

PERTH AND SMITHS FALLS DISTRICT HOSPITAL

Board of Directors' Meeting
Tuesday, April 23, 2013
Main Boardroom, GWM Site
7:30 a.m.

PRESENT: D. Adshead, C. Beckett, L. Bisonette, J. Brown, L. Evans, *L. Hendriks, Chair*, D. Howard, W. Johnson, Dr. P. Roney, M. Ross, R. Schooley, D. Staples, B. Strachan

REGRETS: B. Allen, Dr. P. Cunniffe, Dr. M. Joannou, L. Sparks

IN ATTENDANCE: K. Kelly, Recording Secretary, M. Bell, President, GWM Auxiliary

1. CALL TO ORDER

The meeting was called to order by L. Hendriks, Chair at 7:34 a.m.

2. CHAIR'S REMARKS

L. Hendriks looking forward to volunteer luncheon today and she encouraged the members to attend.

3. APPROVAL OF AGENDA

RESOLUTION No. 44/13

MOVED by M. Ross

SECONDED by L. Sparks

THAT the agenda for the April 23, 2013 Board of Directors' meeting be approved as circulated. With the addition of Item 11.5 Lanark County Mental Health – W. Johnson.

CARRIED.

4. DECLARATION OF CONFLICT OF INTEREST

D. Howard and C. Beckett declared a conflict for Closed Session Item 5.3 – Hart Laundry Update.

5. CONSENT AGENDA

At this point, L. Hendriks 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. 45/13

MOVED by L. Evans

SECONDED by C. Beckett

THAT the Consent Agenda be approved as presented with the notation that the South East LHIN draft minutes and CEO report were not available at the time of the meeting.

CARRIED.

6. ACKNOWLEDGEMENTS

6.1 Grateful Patient Letter – L. Bisonette

L. Bisonette referred the members to the grateful patient letters received recently. She advised that the letters are shared with all staff involved.

7. ACTION ITEMS

7.1 Leadership Report – L. Bisonette

L. Bisonette referred the members to the leadership report prepared for the Board of Directors' information. She commented that work continues to share good news stories about the hospital whenever possible. She also thanked the board members who volunteered or participating in Sunday's Spring Fling Running Thing fundraising event.

She clarified that physiotherapy patients are triaged in a similar fashion to patients presenting at the ER and waiting lists remain relatively the same prior to any program changes.

R. Schooley commented on the conservable days reported in Dr. Roney's report and L. Bisonette's report. L. Bisonette advised that an action plan is underway and she feels that the hospital is on the right track. The projection in the next HSAA is 85% occupancy of 85 beds.

RESOLUTION No.46/13

*MOVED by D. Adshead
SECONDED by C. Beckett*

THAT the Leadership Report be accepted as presented by Linda Bisonette, President & CEO.

CARRIED.

7.2 CHIEF OF STAFF REPORT – DR. P. RONEY

Dr. P. Roney referred the members to the Chief of Staff report included in the materials. He confirmed that PSFDH conservable days action plan is in place. There is ongoing education of physicians in areas of proper coding to ensure that all aspects are captured and PSFDH is funded appropriately. The hospital continues to focus on the items that are in its control.

He referenced the CTAS 5 (lowest acuity) pilot project that was undertaken at the GWM Site wherein the ER Triage Nurse assessed the patients and made a determination of whether the patient was sent home with a request to return in the morning. This pilot project will be put into place at the SF Site ER.

He advised that there is no need for midwifery at this point. He spoke to the concept of having the midwives serve as coaches in the OR and raised the concern of overcrowding the OR and the need to ensure safety and efficiency.

Per the Department of Surgery, the wait times have not changed. The orthopaedic patients are being as there has been more of a connection with Ottawa area patients (based on referrals received by Dr. Roberts.)

He then referred the members to the listing of annual reappointments of clinical chiefs and the upcoming changes.

RESOLUTION No. 47/13

MOVED by L. Evans
SECONDED by M. Ross

THAT the Chief of Staff report be accepted as presented by Dr. Peter Roney, Chief of Staff.

CARRIED.

RESOLUTION No. 48/13

MOVED by R. Schooley
SECONDED by D. Howard

THAT The Board of Directors of the Perth and Smiths Falls District Hospital hereby accepts the recommendation of the Medical Advisory Committee to appoint the following persons as the clinical chief of the noted department:

- *Dr. A. Gauthier Anaesthesia;*
- *Dr. C. Ehrat Emergency Dept. Perth;*
- *Dr. M. Horsey Emergency Dept. Smiths Falls;*
- *Dr. L. Wahay Family Medicine – Perth;*
- *Dr. R. Shew Family Medicine - Smiths Falls;*
- *Dr. N. Parikh Diagnostic Imaging;*
- *Dr. P. Anderson Surgery;*
- *Dr. R. Del Grande Internal Medicine; and*
- *Dr. P. McGregor OBS.*

CARRIED.

7.3 Governance Committee – M. Ross

M. Ross referred the members to the documents included in the materials that have been brought forward from Governance Committee. He advised that the committee continues to review the policies currently in place and update as necessary.

7.3.1 Governance Process Policy No. 2.6.6, “Executive Committee”

RESOLUTION No. 49/13

MOVED by M. Ross
SECONDED by D. Adshead

THAT the Governance Committee recommends to the PSFDH Board of Directors the approval of Governance Process Policy No. 2.6.6, Executive Committee” as revised and presented.

CARRIED.

7.3.2 Board/Staff Relationship Policy No. 3.2, “Chief Executive Committee”

RESOLUTION No. 50/13

MOVED by M. Ross
SECONDED by D. Howard

THAT the Governance Committee recommends to the PSFDH Board of Directors the approval of Board Staff Relationship Policy No. 3.2, “Chief Executive Officer’s Job Description” as reviewed and presented.

CARRIED.

7.3.3 Board/Staff Relationship Policy No. 3.3, “Monitoring Chief Executive Officer Performance”

RESOLUTION No. 51/13

MOVED by M. Ross
SECONDED by B. Strachan

THAT the Governance Committee recommends to the PSFDH Board of Directors the approval of Board/Staff Relationship Policy No. 3.3, “Monitoring Executive Performance” as reviewed and presented.

CARRIED.

7.3.4 PSFDH Job Description – President & CEO

RESOLUTION No. 52/13

MOVED by M. Ross
SECONDED by D. Adshead

THAT the Governance Committee recommends to the PSFDH Board of Directors the approval of the President & CEO Job Description as presented.

CARRIED.

7.3.5 Executive Limitations Policy No. 4.0, “General Executive Officer Constraints”

RESOLUTION No. 53/13

MOVED by M. Ross
SECONDED by J. Brown

THAT the Governance Committee recommends to the PSFDH Board of Directors the approval of Executive Limitations Policy No. 4.0, “General Executive Officer’s Constraint” as reviewed and presented (with no changes.)

CARRIED.

7.4 HSAA – C. Beckett

L. Bisonette referred the members to the proposed HSAA amending agreement (posted on portal.) She confirmed that the Ministry is considering a review of the HSAA based on the funding formula changes. However, the document presented today is essentially the same

agreement signed last year with the addition of Schedule A. She confirmed that schedules have been populated based on PSFDH numbers from HAPS. She noted that more information to follow on new quality based procedures. She reviewed Schedule C1 which outlined the performance indicators and noted that board approval is required prior to the May 21, 2013 submission date.

RESOLUTION No. 54/13

*MOVED by C. Beckett
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 2008-2013 H-SAA Amending Agreement with the South East Local Health Integration Network;

FURTHER that the Amending Agreement be effective April 1, 2013;

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

CARRIED.

8. CLOSED SESSION

RESOLUTION No. 55/13

*MOVED by D. Howard
SECONDED by J. Brown*

THAT the Board of Directors of the Perth and Smiths Falls District Hospital hereby move to a closed session 7:58 a.m. and L. Bisonette, President & CEO, and K. Kelly, Recording Secretary, to remain for the discussion.

CARRIED.

RESOLUTION No. 56/13

*MOVED by J. Brown
SECONDED by M. Ross*

THAT the Board of Directors hereby moves out of the closed session at 8:08 a.m.

CARRIED.

Approval of Closed Session Notes

RESOLUTION No. 57/13

*MOVED by C. Beckett
SECONDED by B. Strachan*

THAT the closed session notes of the March 26, 2013 meeting be approved as circulated.

CARRIED.

9. BUSINESS ARISING FROM MINUTES

9.1 South East Local Health Integration Network

L. Bisonette provided a report from the recent SE CHEF meeting. She noted that the group reviewed the funding models and the upcoming changes. It was determined that an external consultant will be engaged to implement proposed changes. The facilitation of a plan will start in May/June and completed by November/December timeline. When available and ready, L. Bisonette will share the project charter.

L. Hendriks commented that the SE LHIN distributed a very draft document regarding sustainability in December 2012. The document was brought forward by L. Bisonette at that time and shared with the Executive. This document has now been shared with the SE LHIN chairs. Based on the response of the SE LHIN chairs, most were not aware of the document. The sustainability plan continues to be a draft document.

This plan was briefly discussed during the recent meeting with D. Segal, SE LHIN Chair and Ms. Segal felt that the sharing of the document was done prematurely. L. Hendriks will keep the board informed.

L. Bisonette also reported that the SE CHEF group received a presentation on behavioural supports programs. This is not yet available to hospitals. Direction has also been received from the SE LHIN regarding capital projects. The process requests hospitals to bring forward projects to LHIN.

Three RFP for regional IT has been shortlisted to three groups.

Discussion took place on the life and limb policy, specifically access to care for those seeking life/limb assistance. "Critical" services are presently in place but could be made more efficient.

L. Bisonette confirmed that long term care facilities are aware of the behavioural support program. She noted that the patriation and repatriation policy and process was also discussed. PSFDH does not have patriation issues.

9.1.1 Primary Health Links – Dr. Cunniffe/Dr. Joannou

Dr. P. Cunniffe provided an update on the status of the business plan which is the final step in obtaining approval from Ministry for the local primary health links initiative. He thanked the board for the letter of support. The next step for the steering committee is a facilitated session scheduled for Saturday, June 1 in Perth that will involve primary care providers (physicians, nurse practitioners, etc.) This is an invitation only event and will serve as a visioning session to develop priorities and directions for improving primary care in the area.

A follow-up/2nd session will be held in the latter part of June and will include the hospital, long term care facilities. No date has been determined for this event. Once the sessions have been completed, the business plan will be submitted. The Ministry will fund up to \$75,000 to develop readiness assessment and the Rideau Community Health Services is acting as the coordinating agency (to provide administration and logistics.)

Discussion ensued. R. Schooley stated that this initiative is critical and if additional support is required, that Dr. Cunniffe advise of the same.

While the initial \$75,000 is to assist in the planning there is a large sum available (which may be one time funding) to see that the proposed initiatives are put into action.

9.1.2 Meeting with D. Segal, SE LHIN Board Chair – L. Hendriks/L. Bisonette

L. Hendriks reported that she and L. Bisonette had a positive first meeting with D. Segal, Chair, South East LHIN earlier this week. D. Segal intends to meet all SE LHIN hospital chairs and CEOs in the coming weeks.

While at the meeting with D. Segal, L. Bisonette highlighted that PSFDH is the only SE LHIN hospital to have received an A+ rating. D. Segal mentioned that this should be celebrated. Various topics were covered during the meeting.

L. Hendriks impressed upon D. Segal the importance of having P. Huras in attendance at the community meeting.

9.2 Family Physician Shortage – Smiths Falls – Update – L. Bisonette

Per Dr. Roney's Chief of Staff report, recruitment is ongoing and it is anticipated that one new physician will be joining the new office space in the summer 2013. L. Bisonette added that she has spoken with the contractor of the turn key and a pay out of \$150,000 will be made (per the agreement) as the contractors have satisfied the hospital requirement to date.

10. NEW BUSINESS

10.1 Community Meeting April 24, 2013 – L. Bisonette

L. Bisonette reported that the April 24, 2013 community meeting is sponsored by the OMA and it has been coordinated by Dr. A. Drummond. She confirmed that P. Huras, CEO, South East LHIN will be in attendance and he will give a presentation. P. Huras will also participate in a panel discussion along with Dr. Roney, Dr. Joannou, L. Bisonette and Dr. Drummond. Dr. Adam Stacey will serve as the moderator.

Discussion ensued. L. Bisonette provided an outline of her presentation. K. Kelly to post on the hospital site. The members put forward suggestions for the presentation such as the legislated need to be in a balanced position; clarify that emergency "operations" means emergency "surgeries"; and recent changes will be monitored.

L. Hendriks encouraged members to attend the community meeting. L. Bisonette added that MPP Hillier will also be in attendance along with members of the hospital management team.

11. BOARD COMMITTEE REPORTS

11.1 Liaison Committee – April 8, 2013 – L. Evans

L. Evans reported that the committee met April 8, 2013. She has been busy participating in a number of hospital, auxiliary and foundation related events such as the Black Tie Bingo and Spring Fling Running Thing. She referenced the thank you letter from P. Blackstock, Chair, Rideau Community Health Services.

She and L. Bisonette continue to attend Smiths Falls Community Hospital Foundation board meetings. She outlined a number of upcoming fundraising events. K. Kelly to circulate to the board (post on portal.)

L. Evans attended the SFCH Auxiliary meeting this month and encouraged members to participate and support auxiliary events. L. Bisonette noted that SFCH Auxiliary donated \$10,000 for the purchase of pain pumps. N. Shaw, Patient Care Manager, MS/OBS will attend the upcoming meeting on L. Bisonette's behalf to speak to the pumps.

11.2 Board Quality Committee – April 11, 2013 – R. Schooley

R. Schooley reported that the Board Quality Committee met on April 11, 2013. The committee reviewed a draft of the Balanced Scorecard. This item will be posted along with the completed survey for Health Quality Council (oversight of Quality Improvement Plans.) It was suggested that this item be brought forward to a future meeting as it was quite extensive.

11.3 Finance Committee – April 18, 2013 – C. Beckett

C. Beckett referred the members to the information in the materials. She is encouraged by the progress to date. A brief discussion ensued. She noted that all but two items on the dashboard have moved to green status. The Finance Committee offered congratulations to the management team for implementing the peer review initiatives.

Further, the unaudited numbers reflect a deficit of \$1.2 million and C. Beckett noted that without exit costs, the operating deficit is approximately \$250,000. She confirmed that year end audit commences the first week of May and it is anticipated that the audited numbers will be available at the May meeting.

C. Beckett reported that the Honeywell energy project is complete and management will work to ensure guaranteed savings. The Finance Committee reviewed the information for LCMH and the PSFDH HSAA amending agreement.

L. Hendriks noted that the improvement to length of board meetings may be the result of the improvements with the hospital finances. R. Schooley offered that while the numbers presented are unaudited, he feels that the numbers are accurate. He added that last year, the hospital and board planned on money that was not received however, this is not the situation this year. He is pleased with the efforts and success.

L. Hendriks added that she received a letter from the Ministry of Health & Long-Term Care regarding working capital deficit relief and PSFDH does not qualify this year.

11.4 Executive Committee – April 5 & 19, 2013 – L. Hendriks

- the matters discussed at the recent meetings have been covered under other reports and closed session.

11.5 Lanark County Mental Health Community Advisory Board – W. Johnson

W. Johnson provided a report from the recent LCMH Community Advisory Committee meeting. He advised that the committee has two *ex officio* positions (one hospital board member and hospital President & CEO.)

He announced an upcoming presentation to be held on Thursday, May 9, 2013 7 p.m. with Dr. Heather Stuart presenting. K. Kelly to send out details.

Information and reports were received on matters such as staff wellness survey results (available next week), completion and submission of MSAA, etc. HE noted that staff morale is at an all time high in the LCMH program. L. Bisonette commented that the upcoming capital project for LCMH is under the umbrella of PSFDH and subject to the SE LHIN rules and procedures.

It was suggested that D. McDonnell, Executive Director attend a board meeting to provide an update on services at LCMH.

Further, it was suggested that a joint meeting with LCMH community engagement committee and PSFDH Liaison Committee be planned. K. Kelly to advise board when a date has been coordinated.

12. BOARD EDUCATION

12.1 CEO Succession Planning Session (OHA)

L. Hendriks reported that this matter was discussed at the recent Executive Committee meeting. It was suggested that based on timing that C. Beckett and R. Schooley attend the upcoming OHA session.

RESOLUTION No. 58/13

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

THAT the Board of Directors authorize to C. Beckett and R. Schooley attend the upcoming Ontario Hospital Association Course, "CEO Succession Planning for Hospital Boards;

AND further, that relevant travel costs will be covered by the Board of Directors.

CARRIED.

13. OTHER BUSINESS

L. Bisonette commented that A+ from The Fifth Estate. She acknowledged the support from staff, physicians, volunteers, board in achieving this recognition and rating.

14. DATE OF NEXT MEETING

Tuesday, May 28, 2013, Main Boardroom, SF Site.

15. ADJOURNMENT

RESOLUTION No. 59/13

*MOVED by C. Beckett
SECONDED by W. Johnson*

THAT the meeting of the Perth and Smiths Falls District Hospital Board of Directors be adjourned at 9:03 a.m.

CARRIED.

"L. Hendriks"

"L. Bisonette"

L. Hendriks, Chair

L. Bisonette, Secretary