

WDMH Board of Directors Tuesday, February 26, 2019–5:00 p.m. Dillabough Professional Centre - Boardroom

MINUTES OF MEETING

Director	Present	Regrets	Director	Present	Regrets
Mike Villeneuve, Chair	٧		Lynn Hall	٧	
Andy Barrett	V		Bruce Millar	٧	
Renee Belhumeur	٧		Michelle Perry	٧	
Cholly Boland	٧		James Pitruniak	٧	
Holly Brown	٧		Shawn Sutton (Teleconf)	٧	
Dr. Marilyn Crabtree	V		John Trickett (Teleconf)	٧	
Tom Dawson		٧	Dr. D. Tse	٧	
Lynn Dillabough	V		Marieke vanNoppen	٧	
Elise Guest	٧		David Wattie	٧	
Staff			Guest		
Michelle Blouin	٧		Linda Morrow		
Laura Landry	٧				
Chris Barkley (Recorder)	٧				

1. Call to Order

The meeting was called to order at 5:00 pm.

2. Declaration of Conflict of Interest

None declared.

3. Agenda Check-In

The agenda was approved by consensus.

4. Patient Story

Laura Landry, Clinical Manager, shared a story of a poor patient experience, including the learning opportunities as a result of the investigation.

5. Board Education

5.1 <u>2019-24 Strategic Plan Discussion</u>

The Strategic Planning Committee has been meeting monthly since October 2018. The Committee has gone through a phase of data collection including:

Speakers:

• Chair, OHA Small, Rural and Northern Hospitals Committee

- CEO, Canadian Nurses Association
- Premier's Council on Improving Health Care and Ending Hallway Medicine

Video Presentations:

- Advancement in health care technology
- Regionalization (U.S. perspective)

Documents:

- LHIN Integrated Health Service Plan 2019-2022
- Patients First legislation

Environmental scan conducted by the committee Hospital population/utilization data

Two staff focus groups have been scheduled for March. Linda Morrow attended today's meeting to facilitate a discussion with the board to hear where the Board feels the hospital needs to place its focus in the next five years. Ideas were shared in relation to Quality / Services; Our People; Integration / Partnerships; and Accountability. A draft plan will be presented to the Board at the annual education workshop in May.

6. Review of Minutes

Moved by David Wattie, seconded by Bruce Millar that the minutes of November 27th be approved. Carried.

7. New Business

7.1 Risk Management Update

M. Blouin, Sr. VP of Corporate Services and Chief Financial Officer provided an update on the Hospital's Risk Management Program. The hospital reports any possible claim or actual claim through the established Healthcare Insurance Reciprocal of Canada (HIROC) claim reporting process. Risk management reports are obtained from HIROC and reviewed annually.

8. Board Reports:

8.1 Quality Committee

The minutes of the February 21st Quality Committee meeting were distributed in advance for information. David Wattie, Acting Chair of Quality, highlighted the following:

- WDMH is used as a model hospital for blood transfusion
- Some committee members participated in a tour of patient units to talk to staff about quality initiatives

8.1.1 2019/20 Patient Care Information Plan

WDMH is required to develop and publicly post our Patient Care Improvement Plan (PCIP) for 2019-2020 by April 1, 2019.

The 2019-2020 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 2019-2020 were presented and rationale was provided for the following new indicators:

- 30-day follow up for Chronic Obstructive Pulmonary Disease (COPD), Congestive Heart Failure (CHF), Diabetes Patients in Emergency Department
- Average time from decision to admit to the time the patient is in an inpatient bed
- Physician notification of suspected sepsis at Emergency Department triage
- Newborn procedural pain management (heel prick)
- Hospital Acquired Delirium

MOVED by **David Wattie** and **SECONDED** by **John Trickett** that the 2019-2020 Patient Care Improvement Plan be approved as presented. **CARRIED**.

8.1.2 Executive Compensation Hold-Back Plan

The Excellent Care for All Act (EFAA) requires the compensation of senior executives to be linked to the achievement of improvement targets identified in WDMH's Patient Care Improvement Plan (PCIP). A description of the plan must be included in the PCIP and available to the public. Senior executives include the CEO, Chief of Staff and the two Senior Vice-Presidents.

The allocation plan for the 2019/20 fiscal year was presented. The plan allocates up to 75% of performance-based compensation based on the achievement of each of the first three full steps. The remaining 25% will be awarded in direct proportion to performance.

MOVED by Marieke vanNoppen and **SECONDED** by **Elise Guest** that the 2019-2020 Performance-Based Compensation Allocation Plan be approved.

CARRIED.

8.1.3 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.

8.2.1 Professional Staff Appointments

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

- Dr. Sarah Ashton, Locum without Admitting Privileges, Department of Anaesthesia
- Dr. Michael Bensimon, Associate without Admitting Privileges, Department of Family Medicine
- Dr. Dominick Bosse, Regional Affiliate without Admitting Privileges, Department of Internal Medicine – Oncology
- Dr. Sharon McGee, Regional Affiliate without Admitting Privileges, Department of Internal Medicine – Oncology
- Dr.Terry Ng, Regional Affiliate without Admitting Privileges, Department of Internal Medicine – Oncology
- Dr. Amirrtha Sirkanthan, Regional Affiliate without Admitting Privileges, Department of Internal Medicine - Oncology

CARRIED.

MOVED by Elise Guest and SECONDED by Michelle Perry that the following modifications to professional staff privileges be approved:

WDMH Professional Staff Modification:

 Dr. Filemon Dejesus, from Term without Admitting Privileges, Department of Surgery for Urology to Term without Admitting Privileges, Department of Surgery for Surgical Assist effective January 1, 2019

CARRIED.

8.3 <u>Medical Staff Organization</u>

No report.

8.4 Finance Report

8.4.1 Financial Statements – Third Quarter

The hospital's financial results for the period ended December 31st, 2019 shows a surplus from hospital operations of \$33,064 which is unfavourable by \$454,044 from the approved budget.

The main factors for the variance were reviewed in detail.

8.4.2 2019/20 Operating Plan

The preliminary budget for the year end March 31, 2019 is projected to result in a surplus from hospital operations of \$108,271 and a deficit from all fund types of \$(78,209).

The Revenue and Expenditure assumptions were reviewed. The 2019/20 Operating Budget assumes that the hospital will successfully complete all of the allocated Quality Based Procedures from the Ministry of Health and Long-Term Care.

MOVED by Bruce Millar and SECONDED by Andy Barrett that the 2019/20 Operating Plan be approved, thereby approving the hospital's 2019/20 Hospital Annual Planning Submission (HAPS) and the execution of the 2019/20 Hospital Services Accountability Agreement (HSAA).

CARRIED.

8.4.3 2019/20 Capital Plan

Each year the hospital compiles a capital listing which prioritizes the expected annual capital purchases for the year. This is externally funded through the Foundation as well as the Auxiliary. All submissions are reviewed by a working group consisting of all leadership members, (including managers, team leaders, senior managers and Chief Physicians).

The proposed capital list was presented to the Board. The list includes all high, medium and low priority items and contains a contingency in the amount of \$100,000.

MOVED by **David Wattie** and **SECONDED** by **Bruce Millar** that the 2019/20 Capital Equipment Plan totalling \$1,108,078 be approved as presented.

CARRIED.

9 Report of the CEO

9.1 <u>Strategic Priorities Quarterly Update</u>

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

In addition to his written report C. Boland commented on the government's recent announcement regarding its plan to strengthen Ontario's health care system. Key pillars of the announcement include improving access to services and patient experience by:

- Integrating multiple provincial agencies, including the LHINs, into "Ontario Health", a single agency
- "Ontario Health" would have the authority to assume LHIN functions and responsibilities
- Organizing health care providers to work in new, coordinated "Ontario Health Teams"
- Providing patients, families and caregivers with help in navigating the public health care system on a 24/7 basis

 Improving access to secure digital tools, including online health records and virtual are options for patients

10. Report of the Foundation

The Foundation is having a successful year having raised over \$1 Million.

11. WDMH Auxiliary Report

Auxiliary Co-Chair Lynn Dillabough reported the Auxiliary has developed a new mission statement.

The recent Quilt Draw raised \$2015.00. The spring fashion show will be held in May, and a 50/50 draw will run over the summer months.

12 Governance

12.1 Executive Committee Minutes for Information

The minutes of the February Executive Committee meeting were received for information. Chair Mike Villeneuve reminded Board members they are required to attend one Executive Committee meeting each year.

12.2 <u>2019/20 Corporate Memberships</u>

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 Bruce Millar and SECONDED by Holly Brown that the 2019-2020 Corporate Memberships be approved as presented.

CARRIED.

12.3 <u>Meeting Evaluation Results – November 27, 2019</u>

The results of the November 27 meeting evaluation were reviewed. It has been noted that inperson attendance at Board meetings and Quality Committee has decreased. Chair Mike Villeneuve stressed the importance of having full Board representation at the Quality Committee meetings.

12.4 Meeting Evaluation – February 26, 2019

Board members were requested to complete the electronic evaluation for this meeting.

12.5 <u>Annual Director Self-Evaluation</u>

Director Self-Evaluations will be distributed electronically.

13 Conference / Workshop Reports

No report.

14 Report of RHI Board

Efforts are ongoing for the redevelopment of the home.

15 In Camera

No report.

16 Communication & Public Relations Considerations

16.1 Key Themes from Meeting

- Integration of services trying to streamline services for patients
- Strategic Planning planning progressing well
- Risk Management WDMH is not at risk
- Patient Care Improvement Plan was approved
- Auxiliary now has a new Mission Statement

17 Other Business / Next Meeting

H. Brown announced that Rainbow Union Dundas & Grenville is getting ready for Kemptville's first pride event. The group advocates for LGBTQ2 family members and individuals in the community. The event is scheduled the first weekend in June.

The next meeting is scheduled May 28, 2019 at 5:00 p.m.

18 Adjournment

There being no further business the meeting adjourned.