



Board of Directors Regular Board Meeting
November 1, 2017
MINUTES

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Approved – Jan 10/18

Present: Ed Enge ©; Marlene Davidson, Sheron Suutari, Jeff Lehman, Jennifer Learning, CNO; Dr. Joanne Spencer, COS; Doug Moynihan, CEO; Brent Harris, Financial Services Manager

Guest: Mike McKinnon, Atikokan Progress

Absent: Jeremy Dickson, Karen Lusignan, Darcey Bailey, Dr. Van Der Loo

Recorder: Bonnie Clairmont

	Action Req'd/Date
1. <u>PRESENTATION- Karen Parker, Lab Manager</u> K. Parker gave an overview of the AGH lab team and explained the roles they perform. She shared that the lab must take part in proficiency testing and do annual reporting of lab testing, activity, and any changes in the testing we do for the Ministry of Health in order to get a license to operate. As well we have Lab Accreditation every four years. The lab staff utilizes large automated mainframe analyzers and smaller automated hand-held analyzers for the majority of the testing. Each year K. Parker produces a Management Review for AGH senior management and our medical lab director. Two major accomplishments were 1) the reduction in sick time which decreased from over \$26,000 to just over \$2000 and 2) a \$36,000 reduction in overtime and callbacks in two years. K. Parker shared that the hospital is implementing a point of care chemistry device in the ER to further reduce lab call backs. E. Enge commended K. Parker for the accomplishments the lab has achieved. K. Parker answered questions from the board relating to the different tests we perform in Atikokan as well as which analyzers are used for particular tests.	
2. <u>CALL TO ORDER</u>	
E. Enge chaired and called the meeting to order at 5:18 pm.	
3. <u>DECLARATION OF CONFLICT OF INTEREST</u>	
None declared.	

	Action Req'd/Date
<p>4. <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 for November 1, 2017.” CARRIED 2017-076</p> <p>5. <u>CONSENT AGENDA</u></p> <p>The Consent Agenda was reviewed. Changes were noted for the Finance minutes of October 4, 2014. From the Governance Meeting Minutes of October 4th, D. Moynihan noted that the mural will be installed by the end of November. M. Davidson has accepted the vice-chair position on the Governance committee. The consent agenda was accepted as amended.</p> <p>MOTION: J. Lehman/M. Davidson “That the Consent Agenda be approved as amended.” CARRIED 2017-077</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 September 13, 2017 b) Acceptance of Finance Committee Minutes of October 4, 2017 c) Acceptance of Governance Committee Minutes of October 4, 2017 d) Acceptance of Medical Advisory Committee Meeting Minutes of September 27 and October 24, 2017. <p>6. <u>BUSINESS ARISING</u></p> <p>6.1 Executive Compensation Framework Regulation Update: E. Enge shared that the framework was completed by D. Moynihan, P. Kronenberg, J. Dickson and himself and submitted. We have not heard anything back to date.</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 an update on the renovation program. We are awaiting some specialty parts to finish the entrance, new handicap accessible washroom and nurse calls. As well the Extended Care canopy will be installed shortly</p>	

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<p>and new signage for the hospital is on order. The history of healthcare mural will be installed by the end of November.</p> <p>D. Moynihan reported on the Northwest Health Alliance's information technology workshop that took place in September and the plans to upgrade the electronic medical records system, which would bring us much closer to a paperless service.</p> <p>He also shared information on an initiative from the LHIN to develop Sub-regions where health care providers would collaborate to get the best health care outcomes for our patients. The LHIN is looking for leaders to sit on the various health care tables.</p> <p>The Ministry of Health and Long Term Care is reviewing the community lab organizations in an effort to maximize health care benefits for citizens where there is no private lab service. In our lab we are reviewing the benefits of doing renovations to improve patient flow, privacy and quality of service. As well we are getting a new point of care service in the emergency department to improve service and reduce lab staff call-ins.</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 training and a new ventilator in the ER to help critically ill patients breath while waiting for ORNGE to come transport. In the Extended Care Wing, we have received a final report from Compliance's September visit. We were issued seven warnings that we will work on to improve which include setting up a Family and Resident Council; reporting of critical incidents and updating the charge nurse binder with information on what to report and when and on charting restraint use. Our long term care home has been chosen as the site in Northwestern Ontario to train PSWs in Resident Centered Care. This training is funded by the MOHLTC. We received three orders around helping to prevent harm from violence in the workplace. While at Health Achieve D. Moynihan, B. Harris and S. Wood will look at devices available to keep our staff safe when they are working alone. Our physiotherapist is partnering with the Family Health Team to start up a Pulmonary Rehabilitation program which should be up and running at the beginning of January.</p>	

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<p>7.3 Analysis of Hospital Services: D. Moynihan and J. Learning reviewed the analysis for September, 2017 and compared the data with last year and prior months.</p>	
<p>7.4 Financial Services Manager Report: B. Harris gave an overview of the September, 2017 balance sheet and summary of operations. The current ratio is 2.3. The hospital is in good shape cash-wise. At September 30th, the hospital was sitting at a deficit of \$81 K. This is an almost \$40K jump from August, 2017 due to staff wages. We have added a new position, Procurement Agent, which was a not budgeted for and was implemented part way through the year. We have a number of staff off on sick leave. We are currently paying staff who are eligible time and a half to cover shifts. As well, during orientation we have been paying the new worker and a trainer which has added to the financial burden. Comparatively, last year we were sitting at a deficit of \$134K.</p> <p>B. Harris reported that the Community Mental Health Programs are under budget, but monies not spent must be returned. Discussion was held about reallocating the funds received. D. Moynihan will look into reallocation opportunities.</p> <p>J. Learning will create a list of new equipment that would benefit the hospital for the Foundation to review for purchase. The proceeds from the Taste of Atikokan event are being directed towards the Emergency Department needs.</p> <p>B. Harris requested that the board make a motion to approve the line of credit through the Royal Bank. E. Enge shared that we had a line of credit when we did our banking with the TD bank, but didn't have to use it.</p> <p>MOTION: M. Davidson/J. Lehman "That the Board approve the line of credit through the Royal Bank of Canada in the amount of \$400,000." CARRIED 2017-078</p> <p>8. <u>GENERATIVE</u></p> <p>8.1 Advancing Local Health Hub</p> <p>E. Enge shared that the LHIN is supporting our development of a "Hub". The Rainy River West District Health Hub has being established. It includes Fort Frances, Rainy River and Emo. E. Enge and D. Moynihan attended their last meeting and was invited to be a non-voting</p>	<p>D. Moynihan to look into reallocating funds.</p>

member on their steering committee. We would like to see an Atikokan hub developed.	
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<p>The NW LHIN hosted a webinar and invited the public to apply to be part of the Sub-region Planning Table. Tracey Stevenson from the LHIN will meet with D. Moynihan and T. Scholten to offer more clarity on what they are trying to accomplish. D. Moynihan encouraged the board to recommend that citizens from Atikokan complete the Expression of Interest. E. Enge shared that there are three levels of service to consider: 1) locally, which needs to be formalized; 2) District level – cooperate for best patient outcomes and 3) Regionally – to create programs to improve patient care for Atikokan residents. K. Lusignan is willing to sit on the Sub-region table.</p> <p>8.2 Quality Council Board Representative. E. Enge asked board members to consider being a representative at the Quality Council meetings. The meetings are held quarterly and share Quality Council meeting information at the Quality Committee of the Board meetings. We will revisit at the Quality Committee meeting on November 15th.</p>	
<p>9. <u>IN CAMERA SESSION</u></p> <p>MOTION: M. Davidson/J. Lehman</p> <p>“That the Board move to an in-camera session of the meeting at 6:35 pm.”</p> <p>CARRIED 2017-079</p>	
<p>10. <u>RETURN TO OPEN SESSION</u></p> <p>MOTION: S/ Suutari/M. Davidson</p> <p>“That the Board return to an open session of the meeting at 6:40 pm.”</p> <p>CARRIED 2017-080</p>	
<p>MOTION: D. Bailey/S. Suutari</p> <p>“That the Board approve the In-Camera minutes of September 13, 2017.”</p> <p>CARRIED 2017-081</p>	

	Action Req'd/Date
<p>MOTION: J. Lehman/M. Davidson Credentialing: (from September 27, 2017 MAC Meeting) <u>Locum Staff Appointment</u> “That the following professional staff: Dr. Rajni Bhatia Dr. Karlene Gleason Dr. Aneesh Vaghadia Dr. Jonathan Ding Dr. Nelson Lyon be approved for appointment to the Locum staff for the remainder of the calendar year 2017.”</p> <p style="text-align: right;">CARRIED 2017-082</p>	
<p>MOTION: M. Davidson/J. Lehman Credentialing: (from September 27, 2017 MAC Meeting) <u>Regional Ordering Staff Appointments</u> “That the following professional staff: Dr. Ismeil Amhalhal Dr. Sarah Eckler Dr. Azadeh Rajaei Dr. Gwynivere Davies Lisa Lycklama, Midwife Dr. Masoud Sadreddini be approved for appointment to the Regional Ordering staff for the remainder of the calendar year 2017.”</p> <p style="text-align: right;">CARRIED 2017-083</p>	
<p>MOTION: M. Davidson/J. Lehman Credentialing: (from September 27, 2017 MAC Meeting) <u>Locum Staff Re-Appointment</u> “That the following professional staff: Dr. Priya (Kohli) Shah be approved for re-appointment to the Locum staff for the remainder of the calendar year 2017.”</p> <p style="text-align: right;">CARRIED 2017-084</p>	
<p>MOTION: J. Lehman/M. Davidson Credentialing: (September 27, 2017 MAC Meeting) <u>Regional Ordering Staff Re-Appointment</u> “That the following professional staff: Dr. Rubens Barbosa be approved for re-appointment to the Regional Ordering staff for the remainder of the calendar year 2017.”</p> <p style="text-align: right;">CARRIED 2017-085</p>	

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<p>MOTION: J. Lehman/S. Suutari Credentialing: (October 24, 2017 MAC Meeting) <u>Locum Staff Appointment</u> “That the following professional staff: Dr. Jesse Myers Dr. Elliott Nguyen Dr. Jonathan Wong be approved for appointment to the Locum staff for the remainder of the calendar year 2017.”</p> <p style="text-align: right;">CARRIED 2017-086</p>	
<p>MOTION: J. Lehman/M. Davidson Credentialing: (October 24, 2017 MAC Meeting) <u>Regional Ordering Staff Appointment</u> “That the following professional staff: Dr. Khal Salem be approved for appointment to the Regional Ordering staff for the remainder of the calendar year 2017.”</p> <p style="text-align: right;">CARRIED 2017-087</p>	
<p>11. <u>ADJOURNMENT</u> With no further business, the meeting was adjourned at 6:45 pm on a motion by M. Davidson/S. Suutari.</p> <p style="text-align: right;">CARRIED 2017-088</p>	
<p>The next <u>regular Board meeting</u> will be held on Wednesday, January 10, 2018 at 5 pm.</p> <p>The Quality Committee of the Board Meeting will be held on Wednesday, November 15 at 5:00 pm. The joint Finance Committee/Governance Committee meeting will take place on Wednesday, December 6th at 5:00 pm.</p>	
<p>_____ Ed Enge, Board Chair</p> <p>_____ D. Moynihan, CEO</p>	

**CEO Report - Board of Directors meeting
Atikokan General Hospital - November 1, 2017**

North West Health Alliance – Information Technology

A NWLHIN region wide workshop occurred in Thunder Bay in September with over 50 representatives gathered to discuss our Hospital Information System (HIS) strategy and a plan to upgrade our electronic medical record. Discussion included membership on a governance or advisory panel overseeing this work to complete the proposed transition to Meditech 6.1x and Advanced Clinical Systems. Representation was from all 12 hospitals and included staff from IT, finance, health records, nursing, and CEO's. We worked in groups to help create a plan for this major project which could cost approximately \$ 30 million. Key to the success will be the business plan that should add value and improve patient outcomes.

Sub region Development

The Sub Region of Rainy River is one of 5 sub regions in our LHIN and comprises Atikokan and Fort Frances, Emo and Rainy River. Fort Frances and Atikokan are considered 'Hubs' or Integrated Health Care Organizations (IHCO). An IHCO would be where all the health service providers in a community collaborate together to produce the best possible health care outcomes for their population. The LHIN is seeking leaders to sit at various health care 'tables' to improve our population health.

Redevelopment Project

As we get closer to substantial completion we are awaiting some specialty parts and equipment to finish the new washroom at the entrance and additional nurse calls. The new ECW exterior canopy is scheduled for installation the week of November 13, and another local firm is manufacturing new interior directional signage.

Laboratory

Our lab is part of the Kenora Rainy River Lab Association comprising the 6 hospitals on the west side of Thunder Bay. This Corporation provides specialist leadership, and best practice training and group equipment purchases. Atikokan, like some other communities, also provides a collection point for community services. The MoHLTC is reviewing the provincial community lab organizations with the aim to ensure the best possible use of resources to maximize health care benefits for citizens where there is no private lab service. In our lab we are starting a process to review the benefits of doing some renovations that would improve patient flow, privacy, and quality of service. Also, we are proceeding with a new 'point-of-care' service in our emergency department that should improve service and reduce the need for some staff call-ins at night.

Chief Nursing Officer Report
November 1, 2017 Board of Director's Meeting

Nursing: We are in the midst of training our RNs and RPNs in drawing blood. Liz Shine is doing the training in the lab. This is in order to prepare for our new IStat machine that will help diagnose heart and kidney problems without calling the lab in. The RNs will be trained on how to use the new blood machine and we hope to have the machine ready to use shortly after.

We also have a new ventilator that we will start training on November 6. This is part of the Regional RCCR emergency program. This will help patients to breath while we wait for ORNGE to come transport critically ill patients.

We had another successful round of training for non-violent crisis intervention, and we were able to get staff from dietary, community counselling and housekeeping trained in addition to more of our nurses.

The nursing staffing is good right now. We hired 2 RNs and 2 RPNs over the summer and they have mostly completed all their orientation and are available to work. There are now only casual vacancies for both RN and RPN available as all other slots are filled.

Diagnostic: We are still waiting to hear from Thunder Bay Radiologists concerning taking over our DI reporting needs. They are planning on coming here for a visit to check out our site.

Our GE X-Ray room warranty has expired, and we are now under contract with GE for Preventive Maintenance and HARP testing (HARP – radiation safety compliance). GE will visit us twice a year for regular PM/HARP.

Extended Care Wing: We received a final report at the end of September from our Compliance visit – Jennifer has a copy of the report to share. We are excited to have some great education opportunities happening next month:

- November 21st the CMHA (Canadian Mental Health Assoc.) is offering a Gentle Persuasive Approach (GPA) course to our front line workers. 10 PSWs and RPNs will be taking the course. This course provides education on dementia and brain changes and how to deal with residents who experience responsive behaviours from dementia.
- PSW training will take place starting November 29^h that focuses on Resident Centered Care – this is funded by the MOHLTC and our Long Term Care has been chosen as the site in Northwestern Ontario to train the leader PSWs. We have had a PSW request the training and when she is done she will then train all the other PSWs in our facility on how to

deliver high-quality and safe care that meets the needs of the residents. We are excited by this opportunity. The training for the PSW and the cost of covering for her shifts is completely covered by the MOHLTC.

- We will be having the RPN students from Confederation College doing their placements on the ECW wing in late November and December.

Risk Management/Infection Control/Quality Improvement: the Ministry of Labour was here on October 16, 2017. We received 3 orders around helping to prevent harm from violence in the workplace. We are actively working on solutions to the nurses being alone in the ER. We are also conducting a new risk assessment of our new space, identifying all areas that could be of risk to staff or patients.

We are in the final phase of implementing our new document management system called OMNI. Bonnie did a lot of work on this project and her time and dedication is appreciated.

The Patient and Family Advisory Council meeting is tentatively scheduled for the beginning of November. The council will review the results of some of our surveys, our quality improvement plan and the Terms of Reference for the committee.

Rehabilitation Department: We have a Kinesiology Intern here for the next year. She will be working with inpatients, residents, and outpatients. She has experience from St. Joseph's Hospital in Thunder Bay and she is bringing some of their ideas for rehabilitation and exercises to our facility. She is putting together a Kin Kart which has equipment she can use with patients who are not able to or don't want to go to the rehabilitation department. We are also looking at a chronic pain program for patients. Our Physiotherapist is partnering with the Family Health Team to start up a Pulmonary Rehabilitation program which should be up and running the beginning of January.