

Board of Directors Regular Board Meeting May 17, 2017

MINUTES

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Approved – Sept. 13/17

Present: Ed Enge ©; Jeremy Dickson, VC; Marlene Davidson, Sheron Suutari, Karen

Lusignan, Jeff Lehman, Darcey Bailey, Jennifer Learning, CNO; Dr. Joanne

Spencer, COS; Doug Moynihan, CEO

Absent: Dr. Van Der Loo

Recorder: Bonnie Clairmont

	Action Reg'd/Date
1. PRESENTATION- Barb Kwasnicia, Community Counselling	
B. Kwasnicia gave an overview of the different roles she oversees	
including Human Resources, Housekeeping/Laundry and Community	
Counselling. Human Resources has been very busy this past year and	
many positions have been filled. Our Nursing overtime has dropped	
drastically since last year. The Housekeeping/Laundry staff have been	
meeting monthly and doing training on new equipment. Barb	
commended them for their thorough work during our recent outbreak.	
Community Counselling has hired a new counselor and she is working out	
very well. Barb then responded to questions from the Board regarding	
the services that Community Counselling offer the youth and others	
dealing with addictions.	
M. McKinnon took a group picture of the Board.2. <u>CALL TO ORDER</u>	
E. Enge chaired and called the meeting to order at 5:30 pm.	
3. DECLARATION OF CONFLICT OF INTEREST	
None declared.	
4. AGENDA	
The agenda was reviewed and accepted as presented with the	
The agenda was reviewed and accepted as presented with the	
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addition of 3.2 Patient/Family Advisory Committee.	
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		Action Req'd/Da
5.	CONSENT AGENDA	neq a, za
Γhe	Consent Agenda was reviewed and accepted with amendments noted	
n tl	ne Board minutes of March 8, 2017 and Finance Minutes of April 5,	
201	7.	
М	OTION: S. Suutari/D. Bailey	
141	"That the Consent Agenda be approved as amended."	
	CARRIED 2017-032	
	th the adoption of the Consent Agenda, the following items were	
apı	proved:	
a)	Adoption of Regular Board Meeting Minutes of March 8, 2017	
b)	Acceptance of Quality Committee of the Board Meeting Minutes of	
	March 22, 2017	
c)	,	
	approve sign-off on 2017/18 QIP Report.	
-	Acceptance of Finance Committee Meeting Minutes of April 5, 2017	
e)	Acceptance of Governance Committee Meeting Minutes of April 5, 2017	
f)	Acceptance of HPRR Committee Meeting Minutes of April 5, 2017	
•	Acceptance of Medical Advisory Committee Meeting Minutes of March	
67	28 and April 11, 2017.	
6.	BUSINESS ARISING	
	C.1 Crond Organing Planning Undete D. Marwiken should that the	
	6.1 Grand Opening Planning Update . D. Moynihan shared that the committee is working on creating interpretive murals sharing the	
	history of healthcare in Atikokan. We have 4 or 5 blank walls where	
	murals could be hung. S. Bryk has provided the hospital with a	
	history of healthcare that she has compiled. The Grand Opening	
	Planning committee will identify four or five significant events in	
	our healthcare history and arrange for pictures and interviews. The	
	plan is to do the grand opening in the fall with a ribbon cutting and	
	dignitaries present. M. Davidson shared that she would be	
	interested in joining the committee.	
	6.2 Patient/Family Advisory Committee : J. Learning shared that we	
	have had one meeting so far. There are four people that have	
	expressed interest in being on the committee and we have	
	advertised for more. At the first meeting the committee reviewed	
	and made suggestions for improvement to current hospital surveys	
	as well as reviewed the Terms of Reference. The next meeting will	
	be scheduled for summer or early fall.	

Action Reg'd/Date

7. STRATEGIC DISCUSSION

7.1 Report from the President and CEO

See report attached to minutes.

D. Moynihan recapped some of the highlights from his report including the completion and occupancy of the ten Long Term Care redeveloped bedrooms. Hospital staff successfully moved 18 residents in five days. Other than a few air exchange noise complaints, residents are very happy with their new accommodations. We have now hoarded off another area in the LTC to complete the final stage which is to build a new entrance into the LTC and create three new rooms from existing rooms 14 & 15 as well as build a new public handicap accessible washroom in the front lobby. Final completion is scheduled for mid-July. Our annual fundraiser "Today I'm Working for My Hospital" was a huge success with a 25% increase over last year. AGH staff collectively donated \$1,658.18.

7.2 Quality/Patient Safety Report by Jennifer Learning, CNO See report attached to minutes.

J. Learning reported that C. Ducharme, Nurse Manager of Acute and Emergency departments, has left AGH employ after 28 years of service. Keira Lacosse has filled that position and comes to us with 15 years of nursing experience. Several staff have joined the smoking cessation program in preparation for January, 2018 when the hospital grounds must be completely smoke-free. Pharmacy staff have been busy preparing for our pharmacy accreditation which takes place in June. The lab celebrated Lab Week by providing tours word scrambles for staff. We are currently advertising for a lab technician as one of our staff will be off on maternity leave late this summer. We are also recruiting for a casual X-ray tech as our current tech is heading back to school for ultrasound training. We are trying a "float" RPN system with nurses working in both the LTC and acute wards. All RPNs have been cross-trained and are learning the new med system in LTC. In the Rehab department we have hired R. Sportak as the new Rehab Aide. OT, PT and a social worker from Community Counselling are working with the Long Term Care staff to develop a restorative care program for the seniors.

	Action Req'd/Date
7.3 Financial Services Manager Report	Req u/Date
D. Moynihan gave an overview of the March 31, 2017 financial	
statements. A more thorough overview will be done at the annual	ı
meeting in June. From the Summary of Operations, D. Moynihan r	noted
that after the budget was put together for 2016/17 we received	
additional funding from the Ministry for post construction. Under	
Expenses our salaries and wages are up due to extra staff brought	
deal with the outbreak. D. Moynihan also reviewed the balance sh and noted that although the project should be complete in July,	ieet
financing will take a while to show in statements. Overall we are in	n
good shape financially.	•
geed staff of staff of the staf	
. <u>GENERATIVE</u>	
8.1 Northern and Rural Hospitals Conference Report	
The conference was attended in Toronto by E. Enge, J. Learning, K	
Lusignan and S. Wood. E. Enge reported on some of the highlights	of
the conference which include receiving good information, meeting	g new
contacts, listening to speakers with valuable information such as:	
- Changes in funding for rural hospitals which has resulted in ho	spital
closures in Pennsylvania.	
- Partnering with Patients. Family presence procedure	
- Integrated funding models for hospitals	
- Westjet – Culture is everywhere. We succeed because I care	
- OTN innovations – Tele home care	
- ORNGE – critical RCCR program – advances in technologies	
 Paramedicine program where there is no primary care provide 	er
 Much discussion on hubs and determining what works in their 	
communities and making it happen	
E. Enge has copies of the power point presentations if Board are	
interested. J. Lehman noted that one issue that needs to be addre	essed
is housing arrangements for expectant mothers from town that ne	eed
to deliver in Thunder Bay.	

		Action Req'd/Date
	8.2 Annual General Meeting	
	E. Enge shared that M. McKinnon from the Atikokan Progress will	
	interview himself and D. Moynihan and do a newspaper article about	
	the proposed change to Bylaw #2 – going from open to closed	
	membership. This will appear in the newspaper prior to the June 7 th	
	annual meeting. A vote to accept a closed membership will be held at	
	the meeting. The Patient and Family Advisory Committee has been	
	formed to allow people to voice any hospital concerns they may have.	
9	IN CAMERA SESSION	
	MOTION: S. Suutovi /D. Boilou	
	MOTION: S. Suutari/D. Bailey	
	"That the Board move to an in-camera session of the meeting at 6:28 pm."	
	CARRIED 2017-033	
10	RETURN TO OPEN SESSION	
	MOTION: D. Bailey/M. Davidson	
	"That the Board return to an open session of the meeting at 6:38 pm."	
	CARRIED 2017-034	
	MOTION: M. Davidson/K. Lusignan	
	"That the Board approve the In-Camera minutes of March 8, 2017."	
	CARRIED 2017-035	
	MOTION: K. Lusignan/S. Suutari	
	Credentialing: (from March 28, 2017 MAC Meeting)	
	Locum Staff Appointment	
	"That the following professional staff:	
	Dr. Andrew David Hemphill	
	Dr. Melissa Cindy Lui	
	Dr. Reza Salarinejad	
	be approved for appointment to the Locum staff for the remainder of	
	the calendar year 2017."	
	CARRIED 2017-036	

MOTION: S. Suutari/K. Lusignan

Credentialing: (from March 28, 2017 MAC Meeting)

Regional Staff Appointments

"That the following professional staff:

Dr. Anthony Gabriel Deketele

Dr. Khaja M. Masood

Dr. Rosanne Marie Tyrell

be approved for appointment to the Regional staff for the remainder of the calendar year 2017."

CARRIED 2017-037

MOTION: K. Lusignan/M. Davidson

Credentialing: (from March 28, 2017 MAC Meeting)

Locum Staff Re-Appointment

"That the following professional staff:

Dr. Adam Manis

be approved for re-appointment to the Locum staff for the remainder of the calendar year 2017."

CARRIED 2017-038

MOTION: K. Lusignan/M. Davidson

Credentialing: (from March 28, 2017 MAC Meeting)

Locum Staff Re-Appointment

"That the following professional staff:

Dr. Vivian Ma

be approved for re-appointment with the change of Associate Staff to Locum staff as of March 24, 2017 for the remainder of the calendar year 2017."

CARRIED 2017-039

MOTION: D. Bailey/S. Suutari

Credentialing: (from March 28, 2017 MAC Meeting)

Regional Staff Re-Appointments

"That the following professional staff:

Ms. Carolyn Gagnon, NP

be approved for re-appointment to the Regional staff for the remainder of the calendar year 2017."

CARRIED 2017-040

MOTION: S. Suutari/D. Bailey

Credentialing: (from April 11, 2017 MAC Meeting)

Regional Staff Appointments

"That the following professional staff:

Dr. Neema Dadgostar

Dr. Abraham Rudnick

Ms. Carey Catherine Murphy, Midwife

be approved for appointment to the Regional staff for the remainder of the calendar year 2017."

CARRIED 2017-041

MOTION: K. Lusignan/S. Suutari

Credentialing: (from April 11, 2017 MAC Meeting)

Regional Staff Re-Appointments

"That the following professional staff:

Dr. Lloyd Kenneth Douglas

be approved for re-appointment to the Regional staff for the remainder of the calendar year 2017."

CARRIED 2017-042

MOTION: J. Dickson/M. Davidson

Credentialing: (from May 9, 2017 MAC Meeting)

Regional Staff Re-Appointments

"That the following professional staff:

Ms. Marlyss Thiessen, NP

be approved for re-appointment to the Regional staff for the remainder of the calendar year 2017."

CARRIED 2017-043

MOTION: S. Suutari/K. Lusignan

Credentialing: (from May 9, 2017 MAC Meeting)

Courtesy Staff Appointments

"That the following professional staff:

Dr. Allison Grant

Dr. Melissa Kern

be approved for appointment to the Courtesy staff for the remainder of the calendar year 2017."

CARRIED 2017-044

MOTION: J. Dickson/S. Suutari		
Credentialing: (from May 9, 2017 N	IAC Meeting)	
<u>Locum Staff Appointments</u>		
"That the following professiona	l staff:	
Dr. Andrew Maeng		
he approved for appointment to	the Locum staff for the remainder of	
the calendar year 2017."	the Locum stan for the remainder of	
the talendar year 2017.	CARRIED 2017-045	
MOTION: M. Davidson/J. Dickson		
Credentialing: (from May 9, 2017 M	IAC Meeting)	
Regional Staff Appointments		
"That the following professiona	l staff:	
Dr. Ghazala Iffat Basir	Dr. Dalia Rosen-Zaidener	
Dr. Craig Andrew Simpson	Dr. Kevin Wilberforce	
	the Regional staff for the remainder	
of the calendar year 2017."	CARRIED 2017-046	
12. ADJOURNMENT	CARRIED 2017-046	
With no further business, the meeting v	was adjourned: at 6:55 pm on a	
motion by D. Bailey/K. Lusignan	CARRIED 2017-047	
motion by D. Baney, it Easignan		
	CARRIED 2017 047	
	CARRIED ZOI7 047	
The next <u>regular Board meeting</u> will be h		
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5:00 pm in the basement boardroom.	neld on Wednesday, September 13 th at	
5:00 pm in the basement boardroom. The Annual General Meeting will be held	neld on Wednesday, September 13 th at d on Wednesday, June 7 with Special	
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CEO Report to the Board of Directors Atikokan General Hospital, May 17th, 2017

The big news from the last 2 months was the completion and occupancy of the ten (10) new Long Term Care redeveloped bedrooms. An interdisciplinary team of about a dozen staff had been meeting once a week for the previous 3 months to ensure every aspect of the move was coordinated so that our residents would have a smooth move. Externally the MoHLTC gave us a long check list and a requirement to prepare a formal Occupancy Plan. An inspector from the ministry visited along with our Capital Branch senior advisor, Maureen Judge to personally inspect the site. Running in parallel to the ministry inspections were check lists from the contractor and inspections from the Chief Building Officer and the engineering / architectural and plumbing inspections. The first resident move started on Friday May 5 then continued throughout the weekend with 3 or 4 moving each day, until everything was complete by May 9. Under the great leadership of Stacey Wood the LTC manager, extra staff were brought in and worked together as a team to paint and clean rooms and ensure the residents We also received a timely notice that our operating received top notch care. license was approved to increase the number of residents from 22 to 26. We have now hoarded off another area in the LTC to complete the final stage which is to build a new entrance into the LTC and create 3 new rooms from the old rooms 14 & 15 as well we will build a new public handicap accessible washroom in the front lobby. Final completion is scheduled for mid July.

A grand opening ceremony to celebrate the new acute wing and the redeveloped LTC beds is being planned for late summer. It is intended that this would be a community celebration of the history of health care in Atikokan. Our goal is to interview ex staff and residents and working along with the museum and a graphic artist we would create wall hangs or 'interpretive historical murals' recognizing key events and the people of Atikokan who have influenced health care in Atikokan.

Also last month we had our annual fundraiser 'Today I'm Working for my Hospital'. This year was more successful than ever. Overall we raised \$ 6,242.80, a 25% increase over last year. An interesting story is that one of our regular contributors donates funds based on the work he does that day completing tax returns. This year we had that huge snow storm forcing many of his clients to wait until Friday April 28th. Due to the inclement weather, AGH benefitted greatly from this persons 'extra' generosity. Also, of particular note was participation from staff. Collectively staff donated \$1,658.18. The most interesting aspect was that 8 departments had fun games and draws to collect money which itself contributed \$ 460.00. Last year we only had one department and raised less than \$50. This is one indication of high moral.

And Human Resources have been busy, particularly in recruitment. Since January there have been 13 new hires or new roles for staff, 8 staff have left and we now have 12 vacancies.

- In recognition of our changing workforce and the evolution of tasks and responsibilities in the workplace, Human Resources is currently undertaking a classification review of all non-union (exempt) positions. This classification review involves:
 - 1. Reviewing job descriptions to ensure that they capture the tasks and responsibilities of the role,
 - 2. Using a massive Ontario Hospital Association job profile data base, matching the Atikokan General Hospital's jobs with external and internal comparators,
 - 3. Aligning the hospital's classification structure appropriately. We anticipate that this project will be completed by late summer or early fall.
- Human Resources is proceeding with a new corporate orientation program. The purpose of this program will be to integrate all the elements of orientation under one facilitated presentation, thus providing a more effective and enjoyable experience for new employees. The new program will be initially rolled out on May 15, 2017.
- The Smoke Free Ontario Act will prohibit smoking on hospital grounds effective January 1, 2018. Human Resources has partnered with the Chemotherapy / Telemedicine Nurse to create a working group dedicated to preparing the Atikokan General Hospital for this change. The working group is currently engaged in the following:
 - Seeking additional members, especially those who will be impacted personally by the legislative change.
 - Soliciting input from peers, government agencies, and other external resources.
- The Accessibility Committee of the Atikokan General Hospital continues to work towards its 2017 goals: a comprehensive review of all of the hospital's existing accessibility programs and policies in advance of our Dec. 31, 2017 reporting deadline. The next committee meeting is set for May 17, 2017.
- The Employee Wellness Committee- on which Human Resources sits- is currently preparing a number of exciting activities for Mission Week later in May. The Wellness Committee has also sent out a survey to all employees to solicit input about what they would like from the Committee in 2017.

Chief Nursing Officer Report to the Board May 17th Board Meeting

<u>Nursing:</u> We are saying goodbye to Nurse Manager of Acute Cathy Ducharme after many years of working at the hospital. We have hired Keira Lacosse who comes to us with 15 years of a variety of nursing experiences which should benefit our organization. We have had several staff members join our smoking cessation program in preparation of Jan 2018 when our hospital grounds goes completely smoke free. We are creating pamphlets for patients coming into the ER that tells about the other health services in our community and we are sending a nurse to a health evening at North Star School at the end of the month to talk to children about what happens in an emergency room and show them some of the stuff we use. We have two RPN going on maternity leave in the summer so we are starting to recruit now so we have enough coverage for shifts over the summer.

Pharmacy: We are working on updating all our pharmacy policies and procedures in preparation for our hospital pharmacy accreditation that takes place in June. Corina and I are meeting weekly to discuss what we need to do to get ready for the accreditation and going through everything we need to have in place for their visit.

<u>Lab:</u> The lab celebrated Lab Week in the third week of April and they provided tours of the lab and had word scrambles etc for the staff to do. We are getting a new analyzer and we need to make some physical changes to the lab area which maintenance is working on. It is part of a long range plan to make the lay out of the lab more efficient for the lab staff. We have one technician going on maternity leave in August so we are going to be advertising for her replacement soon.

<u>Diagnostics</u>: We are still struggling with lag times between meditech interfacing with our diagnostic equipment. We are working with our IT to try to solve the issue. Our casual x-ray tech is going to school to get her ultrasound so we are losing her but hopefully she will want to come back to Atikokan when her training is finished to help out with ultrasounds. She will be gone for two years.

Extended Care Wing: We are planning to move into the new space the second week of May if all goes well with the Ministry inspection. We will be moving two people from ALC acute into the new long term care beds and two people from the community. We will have a "float" RPN that will help out ECW most of the time but be available for the active floor when they need help depending on the acuity of the clients. We will trial the "float" RPN for the summer and then hold a meeting with the staff to determine the issues and see if this is working or if we have to come up with a different staffing plan. Right now we are getting all the RPN orientated to both active and ECW so they are comfortable working in both areas.

<u>Infection Control:</u> We had a staff member come down with a suspected case of the mumps. The nurse manager and the Health Unit worked together to identify any possible staff or patients who may be at risk for getting the mumps and those staff members were vaccinated and replaced until we could confirm if the staff person actually did have the mumps. We had 4 falls in the month of March on acute and none in April. We had 4 falls in ECW in April. We are launching our updated policies and procedures for falls and a new incident reporting form at our May nursing staff meeting. It is now mandatory to have a staff huddle immediately after a fall to see what could have been done differently. We are revamping our incident reports to make them easier for staff to fill out and we are creating tracking sheets so we can follow up more easily to see if measures we put in place to fix the issues are working or if we have created other issues that we did not anticipate.

Rehabilitation: We have hired a new Rehab Aide, Ruth Sportak and she starts May 8 to assist the OT and PT with patients in the department. Our PT did a lunch and learn on aging and how falling is a natural part of aging. He plans on doing more lunch and learns over the coming year for staff. We are pulling together the OT, PT and a social worker from Community Counselling to work with extended care to develop a restorative care program for the seniors.