

WDMH Board of Directors
Monday, February 26, 2018– 5:00 p.m.
Dillabough Professional Centre - Boardroom

MINUTES OF MEETING

<u>ATTENDEES:</u>	Marieke vanNoppen, Chair Mike Villeneuve, Vice Chair Shawn Sutton, Treasurer James Pitruniak David Wattie Andy Barrett Bruce Millar Michelle Perry Cholly Boland – CEO John Trickett (Teleconf) until 6:00 pm Renee Belhumeur (Teleconf) until 6:15 pm Dr. D. Tse (Teleconf)	<u>GUESTS:</u>	Ann Zeran Deena Shorkey
		<u>STAFF:</u>	Mikyla Lennard Michelle Blouin Chris Barkley (Recorder)
		<u>REGRETS:</u>	Stephen McClellan Connie Granlund Robin Varughese Lynn Hall Dr. M. Crabtree

1. Call to Order

The meeting was called to order at 5:05 pm.

2. Declaration of Conflict of Interest

None declared.

3. Agenda Check-In

There were no changes to the agenda.

4. Review of Minutes – November 28, 2017

In response to a question raised at the November meeting, it was clarified that HIROC (Healthcare Insurance Reciprocal of Canada) covers \$35 million for liability. To date the highest settlement in Canada is \$20 million.

MOVED by **Bruce Millar**, and **SECONDED** by **Andy Barrett** that the **Minutes of November 28, 2017 be approved.**

CARRIED.

5. Patient Story

Mikyla Lennard, Clinical Manager, shared a story involving a motor vehicle accident patient who had an acquired brain injury. Due to being moved around many healthcare facilities and a change in residence, the patient lost all trust in the medical system and felt his rights had been taken away. The care team at WDMH recognized that this patient may have been placed on a

Form 1 (Application for Psychiatric Assessment) prematurely and that more information and education needs to happen around sending a patient to a psychiatric facility on a Form 1.

6. Board Education

6.1 Community Addiction and Mental Health Services

The Board received a presentation from Ann Zeran and Deena Shorkey of Community Addiction and Mental Health Services and Child and Youth Services. The presentation provided an overview of both hospital-based services and community addiction and mental health services.

7. New Business

There was no new business brought forward.

8. Board Reports:

8.1 Quality Committee

James Pitruniak provided an overview of the February 22nd Quality Committee meeting. The minutes of the meeting were included in the Board agenda package.

The 2017/18 Patient Care Improvement Plan progress report was reviewed. The Board extended congratulations to the quality teams for either meeting or exceeding targets. Dr. D. Tse was also congratulated on working with physicians to achieve zero chart deficiencies in the last quarter.

8.1.1 2018/19 Patient Care Improvement Plan

WDMH is required to develop and publically post our Patient Care Improvement Plan (PCIP) for 2018-2019 by April 1, 2018.

The 2018-2019 PCIP was developed with input and support from staff and physicians, including Medical Advisory Committee (MAC), Medical Staff Organization (MSO), Patient and Family Engagement Committee (PFEC) and quality teams. The proposed indicators for 2018-2019 were presented and rationale was provided for the following new indicators:

- Emergency Department Length of Stay for Admitted Complex Patients
- Identification and Flagging of Suspected Sepsis at Emergency Department Triage
- Workplace Violence Incident Rate
- Patient Satisfaction – Family and Patient Centered Care
- All Same Day Cancellations of Surgical Procedures

Three indicators that have been carried over from 2017/18 to ensure continued improvement and sustainability include:

- Acute adult readmissions to our facility within 28 days of discharge
- Barthel Index Outcome
- Appropriateness of Catheterization

MOVED by **Andy Barrett** and **SECONDED** by **Bruce Millar** that the 2018-2019 Patient Care Improvement Plan be approved as presented.

CARRIED.

8.1.2 Patient Safety Report

The Patient Safety Report was received for information.

8.2 Medical Advisory Committee

Highlights from the Medical Advisory Committee meetings were included in the agenda package and distributed prior to the meeting.

Hospital Administration is working closely with the Family Medicine group to review the procedures for orphan patients beginning in March. Recruitment is underway for hospitalists to cover these inpatients. A new program is being developed which involves recruitment and mentoring of new graduates. This program will also aid in filling coverage for orphan patients.

8.2.1 Medical Staff Appointments

MOVED by **James Pitruniak** and **SECONDED** by **Bruce Millar** that the following professional staff privileges / modifications be approved:

Dr. Artem Luhovy, Associate with Admitting Privileges, Department of Family Medicine

Dr. Deniz Akyurekli, Temporary without Admitting Privileges, Department of Surgery for Surgical Assist

Dr. Elisabeth Antoniak, Associate with Admitting Privileges, Department of Family Medicine

Dr. Joseph Phillips, Associate with Admitting Privileges, Department of Family medicine

Dr. Rebecca Warmington, Locum with Admitting Privileges, Department of Family medicine

Dr. Tinu Sandhu, Locum without Admitting Privileges, Department of Anaesthesia

MOTION CARRIED.

8.2.2 Chief of Surgery

The recruitment of the new Chief of Surgery was conducted according to the WDMH By-laws. The candidate, Dr. M. Oberoi, was interviewed by the Selection Committee on December 7, 2017 resulting in a positive recommendation to the Medical Advisory Committee (MAC). MAC

granted its approval via email on December 8th. On December 11th, 2017 a motion was sent via email to the Board of Directors to appoint Dr. M. Oberoi as the Chief of Surgery.

MOVED by **Bruce Millar** and **SECONDED** by **David Wattie** that **Dr. M. Oberoi be appointed as the Chief of Surgery as per the recommendation of the Medical Advisory Committee.**

CARRIED.

8.2.3 Chief of Family Medicine

Due to current priorities in the Department of Family Medicine and to maintain continuing for the betterment of the hospital, the Medical Advisory Committee recommended that Dr. Jennifer Ingram-Crooks be appointed Chief of Family Medicine for a third three year term.

MOVED by **Mike Villeneuve** and **SECONDED** by **Bruce Millar** that **Dr. Jennifer Ingram-Crooks be appointed as Chief of Family Medicine for three years.**

CARRIED.

8.2.4 Amendment to Professional Staff Bylaws

To align practices to those of other hospitals and to comply with the Regional Credentialing Program, WDMH will now require a Criminal Records Check for all new Professional Staff Applicants. The Professional Staff Bylaws require updating to reflect this change.

MOVED by **Michelle Perry** and **SECONDED** by **Mike Villeneuve** that the Professional Staff Bylaws be amended to reflect the following:

A current (within 6 months) and acceptable Criminal Records Check for the vulnerable sector to be completed by the Police Force for the applicant's jurisdiction of residence.

CARRIED.

8.3 Medical Staff Organization

The Medical Staff Organization meets monthly. The physicians have been working at updating the Professional Staff Rules and Regulations, and developing a Code of Conduct. Both documents will be presented to the Board for final approval.

8.4 Finance Report

8.4.1 Financial Statements – Third Quarter

Financial Statements for the period ending December 31, 2017, show a surplus from hospital operations of \$306,000. There is a very low risk of not meeting the requirements under the Hospital Service Accountability Agreement.

8.4.2 Funding Update

Effective April 1, 2018 WDMH will be categorized as a small hospital and funding will be calculated using the small hospital funding formula.

Another funding uncertainty for WDMH is related to the LHIN's sub acute care planning initiative. We are awaiting further information and a decision from the LHIN Board of Directors.

8.4.3 2018/19 Operating Plan

The budget for the yearend March 31, 2019 is projected to result in a surplus from hospital operations of \$5,331 and a deficit from all fund types of \$(94,874). Revenue and Expenditure assumptions were reviewed. It was noted that the potential funding reduction from the LHIN's sub acute care planning initiative has not been included.

MOVED by David Wattie and SECONDED by Shawn Sutton that the 2018/19 operating budget be approved.

CARRIED.

8.4.4 2018/19 Capital Budget

The 2018/19 Capital Equipment Plan was presented to the Board for approval. The capital listing was compiled with input from managers, team leaders, senior managers and Chief Physicians. The plan contains a contingency in the amount of \$100,000 and includes all high, medium and low priority items.

It was noted that if the required donation money is not raised to purchase the equipment, fewer items will be purchased, which will be done in order of priority. The highest priority items for 2017/18 total \$1,286,138.

MOVED by Tom Dawson and SECONDED by Mike Villeneuve that the 2018/19 Capital Budget be approved as presented.

CARRIED.

9 **Report of the CEO**

9.1 Strategic Priorities Update

An update on Strategic Priorities was distributed in advance with the agenda.

In addition to his written report, Mr. Boland highlighted the following:

- The Automated Dispensing Cabinets will be implemented in the spring of this year. The cabinets were demonstrated throughout the hospital. This was a very expensive purchase by the hospital, funded by the Foundation.
- We currently have six physicians who will continue looking after orphan patients. We have started advertising for a hospitalist to look after these patients. The WINGS (Winchester Intensive New Grad Skill-enhancing Program) was initiated by a physician at WDMH for physicians who have finished their residency but are looking for a more structured experience. These physicians can aid in looking after Orphan patients.

10. Report of the Foundation

The written report of the Foundation was distributed in advance. Chair Tom Dawson thanked Board members for spreading the word that new Directors are needed for the Foundation Board.

Gala tickets will be on sale shortly and Board members are encouraged to attend this fun evening.

11. WDMH Auxiliary Report

The written report of the Auxiliary was distributed in advance. A new cash register has recently been purchased to update the Gift Shop inventory system. The WDMH Auxiliary will be hosting the Hospitals Auxiliary Association of Ontario Spring Conference in April.

12. Governance

12.1 Executive Committee Minutes for Information

The minutes of the February 20th Executive Committee meeting were received for information.

12.2 Board Recruitment

We will have one resignation from the Board in June. Although we will not be entering into a recruitment campaign at this time, any interested candidates will be considered.

12.3 Corporate Memberships 2018/19

In accordance with Article 2 of the Administrative Bylaws, those persons who make application for admission as a Corporate Member must meet the specified qualifications and be approved by a resolution of the board. A call for Corporate Membership was placed in local newspapers and on the hospital's website for two consecutive weeks in February 2018. Board members received the list of Corporate Membership renewals and new applications prior to the meeting.

MOVED by James Pitruniak and **SECONDED** by Bruce Millar that the **2018-2019 Corporate Memberships be approved as presented.**

CARRIED.

12.4 Board Director Annual Self-Evaluation

Directors were requested to complete the Annual Self-Evaluation tool. The purpose of the evaluation is to provide Board Directors with positive reinforcement and identify areas for improvement. The self-evaluation also assists in succession planning to identify individuals for a leadership role.

12.5 Meeting Evaluation Results – November 28, 2017

The response rate was low for the November 28th meeting evaluations. Members are encouraged to complete the evaluations to ensure the meetings are on track.

12.6 Meeting Evaluation February 26, 2018

Directors were requested to complete the evaluation for today's meeting.

13.0 Conference / Workshop Reports

No report.

14.0 Report of RHI Board

The focus of the board is to receive support from both the provincial and federal governments to proceed with a new building.

Many special events are being planned for Dundas Manor's 40th Anniversary.

15.0 Communication & Public Relations Considerations

15.1 Key Themes from Meeting

- *Addiction and Mental Health Services* - There are a lot of programs in Stormont, Dundas & Glengarry, and many are not doctor or referral-based. Individuals or concerned family members can take advantage of these services
- *Operating Budget* - positive results for the 2017/18 fiscal year. We are expecting to balance the budget again in 2018/19
- *Change Management* - Looking at hiring a hospitalist to look after Orphan patients

Staff members left the meeting at this point, prior to the In Camera discussion.

16.0 In Camera

Board members reviewed the WDMH Board Decision Making Guide. The purpose of the Guide is to support/promote a thoughtful, coherent, consistent approach to Board decision making.

An in camera discussion was held around Senior Management's request for the Board to review Executive Salary Hold-Back and the Executive Compensation Hold-Back Plan for the 2018/19 Quality Improvement Plan . Hold-back for five comparator hospitals was reviewed.

The in camera discussion ceased and the regular meeting of the Board was resumed.

MOVED by **Bruce Millar** and **SECONDED** by **Tom Dawson** that **after discussion and consideration of holdback percentage of annual salary the Board has agreed that the 3% holdback is appropriate. CARRIED.**

MOVED by **Andy Barrett** and **SECONDED** by **Mike Villeneuve** that the **Executive Compensation Hold Back Plan for 2018-19 be approved as presented. CARRIED.**

17.0 Next Meeting

The next Board meeting will be held May 22, 2018, 5:00 p.m.

17.0 Adjournment

The meeting adjourned at 8:08 p.m.