

Time: 5:00 pm

Location: Hospital Boardroom

Chair: John Frostiak

Present: Mr. John Frostiak, Chair
Mr. Marshall Dumontier
Mr. Trevor Zhukrovsky
Mr. Dennis Gushulak (*via teleconference*)
Ms. Eleanor Vachon
Ms. Audrey Blazek
Ms. Arlene Swanwick
Ms. Angela Bishop, President & CEO
Ms. Rebecca Ross, CNE
Dr. Andrew Gloster, Chief of Staff
Dr. Diane Zielke, President of Medical Staff

Guests: Ms. Pearl Fleming, Ms. Amanda Kaczmarek, Mr. Alex McAuley

Regrets: Ms. Donna Williams, Ms. Brenda Cooke, Ms. Leah Gentes

1. CALL TO ORDER

The meeting was called to order by Mr. Frostiak at 5:10 pm.

1.1 Quorum

Quorum was established.

1.2 Acceptance of Agenda

Ms. Bishop proposed moving item *2.0 Consent Agenda* to after item *3.0 New Business*. Mr. Frostiak also proposed adding item *4.4 Quality Committee Minutes*.

The following motion was brought forward:

MOTION NO: 18-07

Moved: E. Vachon

Seconded: A. Blazek

That the agenda for the February 27, 2018 meeting of the RLMCMH Board of Governors be accepted with the proposed addition and adjustment.

Vote for motion: Carried.

1.3 Declaration of Conflict of Interest

None declared.

At this point, item 3.0 New Business was addressed.

2. CONSENT AGENDA

For the purpose of convenience and for expediting meetings, matters of business of repetitive or routine nature are included in the Consent Agenda and all such matters of business contained in the Consent Agenda are voted on collectively.

A particular matter of business may be singled out from the Consent Agenda for debate or for a separate vote upon the request of any Member. In the case of a separate vote, the excluded matter of business is served from the Consent Agenda, and only the remaining matters of business contained in the Consent Agenda are voted on collectively.

2.1 Minutes, Board of Governors, January 23/18

- 2.2 Minutes, Resource & Planning Committee, January 16/18
- 2.3 Minutes, Medical Advisory Committee, January 11/18
- 2.4 Minutes, Quality Committee, November 14/17
- 2.5 Minutes, Quality Committee, January 30/18
- 2.6 Board Effectiveness Survey Results, January 23/18

The following motion was brought forward:

MOTION NO: 18-08 **Moved:** M. Dumontier **Seconded:** D. Williams
That the consent agenda for the February 27, 2018 meeting of the RLMCMH Board of Governors be accepted as presented.
Vote for motion: Carried.

3. NEW BUSINESS

3.1 Capital Plan 2018-2019, DRAFT

Ms. Bishop reviewed this document in detail. In reference to the pharmacy upgrades, Ms. Bishop announced that she will be attending a meeting tomorrow with the LHIN and small hospital executives in an effort to advocate for funding and discuss OCP standards. She also explained that the Hospital will be renovating the shared obstetrics bathroom into two smaller bathrooms so that one of the birthing rooms can be used for acute care patients. A brief discussion took place about the implementation of the VOIP phone system by the IT Department as well as the replacement of the electrical panel, and the redesign of the nursing station. Mr. McAuley is confident that the 2018-2019 capital projects can be financed through cash flow, with the exception of the pharmacy upgrades and the electrical panel. Ms. Bishop added that the FCAP list is available to Board members upon request. *The 2018-2019 Capital Plan* will be brought to the next meeting of the Board for final approval.

3.2 Changes to Corporations Act: Gap Analysis

Ms. Bishop gave a brief review of this document. There was some discussion regarding the difference between a member meeting and a director meeting. Ms. Bishop is recommending that a bylaw review be conducted prior to making any amendments based on the changes to the *Corporations Act*. See item 3.4.

3.3 Policy Review / Addition

3.3.1 Director Role Description, BG-JD-01

A minor revision had been made to this policy, based on changes to the *Corporations Act*. Mr. Zhukrovsky suggested adopting the language of the *Corporations Act* as presented in the *Directors' Standard of Care*. Ms. Bishop will make this amendment to the *Fiduciary Duties* section of BG-JD-01.

The following motion was brought forward:

MOTION NO: 18-09 **Moved:** M. Dumontier **Seconded:** T. Zhukrovsky
That the revisions to the policy BG-JD-01 be accepted with the suggested amendment.
Vote for motion: Carried.

3.3.2 Committee Rules & Regulations, BG-MTG-04

This new policy, which was adopted from the OHA, was presented to the members for their approval. The members agreed that it was not necessary for committees to develop an annual work plan as this is addressed in a committee's *Terms of*

Reference (TOR). Ms. Fleming will make this amendment. Ms. Bishop added that if this policy is approved it will be necessary to review the committee TORs to ensure that they align with BG-MTG-04.

The following motion was brought forward:

MOTION NO: 18-10 **Moved:** A. Blazek **Seconded:** A. Swanwick
That the new policy BG-MTG-04 be approved with the suggested amendment.
Vote for motion: Carried.

3.4 Legal Review of Bylaws

Ms. Bishop proposed that the Hospital conduct a legal review of its bylaws, which were last approved in 2012. It is a best practice, as recommended by OHA, to review bylaws every three years. Ms. Bishop has retained a quote of \$8000 (flat rate) for a legal review. A discussion took place about the cost and members suggested alternatives, such as adopting prototypes from other facilities. One member suggested waiting until the updates to the Corporations Act are fully implemented, possibly 3-4 years. Some members expressed concern that the quote of \$8000 is too high. Ms. Bishop will find out what other facilities have paid. Mr. McAuley explained that there is cash flow available from the legal budget to finance the review.

The following motion was brought forward:

MOTION NO: 18-11 **Moved:** E. Vachon **Seconded:** A. Swanwick
That Board of Governors approves a legal review of RLMCMH's bylaws.
Vote for motion: Carried.

3.5 Financial Statements, January 31/18

Mr. McAuley reviewed both the *Balance Sheet* and *Operating Statement*. The statements showed a \$165 000 surplus and Mr. McAuley does not expect a significant change prior to the end of the fiscal year. A member asked if the Hospital was maintaining the savings that were guaranteed by Honeywell after the installation of the new air handler unit, to which Mr. McAuley responded positively. Mr. McAuley then reviewed the *Board Statistical Report* and a discussion took place about the high rate of ALC occupancy and the risk this poses to the Hospital. Ms. Bishop added that this is a problem for all Hospitals in the region.

The following motion was brought forward:

MOTION NO: 18-12 **Moved:** A. Swanwick **Seconded:** E. Vachon
That Board of Governors approves the Financial Statements dated January 31, 2018 as presented.
Vote for motion: Carried.

3.6 Corporate Scorecard, Q3

Deferred.

3.7 Board Self-Assessment

Information was included in the package for the online Board self-assessment tool offered through the OHA. The tool will be free to use as RLMCMH is a member of the OHA. The members agreed to participate. Ms. Fleming will arrange.

At this point, item 4.4 was addressed.

4. BUSINESS ARISING

4.1 Board Portal

Ms. Fleming gave a brief demonstration on how to access the Board Portal via the RLMCMH website. A login and password were distributed to each Board member. Ms. Fleming explained, that unfortunately, the current platform does not allow for the use of document folders. Since the Hospital will be switching website providers, an upgrade cannot take place at this time.

The members agreed that they will proceed with using the portal for now, but will not post in-camera materials. Ms. Fleming will post the next Board Package on the portal.

4.2 Board Retreat

The Annual Board Retreat is scheduled for April 27-28. The members were asked to RSVP as soon as possible if they had not already done so.

4.3 Project Update

Ms. Kaczmarek announced that the installation of the new kitchen ventilation system is underway. The only major disruption in service is scheduled for March 14-16. A contingency menu will be in place for patients during this time. This project is funded by HEEP. Ms. Ross added that the MDRD renovation is still planned to begin in May. The electrical audit has taken place, and Ms. Bishop is awaiting the final report.

4.4 Quality Minutes

In reference to items 2.4 and 2.5, Mr. Frostiak asked for clarification on AOB policy and procedure. Ms. Ross explained that when a patient exhibits violent behavior the nurse will perform a VAAT (Violence Assessment Tool) and submit an incident report. A meeting will then take place between the Nurse Manager, CNE, and DRMPR to determine whether the patient will be flagged in Meditech as AOB. Prior to this meeting, signage may be placed on the patient's door to caution other staff members about the potential risk. A discussion took place about the assessment process and the potential impact of labelling patients, as well as the permanence of the AOB label. Ms. Kaczmarek reminded the members that the AOB process is now a requirement of the Ministry of Labour. Ms. Ross added that the process is not meant to impact the level of care received by AOB patients.

At this point, Ms. Bishop left the meeting. The time was 6:30 pm.

Mr. Frostiak asked for clarification on the issue of outpatient traffic flow, as referenced in item 2.5. Ms. Vachon explained that the process of registering and making appointments has been a recurring issue of confusion for outpatients. The *Patient and Family Advisory Committee* (PFAC) will be examining the current processes and looking for solutions. A short discussion took place about the clinic's role in this process as well as the lack of clerical support in the Lab and DI Departments. Ms. Vachon recommended that the issue be kept on the *Quality Committee* agenda in addition to the PFAC agenda.

At this point, the Consent Agenda was addressed.

5. EMERGING ISSUES FOR DISCUSSION

Deferred.

6. REPORTS

6.1 RLMCH Foundation

Ms. Blazek announced that the Foundation raised \$1750 through their work in the food tent during the Winter Carnival. They are also planning the annual golf tournament which is scheduled for June 15-16.

6.2 RLMCH Auxiliary

Deferred as Ms. Gentes had sent her regrets.

6.3 Medical Advisory Committee

Dr. Gloster is hopeful that RLMCMH will be selected as a pilot site for the CARE course. The CARE course is an inter-professional hands-on course in rural emergency healthcare. It is a two day learning experience; tentatively scheduled for June 9-10.

6.4 Chief Nursing Executive

Ms. Ross reported on the high bed census and ALC occupancy rate. She explained to the members that the LHIN has changed the process for admission to long term care homes to a first come first serve basis. Previously, admission to long term care alternated between the Hospital and community wait lists. The new process has impacted several ALC patients at RLMCMH who will now be waiting longer for a bed at NWL. The high bed census has led to patients spending longer periods of time in the ED before being given a bed. Ms. Ross cautioned the members that this may result in negative feedback from the community. It was suggested that Ms. Ross have an article posted in the Northern Sun explaining the shortage of beds at the Hospital and NWL, in order to make the community more aware of the issue.

7. CORRESPONDENCE / INFORMATION:

- Letter from OHA to Premier Wynne
- SRN Council Update

At this point, Ms. Fleming reminded the members to RSVP for the *Board, Employee, and Physician Service Recognition* event on March 22nd. Former Board members, Rachelle Steele and Terry Bursey will be recognized at the event for their years of service. The event will be catered by *Local 26*.

8. NEXT MEETING: Tuesday March 27, 2018 @ 5:30 pm

9. ADJOURNMENT

The meeting adjourned by Ms. Swanwick at 7:18 pm.

John Frostiak
Board Chair

Angela Bishop
President & CEO