

**PERTH AND SMITHS FALLS DISTRICT HOSPITAL**

Board of Directors' Meeting  
Tuesday, March 22, 2011  
Main Boardroom, GWM Site  
07:30 hours

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PRESENT: C. Beckett, L. Bisonette, J. Brown, L. Evans, L. Hendriks, Dr. S. Muldowney, Dr. P. Roney, M. Ross, R. Schooley, *L. Sparks, Chair*, D. Staples, T. Stepanuik\*, B. Strachan, K. Van Der Meer

REGRETS: Dr. C. Ehrat

IN ATTENDANCE: B. Allen, Vice President, Finance & Support Services, K. Kelly, Recording Secretary, C. Cassidy-Gifford, Manager, Quality, M. Guitard, President, GWM Auxiliary, M. Poulin, Executive Director, Lanark County Mental Health

*\*via conference call*

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**1. CALL TO ORDER**

The meeting was called to order by L. Sparks at 7:33 a.m.

**2. CHAIR'S REMARKS**

L. Sparks provided the following remarks:

- He and R. Schooley attended a meeting with R. Cooke, M. Ashworth to discuss funds.
- A further meeting with the foundation board tomorrow at noon.
- He referenced an article in The Ottawa Citizen regarding hospitals and capital equipment needs.

He then welcomed M. Guitard, President, GWM Auxiliary to the meeting and she provided a report on the GWM Auxiliary.

L. Sparks extended his thanks to M. Litle, Vice President, GWM Auxiliary who recently tendered her resignation from the office.

**3. APPROVAL OF AGENDA**

*RESOLUTION No. 26/11*

*MOVED by L. Evans*

*SECONDED by R. Schooley*

*THAT the agenda for the March 22, 2011 Board of Directors' meeting be approved as circulated with the change to Item 6.6 – MSAA (Lanark County Mental Health). This item will be discussed earlier on the agenda.*

*CARRIED.*

#### **4. DECLARATION OF CONFLICT OF INTEREST**

Nil.

#### **ITEM 6.6 – MSAA (LANARK COUNTY MENTAL HEALTH)**

At this point, L. Sparks welcomed M. Poulin, Executive Director, Lanark County Mental Health to the meeting and invited him to speak. B. Allen provided background information to the members and advised that a letter has been sent to LHIN from L. Sparks and T. Stepanuik. No official response has been received to date. B. Allen did note that he received a telephone call from P. Huras, CEO, South East LHIN encouraging the hospital to submit a balanced budget with no service cuts. B. Allen noted that the CAPS document has been amended slightly to remove service cuts (included in package). He added that the narrative was modified to remove any reference to service cuts and reductions. P. Huras intimated to B. Allen that there may be a possible funding increase for this agency.

B. Allen stated that based on his discussion with P. Huras, that should no submission be made, no funding will be flowed as of April 1/11. Discussion.

T. Stepanuik stated that email discussion had taken place with the Finance Committee regarding this situation and the committee is intent on not compromising any service cuts, etc. He added that the Finance Committee is supportive of what is being presented today.

B. Allen asked if there were any comments on the indicators (as it is a new information).

M. Poulin offered his comments regarding the support of the hospital board of directors and noted that this board was the only board who did not comply. He added that he appreciated the assistance of B. Allen and T. Stepanuik with this process. M. Poulin provided background on the programs and services of Lanark County Mental Health and the impacts of 0% increase.

Discussion ensued. D. Staples commented that a related issue was raised by the Town of Smiths Falls at the recent Good Roads Conference and the Town of Smiths Falls requested the ministry to adequately fund mental health in this area as it is irresponsible to assume that the services could be offered with no funding increases.

D. Staples noted that the issue has been raised politically. K. Van Der Meer agreed with D. Staples' comments

L. Sparks will send correspondence (to P. Huras and G. Thompson) to R. Hillier, MPP and L. Sandles at the Ministry of Health & Long-Term Care.

*RESOLUTION No. 27/11*

*MOVED by R. Schooley  
SECONDED by L. Hendriks*

*The Perth and Smiths Falls District Hospital Board of Directors hereby accepts the recommendation of the Finance Committee to approve the 2011/2012 CAPS budget for Lanark County Mental Health which reflects a balanced budget position.*

*FURTHERMORE that the Perth and Smiths Falls District Hospital Board of Directors approves the common and sector specific local obligations/indicators as provided by the South East LHIN.*

*FURTHERMORE, that the approved CAPS will be forwarded to the South East LHIN.*

*CARRIED.*

It was noted that K. Van Der Meer opposed the motion. M. Poulin left the meeting at 7:50 a.m.

## **5. CONSENT AGENDA**

At this point, L. Sparks asked the members to review the consent agenda items and information and to bring forward any items that should be moved to the open meeting for comment and/or discussion.

*RESOLUTION No. 28/11*

*MOVED by J. Brown  
SECONDED by L. Evans*

*THAT the Consent Agenda be approved as presented. J. Brown requested clarification on Item 5.2 South East LHIN Draft Minutes.*

*CARRIED.*

B. Allen advised that there reference to an IT program/initiative (from the SE LHIN) is for back office integration (amalgamation of services for LCSS, LCMH, etc.) and any funding would be directed to this. This initiative would not be for a common IT program for the clinical services roadmap.

## **6. ACTION ITEMS**

### **6.1 President & CEO Report – T. Stepanuik**

T. Stepanuik referred the members to the “President & CEO Report” and apologized for the delay in sending out the information. He highlighted the following items:

- M. Poulin’s upcoming retirement. He noted that M. Poulin has been with Lanark County Mental Health for 30 years. He has met with L. Gilbertson, LCMH Community Advisory Board Chair and she shares the hospital’s perspective regarding how the position will be filled.

- he confirmed that a memo and survey was sent to all LCMH staff regarding the upcoming leadership change. He noted that there has been an 80% response rate to the survey.
- T. Stepanuik will collate the information. T. Stepanuik and L. Gilbertson will meet next week to discuss.
- he then highlighted that hospital has retired all long-term debt. He noted that the Finance Committee has requested additional information regarding the percentage of utilities cost (presently at 2%). B. Allen will make inquiries.

Discussion ensued regarding increases to sick days and WSIB information. T. Stepanuik will endeavour to incorporate WSIB information going forward, but noted that the information will be dated.

T. Stepanuik also offered to provide a presentation on sick time at the next meeting.

L. Bisonette offered clarification on the clinical matter regarding the rationale for the 10% reduction of out patient clinics (ENT, dermatology) and its impact. Discussion. She noted that there has been an increase in the fracture clinics due to the arrival of the 2<sup>nd</sup> orthopaedic surgeon.

L. Sparks asked and T. Stepanuik advised that since the hospital no longer has long-term debt, the cash (previously applied to debt) be applied to the hospital shortfall.

*RESOLUTION No. 29 /11*

*MOVED by K. Van Der Meer*

*SECONDED by C. Beckett*

*THAT the Perth and Smiths Falls District Hospital Board of Directors' hereby accepts the report of the President & CEO.*

*CARRIED.*

## **6.2 CHIEF OF STAFF REPORT – DR. P. RONEY**

Dr. Roney provided his Chief of Staff report to the members.

SUMMER OR CLOSURES – BS/MR

*RESOLUTION 30/11*

*MOVED by B. Strachan*

*SECONDED by M. Ross*

*The Board of Directors of the Perth and Smiths Falls District Hospital hereby accepts the recommendation of the Medical Advisory Committee to approve the summer 2011 OR closure dates as follows:*

- *Friday, July 22, 2011 at 17:00 hours until Monday, August 8, 2011 at 08:00 hours;*

*FURTHER that there will be no bed closure at the Smiths Falls site due to construction and there will be a closure of five (5) beds at the GWM Site;*

*AND the Operating Rooms will remain open for C-Sections at the Smiths Falls Site.*

*CARRIED.*

He noted that Items 2, 3 and 4 relate to credentialing and these matters will be discussed during closed session. He noted that the hospital continues to recruit.

Dr. P. Roney then provided an update on the South East LHIN clinical services roadmap and the possible directions for the initiative.

At this point, Dr. Muldowney raised the issue with the location of the medical staff lounge at the Smiths Falls Site. She noted that stemming from the recent medical staff meeting, she has been directed to send a letter to T. Stepanuik outlining the concerns of the physicians. Discussion ensued regarding the matter being reviewed by the Building Committee. L. Hendriks noted that this matter was discussed by the Building Committee.

Further discussion took place regarding the Clinical Services Roadmap and whether or not any financial scenarios have been considered with the proposed directions.

Dr. P. Roney indicated that these are the 1<sup>st</sup> recommendations from the consultants engaged by the South East LHIN. It was noted that the hospital will be putting forward concerns.

B. Strachan requested that a letter to Dr. Mclean be forwarded from the board on his recent achievement. K. Kelly to draft a letter for L. Sparks.

L. Sparks reported that he is in the process of writing a letter with the boards of Providence and Kingston General indicating that until something is tangible with respect to the Clinical Services Roadmap, the South East LHIN should stop implying that our respective organizations are supportive.

The members discussed the process for public engagement and the concern of how the South East LHIN has been approaching municipal councils. The members also disagreed with how the LHIN will be soliciting feedback and input.

T. Stepanuik stated that over the next few months, a formal proposal for Meditech upgrades will be presented for the board's consideration.

*RESOLUTION No. 31/11*

*MOVED by D. Staples*

*SECONDED by R. Schooley*

*THAT the report of the Chief of Staff be accepted as presented.*

*CARRIED.*

### **6.3 Strategic Plan – Principle Risks – L. Sparks**

T. Stepanuik referred the members to the materials included in the package. He stated that the board charged him with preparing a spreadsheet outlining the governance related risks. This information will be incorporated into the board dashboard and has been reviewed by the Executive Committee. This is for information.

Discussion ensued regarding whether or not the risks need to be prioritized. T. Stepanuik noted that based on the discussion at the recent Executive Committee meeting, there is a need to balance all priorities which will make it difficult to prioritize the risks.

L. Sparks asked for suggestions on how this document will be utilized. C. Beckett suggested that the board highlight one risk each month at a board meeting. D. Staples further suggested that the risks be linked into the topics at the board meeting (perhaps, by adapting the CEO report to speak to some of the risks.)

T. Stepanuik added that TNG will be invited to meet with the board again (in April) as there is a need to maintain the momentum. L. Sparks noted that C. Beckett's suggestion will be brought forward at that point.

### **6.4 HSAA - R. Schooley**

R. Schooley put forward a recommendation for the board's consideration:

*RESOLUTION No. 32/11*

*MOVED by R. Schooley  
SECONDED by B. Strachan*

*The Perth and Smiths Falls District Hospital Board of Directors hereby endorses the recommendation of the Finance Committee to ratify the Amending Agreement for the 2008-2012 Hospital Services Accountability Agreement with the South East Local Health Integration Network);*

*FURTHER that the Amending Agreement be effective April 1, 2011;*

*AND THAT the Board Chair and the President & CEO be authorized to sign the Amending Agreement as representatives of the hospital.*

*CARRIED.*

### **6.5 Quality Improvement Plan – L. Hendriks**

L. Hendriks provided the following background information on the Quality Improvement Plan:

- the Board Quality Committee has been reviewing this matter
- there has been a focus on three particular issues:
  - medication reconciliation; hand hygiene; and falls prevention.

L. Hendriks then reviewed the draft document contained in the materials. She noted that this is to be submitted by April 1, 2011. The South East LHIN has requested that they review this prior to submitting to the Ministry (Ontario Quality Health Council). Discussion ensued regarding the three aims.

L. Bisonette advised that the focus on medication reconciliation on the 3<sup>rd</sup> floor (GWM Site) was due to the fact that the hospital is taking a staged approach. The program is already in place in both ICUs.

It was noted that the potential upgrade to Meditech will assist with this aim.

T. Stepanuik spoke to Part C and noted that this section was finalized recently. He noted that the hospital is the only hospital that is delivering a “grading” system to making, meeting and exceeding targets. He added that upon today’s board approval, the document will be forwarded to the South East LHIN and then to the Ontario Quality Health Council.

L. Sparks noted that based on discussions with other hospitals, the Perth and Smiths Falls District Hospital’s progress is significantly more than other hospitals.

*RESOLUTION No. 33/11*

*MOVED by L. Hendriks  
SECONDED by M. Ross*

*The Board of Directors of the Perth and Smiths Falls District Hospital hereby accepts the recommendation of the Executive Committee to approve the Quality Improvement Plan (short form) Improvement Targets & Initiatives spreadsheet; and*

*FURTHER, the Board of Directors authorizes Larry Sparks, Chair, Lynda Hendriks, Board Quality Committee Chair and Todd Stepanuik, President & CEO to sign the document and submit to the Ontario Quality Health Council.*

CARRIED.

#### **6.6 MSA (Lanark County Mental Health)**

- discussed earlier in the meeting.

*Dr. Muldowney left the meeting at 8:50 a.m.*

#### **6.7 Signing Authority Policy**

R. Schooley put forward the following resolution.

*RESOLUTION No. 34/11*

*MOVED by R. Schooley  
SECONDED by L. Evans*

*The Board of Directors of the Perth and Smiths Falls District Hospital hereby accept the recommendation of the Finance Committee to approve the Signing Authority Policy as presented.*

CARRIED.

B. Allen advised that the Board Chair authorizes the transactions of the President & CEO and there are presently seven (7) credit cards issued to departments/employees (president, vice presidents, board chair, Lanark County Support Services, Lanark County Mental Health and Materials Management).

### **6.8 Lanark County Support Services**

R. Schooley put forward the following resolution:

*RESOLUTION No. 35/11*

*MOVED by R. Schooley*

*SECONDED by M. Ross*

*The Perth and Smiths Falls District Hospital Board of Directors hereby accepts the recommendation of the Finance Committee to approve the 2011/2012 budget for Lanark County Support Services which reflects a balanced budget position.*

*FURTHERMORE that the Perth and Smiths Falls District Hospital Board of Directors authorizes Larry Sparks, Chair, Board of Directors and Todd Stepanuik, President & CEO to sign the 2011/12 budget.*

*CARRIED.*

## **7. CLOSED SESSION**

At this point, the meeting of the Board of Directors moved to a closed session.

*RESOLUTION No.36 /11*

*MOVED by J. Brown*

*SECONDED by L. Hendriks*

*THAT the Perth and Smiths Falls District Hospital Board of Directors' hereby move in camera at 8:54 a.m.*

*FURTHER that K. Kelly, Recording Secretary remain for the duration of the in camera session.*

*CARRIED.*

*RESOLUTION No. 37/11*

*MOVED by J. Brown*

*SECONDED by L. Hendriks*

*THAT the Perth and Smiths Falls District Hospital Board of Directors hereby move out of the in camera session at 9:11 a.m.*

*CARRIED.*

Based on the closed session discussion, the following motions were put forward.

*RESOLUTION No. 38/11*

*MOVED by D. Staples*

*SECONDED by J. Brown*

*THAT the Board of Directors of the Perth and Smiths Falls District Hospital hereby accepts the recommendation of the Medical Advisory Committee as put forward by Dr. P. Roney, Chief of Staff and approves the following applications for privileges:*

- Dr. T. Woods, request for Courtesy privileges in the Emergency Department*
- Dr. G. Asrat – change from Associate to Active privileges;*
- Dr. B. Chaudry – change from Associate to Active privileges; and*
- Dr. R. Kennie – change from Associate to Active privileges.*

*CARRIED.*

*RESOLUTION No. 39/11*

*MOVED by L. Evans*

*SECONDED by J. Brown*

*THAT the Board of Directors of the Perth and Smiths Falls District Hospital hereby accept the recommendation of the President & CEO regarding the pay at risk amount of 3% to be applied to the four impacted individuals (President & CEO, Vice President, Finance & Support Services, Vice President, Patient Care Services/CNE and Chief of Staff).*

*FURTHERMORE that the amount be subject to a graduated/sliding percent threshold for payment based on the performance targets and that any payment will be made once evidence exists that there is achievement of some or all of the targets.*

*CARRIED.*

## **8. BUSINESS ARISING FROM MINUTES**

### **8.1 South East Local Health Integration Network**

#### **8.1.1 Clinical Services Roadmap**

T. Stepanuik reported that a communiqué was sent to staff on Friday, March 18 regarding the public engagement process. The communiqué encourages all staff be involved. He added that this matter will be raised during the upcoming interview with Lake 88. L. Sparks stated that there is a need to ensure and to promote the opportunity for members of the catchment area to provide an input. It was suggested that a media release and letter to the editor be generated for newspapers.

The members discussed other opportunities to raise awareness on the matter. R. Schooley suggested that local high schools be approached. J. Brown noted that she participates on a school committee and can bring information to an upcoming

meeting. A list of community groups will be generated (university women's network, auxiliaries, high schools, etc.) R. Schooley to forward suggestions to L. Sparks. It was noted that there will be a need to have talking points when speaking to community groups.

L. Bisonette noted that there continues to be a common question regarding the clinical services roadmap and that is essentially, "what is this about?" She stated that there is a need to reinforce the availability of quality care close to home.

T. Stepanuik will draft a letter to the editor; media release; generate speaking points and offer suggestions for community groups.

### **8.1.2 SE LHIN Meetings**

#### **8.1.2.1 SE CHEF Meeting – T. Stepanuik**

##### **8.1.2.2 Clinical Leaders Meeting – Dr. P. Roney/L. Bisonette**

- nothing further to report.

### **8.2 Accreditation Update**

L. Hendriks reported that hospital staff have been working diligently on the items presented in the Accreditation report (report has been posted on portal). A draft report has been sent to Accreditation Canada for their initial review and feedback and to ensure that all aspects are covered. C. Cassidy-Gifford confirmed that she received a response yesterday afternoon and advised that the hospital's final document will be submitted March 28. This matter will be on the Board Quality agenda next month.

### **8.3 Family Physician Shortage – Smiths Falls – L. Sparks**

Nothing to report. It was agreed that there is a need to find a date in April for the group to meet again.

T. Stepanuik reported that the hospital has met with a young physician recently. The physician is presently entertaining offers from both Almonte and Smiths Falls.

D. Staples noted items for follow-up such as the possible continuation of funding, turnkey activities, etc.. L. Sparks anticipates confirming a date before the next board meeting.

### **8.4 Board of Directors' Self-Evaluation – L. Sparks**

L. Sparks reported that nine members completed the evaluation. He suggested that the evaluation comments be brought forward to the align with strategic plan discussions. He noted that the previous year's summary would be provided going forward as it will assist the members in gauging accomplishments, etc.

## **9. NEW BUSINESS**

### **9.1 CEO Evaluation – L. Sparks**

L. Sparks advised that this document will be sent electronically. The completed evaluation should be returned to K. Kelly for collation. K. Kelly to send email to board with evaluation form.

## **9.2 Home First Initiative – L. Bisonette**

L. Bisonette provided information on this initiative to the members. She highlighted the following points:

- initiative has been rolled out at Kingston General Hospital, Brockville General Hospital and Quinte Healthcare. The Perth and Smiths Falls District Hospital is next to roll out the program.
- the program is intended to reduce ALC patients and their associated hospitalized days within the South East LHIN. This philosophy has supported the client's choice to return home after their acute event, while making a final destination decision.
- the PSFDH will continue to do its best to identify early on the needs of the patient
- this initiative may delay the need to go to a long term care situation.

## **10. BOARD COMMITTEE REPORTS**

### **10.1 Governance Committee – C. Beckett**

C. Beckett reported the following:

- newspaper ad was placed in local papers;
- received six (6) applications
- one applicant was ineligible
- interviews are scheduled for Monday, April 11.
- there are three (3) openings to fill.

At this point, R. Schooley left the meeting (due to his conflict). She then referred the members to the briefing note provided regarding Directors & Officers insurance.

T. Stepanuik added that B. Allen has been charged with speaking on the matter with Marsh Canada regarding the possible augmentation of the existing D&O insurance.

There is no recommendation to change coverage at this point..

K. Van Der Meer requested if there would be a significant difference to increase/decrease coverage. T. Stepanuik advised that from a due diligence perspective, there is a need to ensure that trustees are adequately insured. He confirmed that the board members are adequately insured.

T. Stepanuik added that the hospital is awaiting information from Marsh. It was noted that all members (voting/non-voting) are covered by this policy.

### **10.2 Board Quality Committee – L. Hendriks**

L. Hendriks reported that the committee continues to develop the patient declaration of values. There is an on-line survey available for the public to provide feedback. The document needs to be finalized and posted by June 1, 2011.

The committee has also be reviewing the Quality Improvement Plan. C. Cassidy-Gifford confirmed that the balanced scorecard will be presented at the next meeting, therefore it will be shared with the board at the April meeting.

### **10.3 Building Committee – K. Van Der Meer**

K. Van Der Meer reported the following:

- committee met recently;
- Phase 3A move went well with the assistance of Wills Transfer
- work has commenced on Phase 3B
- he referenced the letters in the meeting materials and noted that the hospital is awaiting response from Aecon.
- Change orders summary
  - o Summary has been sent to the Ministry
  - o B. Allen and T. Stepanuik are working to arranging a meeting with Ministry representatives to discuss overall project; cash flows, change orders.
- parking issue has been resolved. The lane at the main entrance is not a parking area, however, it was agreed that the area can be a drop-off.
- B. Allen confirmed that any signs indicating that it was a drop-off/pick-up zone have been removed. The area is essentially an “unofficial” drop off zone.

D. Staples noted that given the time of year (Ministry year end), it may be a good time to approach the ministry regarding the change orders. B. Allen stated that attempts were made to have a meeting to discuss the project prior to March 31, however, this was not agreeable with the Ministry.

### **10.4 Financial Summary**

#### **10.4.1 Monthly Finance Statements**

#### **10.4.2 2010/2011 Operating Forecast**

R. Schooley provided the following financial report:

- hospital is reporting a year to date deficit from operations of \$546,042 to February 28, 2011.
- the month of February ended with a deficit of \$86,661 for the month which was \$65,682 higher than last moth’s projected deficit for February of \$20,981.
- a special Finance meeting has been scheduled for April 1. K. Kelly to send notice to committee members.

B. Allen added that the hospital will be required to submit a HAPS document six (6) weeks after funding has been announced. Discussion ensued regarding the hospital’s position with respect to HBAM facts and figures. A letter to the South East LHIN highlighting our hospital’s performance is being generated.

L. Sparks advised that he will be taking the initiative to organize a meeting with W. Turner, Director, South East LHIN Board of Directors to discuss the hospital’s direction and hospital funding issues despite HBAM reports and other good positioning. He thinks that the meeting will be after the funding direction has been determined.

### **10.5 Executive Committee – L. Sparks**

L. Sparks reported that the Executive Committee met recently to discuss the 2011/2012 budget, performance based compensation and status of discussions with the foundations.

**11. OTHER BUSINESS**

Nothing at this point.

**12. NEXT MEETING DATE**

Going forward, board meetings will be held at the GWM Site. Committee meetings will be accommodated at both sites.

L. Sparks reminded the members of the upcoming GWM Foundation fundraising event, "Black Tie Bingo".

The next meeting will be held on Tuesday, April 26, 2011 at 07:30 hours, Main Boardroom, GWM Site.

**DATES TO REMEMBER – VOLUNTEER WEEK APRIL 11**

**13. ADJOURNMENT**

*RESOLUTION No. 40/11*

*MOVED by L. Hendriks  
SECONDED by C. Beckett*

*THAT the meeting of the Perth and Smiths Falls District Hospital Board of Directors be adjourned at 9:51 hours.*

*CARRIED.*

*"Larry Sparks"*

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Larry Sparks, Chair

*"Todd Stepanuik"*

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Todd Stepanuik, Secretary