



Board of Directors Regular Board Meeting
January 9, 2019
MINUTES

W:\2018\M - MNGT\MINUTES\Reg 07-118 minutes.docx

Approved – March 6/19

Present: Ed Enge ©; Marlene Davidson, Jeff Lehman, Karen Lusignan, Darcey Bailey, Sally Burns, Brent Harris, Chief Financial Officer; Dr. S. Van Der Loo, COS; Dr. Joanne Spencer, Pres. Medical Staff

Guest: Mike McKinnon, Atikokan Progress

Absent: Jeremy Dickson-VC, Sheron Suutari, Jennifer Learning, CNO, Doug Moynihan, CEO

Recorder: Bonnie Clairmont

	Action Req'd/Date
<p><u>PRESENTATION- Maintenance Department – prepared by R. Bowes</u></p> <p>B. Harris shared the maintenance department presentation. He noted that in 2018 we had two long-term, highly experienced staff (G. Pfeifer, 33 years and J. Cain, 15 years) retire. The maintenance department currently staffs G. Armstrong (15 years), C. Lavallee (1 year) and R. Bowes (9 months). The transition has not been an easy one and the learning curve has been steep, but the staff are ensuring maintenance tasks are being completed in a safe and timely fashion and is keeping records of maintenance tasks and equipment checks for proper compliance. The maintenance department is currently working on assisting with the installation of a new sprinkler system in the Extended Care Wing, They are working towards having a new rooftop HVAC unit installed for the lab and hope to replace the ECW chiller and install new, energy efficient LED parking lot lighting in 2019.</p>	
<p><u>1. CALL TO ORDER</u></p> <p>E. Enge chaired and called the meeting to order at 5:10 pm.</p>	
<p><u>2. DECLARATION OF CONFLICT OF INTEREST – None declared.</u></p>	

	Action Req'd/Date
<p>3. <u>AGENDA</u></p> <p>The agenda was reviewed and accepted as presented with the addition of 5.3 Recommendation from MAC regarding a by-law change.</p> <p>MOTION: K. Lusignan/J. Lehman “That the Board approve the agenda of January 9, 2019 as presented with noted addition.”</p> <p style="text-align: right;">CARRIED 2019-001</p> <p>4. <u>CONSENT AGENDA</u></p> <p>It was noted from the December 18, 2018 Medical Advisory Committee minutes that Ms. Kristi Withrow should be listed as nurse practitioner on the motion to reappoint Courtesy staff. Dr. Van Der Loo also explained the distinction between Active and Associate staff classifications. The Consent Agenda was reviewed and accepted as presented.</p> <p>MOTION: K. Lusignan/J. Lehman “That the Consent Agenda be approved as presented.”</p> <p style="text-align: right;">CARRIED 2019-002</p> <p>With the adoption of the Consent Agenda, the following items were approved:</p> <ul style="list-style-type: none"> a) Approval of Regular Board meeting minutes of November 7, 2018 b) Acceptance of Finance Committee meeting minutes of December 5, 2018 c) Acceptance of Governance Committee meeting minutes of December 5, 2018 d) Acceptance of Medical Advisory Committee meeting minutes of October 16, November 20 and December 18, 2018. <p>5. <u>BUSINESS ARISING</u> (none for this meeting)</p> <p>6. <u>STRATEGIC DISCUSSION</u></p> <p>6.1 Report from the President and CEO See report attached to minutes.</p> <p>B. Harris recapped some of the highlights from D. Moynihan’s report including:</p> <ul style="list-style-type: none"> • The NW LHIN CEO working group meets monthly to discuss common issues facing our operations. • Preparation of the annual operating budget is underway. 	

	Action Req'd/Date
<ul style="list-style-type: none"> • The LHIN and Riverside Health Care have had several meetings with us to discuss how we can aid in reducing the overcapacity of the Fort Frances operation. AGH has accepted a couple from Fort Frances into our acute wing. • Health Links continues to be supported with funding coming to us to support the Family Health Team and Community Counselling staff. • LHIN also continues to support the Rainy River Sub Region planning table. K. Lusignan shared that this is no longer a planning table but rather a collaborative with no decision making power. • The Phase Two Pre-Capital submission should be complete in a month or so and will be presented to the board for review. • A review of some of the activities at AGH during the Christmas season including Spirit of Christmas activities organized by the Wellness Committee and the Celebration of Friends hosted by the Foundation. • Report from Candace Green, manager at Atikokan Community Counselling and Addiction Services. M. Davidson questioned how many and how often these services are used overall. D. Moynihan will be asked to report back. 	<p>D. Moynihan to report back on use of ACCAS services.</p>
<p>6.2 Quality/Patient Safety Report by Jennifer Learning, CNO See report attached to minutes. B. Harris recapped some of the highlights from J. Learning’s report including:</p> <ul style="list-style-type: none"> • Hiring three new RNs which helps with staffing issues • Change to staffing of nursing units has been announced to start February 1st. Staffing changes mean reducing the ward clerks beginning March 1st. • A six week education blitz was provided to nursing staff to review equipment and practice their skills. • Rehab: Our occupational therapist and physiotherapist are going to Kenora for training on working with children in our community. All contracts for children’s rehab services have been moved from the LHIN to Firefly starting January 1st. M. Davidson asked about the new GLAD program for hip/knee therapy being offered. The physicians are responsible for referring clients for this program. • Lab: We have seen a savings of \$25K this past year with the implementation of the I-STAT machine in the emergency department. RPNs are learning how to draw blood and use the I-STAT to support the RNs in the ER. 	

	Action Req'd/Date
<ul style="list-style-type: none"> • Long Term Care: Our staffing will change to only one RPN on ECW starting February 1st but with increased in PSW hours. There will be dedicated RPNS just to ECW which should help with communication amongst staff and provide continuity of care for the residents. • Risk Management: We are working on the quality improvement plan (QIP) for 2019/20 and are looking for quality indicators from the board. Our electronic incident reporting system is currently being tested by file managers and will go live shortly. Board decided to discuss this at the board retreat. • Health and Safety: The Joint Occupational Health & Safety Committee met in December. The vulnerable occupancy fire drill scenario was performed in November and produced results well within acceptable limits. • Pharmacy: Our chemo program remains on hold as we continue to work with the LHIN and the regional pharmacy group to come up with different ways to deliver chemotherapy in Atikokan. The lack of nurses willing to get chemo training as well as not having a pharmacist on site when mixing the chemo drugs is a challenge. Safety around the delivery of chemo has to be our priority so we continue to figure out how this program will work. • Diagnostic Imaging: A representative from GE will address some intermittent x-ray control problems on his next visit. Call backs have reduced over the fall. This reduction helps us to continue to fund three people to take call in the x-ray department. • Infection Control: 70 flu shots were given to staff at the hospital and other staff received their vaccine elsewhere. <p>6.3 Analysis of Hospital Services for November, 2018: The AGH statistics have remained consistent in recent months with no notable changes.</p> <p>6.4 Financial Services Manager Report: B. Harris distributed copies of the November, 2018 financial statements and gave an overview of the balance sheet and summary of operations. Overall the operating budget at November 30, 2018 showed a \$158K deficit. We are currently \$216K over budget in salaries and benefits combined. This is a result of maintenance wages (succession plan), sick time and over time. Salaries and wages account for 80% of our expenses. Although we have hired more RNs, those cost savings will likely not show until next fiscal year.</p>	<p>Review quality indicators at Board retreat.</p>

	Action Req'd/Date
<p>Our short term disability (sick pay) is typically around \$225K for the year. At this point of fiscal year 2018/19 (eight months in), those costs are \$226K.</p> <p>B. Harris reviewed the Hospital Accountability Planning Submission (HAPS), ACCAS Community Accountability Planning Submission (CAPS) and Capital Budget for 2019-2020. He noted that we are not expecting any increase in funding from the government. We have budgeted reduced expenses in salaries as we are reducing ward clerks (4 person change resulting in \$40K savings), reduced lab and diagnostic imaging call backs and the use of the I-STAT machine (\$25 K savings). We are presenting a balanced budget for 2019/2020.</p> <p>B. Harris explained that the CAPS submission is a multi-year agreement so the data remains the same as the previous year.</p> <p>B. Harris presented the capital budget for approval. He noted that the hospital foundation was very generous to the hospital with a total of \$150K donated (\$70K for Vocera system and \$80K towards furniture previously purchased).</p> <p>Hospital Accountability Planning Submission:</p> <p>MOTION: J. Lehman/K. Lusignan</p> <p>“That the HAPS submission for 2019/2020 be approved as presented at the January 9, 2019 Board Meeting.” CARRIED 2019-003</p> <p>Atikokan Community Counselling and Addiction Services – CAPS Submission:</p> <p>MOTION: K. Lusignan/J. Lehman</p> <p>“That the CAPS submission for 2019/2020 be approved as presented at the January 9, 2019 Board Meeting.” CARRIED 2019-004</p> <p>Capital Budget Submission:</p> <p>MOTION: J. Lehman/K. Lusignan</p> <p>“That the Capital Budget submission for 2019/2020 be approved as presented at the January 9, 2019 Board Meeting.”</p> <p style="text-align: right;">CARRIED 2019-005</p>	

	Action Req'd/Date
<p>7. <u>GENERATIVE</u></p> <p>7.1 Committees Terms of Reference: Board members have reviewed and approved the proposed changes to the committees' terms of reference. B. Clairmont will update the terms.</p>	B. Clairmont to update committees' terms of reference.
<p>7.2 Accreditation Update: B. Clairmont reported that the 10 accreditation team leaders meet monthly to review progress. Teams have been busy updating or creating policies and procedures to meet their accreditation standards.</p>	
<p>7.3 Recommendation from MAC for Amendment to By-law 9.17.6: At their November 20, 2018 meeting, the Medical Advisory Committee (MAC) has recommended that the Board amend AGH by-law 9.17.6 entitling associate staff to vote at medical staff meetings. The board will review all by-laws pertaining to MAC at the next Governance meeting and defer the decision to another board meeting.</p>	
<p>8. <u>IN CAMERA SESSION</u></p> <p>MOTION: K. Lusignan/J. Lehman</p> <p>“That the Board move to an in-camera session of the meeting at 6:52 pm.” CARRIED 2019-006</p> <p>9. <u>RETURN TO OPEN SESSION</u></p> <p>MOTION: D. Bailey/M. Davidson</p> <p>“That the Board return to an open session of the meeting at 7:10 pm.” CARRIED 2019-007</p> <p>MOTION: M. Davidson/D. Bailey</p> <p>“That the Board approve the In-Camera minutes of November 7, 2018.” CARRIED 2019-008</p>	
<p>MOTION: D. Bailey/M. Davidson</p> <p>Credentialing: (from November 20, 2018 MAC Meeting)</p> <p>“That the motions specific in the MAC minutes dated Wednesday, May 23, Wednesday, September 12 and Tuesday, October 16, 2018 be amended as reflected in the minutes of the November 20, 2018 MAC minutes and that the three sets of minutes be approved with these amendments.” <u>DEFERRED 2019-009</u></p>	

	Action Req'd/Date
<p>MOTION: D. Bailey/K. Lusignan Credentialing: (from November 20, 2018 MAC Meeting) "That Associate Staff be granted voting rights from November 20, 2018 forward." DEFERRED 2019-010</p>	
<p>MOTION: S. Burns/D. Bailey Credentialing: (from November 20, 2018 MAC Meeting) "That AGH by-law 9.17.6 be amended to entitle associate staff to vote at Medical Staff meetings." DEFERRED 2019-011</p>	
<p>MOTION: K. Lusignan/D. Bailey Credentialing: (from November 20, 2018 MAC Meeting) <u>Associate Staff Appointment</u> "That the following professional staff: Dr. Nelson Lyon be approved for appointment to the Associate staff for the remainder of the calendar year 2018." CARRIED 2019-012</p>	
<p>MOTION: J. Lehman/M. Davidson Credentialing: (from November 20, 2018 MAC Meeting) <u>Regional Staff Appointment</u> "That the following professional staff: Dr. Mohammed Ibrahim Dr. Elrasheed Osman be approved for appointment to the Regional staff for the remainder of the calendar year 2018." CARRIED 2019-013</p>	
<p>MOTION: M. Davidson/J. Lehman Credentialing: (from December 18, 2018 MAC Meeting) <u>Associate Staff Re-Appointment</u> "That the following professional staff: Dr. Joseph Barbero Dr. Aneesh Vaghadia be approved for re-appointment to the Associate staff for the remainder of the calendar year 2019." CARRIED 2019-014</p>	

	Action Req'd/Date
<p>MOTION: M. Davidson/J. Lehman Credentialing: (from December 18, 2018 MAC Meeting) <u>Locum Staff Re-Appointment</u> “That the following professional staff: Dr. Rajni Bhatia Dr. Jonathan Ding Dr. Shauna Gallagher Dr. Melissa Lui Dr. Baijayanta Mukhopadhyay Dr. Jesse Myers Dr. Shaan Pawa Dr. Joanne Reid Dr. David Renner Dr. Dan Shilensky Dr. Kimberly Varty</p> <p>be approved for re-appointment to the Locum staff for the remainder of the calendar year 2019.” CARRIED 2019-015</p>	
<p>MOTION: J. Lehman/M. Davidson Credentialing: (from December 18, 2018 MAC Meeting) <u>Courtesy Staff Re-Appointment</u> “That the following professional staff: Dr. Minoos Bozorgzadeh Dr. Perry Choi Dr. Amir Faghieh Ms. Laura Hendren NP Dr. Melissa Kern Dr. Nicole Laferriere Dr. Christopher Lai Ms. Nikita Matichuk NP Dr. Dolores Sicheri Dr. Sundeep Singh Ms. Kristi Withrow NP</p> <p>be approved for re-appointment to the Courtesy staff for the remainder of the calendar year 2019.” CARRIED 2019-016</p>	
<p>MOTION: M. Davidson/J. Lehman Credentialing: (from December 18, 2018 MAC Meeting) <u>Regional Staff Re-Appointment</u> “That the following professional staff: Dr. Wojciech Aniol Dr. Karim Eltawil Dr. Hanan El Sherif, Dr. Anton Kolobov</p> <p>be approved for appointment to the Regional staff for the remainder of the calendar year 2019.” CARRIED 2019-017</p>	
<p>10. ADJOURNMENT With no further business, the meeting was adjourned at 7:14 pm on a motion by J. Lehman/M. Davidson</p> <p>CARRIED 2019-018</p>	

	Action Req'd/Date
<p>The next <u>regular board meeting</u> will be held on Wednesday, March 6, 2019 at 5 pm. The Finance Committee and Governance Committee meetings will be on Wednesday, February 6, 2019 beginning at 5:00 pm.</p>	
<p>_____</p> <p>Ed Enge, Board Chair</p>	<p>_____</p> <p>D. Moynihan, CEO</p>

CEO REPORT TO THE BOARD REGULAR MEETING

Atikokan General Hospital, January 9, 2019

Hospitals continue to look for signs of change from the new government / administration. Nothing major has been reported, although the Premiers Council on Health continues to review all programs. An interim report may be coming in January. The NWLHIN CEO working group meet to discuss common issues facing our operations.

Locally in the past month we have been focused on preparing the annual operating budget. The CFO and the CNO have done a good job of reviewing our key services and the history of past expenses. Wages, overtime and sick leave continue to challenge our operation.

Our LHIN and Riverside Health Care had several meetings with us to discuss how we can aid in reducing the overcapacity of the Fort Frances operation.

Health Links continues to be supported with direct funding coming to us to support the Family Health Team and the Counselling staff.

The LHIN continue to support the Rainy River Sub Region planning table and Atikokan will have another opportunity to host the next session in February.

The Phase Two Pre-Capital submission is nearing completion and will be brought to the board for review before going to the LHIN and the Capital branch.

Finally, there were many activities during the Christmas season such as the "Spirit of Christmas" week of activities organized by the Wellness committee including special treats, door decorating (thanks to Sally for judging), pancake breakfast, secret Santa, ugly Christmas sweater day and the children's Christmas party which was held at the library. As well, the annual Celebration of Friends, organized by the Atikokan General Hospital Foundation saw a big turnout of locals to celebrate the season with a sing-song and presentations. The Foundation gave the hospital a cheque for \$70,000 to put towards our new Vocera communication system.

Atikokan Community Counselling and Addiction Services Report
by Candace Green, Manager

Happy New Year to the Atikokan General Hospital's Board of Directors:

As the very new Manager of Atikokan Community Counselling and Addictions Services I am happy to report that my transition to the new role has been relatively smooth. Highlights of the agency include:

I have been learning a new data program and in the process a strong desire from the team to use that system to its full potential.

We have been networking with other area agencies to ensure that we are keeping up to date with TREAT and plan to have monthly meetings in order to trouble shoot and learn more about the system.

One of the team's goals is to become paperless or at least reduce the amount we use significantly.

Another area we plan to work on, is developing a new policy regarding working alone and minimizing risk to all of us.

We have been busy keeping up with our workload and case note functions on TREAT in order to keep our statistics up to date and ensuring that non-active clients are being discharged in a timely fashion.

We are also very pleased to welcome back to full time employment, Cathy Barnard and Barbara Kwasnicia. I look forward to working with a knowledgeable and dedicated staff.

**Chief Nursing Officer's Board Report
January 9, 2019**

Nursing: We hired 3 new RNs who started their orientation in December which help with our staffing issues. We announced changes to how we will staff our nursing units to start February 1, 2019. The staffing changes did mean we had to lay off our two part time ward clerks as we will be going down to one full time ward clerk in the emergency department. The layoffs will begin March 1, 2019 and we will no longer have a ward clerk on the acute floor or on weekends.

We provided a 6 week nursing education blitz and staff had the opportunities to review equipment and practice their skills numerous times throughout the 6 weeks with the help of 1 RN and 2 RPNS who are all on modified work.

Rehab: Our new Occupational Therapist is going to Kenora in January along with our physiotherapist to receive training on working specifically with children in our community. The contracts for all children's rehabilitation services moved from the Northwest LHIN to Firefly starting January 1st. Home and Community Care across Ontario will no longer be sending therapists into schools. They will now only be dealing with adults.

Lab: There has been a net savings so far of \$25,000 this past year because of implementing the I-STAT in the emergency room and we expect this trend to continue. The RPNs are learning this month how to draw blood and also use the I-Stat so they can provide support to the RNs in the ER.

Long Term Care: We will be going to only 1 RPN on ECW starting February 1 but there will be an increase in PSW hours so we will be scheduling 8 hour and 12 hour shifts for PSWs which should help with recruitment of PSWs. The change will mean that there will be dedicated RPNs just to Extended care which should help with communication amongst staff and provide continuity of care for the residents.

Risk Management: We are working on the quality improvement plan for 2019/20 and would like the board to consider if there is any quality indicators that they would like the hospital to measure for this plan? Our electronic incident reporting system is almost ready to go live, the file managers are testing it right now to see that everything flows as it should before we go live.

Health and Safety: The Joint Occupational Health & Safety Committee met December 11th and discussed concerns with the ECW dining room ceiling leakage and the ice build up at the new ECW entrance. They also discussed that bullying/gossip continues to be an issue. The Vulnerable Occupancy Fire Drill Scenario was performed November 15th and produced results well within acceptable limits.

Pharmacy: We continue to work with the Northwest LHIN and the regional pharmacy group to come up with different ways to be able to provide chemotherapy to patients in our own community. The lack of nurses in our community willing to take the chemo program is a challenge along with not having a pharmacist on site when mixing the chemotherapy. Safety around delivery of chemotherapy has to be our priority so we continue to try to figure out how this program will work.

Diagnostic Imaging: There have been some intermittent x-ray control problems that the Field representative from GE will work on when he comes here for his semi-annual visit. The number of call backs for x-rays has reduced over the fall and this continues to be the trend. The reduction in call backs helps us to continue to fund 3 people to take call in the x-ray department.

Infection Control: We gave 70 flu shots at the hospital to various staff and other staff received their vaccine from other places. A breakdown of vaccines by department is shown below.

**Staff Influenza Vaccine Rate by
Position (as of Dec 21)**

Department	Vaccine Rate
Admin	92%
CommCoun	17%
DI	100%
Dietary	69%
Health Records	67%
Hskg/Laundry	64%
Lab	80%
MDRD	50%
Maintenance	75%
Pharmacy	100%
PSW	76%
Recreation	100%
Rehab	75%
RN	67%
RPN	67%
Ward Clerk	100%
Physicians	60%
Volunteers	43%
Student (Con College)	100%