



Board of Directors Regular Board Meeting
January 10, 2018
MINUTES

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Approved – Mar 7/18

Present: Ed Enge ©; Marlene Davidson, Sheron Suutari, Jeff Lehman, Karen Lusignan, Darcey Bailey (by telephone), Jennifer Learning, CNO; Dr. Joanne Spencer, COS; Doug Moynihan, CEO; Brent Harris, Chief Financial Officer

Guest: Mike McKinnon, Atikokan Progress

Absent: Jeremy Dickson, Dr. Van Der Loo

Recorder: Bonnie Clairmont

	Action Req'd/Date
<p>1. <u>PRESENTATION- Robert Herrmann, Diagnostic Imaging (DI)</u> R. Herrmann gave an overview of the AGH Diagnostic Imaging department and explained the testing performed here. There are currently two full-time staff in the DI department (Robert and Katrina). It serves local and regional clinical outpatients, hospital in-patients, residents of the Extended Care Wing and patients coming into the emergency department. The DI department has the capability and equipment to perform general and mobile X-rays, general ultrasounds as well as bedside ultrasounds and do cardiac testing (ECGs). ECGs are transmitted through a fax line to Kingston to get interpreted by a cardiologist. The ultrasounds and X-rays are sent to a radiologist in Markham who interprets the exam and dictates a report that gets sent back to the hospital and Family Health Team.</p>	
<p>2. <u>CALL TO ORDER</u> E. Enge chaired and called the meeting to order at 5:25 pm.</p>	
<p>3. <u>DECLARATION OF CONFLICT OF INTEREST – None declared.</u></p>	
<p>4. <u>AGENDA</u> Item 4.1 ONA Ratification was moved to the In-camera meeting agenda and Item 5.4: Foundation was added to the January 10th agenda. The agenda was reviewed and accepted as amended.</p> <p>MOTION: S. Suutari/M. Davidson “That the Board approve the agenda for January 10, 2018.” CARRIED 2018-001</p>	

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<p>5. <u>CONSENT AGENDA</u></p> <p>The Consent Agenda was reviewed. Changes were noted for the Quality Committee of the Board minutes of November 15th, HPRR minutes of November 23rd and Governance meeting minutes of December 6, 2017. The consent agenda was accepted as amended.</p> <p>MOTION: K. Lusignan/S. Suutari “That the Consent Agenda be approved as amended.” CARRIED 2018-002</p> <p>With the adoption of the Consent Agenda, the following items were approved:</p> <ul style="list-style-type: none"> a) Adoption of Regular Board meeting minutes of November 1, 2017 b) Acceptance of Quality Committee of the Board meeting Nov. 15, 2017 c) Acceptance of Health Professional Recruitment & Retention (HPRR) Committee meeting minutes of November 23, 2017 d) Acceptance of Finance Committee minutes of December 6, 2017 e) Acceptance of Governance Committee minutes of December 6, 2017 f) Acceptance of Medical Advisory Committee meeting minutes of November 22 and December 18, 2017. <p>6. <u>BUSINESS ARISING</u></p> <p>6.1 Executive Compensation Framework Regulation Update: E. Enge shared that the framework was completed and submitted. We have not heard anything back to date.</p> <p>6.2 Quality Council Board Representative Update: E. Enge reported that K. Lusignan has volunteered to be the board representative for the Quality Council. J. Lehman offered to be the back-up.</p> <p>7. <u>STRATEGIC DISCUSSION</u></p> <p>7.1 Report from the President and CEO See report attached to minutes.</p> <p>D. Moynihan recapped some of the highlights from his report including a summary of the first Sub Region Planning Table held in December which he attended along with Marlene, Karen and Barb from Atikokan. K. Lusignan shared that the group asked to be a decision making forum rather than advisory. The Smoke-Free hospital regulation came into effect on January 1st. We have two ECW residents who are smokers. One has quit smoking, while the other is leaving the property to smoke.</p>	

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<p>D. Moynihan shared that the hospital is looking at getting communication devices to allow staff working alone to get immediate assistance should a violent situation occur. We have had presentations from two different companies and are looking for interest from other hospitals to get a financial savings. Information on these systems will be shared with K. Lusignan for review for the Family Health Team.</p> <p>He also shared that currently there is an overcapacity in area hospitals due to influenza outbreaks and it is a challenge to meet the demands. T. Lavallee is offering additional flu shot clinics to encourage AGH staff to get vaccinated.</p> <p>7.2 Quality/Patient Safety Report by Jennifer Learning, CNO See report attached to minutes.</p> <p>J. Learning recapped some of the highlights including nurse staffing and the new Point of Care Istat machine in the emergency department. The machine has been used 11 times in December and has received positive feedback from the nurses using it. As well, the hospital has purchased a vein viewer which has reduced the number of needle pokes patients need when getting an IV or having blood drawn. We have a DI technician coming on January 25 -26th to assist Robert with ultrasounds. Karen Parker, our lab manager is leaving. We are currently advertising to fill her position. J. Learning also discussed workplace violence updates taking place at the hospital as well as Infection Control measures in place.</p> <p>7.3 Analysis of Hospital Services: D. Moynihan and J. Learning reviewed the analysis for December, 2017 and compared the data with last year and prior months. J. Learning shared that the hospital was busy in October, slowed down in November and then picked up again in December. Of our 15 acute beds, 7 are ALC patients.</p> <p>7.4 Financial Services Manager Report: B. Harris gave an overview of the November, 2017 balance sheet and summary of operations. There has not been much change from last month. We will have a \$1 million redevelopment payout upcoming from our current liabilities which will come out of our investments. This will be discussed at the next Finance meeting. At November 30th, the hospital was sitting at a deficit of \$76K. Salary and wages continue to be our biggest variance in the budget. This includes nursing wages and the unbudgeted Procurement Officer position and two interns. The intern expenses are offset by grants. The</p>	

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<p>Ministry is aware of the overage in this year’s budget. The Community Mental Health Programs shows very little change in the surplus. The CAPS budget submission for 2018/19 will remain the same.</p> <p>B. Harris distributed copies of the Hospital Accountability Planning Submission (HAPS) and Budget for 2018-2019 for review and discussion. He noted changes to LHIN funded allocations and Salaries and wages. As well, there is an allocation change between the Supplies expenses and Medical and surgical supplies due to changes in hospital processes. B. Harris shared that the hospital is budgeting for a 1% surplus to remedy the current year deficit.</p> <p>MOTION: M. Davidson/J. Lehman “That the HAPS submission for 2018/19 be approved as presented at the January 10, 2018 Board Meeting, indicating a surplus of \$78K.”</p> <p style="text-align: right;">CARRIED 2018-003</p> <p>8. GENERATIVE</p> <p>8.1 Advancing Local Health Hub</p> <p>D. Moynihan reported that our initial application for funding to help develop a local hub was not supported at this time. E. Enge and D. Moynihan have met with M. Davidson and K. Lusignan from the Family Health Team to discuss forming a local health hub. Jessica Logozzo from the LHIN will be doing a presentation on health hubs at the Caregivers meeting on January 18th. Board members are invited to attend. As part of the February 23 – 24th Board Retreat, we would like to bring the hospital and Family Health Team boards together to get conversation going on the development of a local health hub plan. D. Moynihan has sent out requests for proposals to facilitate the February retreat.</p> <p>8.2 Conference Invitations</p> <p>E. Enge shared information on the Annual Rural and Northern Health Care Conference being held in Toronto on May 8 - 9, 2018, as well as a governance learning opportunity for board members on May 10 – 11. He and K. Lusignan attended last year’s conference and found it worthwhile. Interested board members can let E. Enge or B. Clairmont know so arrangements can be made. Our budget allows for up to two board members to attend. K. Lusignan expressed interest in attending</p>	

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<p>the governance session, if other board members did not wish to attend this conference.</p> <p>As well, E. Enge encouraged board members to review the OHA handout “Vital Role of Hospitals in Northern Communities” which was prepared following a December, 2017 meeting at Queen’s Park which involved the OHA, hospital representatives and officials from the Premiers Office and the Ministry of Health and Long Term Care.</p> <p>8.3 Board Retreat</p> <p>E. Enge discussed proposed plans for the board retreat which will be held on Friday, February 23 evening and Saturday, February 24th. Plans are to have the Family Health Team board join with our board for the Friday night session to discuss forming a local health hub. Saturday, February 24th would be an AGH board only session. The retreat facilitator may poll board members for issues to be addressed on this day.</p> <p>8.4 Foundation</p> <p>M. Davidson shared details on the many events that the hospital Foundation has organized for our hospital. She acknowledged the dedication and hard work of those on that committee and encouraged board members to support and share information on the events coordinated by the Foundation.</p>	
<p>9. <u>IN CAMERA SESSION</u></p> <p>MOTION: K. Lusignan/M. Davidson</p> <p>“That the Board move to an in-camera session of the meeting at 6:42 pm.”</p> <p style="text-align: right;">CARRIED 2018-004</p>	
<p>10. <u>RETURN TO OPEN SESSION</u></p> <p>MOTION: K. Lusignan/S. Suutari</p> <p>“That the Board return to an open session of the meeting at 6:58 pm.”</p> <p style="text-align: right;">CARRIED 2018-005</p>	

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<p>MOTION: J. Lehman/S. Suutari “That the Board approve the In-Camera minutes of November 1, 2017.” CARRIED 2018-006</p> <p>MOTION: J. Lehman/K. Lusignan Credentialing: (from November 22, 2017 MAC Meeting) <u>Locum Staff Appointment</u> “That the following professional staff: Dr. Shauna Gallagher Dr. Shaan Pawa Dr. Ankeeta Tatkase</p> <p>be approved for appointment to the Locum staff for the remainder of the calendar year 2017.” CARRIED 2018-007</p>	
<p>MOTION: M. Davidson/K. Lusignan Credentialing: (from November 22, 2017 MAC Meeting) <u>Regional Staff Appointments</u> “That the following professional staff: Dr. Iram Ahmed Dr. Anatoly Shuster Dr. Rory Silverberg Ms. Kristi Withrow, Nurse Practitioner</p> <p>be approved for appointment to the Regional staff for the remainder of the calendar year 2017.” CARRIED 2018-008</p>	
<p>MOTION: K. Lusignan/J. Lehman Credentialing: (from December 18, 2017 MAC Meeting) <u>Regional Staff Appointment</u> “That the following professional staff: Dr. Chloe McAlister Dr. Atoosheh Rohani</p> <p>be approved for re-appointment to the Regional staff for the remainder of the calendar year 2017.” CARRIED 2018-009</p>	

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<p>MOTION: J. Lehman/K. Lusignan Credentialing: (December 18, 2017 MAC Meeting) <u>Regional Staff Appointment</u> “That the following professional staff: Dr. Amer Alaref Dr. Olexiy Aseyev Dr. Matthew Goodmurphy Ms. Ingrid Hutton NP Dr. Laurel Laakso Dr. Travis Marion</p> <p>be approved for appointment to the Locum staff for the remainder of the calendar year 2018.”</p> <p style="text-align: right;">CARRIED 2018-010</p>																																																																									
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<p>MOTION: J. Lehman/K. Lusignan</p> <p><i>Memorandum of Settlement</i></p> <p>“That the Board approve the Memorandum of Settlement between AGH and ONA dated January 5, 2018.”</p> <p style="text-align: right;">CARRIED 2018-012</p>	
<p>11. <u>ADJOURNMENT</u></p> <p>With no further business, the meeting was adjourned at 7:03 pm on a motion by S. Suutari/J. Lehman.</p> <p style="text-align: right;">CARRIED 2018-013</p>	
<p>The next <u>regular Board meeting</u> will be held on Wednesday, March 7, 2018 at 5 pm.</p> <p>The joint Finance Committee/Governance Committee meeting will take place on Wednesday, February 7 at 5:00 pm. The Quality Committee of the Board Meeting will be held on Wednesday, March 28, 2018 at 5:00 pm.</p>	
<p>_____</p> <p>Ed Enge, Board Chair</p>	<p>_____</p> <p>D. Moynihan, CEO</p>

CEO Report to Board of Directors Atikokan General Hospital- January 10, 2018

Sub region Planning Table

About 12 members attended the first Rainy River Sub Region Planning table in Fort Frances December 7th. (Marlene, Karen and Barb accompanied me from Atikokan) There was a full agenda and presentations from the LHIN explaining the role and terms of reference. Strong discussions ensued regarding expectations of the newly formed committee. The LHIN asks that we focus on two main roles:

1. Be advisory to identify local population health priorities and that
2. We champion implementation of regional priorities, identify population health needs and implement local solutions.

At the end of our meeting we were proposing that the main issue for our sub region is access. This can be interpreted as access to primary care, to transportation, to services, to moving blood samples, etc.

Atikokan Health Hub

There is interest in bringing together health care workers in Atikokan to explore how we could increase our collaboration to address the health issues experienced by residents in our town. Several options will be explored by the board in the regular meeting of January 10. Funding has been requested from the LHIN to help facilitate engaging members and Directors /Governors of local health care providers from our Atikokan Care Givers and Inter-Agency groups. Hopefully it will be approved and available in time to use it before March 31.

No Smoking

No smoking on the hospital site came into effect January 1st. This applies to all patients, staff, residents and visitors. So far the staff is having the most difficult challenge adapting to the change.

Bill 148 - Amendments to the Employment Standards Act (ESA)

January 1st also was the start of broader provisions in the ESA. Most items are already provided or are better for staff here at the AGH. One provision, 10 days of Personal Emergency Leave has generated much discussion as employers seek clarification on implementing the new conditions.

Chief Nursing Officer's Board Report January 10, 2018

Nursing: We are actively looking for two part time RNs and we will be actively recruiting for a chemo/telemedicine nurse in the spring.

The Point of Care Istat machine was implemented December 4 and was used 11 times in December, which means 44 hours in lab call backs were avoided! Staff comments are: "it's fast, easier than starting an IV, helps to get patients out faster, I really like it". Also the nurses have drawn blood cultures after hours that avoided call backs.

We purchased a "Vein Viewer" which helps nurses and lab staff to find veins when starting IVs or drawing blood. This has been well received by staff and patients as it has reduced the number of needle pokes patients need in order to get an IV or have their blood drawn.

Diagnostics: Robert has been in contact with an ultrasound technologist from Red Lake who is considering doing some locum work here to provide some back up relief for Robert . They have arranged for the possibility of her coming for a couple of days in the week of January 22nd. Robert has a waitlist for ultrasounds as he has a sore shoulder, but he is working through the list and we have ordered a sling-like contraption to help provide support for his shoulder during ultrasounds.

We also have interest from an x-ray technician looking for a casual position. We are looking into this so we can offer more relief from the amount of on-call hours that x-ray has to do.

Rehab: Our Kinesiology intern is going to spend a few days with the Kinesiologist who runs the chronic pain program through St. Joseph's Care Group in Thunder Bay to learn what he does with patients living with chronic pain. We are partnering with the Family Health Team's chronic pain staff and creating a chronic pain maintenance program here in Atikokan. We hope to have something in place by spring.

We are also partnering with the FHT to provide a pulmonary rehab program. Patients living with COPD will be part of an eight week program where their lung health will be monitored and they will do exercises in our rehab department. This will start in February.

Lab: We are using the local transportation system of Kelly Coach to get some of our specimens to either Fort Frances or Thunder Bay and this is working out very well. We have a new fridge and freezer in the lab which is fantastic, but we are struggling with the amount of equipment we have now that need electrical outlets. Maintenance is working on a solution. We have a new casual lab phlebotomist who is also a ward clerk and has been trained so she can cover when our full time phlebotomist is away.

Risk Management/Infection Control:**Workplace Violence Update:**

- The policy and procedure for workplace violence has been reviewed (training power point also updated)
- Workplace risk assessment was done resulting in the identification of a security gap – due to the change in route for members of the public to access the new acute care unit, there is now unmonitored access to the entire building through the upper service wing
- Ascom and Vocera provided presentations regarding applications for personal communication/security devices in order to meet the requirement for staff (while working alone) being able to summon immediate assistance should a violent situation occur. A decision on which device to use is pending.
- Workplace violence prevention will be a new indicator on the Quality Improvement Plan for 2018/19. We have been collecting data on all violent incidents and encouraging staff to fill out the proper reports so we can track and analyze what is happening in our hospital.

Infection Control:

- Influenza A has been confirmed in the region and outbreaks reported in LTC homes in Thunder Bay and Red Lake
- New 'Best Practices for Environmental Cleaning' from the Provincial Infectious Diseases Advisory Committee (PIDAC) are soon to be released – AGH housekeeping/laundry policies & procedures will need review to ensure compliance.