

**WDMH Board of Directors**  
**Tuesday, November 28, 2017– 5:00 p.m.**  
**Dillabough Professional Centre - Boardroom**

**MINUTES OF MEETING**

<b><u>ATTENDEES:</u></b>	Mike Villeneuve – Vice Chair Shawn Sutton – Treasurer Stephen McClellan David Wattie Michelle Perry Bruce Millar Dr. D. Tse – Chief of Staff James Pitruniak Dr. Crabtree – President Medical Staff Lynn Hall – Chief Nursing Executive Cholly Boland – CEO John Trickett Andy Barrett Renee Belhumeur	<b><u>TELECONFERENCE:</u></b>	Marieke vanNoppen Tom Dawson
		<b><u>STAFF:</u></b>	Terrance Patterson Michelle Blouin Chris Barkley (Recorder) Laura Landry
		<b><u>REGRETS:</u></b>	Robin Varughese

**1. Call to Order**

The meeting was called to order at 5:03 pm.

**2. Declaration of Conflict of Interest**

None declared.

**3. Agenda Check-In**

The Patient Story will follow the report of the Chair.

**4. Review of Minutes – September 26, 2017**

**MOVED** by Bruce Millar, and **SECONDED** by Michelle Perry that the **Minutes of September 26, 2017 be approved.**

**CARRIED.**

**5. Report of the Chair**

Executive Committee Minutes

The minutes of the Executive Committee meeting were received for information. Directors were reminded that all members are welcome to attend Executive Committee meetings, and must attend at least one meeting per year.

Quality Committee meetings are held the Thursday prior to Board meetings. It is a requirement that new Directors attend on a regular basis for a minimum of two years.

### Annual Donation to Foundation

Board members were reminded to make their annual donation to the Foundation. It is important to show the Hospital Board Directors support of our Foundation.

**MOVED by Mike Villeneuve and SECONDED by James Pitruniak that the Board move into an In camera session. CARRIED.**

### **In Camera Session**

#### Executive Compensation – Severance

The Board received a briefing note in advance with information regarding the request from Senior Executives to revisit severance provisions. Information from comparator hospitals was provided.

Following a discussion it was:

**MOVED by Bruce Millar and SECONDED by Shawn Sutton that the severance for senior executives be adjusted to 24 months. CARRIED.**

**MOVED by Mike Villeneuve and SECONDED by Stephen McClellan that the In camera session cease and the regular meeting of the board resume. CARRIED.**

### **Patient Story**

The Board viewed a video of a family who shared their experience at WDMH. The family felt they were not listened to at the time of triage. We have worked with the family and over time have been able to rebuild their confidence in WDMH. The Board appreciated hearing the story from the family's perspective.

## **6. Board Education**

### 6.1 Provincial Governance Benchmarking Survey Results

The Board reviewed the 2016 Hospital Governance Benchmarking Survey Highlights. It was agreed that WDMH is advanced in our governance and operate based on common, wise practices. We operate with the understanding that the needs of the hospital are the needs of the community. It may be beneficial to increase our contacts with outside boards and to act on diversity (age, gender, ethno-cultural background) as a key screen when recruiting new members.

## **7. New Business**

### 7.1 Risk Management Update

The Board received a presentation on the hospital's risk management program. The hospital has been successful in reducing or avoiding risk through its proactive program. Obstetrics and Emergency have been identified provincially as high risk services and we have been able to keep our outcomes in both areas well below that of our peer hospitals.

## 7.2 2017/18 Strategic Priorities

The 2017/18 Strategic Priorities were presented to the board for consideration and approval.

The strategic priorities were developed from:

- A review of the 2013-18 Strategic Plan document
- An update of challenges and opportunities
- Review of the 2016-17 Strategic Priorities
- Off-site planning meeting with WDMH managers, physician, staff and patient representatives
- Consultation with staff and physicians

**MOVED by Bruce Millar and SECONDED by John Trickett that the 2018-19 Strategic Priorities be approved as presented. CARRIED.**

It was noted we are in the final year of our 2013-2018 Strategic Plan.

## **8. Board Reports**

### 8.1 Quality Committee

James Pitruniak provided an overview of the November 23rd Quality Committee meeting. The minutes of the meeting were included in the Board agenda package.

Following two years of audits and reviews it was discussed and confirmed that the Chronic Obstructive Pulmonary Disease (COPD) treatment measures are too difficult to audit consistently. It was therefore recommended that the COPD indicator be removed from the 2017/18 Patient Care Improvement Plan.

**MOVED by Stephen McClellan and SECONDED by Bruce Millar that the Complex Chronic Obstructive Pulmonary Disease Best Practice Indicator be removed from the 2017-2018 Patient Care Improvement Plan. CARRIED.**

The hospital will investigate partnerships and programs to assist our COPD patients in living with their disease and caring for themselves.

The Administrative Bylaws and Quality Committee Terms of Reference were reviewed to ensure consistency in membership on the Quality Committee.

**MOVED by Andy Barrett and SECONDED by Bruce Millar that the Membership in the Quality Committee Terms of Reference be revised to be consistent with the Administrative Bylaws:**

- Three voting members of the board
- Chief Executive Officer
- Chief of Staff
- Chief Nursing Executive
- Vice President, Corporate Services
- Chief Research Officer

- Representative of the Patient/Family Engagement Committee
- One person who works in the hospital who is not a member of the college of Physicians and Surgeons of Ontario or the college of Nurses of Ontario

**MOTION CARRIED.**

8.1.1 Patient Safety Report

The Patient Safety Report was received for information.

8.1.2 Medical Advisory Committee

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

**MOVED** by **David Wattie** and **SECONDED** by **Michelle Perry** that the following professional staff privileges / modifications be approved:

*Dr. Ehab Elzayat*, Associate with Admitting Privileges, Department of Surgery specializing in Urology

*Dr. Ruchi Murthy*, Term without Admitting Privileges, Internal Medicine specializing in Infectious Disease

*Dr. Greg Pukay*, Term without Admitting Privileges, Department of Surgery for Surgical Assist

*Ms Elizabeth Ormond*, Active Midwife with Admitting Privileges, Department of Obstetrics

*Dr. Husein Moloo*, Term without Admitting Privileges, Department of Surgery for Surgical Assist

*Dr. Sampa Das*, from Term without Admitting Privileges, Department of Emergency Medicine to also include Surgical Assist

*Dr. Herve Weka*, from Associate with Admitting Privileges, Department of Family Medicine with cross appointment to Department of Obstetrics to Term with Admitting Privileges, Department of Family Medicine effective October 1, 2017. Dr. Weka requested to rescind his resignation of privileges

*Dr. Wendy Zhang* from Locum with Admitting Privileges, Department of Family Medicine to include Cross Appointment in Department of Emergency Medicine

*Ms Krysta Moland*, Active Midwife with Admitting Privileges, Department of Obstetrics effective November 30, 2017

**MOTION CARRIED.**

Following a review of the Professional Staff Bylaws the Medical Advisory Committee recommended the Bylaws be amended to reflect the practices of all other hospitals in the Regional Credentialing Program. WDMH's current practice is for physicians to resubmit their Certificate of Professional Conduct annually.

**MOVED by Stephen McClellan and SECONDED by Bruce Millar that the Professional Staff Bylaws be amended to align WDMH practices to those of other hospitals in the Regional Credentialing Program such that all mentions of requiring a Certificate of Professional Conduct from CPSO every three years will be removed.**

**CARRIED.**

#### 8.1.4 Medical Staff Organization

A proposal will be submitted to Senior Management with regards to a change in orphan on-call.

Dr. Crabtree expressed appreciation for including technology in the 2018-19 strategic priorities, particularly as it relates to automated scheduling.

### 8.2 **Finance Report**

#### 8.2.1 Financial Statements – Second Quarter

Financial Statements for the period ending September 30th, 2017, show a surplus from hospital operations of \$141,464 which is unfavourable by \$44,435 from the approved budget. The main factors for the variance were reviewed in detail.

#### 8.2.2 Funding Update

The operating budget is submitted to the LHIN in two steps: first as an unapproved budget, then as an approved balanced budget. The budget will be presented to the Board in February for approval.

Effective April 1, 2018 WDMH will be categorized as a small hospital. We are awaiting communication from the Ministry to confirm funding.

## 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 hospital has achieved the Silver level in the Champlain LHIN's Healthy Foods initiative

- The LHIN's subacute care planning initiative is a work in progress. There may be a negative impact to WDMH's Complex Continuing Care Unit.

## **10. Report of the Foundation**

The written report of the Foundation was distributed in advance. The Foundation is on track for revenue and expenditures. The current expense ratio is reasonable and in line with other Foundations for small hospitals.

The Foundation will be recruiting new members and is looking specifically for someone from the North Stormont area, as well as someone with investing experience.

## **11. WDMH Auxiliary Report**

The hospital has recently hired a new Volunteer Coordinator. Peter Sorby has recently resigned as Auxiliary President; Connie Granlund, Vice-President has agreed to assume the role of Interim President.

## **12. Governance**

### **12.1 Meeting Evaluation Results – September 26, 2017**

The results of the September 26<sup>th</sup> meeting evaluation were reviewed.

### **12.2 Meeting Evaluation – November 28, 2017**

Board members were encouraged to complete the evaluation for this meeting and submit to C. Barkley.

## **13.0 Conference / Workshop Reports**

Bruce Millar and David Wattie provided highlights of their experience at the OHA Health Achieve Conference and Effective Governance for Quality and Safety Workshop.

## **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.

## **15.0 Communication & Public Relations Considerations**

### **15.1 Key Themes from Meeting**

- The Board thanks the patient/family who shared their story on video, and pushed us all to double down on safety, quality and satisfaction outcomes.
- We talked about governance and agree we are operating based on common, wise practices. We may want to increase our contacts with outside boards, and we must act

on diversity (age, gender, ethno-cultural background) as a key screen when we recruit new members.

- The hospital operates a rigorous and proactive risk management program. We offer services in two higher-risk areas – obstetrics and a 24-hour emergency department – and our outcomes in these areas are better than peer hospitals. In fact in all the categories, the performance of WDMH exceeds our peer hospitals.
- We reviewed the 2017/2018 strategic plan and activities, and noted that we soon will need to start into a new cycle of strategic thinking. The board congratulated the staff and endorsed ongoing work in three theme areas and 12 areas of focus.
- The 2017 budget is in a strong position to achieve balance, and there is minimal risk that we will not meet the Hospital Services Accountability Agreement.
- The hospital is moving strongly in taking its part in the LHIN's healthy foods initiative (e.g. foods available in cafeteria).
- The board congratulated and thanked the Foundation for so much great work this year. The Foundation is seeking board members to include, a) representation from North Stormont, and b) a member having investment experience.
- Logistics and background work is ongoing in preparation for construction of a new building to replace the existing Dundas Manor.
- The Board thanks Peter Sorby for his two years of work and leadership on the hospital auxiliary. Peter has stepped down as president of the group; Connie Granlund is acting in the role on an interim basis.
- Watchword of this meaning: **communication** – an ongoing challenge critical to care, operations and governance

#### **16.0 Next Meeting**

The next Board meeting will be held February 27, 2018, 5:00 p.m.

#### **17.0 Adjournment**

The meeting adjourned at 7:18 p.m.