

## OPEN SESSION MINUTES

December 13, 2012

5:30 p.m.

Huntsville District Memorial Hospital Boardroom

Approved January 10, 2013

**ATTENDANCE:**

<i>Elected Directors:</i>	Larry Saunders, Chair	Evelyn Brown (T)	Charlie Forret	Eric Spinks
	Sven Miglin	Bill Garriock	John Sinclair	Gregg Evans
	Philip Matthews	Catherine King (T)	Rick Durst	Joe Swiniarski
<i>Ex-Officio Directors:</i>	Natalie Bubela	Dr. Jan Goossens	Dr. A. MacLennan (T)	Dr. Steven Herr
	Bev McFarlane			
<i>Executive Support:</i>	Tim Smith	Harold Featherston	Robert Hughes	Vivian Demian
<i>Resources:</i>	Tammy Tkachuk			(T) - participation via teleconference

**1.0 CALL TO ORDER**

With quorum present, the Chair Larry Saunders called the meeting to order at 5:32 pm. Mr. Saunders welcomed Kim Rose to the meeting and explained that Mrs. Rose is the Acting Director of Human Resources in Robert Hughes' absence.

**1.1 APPROVAL OF AGENDA**

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

**1.2 DECLARATION OF CONFLICT OF INTEREST**

Upon review of the agenda there were no declarations of conflict of interest.

**1.3 PATIENT SAFETY EDUCATION - 'PATIENTS AS PARTNERS'**

Bev McFarlane presented information related to the patient safety education topic of Patients as Partners. The presentation was an adaptation of the full patient safety education program that is being provided to staff as one of the deliverables of the Patient Safety Plan. The information included a review of why patient engagement in safety is important along with the fundamental principles including disclosure and apology.

In terms of the Patient Advocate role, it was explained that a formal role is typically found in large hospital settings through an ombudsmen type office. Smaller hospitals such as Muskoka Algonquin Healthcare typically use alternatives to a formal ombudsmen role due to budgeting constraints. At Muskoka Algonquin Healthcare, a comprehensive complaints process is in place along with one of the Quality Improvement targets focused on response time. A question was also raised regarding legal liability in terms of communication with patients regarding their status; N. Bubela stated that this is not an area of high concern within the hospital. In terms of identifying and addressing risk, there are protocols in place. MAHC's insurance carrier, HIROC, provides a framework along with mitigation strategies to guide the Hospital through ensuring that proper protocols are in place for areas of risk. An example provided was MAHC's Falls Risk program in place.

In addition, Bev McFarlane explained that the organization has implemented a 'Good Catch' award intended to highlight and celebrate those individuals that bring forward safety incidences.

**2.0 CONSENT AGENDA**

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

- **Approval of the Minutes from October 11, 2012**
- **Receipt of the Board Meeting Summary Notes from November 8, 2012**
- **Approval of the Quality & Patient Safety Terms of Reference**
- **Approval of the Quality & Patient Safety Work Plan**

- *Receipt of the Governance Committee Report*
- *Receipt of the Resources Committee Report*
- *Receipt of the Human Resources Report*
- *Receipt of the Compliance Report*
- *Receipt of the Expense Reports*
- *Receipt of the Senior Leadership Team Report*

### **3.0 PROGRAM QUALITY AND EFFECTIVENESS**

#### **3.1 PATIENT EXPERIENCES**

N. Bubela further explained that the Good Catch awards will be shared at the Board moving forward. Included in the good catch will be a description of the incident and the key learning. The key learning that was shared this month was that when patients are confused it is important to conduct a frequent scan of their environment to remove any potential safety issues.

#### **3.2 REPORT OF THE CHIEF OF STAFF / MEDICAL ADVISORY COMMITTEE**

Further to the report pre-circulated with the meeting package, Dr. Goossens explained that the Medical Advisory Committee continues to work diligently on the order sets. The Bylaw review is nearing its conclusion and has been sent back to the medical staff as a whole for the final 30 day review with an opportunity to provide feedback prior to bringing forward to the Board for approval.

Discussion ensued regarding the recent site visit to Owen Sound related to the electronic medical record. The physician order set module has not been implemented as of yet, therefore a follow up site visit to a site that has implemented the Cerner physician order entry module is being scheduled. There is no real concern at this time regarding the system; however the medical staff would like an opportunity to view prior to endorsement. A plan is in place at Grey Bruce to continue to implement all of the modules to the HIMS level five.

#### **3.3 ENTERPRISE RISK MANAGEMENT PROGRAM**

T. Smith summarized the new Enterprise Risk Program for Muskoka Algonquin Healthcare explaining that the model will be driven from the bottom up with the Managers completing a self-assessment of their individual areas that would then flow to the Senior Leadership to evaluate and rank the identified risks. These would then be prioritized into a bi-annual report to the Board and will cover the areas of risks related reputation, financial, safety and quality. The risks will also be presented through the appropriate Board Committees. Overall, the goal is to have the number of risks reduce overtime once mitigation strategies are implemented. It was clarified that any immediate pending risks would be brought to the attention of the Board in a timely fashion and would not be held until the next reporting period.

### **4.0 REPORTS**

#### **4.1 REPORT OF THE CHAIR**

The Chair commended and thanked the organizing staff for the Christmas Party held December 8<sup>th</sup> as the event was once again a well-attended success enjoyed by all.

During November the following groups celebrated their professional recognition weeks. On behalf of the Board L. Saunders extended appreciation to these groups - Health Information Services staff, Information Technology staff, Perioperative Nurses, Diagnostic Imaging staff.

Congratulations were extended to members of both the Huntsville and South Muskoka Auxiliaries. The Hospital Auxiliaries Association of Ontario (HAAO) held their annual convention in November made the following announcements:

- Beryl Clayson, Vera McWade, Irene Parker and Jean Wagner of the Huntsville Auxiliary all recently received the HAAO Provincial Life Membership Award.
- Sharon Clark, the Past President of the South Muskoka Auxiliary was officially installed as the HAAO Director of Students
- Beth Hannah, the former Volunteer Coordinator for the South Muskoka Auxiliary is now the HAAO Central Region Chair

The North Simcoe Muskoka LHIN will be holding its next information meeting in the Muskoka area on January 31<sup>st</sup>; the Chair requested that any Directors available to attend.

The Chair also noted that following the November Board meeting, and the recognition that MAHC received at the Ontario Hospital Association Health Achieve Conference related to the C-difficile project, a joint letter was sent to the District advising them of the recognition and thanking them once again for their contribution the project.

## 4.2 REPORT OF THE CHIEF EXECUTIVE OFFICER

Further to the report pre-circulated in the meeting package, N. Bubela explained that a personal note was sent to the President and CEO of the Ontario Hospital Association thanking her for the recognition and explaining that being chosen to be recognized was a real motivator for our staff.

N. Bubela shared the announcement that the North Simcoe Muskoka LHIN has appointed Jill Tettmann as the new Chief Executive Officer.

Appreciation was extended to the media in terms of their response to the Influenza Outbreak at the South Muskoka Memorial Hospital; the newspaper stopped its presses to ensure that the announcement was included in its coverage on Wednesday.

The Board was informed that the Pre Capital submission was reviewed at the Community Services Committee and the submission was recommended for approval at the LHIN Board level. The Committee was exceptionally complimentary on the quality of the submission. The Strategic Planning Committee and staff were thanked for the collaboration in developing the final document.

N. Bubela and H. Featherston explained that the within the budget deliberations at the District of Muskoka one of the projects presented was to extend a water main to the new water treatment centre through Earl's road. Within the presentation the HDMH Site is referenced in terms of the benefits that this project would have for the hospital. Currently the HDMH Site is serviced by a 6-inch water which is considered small by today's design standards. Its size limits the flow and volume of water available at the hospital and limits the capacity to expand systems and/or services in the hospital that require additional water flow and volumes. The opportunity for HDMH to connect to this new water main will provide future security related to any expansion projects that may be contemplated.

## 5.0 ENDEAVOUR TO ENSURE FINANCIAL VIABILITY

### 5.1 FINANCIAL STATEMENTS

P. Matthews explained that the financial results to the end of October demonstrate a \$131,000 positive variance and that this trend has continued through November. P. Matthews noted that this positive variance has not all achieved by efficiencies but rather through other revenue as well as deferred base salaries. The one concern on the balance sheet is related to the accounts receivables; through November a decrease is being seen. It was noted that the biggest accounts are related to federal accounts. Given the proximity to the end of the year, T. Smith expressed confidence with the budget and maintaining a balanced position. Caution was noted however in terms of the current outbreak and the impact related to staffing and increased costs. A differential between the benefits and salary line was noted; it was explained that it is believed this is due to an issue in the software program and is a misallocation. It was clarified that benefit salaries refers to statutory holidays and vacations while employee benefit contributions refers to CPP, ect.

***It was moved, seconded and carried that the Financial Report for the seven month period ending October 31, 2012 be approved.***

## 6.0 ENSURE BOARD EFFECTIVENESS

### 6.1 BOARD MEETING EVALUATION RESULTS

E. Brown outlined the three areas of focus resulting from the Board meeting evaluation results. Discussion ensued related to the declining results to question I - Board members come prepared for the board meeting and the recommendation that the question be altered to read 'I come prepared for the board meeting'. The basis of the recommendation was that it is difficult to understand and implement corrective action given that it is a judgment of each individual answering the question. It was suggested that the response and a downward trend bares identification and discussion by the Board and that it provides a valuable finding. It was also noted that a correlation can be made with the self/peer assessment that is completed annual. There was general consensus to maintain

the question as worded currently, 'Board members come prepared for the meeting'. It was also agreed to implement the remaining two recommendations:

- Board members to provide comment for any response of Adequate/Could Improve
- Divide question h. to ask to separate questions as follows:
  - Board members communicated effectively with management
  - Board members communicated effectively with each other.

## 7.0 FOSTER RELATIONSHIPS

### 7.1 AUXILIARY REPORT

The Board received the report of the South Muskoka Memorial Hospital Auxiliary.

## 8.0 IN-CAMERA SESSION

***It was moved, seconded and carried that the open session be terminated and the Board of Directors proceed into the in-camera session.***

  
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Larry Saunders, Chair

  
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Natalie Bubela, Secretary