



Board of Directors Regular Board Meeting
May 2, 2018
MINUTES

W:\2018\M - MNGT\MINUTES\Reg 07-038 minutes.docx

Approved – Sept. 12/18

Present: Jeremy Dickson - VC; Sheron Suutari, Jeff Lehman, Karen Lusignan, Jennifer Learning, CNO; Dr. Joanne Spencer, COS; Doug Moynihan, CEO; Brent Harris, Chief Financial Officer

Guest: Mike McKinnon, Atikokan Progress

Absent: Ed Enge ©, Marlene Davidson, Darcey Bailey, Dr. Sara Van Der Loo

Recorder: Bonnie Clairmont

	Action Req'd/Date
<p>1. <u>PRESENTATION- Bridget Davidson, Health Records</u></p> <p>B. Davidson gave an overview of roles she is responsible for at the hospital including sitting on a number of committees including MAC, Privacy Team, Ethics, Utilization & Quality Assurance. As Privacy officer for the hospital she has revamped the entire privacy program. She is also the Freedom of Information (FOI) lead and responds to requests for access to personal health information. B. Davidson also completed an evaluation of clients' experiences with the HealthLinks program and shared that those results which shows that the Health Links Program has become embedded in the Family Health Team model of care. Although clients health may not have improved, their overall wellbeing has improved. Clients are overall satisfied and confident in the services they are receiving.</p>	
<p>1. <u>CALL TO ORDER</u></p> <p>J. Dickson chaired and called the meeting to order at 5:15 pm.</p>	
<p>2. <u>DECLARATION OF CONFLICT OF INTEREST – None declared.</u></p>	
<p>3. <u>AGENDA</u></p> <p>The agenda was reviewed and accepted as presented.</p> <p>MOTION: S. Suutari/J. Lehman “That the Board approve the agenda of May 2, 2018 as presented.” CARRIED 2018-032</p>	

	Action Req'd/Date
<p>4. <u>CONSENT AGENDA</u> The Consent Agenda was reviewed and accepted as presented.</p> <p>MOTION: J. Lehman/S. Suutari “That the Consent Agenda be approved as presented.” CARRIED 2018-033</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 March 7, 2018 b) Acceptance of Finance Committee minutes of April 11, 2018 c) Acceptance of Governance Committee minutes of April 11, 2018 d) Acceptance of the Quality Committee of the Board minutes of March 28, 2018 e) Acceptance of the minutes of the Special Board meeting on March 28, 2018 f) Acceptance of Health Professional Recruitment & Retention (HPRR) Committee meeting minutes of March 29, 2018. g) Acceptance of Medical Advisory Committee meeting minutes of March 27, 2018. <p>5. <u>BUSINESS ARISING</u></p> <p>5.1 Rainy River District West Health Hub (RRDWHH) Update: D. Moynihan shared that he and E. Enge usually attend the meetings. The last meeting was rescheduled as the report that was to be discussed has not been released yet. There were no other updates from this group to share.</p> <p>6. <u>STRATEGIC DISCUSSION</u></p> <p>6.1 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 show of support from the local Caregiver’s group to create a health hub in Atikokan. They requested that we apply for funding from the LHIN’s Small Hospital Transformation Fund. D. Moynihan stated that we likely won’t hear a response on this until the fall.</p>	<p>Request funding from LHIN SHTF</p>

	Action Req'd/Date
<p>6.2 Quality/Patient Safety Report by Jennifer Learning, CNO See report attached to minutes.</p> <p>J. Learning recapped some of the highlights including Trauma Nurse Core training that 5 RNs and 5 RPNs have received. Two RNs are currently taking Chemotherapy training. The chemo department is being renovated to help us meet the OCP standards. We have hired a part time RN and are conducting interviews for part time and casual RN positions. We have a team together to work on new online Med Reconciliation that will roll out in September. This system should improve med errors related to admissions, transfers and discharges and improve patient care.</p> <p>The locum ultrasound tech from Red Lake will return in June to help R. Herrmann and instruct him on different types of ultrasounds that will benefit the community.</p> <p>Our Chronic Pain Program offered by the Rehab department is up and running with 8 people interested in attending. Patients will do physical activities at the Rehab department and pool which are aimed to help improve their pain.</p> <p>The Lab received 9 minor and 1 major non-conformance at the recent accreditation. The accreditation team will return on May 2nd to interview staff, doctors, review policies, etc. A final report will come late in the month.</p> <p>T. Hampshire is the successful applicant for the permanent, full-time Recreationist position. She is a wonderful addition to our team and does great things with our residents; they adore her! S. Wood is working on a proposal for improvements to the gazebo area so residents can enjoy the outdoors safely.</p> <p>6.3 Analysis of Hospital Services: D. Moynihan and J. Learning reviewed the analysis for March, 2018 and noted that there was a 32% decrease in our Acute Care from March, 2017 to March, 2018. For fiscal year 2017/18 we had 195 admissions; 184 discharges and 13 deaths. We had 5195 people visit the Emergency Department during this year.</p>	

	Action Req'd/Date
<p>6.4 Financial Services Manager Report: B. Harris distributed updated copies of the March, 2018 financial statements and gave an overview of the balance sheet and summary of operations. There will be a more thorough review of the March (year-end) statement at annual meeting in June. Under Current Assets, our Cash and Investments are down due to the redevelopment project holdback payment. At March 31st, the hospital was sitting at a deficit of \$194K. Salary and wages continue to be our biggest variance in the budget. This includes nursing overtime and new maintenance staff wages (succession planning). From the Community Mental Health Programs, some of our Sessional Fees were used for a Mental Health study in the community. The remaining unused fees must be returned.</p> <p>7. <u>GENERATIVE</u></p> <p>7.1 Governance to Governance Session – May 28: A copy of the invite to the Governance to Governance Session, hosted by the NW LHIN to be held in Fort Frances on Monday, May 28th was distributed. D. Moynihan encouraged board members to attend to see how boards can contribute to changes in health care.</p> <p>8. <u>IN CAMERA SESSION</u></p> <p>MOTION: J. Lehman/S. Suutari</p> <p>“That the Board move to an in-camera session of the meeting at 5:58 pm.”</p> <p style="text-align: right;">CARRIED 2018-034</p> <p>9. <u>RETURN TO OPEN SESSION</u></p> <p>MOTION: S. Suutari/J. Lehman</p> <p>“That the Board return to an open session of the meeting at 6:36 pm.”</p> <p style="text-align: right;">CARRIED 2018-035</p>	
<p>MOTION: J. Lehman/S. Suutari</p> <p>“That the Board approve the In-Camera minutes of March 7, 2018.”</p> <p style="text-align: right;">CARRIED 2018-036</p>	

	Action Req'd/Date
<p>MOTION: S. Suutari/J. Lehman Credentialing: (from March 27, 2018 MAC Meeting) <u>Locum Staff Appointment</u> "That the following professional staff: Dr. Pamela Lai</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 2018-037</p>	
<p>MOTION: S. Suutari/J. Lehman Credentialing: (from March 27, 2018 MAC Meeting) <u>Regional Staff Appointment</u> "That the following professional staff: Dr. Debesh Basu Dr. Julie Caron</p> <p>be approved for appointment to the Regional staff for the remainder of the calendar year 2018."</p> <p style="text-align: right;">CARRIED 2018-038</p>	
<p>MOTION: J. Lehman/S. Suutari Credentialing: (from March 27, 2018 MAC Meeting) <u>Locum Staff Re-Appointments</u> "That the following professional staff: Dr. Melanie Rodrigues</p> <p>be approved for re-appointment to the Locum staff for the remainder of the calendar year 2018."</p> <p style="text-align: right;">CARRIED 2018-039</p>	
<p>MOTION: J. Lehman/S. Suutari Credentialing: (from March 27, 2018 MAC Meeting) <u>Regional Staff Re-Appointments</u> "That the following professional staff: Dr. Maria Iskhakova Dr. Faye Kehler Dr. Judy Patterson Dr. Daila Rosen-Zaidener Dr. Khal Salem</p> <p>be approved for re-appointment to the Regional staff for the remainder of the calendar year 2018."</p> <p style="text-align: right;">CARRIED 2018-040</p>	

	Action Req'd/Date
<p>MOTION: S. Suutari/J. Lehman Credentialing: (from April 24, 2018 MAC Meeting) <u>Regional Staff Appointments</u> “That the following professional staff: Dr. Brian Buchan Dr. Jemy Joseph</p> <p>be approved for appointment to the Regional staff for the remainder of the calendar year 2018.”</p> <p style="text-align: right;">CARRIED 2018-041</p>	
<p>MOTION: S. Suutari/J. Lehman Credentialing: (from April 24, 2018 MAC Meeting) <u>Courtesy Staff Appointment</u> “That the following professional staff: Dr. Ramez Hanna</p> <p>be approved for re-appointment to the Active staff for the remainder of the calendar year 2018.”</p> <p style="text-align: right;">CARRIED 2018-042</p>	
<p>MOTION: J. Lehman/S. Suutari Credentialing: (from April 24, 2018 MAC Meeting) <u>Locum Staff Re-Appointment</u> “That the following professional staff: Dr. Jonathan Wong</p> <p>be approved for re-appointment to the Locum staff for the remainder of the calendar year 2018.”</p> <p style="text-align: right;">CARRIED 2018-043</p>	
<p>MOTION: J. Lehman/J. Dickson Credentialing: (from April 24, 2018 MAC Meeting) <u>Regional Staff Appointments</u> “That the following professional staff: Ms. Marlyss Thiessen, Nurse Practitioner</p> <p>be approved for appointment to the Regional staff for the remainder of the calendar year 2018.”</p> <p style="text-align: right;">CARRIED 2018-044</p>	

	Action Req'd/Date
<p>MOTION: J. Lehman/S. Suutari Credentialing: (April 24, 2018 MAC Meeting) <u>Regional Staff Appointment</u> "That the following professional staff: Dr. Elrasheed Osman</p> <p>be approved for appointment to the Regional staff for the remainder of the calendar year 2017."</p> <p style="text-align: right;">CARRIED 2018-045</p>	
<p>MOTION: J. Lehman/S. Suutari By-law 9.19 Honorary Staff Amendment "That "That By-law 9.19 be amended to say 'A <u>professional staff</u> may be honored by the Board with a position on the honorary staff of the Hospital because he: a) Is a former member of the Medical Staff who has retired from active practice; or b) Has outstanding reputation or extraordinary accomplishments, although not necessarily a resident of the community."</p> <p style="text-align: right;">CARRIED 2018-046</p>	Include as part of AGM
<p>MOTION: S. Suutari/J. Lehman By-law 9.21.4 Regional Staff Appointment Amendment "That By-law 9.21.4 Regional Staff Appointment be renumbered as by-law 9.22 as it is a separate appointment. All subsequent clause numbers will be amended appropriately".</p> <p style="text-align: right;">CARRIED 2018-047</p>	Include as part of AGM
<p>MOTION: S. Suutari/J. Lehman By-law 9.8.1 Chief Executive Officer Recommendation Amendment: "That By-law 9.8.1 be amended to read: The Board (on or before the fifteenth (15th) day of October of each year) shall require each member of the Medical Staff to make written application through the Chief Executive Officer to the Board for reappointment to the Medical Staff.</p> <p>An application for <u>reappointment</u> to the Medical Staff shall be processed in accordance with the Hospital's Comprehensive Appointment and Credentialing Policy."</p> <p style="text-align: right;">CARRIED 2018-048</p>	Include as part of AGM

	Action Req'd/Date
<p>MOTION: J. Lehman/S. Suutari Appointment of Chief of Staff "That the Board approve the recommendation to appoint Dr. Sara Van Der Loo as Chief of Staff as per By-law 10.1 for a 3 year term ending March 31, 2021."</p> <p style="text-align: right;">CARRIED 2018-049</p>	
<p>MOTION: K. Lusignan/J. Dickson Executive Compensation Program "That the Board approve the recommendation from the Executive Compensation Committee dated May 2, 2018."</p> <p style="text-align: right;">CARRIED 2018-050</p>	
<p>10. ADJOURNMENT With no further business, the meeting was adjourned at 6:40 pm on a motion by J. Dickson/K. Lusignan.</p> <p style="text-align: right;">CARRIED 2018-051</p>	
<p>The next meeting will be the Annual General Meeting on June 6, 2018 beginning with a Special Board Meeting at 6 pm. The Annual General Meeting will be at 7 pm with a Special Meeting afterwards to elect the Chair and Vice-Chair.</p>	
<p>_____ Jeremy Dickson, Board Vice Chair</p>	<p>_____ D. Moynihan, CEO</p>

**CEO Report to Board of Directors Regular Meeting
Atikokan General Hospital, May 2, 2018**

Integrating Health Care in Atikokan Health

The project of creating a health Hub in Atikokan was supported by the local Care Givers group.

They requested that we apply for funding from the LHIN's Small Hospital Transformation Fund for the purpose of staffing a project manager position to facilitate moving to the next step.

Pre Capital Submission for phase two construction

The Phase two project team is lead by Kimberly Smith of Colliers Project Leaders. Membership on the team is a function planner, an architect and cost consultant. Our volumes and population projections have been sent to the design team who will present a sketch. The next step will be to present the sketch internally with our AGH team.

District of Rainy River Sub-Region Planning Table

Attached is a sample of the approximately 50 different topics this group discusses. Our next meeting is this Friday May 4 where we will focus on further work to identify and validate local priorities. This information will be foundational to develop the NWLHIN's next Integrated Service Plan (IHSP IV). The following are some of the priorities that we discussed:

- Primary Care
- Transportation
- Seniors
- Indigenous health
- Access to Care
- Addictions
- Mental health
- Youth
- Patient Experience
- IT infrastructure
- Navigating the system / Collaboration
- Chronic Diseases

Regional Pharmacy Standards

Our LHIN have taken the lead to create a Regional Pharmacy Steering committee to work together with all the hospitals who are working towards installing the new standards proposed by the Ontario College of Pharmacy, Cancer Care Ontario, and the MoHLTC. Locally we are proceeding with renovations in our chemo delivery area so that we can meet the standards.

NorthWest Health Alliance IT/IS Retreat

A strategic workshop was held in Thunder Bay last week with over 50 attendees from the NWLHIN hospitals.

The NWAHA, a Regional Shared Services Organization, facilitated the meetings.

The session discussed options for our Health Information System Renewal. Our LHIN currently contracts with Meditech to provide electronic medical records management, but the current version needs to be upgraded. Also, ideas were discussed on how to create a streamlined governance model that organizes the many different functional committees existing in the LHIN. Proposals will go to the NWAHA board for decision.

Accreditation

We now have approval to issue the final version of standards (13.1). Each of the ten (10) teams will complete a self assessment questionnaire to determine the GAP with each standard. Then an action plan will address each GAP so that we have evidence that all standards are met by March 2019.

In addition, a survey titled Work Life Pulse will be issued to all staff to get feedback on what issues staff sees as important to create better working conditions.

Union negotiations

A precedent was set last weekend when three health care unions, UNIFOR, CUPE and SEIU, met with the OHA to negotiate collectively. Agreement was achieved at the central table and now each local hospital is set to finalize local negotiations.

Chief Nursing Officer's Board Report May 2, 2018

Nursing: We brought in the Trauma Nursing Core Course (TNCC) on April 21 & 22 for 5 RNs and 5 RPNs and we are trying to bring this back in the fall to train the rest of the RNs. We have also found a triage course offered over the OTN for a very reasonable price so we have signed up our newest RN employees to take this course.

We have two RNs currently taking the Chemotherapy course and the chemo department is undergoing renovation to help us meet the new OCP standards for January 2019. The telehealth program is up and we are training relief RNs for summer back up so the program is always available to clients.

In June we will be hosting the TBRHSC RCCR people to have a day to learn about include Rapid Sequence Intubation, first line code drugs, chest tube management, thoracic trauma, difficult intubation practice, ventilator review, trauma assessment and a SIM scenario. It is open to all doctors and nurses.

We have hired a new part time RN and interviews are underway with two other RNs to fill part time and casual positions. Our new call in process that we adopted from Geraldton has significantly reduced the number of grievances around call ins for the nurses and is being used now with housekeeping also to help with their sick calls.

We have a team together and are getting under way in the new online Med Reconciliation that will roll out in September to improve med errors related to admissions, transfers and discharges and improve patient care. Over the next 6 months we will be training our staff in this great initiative!

Diagnostics: the locum ultrasound tech from Red Lake, Cindy, is returning in the first week of June to help Robert and instruct him on different types of ultrasounds that will benefit the community. She will be here for 3 days. Robert will be attending Sonography Canada's annual training seminar in St John's Nfld May 23rd through 27th. Musculo-skeletal ultrasounds will be the primary focus of the hands-on portion of this seminar. We have .1FTE x-ray tech in the department now so there are 3 people able to take call which has significantly improved the work-life balance of the x-ray techs.

Rehab: Our Chronic Pain Program is up and running. They have 8 people who have shown interest in the program. Patients will be able to do physical activity in our rehab area Mondays, Wednesdays and Fridays and can attend the pool on Tuesdays and Thursdays to do exercises which are aimed to help improve their pain.

We have a new rehab aid who has is a registered Kinesiologist and her background is proving very beneficial to our department. Patients are now seeing both the

physiotherapist and the rehab aid and are getting much more attention and instruction than was previously happening. The Kinesiology intern is also now taking on more physiotherapy clients under the care of the physiotherapist which has significantly reduced any wait times for services.

Our Occupational therapist has a student with him from McMaster University and together they offered back care in-services to staff help promote back safety. He is also going into the schools to present to the teachers and EA during their PD days on how to work with children who have sensory concerns which has been very well received by the school boards.

Lab: The AGH lab received 9 minor non-conformances and 1 major non-conformance. Five of the minors and the 1 major were related to the Amnio swab being tested in the ER (I believe the other labs in the region also received these non-conformances). The rest were related to the ER iSTAT which are easy fixes. The accreditation team is looking into one of the 'minors' related to uncertainty of measure because ours doesn't include urinalysis testing (but none of the labs in Ontario include this) which is why they are discussing it with a Chemist and will let us know the decision. They are back May 2 for the second part of the process where they interview staff, doctors, review policies etc to see how we are doing in these areas. A final report will come later in the month.

Long Term Care: Tanis Hampshire is the successful applicant for the permanent full-time Recreationist position. Tanis has been working in this position on a temporary basis for the past year, but recently has been successful in obtaining the position in a permanent capacity. She is a wonderful addition to our team and does wonderful things with our residents; they adore her! Tanis has been assisting the residents with their quarterly Resident Council meetings over the past year – the next one being held Tuesday April 24th. There will be an information meeting on Wednesday April 25th to promote a Family Council for family, friends, and persons of importance to the residents. Currently we do not have an active Family Council, but information meetings are provided semi-annually to promote and provide information about the importance of a Council.

With the warmer weather coming up we want to be able to provide safe access to our outdoor gazebo area. We would like to make it so our residents will be able to go outside freely and safely walk around in a continuous walkway and enjoy the fresh air and feel less confined. Stacey is working on a proposal to put forward to senior management about her plans for improvement in this area over the next few months.