

# BOARD OF DIRECTORS



## OPEN SESSION MINUTES

Thursday, January 8, 2015 at 5:00 p.m.

Via Teleconference and Videoconference to HDMH & SMMH Boardrooms

Approved February 12, 2015

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### **PRESENT:**

<i>Elected Directors:</i>	Charles Forret Donna Denny Kevin King	Gregg Evans Brenda Gefucia	Evelyn Brown Cameron Renwick	Christine Featherstone Joe Swiniarski
<i>Ex-Officio Directors:</i>	Natalie Bubela Dr. J. Macmillan	Karen Fleming	Dr. Jan Goossens	Dr. Kersti Kents
<i>Executive Support:</i>	Tim Smith	Harold Featherston	Robert Alldred-Hughes	Vivian Demian
<i>Staff Resource:</i>	Tammy Tkachuk			
<b><u>REGRETS:</u></b>	Larry Saunders	Phil Matthews	Nicholas Popovich	

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### 1.0 CALL TO ORDER

With a quorum present, the Board Chair, Charles Forret called the meeting to order at 1702 hours.

#### 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

Members 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. There were no conflicts of interest declared.

#### 1.3 CHAIR'S REMARKS

The Chair took the opportunity to acknowledge that staff involved in coordinated the Christmas Party and extended appreciation on behalf of the Board. In addition, the Chair congratulated both of the Hospital Auxiliaries for recent successful fundraising events - the South Muskoka Hospital Auxiliary raised \$7,000 in November through their Candy Cane Luncheon and Bazaar. And the Huntsville Hospital Auxiliary also raised \$7,000 from their House Tour. Directors were reminded to complete the integration, systems thinking survey by January 12, 2015. The Director Expression of Interest process will be initiated and each Director will be receiving a form to complete and submit to T. Tkachuk by the February Board meeting.

#### 1.4 DATA QUALITY CULTURE PROJECT

The agenda item was deferred to the next meeting.

### 2.0 CONSENT AGENDA

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

- 2.1 Approval of the Board of Director Meeting Minutes from November 13, 2014**
- 2.2 Receipt of the Quality & Patient Safety Committee Report of December 18, 2014**
- 2.3 Receipt of the Utilization Reports as at December 10, 2014**
- 2.4 Receipt of the Governance Committee Report of December 17, 2014**
- 2.5 Approval of the Application to Serve on the Board of Directors Policy #GOV-6-10 revisions**
- 2.6 Approval of the Meetings Without Management Policy #GOV-5-120 revisions**
- 2.7 Receipt of the Resources Committee Report of October 28, 2014**
- 2.8 Receipt of the Human Resources Report**
- 2.9 Receipt of the Compliance Report as at October 31, 2014**

## **2.10 Receipt of the Expense Reports as at October 31, 2014**

### **3.0 ENSURE PROGRAM QUALITY & EFFECTIVENESS**

#### **3.1 REPORT OF THE CHIEF OF STAFF**

Dr. Jan Goossens, Chief of Staff presented the report of the Medical Advisory Committee as was pre-circulated and appended to the meeting package for information. There was no further discussion.

#### **3.2 BALANCED SCORECARD REPORT**

Evelyn Brown, on behalf of the Quality & Patient Safety Committee presented the Balanced Scorecard Report as pre-circulated and appended to the agenda package for receipt and welcomed questions from the Board. It was confirmed that there are no significant changes from the previous report. It was also noted that the Alternate Level of Care data is updated, however will always lag approximately two months. There were no further questions or concerns raised.

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

Pre-circulated and appended to the meeting package were the Year 3 results of the Enterprise Risk Management Program as reviewed by the Resources Committee. Gregg Evans reviewed the report and each of the identified enterprise risks. A question was raised with regards to the high risks and that MAHC has minimal opportunity to control; it was explained that the organization continues to work with the North Simcoe Muskoka Local Health Integration Network and the Ministry of Health and Long-Term Care to encourage movement forward for initiatives such as the Integrated Stroke Rehab Unit.

### **4.0 REPORTS**

#### **4.1 REPORT OF THE CHIEF EXECUTIVE OFFICER**

A copy of the combined December and January Report of the Chief Executive Officer was pre-circulated and appended to the agenda package for information. Natalie Bubela highlighted that Vivian Demian continues to be MAHC's representative on Health Links. Further to the report, N. Bubela informed the Board that an announcement was recently made regarding Canadian Blood Services potential labour disruption; a settlement has been reached. Harold Featherston and Bryon Palmer, Lab Manager were recognized for their efforts in preparations in the event that a labour disruption had occurred.

### **5.0 ENDEAVOUR TO ENSURE FINANCIAL VIABILITY**

#### **5.1 FINANCIAL RESULTS**

Gregg Evans presented the Financial Results for the seven month period ending October 31, 2014 on behalf of the Resources Committee. It was noted that the Committee has received the November results. It was highlighted that the impact of the funding reductions are now becoming a reality in the statements. The year to date is showing a deficit and the planned position was to be in a surplus. There are a number of items assisting with mitigation including the utility savings that were a result of the Energy project. Tim Smith informed the Board that Hospitals will once again be permitted to net quality based procedure volumes at year end. A question was raised with regards to a variance related to overtime and it was explained that one significant change for the current year was a reduction in a resource team who are individuals scheduled without an assignment; that pool was reduced however the budget did not plan for sufficient coverage for that shortcoming. A concern was also raised with regards to the cash and demand loan and no apparent reconciliation to the balance sheet; it was explained that the cash reconciliation is conducted on an Excel spreadsheet where the detailed lines had been compressed; expanding these condensed lines shows the reconciliation. In terms of accounts receivable, there was one claim over 120 days of \$90k which was collected in the subsequent month. Further explanation was provided with regards to increased activity on the accounts receivable and it was acknowledged that there is generally increased activity in certain months for example when there is an increase in out of country visitors.

***It was moved, seconded and carried that the Financial Report for the seven month period ending October 31, 2014 be recommended to the Board of Directors for approval.***

## 6.0 ENSURE BOARD EFFECTIVENESS

### 6.1 PEER/SELF-ASSESSMENT TOOL REVIEW & ANNUAL BOARD EVALUATION TIMETABLE

Cameron Renwick reviewed the pre-circulated decision support document providing Directors with the background leading to a slight modification to the Peer/Self-Assessment Tool. There were no questions or concerns raised.

***It was moved, seconded and carried that the Board of Directors approve the addition of a "N/A" response option and an introductory paragraph to the Annual Peer/Self-Assessment Tool.***

### 6.2 INTEGRATION POLICY

On behalf of the Governance Committee, Cameron Renwick presented the Integration Policy. In response to a question it was clarified special legal advice was not sought regarding this topic, however in an education presentation made by MAHC's legal firm this was referenced. In addition, it was also clarified that MAHC has always in practice been compliant with the components of the policy. A comment was made that the policy is one of many ways to demonstrate MAHC's commitment and emphasis regarding integration.

***It was moved, seconded and carried that the Board of Directors approves the Integration, Commitment to Policy #GOV-6-55.***

### 6.3 POLICY REVIEW

Cameron Renwick reviewed the pre-circulated information outlining the rationale for the revisions to the Board Accountability Statement, Confidentiality policy and the Roles & Responsibilities for the Board of Directors. In response to a question from the floor, it was clarified that the revisions to the Confidentiality Policy were derived from the MAHC staff policy on Confidentiality which is based on requirements in the Freedom of Information Privacy Protection Act (FIPPA) and the Personal Health Information Privacy Act (PHIPA).

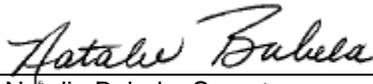
***It was moved, seconded and carried that the Board of Directors approves the revisions to the following policies as recommended by the Governance Committee:***

- a) Board Accountability Statement # GOV-6-10***
- b) Confidentiality # GOV-5-40***
- c) Roles & Responsibilities, Board of Directors # GOV-5-120***

## 7.0 MEETING TERMINATION

***It was moved, seconded and carried that the open session be terminated and the Board of Directors proceeds into the in-camera session following a short recess.***

  
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Charles Forret, Chair

  
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Natalie Bubela, Secretary