

BOARD OF DIRECTORS

OPEN SESSION MINUTES

Thursday, April 12, 2018 at 4:00 p.m.
South Muskoka Memorial Hospital Boardroom
Approved May 10, 2018



PRESENT:

Elected Directors:	Evelyn Brown	Philip Matthews	Brenda Gefucia (T)	Christine Featherstone
	Cameron Renwick	Don Eastwood	Beth Goodhew	Michael Walters
	Bob Manning	Kathy Newby		
Ex-Officio Directors:	Natalie Bubela (T)	Esther Millar	Dr. Dave McLinden	Dr. Biagio Iannantuono
Executive Support:	Terry Shields	Harold Featherston	Robert Alldred-Hughes	
Guests:	Sonja Stirling, Finance Manager			
REGRETS:	Frank Arnone	Moreen Miller	Dr. Anthony Shearing	

1.0 CALL TO ORDER

With a quorum present, the Board Chair, Evelyn Brown called the meeting to order at 4:01 pm.

1.1 APPROVAL OF AGENDA

A revised agenda was provided to all meeting participants; the Financial Results report was moved to Agenda Item 2.1.

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

1.2 DECLARATION OF CONFLICT OF INTEREST

Directors were reminded that conflicts of interest 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. Upon review of the agenda, there were no conflicts of interest declared.

1.3 PATIENT STORY

Esther Millar shared a patient story that outlined the significant efforts of the care team in a complex situation. There were no follow up questions.

1.4 NORTHERN ONTARIO SCHOOL OF MEDICINE (NOSM) UPDATE

Dr. Dave McLinden presented an overview of medical education in Muskoka with four areas of focus: who is involved; who has visited Muskoka; learners that have returned to Muskoka to practice; and, the activities of the Huntsville Local Education Group. It was also highlighted that 94% of NOSM graduates who have completed both their MD and residency programs at the Northern Ontario School of Medicine are now practicing in Northern Ontario. Joining Dr. McLinden in-person was Dr. Jessica Nairn a Resident working in Bracebridge/Gravenhurst along with James Campbell via teleconference, a NOSM Clerkship student. Both expressed their views with respect to their learning experience in Muskoka highlighting the excellent program provided and noted that Muskoka is a much sought out location for learners. The floor was open for comment and question. The Chair thanked the guests for attending the meeting.

Dr. Nairn and Mr. Campbell left the meeting at this time.

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

2.1 FINANCIAL RESULTS

Brenda Gefucia presented the year to date February 28, 2018 Financial Results and reported that volumes continue to trend with acute care well in excess of last year. The most significant variance to budget for revenue is related to the in-year LHIN funding received. In terms of the Quality Based Procedures, it was noted that the estimates for January and February demonstrate that the maximum funds available for non-elective procedures have been reached. The Board was reminded that the hip and knee volumes have been capped as previously reported and the Cancer Care Ontario volumes are also approaching their maximum levels. Salaries and benefits are below budget however overtime costs continue to be higher than budget due to the volumes which is also compounded by sick time and vacancies. There continues to be a positive variance in supplies and other. In terms of the Accounts Receivables, February experienced an increase in semi-private billings however it was noted that these remain at the one month level on the aging. The maximum line of credit utilized was \$6 million and the month ended with a balance of \$2 million. The financial review graph was highlighted and it was explained that it was created in an effort to be clear regarding historical surplus and deficit positions as well as the growth of the accumulated deficit. A question was raised with respect to the full year forecast, and it was explained that work is progressing and it will be presented to Resources & Audit Committee at the end of the month. In terms of a positive position, it was confirmed that hospitals are able to retain up to 2% of the total funding envelope.

It was moved, seconded and carried that the Financial Results Year To Date February 28, 2018 be approved.

3.0 REPORTS

3.1 CHAIR'S REMARKS

The Chair provided a verbal report updating the Board on the recent deputation to the Huntsville Town Council on March 26 after learning about council's intention to consider a motion calling for the dismissal of the Board and CEO. The Chair, along with Cameron Renwick, shared with Councilors MAHC's disappointment in the motion and the potential negative impacts. The two main points made in the deputation were that the task force is listening to all feedback and no decisions have been made; and a request to allow the Task Force to complete its work. The high-level descriptions of the models were shared with Council and it was demonstrated how the feedback the Task Force has received has been listened to and has shaped the models. It was also reaffirmed that no decisions have been made. Council members asked questions and agreement was reached to arrange a further opportunity to provide Councilors with a robust future planning update. These arrangements are in the works for the Task Force leadership to provide an update to Huntsville Town Council. The Board was assured that continued outreach activities and stakeholder engagement, including elected officials, has and is occurring by the Task Force throughout the planning process. The Chair's remarks were closed by re-stating the sentiment shared with the Huntsville Town Council deputation in that the Board and many in the community have continued confidence in CEO Natalie Bubela's leadership of the MAHC organization. There were no questions from the floor.

3.2 REPORT OF THE CHIEF EXECUTIVE OFFICER

Robert Alldred-Hughes, Acting Chief Executive Officer presented the Chief Executive Officer report for April 2018. The success of the recent recruitment fair was highlighted. In terms of the presentations provided by the CEO, and others, it was confirmed that these are included in the information related to the Task Force stakeholder engagement efforts. A question was raised with respect to the effectiveness of the presentations, and it was explained that based on feedback from participants in the sessions they have been effective.

4.0 ENSURE PROGRAM QUALITY & EFFECTIVENESS

4.1 REPORT OF THE CHIEF OF STAFF & MEDICAL ADVISORY COMMITTEE

The April report of the Chief of Staff and Medical Advisory Committee was received. Further to the report, Dr. Iannantuono informed the Board that Dr. Roy Kirkpatrick, General Surgeon has been selected to be the recipient of the 2018 Ontario Medical Association (OMA) Section Service Award for General Surgery. The Ontario Medical Association (OMA) has an OMA Awards Program annually to recognize the achievements of its physicians throughout the province via nomination process. The awards will be presented later this Fall. It was confirmed that MAHC has a communication plan regarding this achievement. A congratulatory letter will be sent on behalf of the Board of Directors.

Further to the pre-circulated report it was explained that management is conducting a further deep dive into the endoscopy numbers. In response to a question from the floor, it was clarified that "Nil report" explains that there was nothing further reported in addition to the written report pre-circulated with the agenda.

5.0 CONTRIBUTE TO STRATEGIC DIRECTION

5.1 CAPITAL PLAN DEVELOPMENT TASK FORCE

Further to the Task Force updates pre-circulated with the meeting package, Cameron Renwick explained that the Task Force has reached a critical milestone by reaching consensus on the details of the programs and services proposed in each of the models. A comprehensive communication plan is being rolled out with both internal and external stakeholders to reinforce the model finalization messages. As well, the task force, through its stakeholder engagement and communication plan, committed to bringing an update to Muskoka District Council when there was important information to update. Cameron Renwick, along with Peter Deane who has agreed to temporarily serve in the vice chair role while Don Mitchell is away, will make a delegation at the next District Council meeting.

Another important milestone reached by the Task Force was finalizing the evaluation criteria to be used to score and evaluate the three models. This criteria was informed by survey feedback from the public to reflect what is important when evaluating the advantages and disadvantages of each model. Also important to note about the evaluation criteria is the variety of data that is being commissioned and collected to support and inform the evaluation of the three models, such as projections, health care studies, and reports on things such as land-use planning, economic development, model costing and fundraising capacity.

In follow up to the Huntsville Town Council, Cameron Renwick wrote to Huntsville councilors asking them to the task force members for an interactive education session at the hospital. The purpose of which was to engage in open dialogue, share information and answer questions they have with representatives of the Board also in attendance. Unfortunately, the "gathering of a quorum of council and the potential to further the business of the corporation", is deemed to be a meeting of Council under the Municipal Act; the Huntsville Chief Administrative Officer has since invited the Task Force to attend a Council meeting. Those details are yet to be confirmed.

The Board was assured that the Task Force is sharing information and answering questions about future planning and capital redevelopment. All of the recent media attention is not being taken lightly and the Task Force is committed to investing the necessary time to ensure questions are answered and due diligence is done.

6.0 CONSENT AGENDA.

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

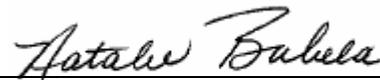
- 6.1 Approval of the Board of Director Meeting Minutes from March 8, 2018***
- 6.2 Approval of the Board of Director Meeting Minutes from March 27, 2018***
- 6.3 Receipt of the Resources & Audit Committee Report of March 23, 2018***
- 6.4 Receipt of the Compliance Report for February 28, 2018***

7.0 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.



Evelyn Brown, Chair



Natalie Bubela, Secretary