

BOARD OF DIRECTORS OPEN SESSION MINUTES

Thursday, March 12, 2020 at 4:00 pm
Huntsville District Memorial Hospital - Boardroom
Approved April 9, 2020



PRESENT:

<i>Elected Directors:</i>	Philip Matthews	Cameron Renwick	Dave Uffelmann	Roy Stewart	(T) denotes electronic participation
	Peter Deane	Kathy Newby	Moreen Miller	Dave Sprague	
	Michael Walters (T)	Brenda Gefucia	Beth Goodhew (T)		
<i>Ex-Officio Directors:</i>	Carol Anderson	Dr. Khaled Abdel-Razek	Natalie Bubela	Dr. Kristen Jones	
<i>Executive Support:</i>	Terry Shields	Harold Featherston	Robert Alldred-Hughes		
<i>Staff Resources:</i>	Tammy Tkachuk	Allyson Snelling			
<i>Observers:</i>	Alison Brownlee, Metroland Media				
REGRETS:	Dr. Pierre Mikhail	Bob Manning			

1.0 CALL TO ORDER

The meeting was called to order by Phil Matthews, Chair at 4:03 pm.

1.1 APPROVAL OF AGENDA

It was moved, seconded and carried that the meeting agenda be approved.

1.2 DECLARATION OF CONFLICT OF INTEREST

Committee members were reminded that conflicts are to be declared for any agenda items and the Director is to excuse him/herself from the meeting for the duration of the discussion. There were no conflicts of interest declared.

2.0 BUSINESS ARISING

2.1 PROFESSIONAL STAFF APPOINTMENT AND CREDENTIALING POLICY

Dr. Khaled Abdel-Razek reviewed the revisions as outlined in the documentation pre-circulated in the agenda package.

It moved, seconded and carried that the revised Professional Staff Appointment and Credentialing Policy be approved.

2.2 BOARD AGENDA DEVELOPMENT AND USE OF CONSENT AGENDA

The policy was further revised in follow up to the previous meeting, to remove policies and procedures from the list of consent agenda items. There were no comments from the floor.

It was moved, seconded and carried that the revised Board Agenda Development and Use Of Consent Agenda Policy be approved.

3.0 REPORTS

3.1 CHAIR'S REMARKS

The Chair presented a documentation outlining MAHC's achievements and awards for 2019. It was requested that the list be added to the Board portal.

Upon review of the events listing, Moreen Miller confirmed that she continues to attend the District meetings and will provide the relevant information for the list.

The Board was advised that with activity increasing relative to Covid-19, in-person meetings may be impacted and as such alternate approaches for meetings may be utilized.

3.2 REPORT OF THE CHIEF EXECUTIVE OFFICER

The March report of the Chief Executive Officer was received for information. The Board was informed that it is an exceptionally busy time for staff and that addressing Covid-19 is the primary focus impacting many resources and as such there may be work plan items delayed if necessary.

4.0 PROGRAM QUALITY & EFFECTIVENESS

4.1 REPORT OF THE CHIEF OF STAFF & MEDICAL ADVISORY COMMITTEE

The February report was reviewed by Dr. Abdel-Razek as pre-circulated. Clarification was sought relative to surgical transfers as well as midwifery scope of practice as it relates to epidurals. There was no follow action identified.

4.2 QUALITY IMPROVEMENT PLAN 2020-2021

Peter Deane presented the 2020-2021 Quality Improvement Plan as recommended by the Quality and Patient Safety Committee. Questions of clarification were raised regarding the eight hour target for admission and the patient flow metric. A discrepancy between the narrative and the work plan was clarified in that the medication reconciliation target has been moved to the operational balanced scorecard for monitoring, and the ALC metric relates to patient; those revisions will be made in the document prior to submission. A question was raised regarding the impact of Covid-19 on operations and if the data will be normalized in any way. It was explained that as part of the submission, a narrative is developed on achievements, and that type of information would be relayed through that report.

It was moved, seconded and carried that the 2020-2021 Quality Improvement Plan be approved for submission to Health Quality Ontario.

5.0 FINANCIAL VIABILITY, IN ACCORDANCE WITH THE STANDARDS APPLICABLE TO THE DIRECTORS AT LAW

5.1 HOSPITAL SERVICES ACCOUNTABILITY AGREEMENT

Brenda Gefucia presented the Hospital Services Accountability Amending Agreement and explained that the revisions are relative to legislative changes. Management has provided assurance that there are no

substantive changes from prior years. It was also clarified the oversight for meeting the HSAA obligations occurs through the Resources & Audit Committee.

It was moved, seconded and carried that the Board of Directors approve the Hospital Services Accountability Amending Agreement extending the term and schedules to June 30, 2020, and that the Board Chair and Chief Executive Officer be authorized to sign the agreement.

6.0 CONSENT AGENDA

It was moved, seconded and carried that the following items be approved or received as indicated:

6.1 Approval of the Board of Director Meeting Minutes of February 13, 2020

6.2 Receipt of the Quality & Patient Safety Committee Report of February 27, 2020

7.0 Coronavirus Update

Carol Anderson provided an update regarding Coronavirus explaining that it continues to be an evolving issue. MAHC is monitoring this situation closely and has a management plan that continues to evolve to ensure alignment with the direction from the Ministry of Health. Enhanced screening measures have been instituted with patient being screened at entry points. MAHC is working closely with community partners on the assessment centres; these are being mandated by the Ministry and the Ministry will make the decision as to when these centres open. It was clarified that the site in Huntsville has been selected to be the NOSM space; the site in Bracebridge is yet to be confirmed, site visits were being finalized today. It was reinforced that the submission will be for two assessment centres in Muskoka. In response to a question regarding messages for Board members, it was recommended that people be directed to MAHC's website for the most current information and that people also be encouraged to call Telehealth.

8.0 ADJOURNMENT

It was moved that the open session be adjourned and the Board of Directors proceed into the in-camera session following a short recess at 5:20 pm.


Philip Matthews, Chair


Natalie Bubela, Secretary