

OPEN SESSION MINUTES

Thursday, June 12, 2014 at 5:30 p.m.
South Muskoka Memorial Hospital Boardroom
Approved September 11, 2014

PRESENT:

<i>Elected Directors:</i>	Larry Saunders Donna Denny Philip Matthews	Gregg Evans Catherine King	Evelyn Brown Cameron Renwick	Christine Featherstone Joe Swiniarski
<i>Ex-Officio Directors:</i>	Natalie Bubela Dr. Jen MacMillan	Bev McFarlane	Dr. Jan Goossens	Dr. Kersti Kents
<i>Executive Support:</i>	Vivian Demian	Harold Featherston	Tim Smith	Robert Alldred-Hughes
<i>Guest:</i>	Dr. Steven Herr			
<i>Staff Resource:</i>	Tammy Tkachuk			

REGRETS:

Charlie Forret Eric Spinks Kevin King

1.0 CALL TO ORDER

With a quorum present, the Chair, Larry Saunders called the meeting to order at 1733 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

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

1.3 ENERGY PROJECT UPDATE

Harold Featherston provided a presentation with an update regarding the Energy Project and explained that the project is nearing completion with current measures remaining in line with the project plan. These include asbestos removal at the Huntsville District Memorial Hospital Site with the main floor being completely abated and a substantial portion of the second floor. The ripple effects of this work have been tremendous in terms of now much of the work can be done internally. The project continue to track to remain on budget however the timeline will be extended approximately one month. The projected \$100,00 in incentives remain well on track. Board members were reminded of the communication campaign that was planned to complement the work and it was noted that this continues to ensure the topic of energy conservation remains top of mind. In February MAHC was awarded the "Bronze" award by the Green Hospital Scorecard; the Team is in the process of submitting the most current data. In response to a question from the floor, it was explained that they are cautiously optimistic of exceeding the projected \$350-400K in annual savings.

1.4 CHAIR'S REMARKS

The Chair introduced and welcomed Dr. Jen MacMillan who was recently appointed the Vice-President of the Medical Staff and hence is now a new ex-officio Board member.

The letter of resignation from Eric Spinks was pre-circulated and appended to the meeting package. The Chair thanked Mr. Spinks for his time with the Board.

It was moved, seconded and carried that the Board of Directors receive the resignation of Eric Spinks, with regret

Correspondence from Mr. Gord Durnan regarding the community engagement efforts related to Master Program/Master Planning was received by the Board. In addition, Natalie Bubela read aloud feedback received from a member of the public expressing appreciation for the sessions and noted that her understanding was significantly improved by attending the session.

Board members were advised of the dates for the Auxiliary/Volunteer recognition events and were requested to advise of their availability to assist at the events. It was noted that the purpose of this event is to recognize the efforts of MAHC's volunteers and the importance that they represent in running the Hospitals.

The North Simcoe Muskoka Local Health Integration Network provided a summary of the recent regional sessions as well as the resulting action plan; these documents were pre-circulated and appended to the meeting package.

The draft Standing Committee Structure for the 2014-2015 Board Year was pre-circulated; it was explained that any concerns or questions were to be brought to the attention of Charles Forret as the incoming Board Chair.

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 May 8, 2014*
- 2.2 Receipt of the Resources Committee Report of May 29, 2014*
- 2.3 Receipt of the Human Resources Report as at April 31, 2014*
- 2.4 Receipt of the Expense Reports for March 31, 2014*
- 2.5 Receipt of the Consultant Use Report as at March 31, 2014*
- 2.6 Receipt of the Capital Equipment Needs List*

3.0 ENSURE PROGRAM QUALITY & EFFECTIVENESS

3.1 UTILIZATION REPORT

A copy of the June 6, 2014 Acute Care and Complex Continuing Care Utilization reports were pre-circulated and appended to the agenda package for information. Natalie Bubela reviewed the data and explained that the trend at the South Muskoka Memorial Hospital Site continues to be well below the budgeted bed base. At the Huntsville District Memorial Hospital Site the trend continues to remain above the budgeted bed base however it was noted that the five overflow beds also remain in place to mitigate the over census issues. The Complex Continuing Care beds indicate an occupancy that is well below the bed base which is the similar situation at the other two regional Complex Continuing Care Hospitals. There were no questions from the floor.

3.2 REPORT OF THE CHIEF OF STAFF

Dr. Goossens, Chief of Staff presented the report on behalf of the Medical Advisory Committee that met on May 26, 2014. A copy of the report was pre-circulated and appended to the agenda package for information. It was explained that in addition to Dr. Kersti Kents and Dr. Jennifer MacMillan's appointments as President and Vice-President, respectively, Dr. Paulette Burns was elected Treasurer/Secretary. Dr. Goossens expressed sincere appreciation to Dr. Steven Herr for his hard work as President over the past year.

4.0 REPORTS

4.1 REPORT OF THE CHIEF EXECUTIVE OFFICER

A copy of the June 2014 Chief Executive Officer Report was pre-circulated and appended to the meeting package for information. N. Bubela provided a brief update regarding the fundraising event that occurred in Toronto on behalf of the South Muskoka Memorial Hospital Foundation and indicated that there are donations coming forward as a result of the event. The Peter Gilgan Emergency Department naming event will be occurring June 16, 2014 with over 40 people that will be attending; N. Bubela committed to circulating the list of anticipated attendees.

4.2 REPORT OF THE PRESIDENT, MEDICAL STAFF

Dr. Steven Herr thanked the Board for the opportunity to remain apprised of the current pulse and culture of the medical staff. Dr. Herr explained that he has enjoyed the past two years working with the Board and made a suggestion to extend the Mentorship Program to the incoming Vice-President as well.

Dr. Kersti Kents requested the opportunity to share correspondence on behalf of the Emergency Department Medical Staff. Discussion ensued and it was noted that such requests for additions to the agenda should be made in advance and a copy of the correspondence be provided through the Board Liaison. The Chair granted a one-time exception. Dr. Kersti Kents read aloud the correspondence which outlined concerns regarding the Pay For Results funding, the recent changes related to the Alternate Level of Funding Agreement (AFA) with the Ministry of Health and Long-Term Care and staffing challenges.

Dr. Kents was thanked for sharing the information. It was noted that although the Board appreciates hearing from the medical staff, the issues highlighted are operational issues best dealt with at the operational level. With the ever changing health care environmental and available funding, it is critical that the Medical Staff and Administration continue to work together to find solutions.

5.0 CONTRIBUTE TO THE STRATEGIC DIRECTION

5.1 STRATEGIC PLAN REVIEW SESSION – SUMMARY REPORT

Evelyn Brown presented the Decision Support Document on behalf of the Strategic Planning Committee and a copy of the report was pre-circulated and appended to the agenda package. Mrs. Brown reported that the Committee reviewed a summary of the discussions that occurred at the planning session held April 25, 2014. The Committee agreed that the Strategic Plan 2012-2014 only requires minor changes:

- In terms of the Vision, it is being recommended that it include reference to the patient and family-centered philosophy.
- Some minor word smithing is being recommended to the Values of *Accountability* and *Engagement*. The Committee felt there needed reference to achieving the Mission, rather than goals; the Value of *Engagement* speaks to working together with commitment, honesty and integrity rather than “through”.

There are no recommendations for change to the Mission or the five Strategic Areas – Quality Care & Safety, Partnerships & Collaboration, Education & Innovation, People, and Sustainable Future.

In addition, it was explained that within this review process it became apparent that there was confusion with regards to the Strategic Plan logo and the Corporate logo. The Committee is recommending that the Strategic Plan logo be revised to reduce this reduce confusion.

Also included in the information was a detailed action plan to complete the Strategic Objectives, Strategic Goals and Annual Operational Initiatives. This work will be completed in phases, brought before the Board for approval at the end of each phase. The new Strategic Plan for 2015-2018 is being recommended to commence April 1, 2015 in order to align the Strategic Plan with the fiscal year.

It was moved, seconded and carried THAT upon the recommendation of the Strategic Planning Committee, the Board of Directors approve the following revisions to the Vision and Values:

Vision: Outstanding Care – Patient & Family Centred

Accountability: Accepting personal responsibility for achieving our goalsMission

Engagement: Building strength and Working together with commitment, -through honesty and integrity.

AND FURTHER THAT the Board of Directors accept the proposed Action Plan to complete the development of a Strategic Plan for 2015 – 2018 to be implemented on April 1, 2015.

5.2 MASTER PROGRAM/MASTER PLAN

Evelyn Brown referred to the hard copy documents that were circulated at the meeting regarding the Long Range Capital Planning Process and the Master Program/Master Plan Update and explained that the documents have been developed to help clarify between the complete longer term process and MAHC’s current stage in the process which is the development of the Master Program/Master Plan. Also appended to the documents was a communications strategy which will be a working document and updated as the process proceeds. It was suggested that these documents be kept for reference. A suggestion was made and it was agreed that a Master Program/Master Plan specific page would be created on the secure Board portal. The timeline is on track to meet the target of having a Board approved Master Program/Master Plan document by December 2014. The draft Master Program was discussed briefly and clarifications were provided in terms emergency services volumes and transportation solutions. It was explained that the Emergency Planning group had robust conversations around best practice and there was significant rigor from front line staff and physicians to develop the projections.

6.0 ENDEAVOUR TO ENSURE FINANCIAL VIABILITY

6.1 AUDITED FINANCIAL STATEMENTS

Phil Matthews, Chair of the Audit Committee presented the highlights of the Financial Statement Review and Year-End Audit Report as pre-circulated and appended to the meeting package. It was noted that the surplus was achieved not solely through revenue and expenses but also was contributed to by balance sheet items. It was highlighted that the organization did not meet the requirements of the Working Funds Program; within discussions with the Auditors advice was provided in terms of achieving those targets in the coming year. It was also explained that the Audit Committee discussed the performance of the Audit firm and were satisfied with no issues or concerns. The remuneration will remain consistent with the past year.

It was moved, seconded and carried that the Board of Directors approve of the Audited Financial Statements for the year ending March 31, 2014 for presentation to the Members of the Corporation.

6.2 APPOINTMENT OF THE AUDITOR

It was moved, seconded and carried that the Board of Directors recommend to the Members of the Corporation the appointment of KPMG as the Corporate Auditors for the 2014-2015 fiscal year.

6.3 HOSPITAL SERVICES ACCOUNTABILITY AGREEMENT

Gregg Evans presented the Decision Support Document on behalf of the Resources Committee outlining the background of the Hospital Services Accountability Agreement and a recommendation from the Committee to provide the Board Chair and Chief Executive Officer authorization to sign an extension of the agreement, in principle. It is a legislative requirement that Local Health Integration Networks and Hospitals have a signed agreement in place in order for funding to flow; the current extension expires June 30, 2014. The Board was assured that should there be any substantive changes requested through the new extension, a special Board meeting will be called prior to sign off of the agreement.

It was moved, seconded and carried that the Board of Directors approve in principle the authorization of the Board Chair and Chief Executive Officer to sign an extension to the 2008-14 Hospital Services Accountability Agreement.

6.4 BROADER PUBLIC SECTOR ACCOUNTABILITY ACT - ANNUAL BOARD ATTESTATION

The annual Broader Public Sector Accountability Act Annual Attestation was pre-circulated and appended to the meeting package. The Chief Executive Officer has attested that the organization is in compliance with the requirements of the Act.

It was moved, seconded and carried the Broader Public Sector Accountability Act Annual Attestation be recommended for approval by the Board of Directors.

7.0 ENSURE BOARD EFFECTIVENESS

7.1 BOARD GOALS FOR 2014-2015

On behalf of the Executive Committee, Larry Saunders presented the draft Board Goals for 2014-2015 as pre-circulated with the meeting package. Further it was explained that subsequent to the Executive Committee developing these goals, a recent education session suggested a different perspective for the focus of Board goals in that the Board goals should internally focused on how to increase the strategic knowledge of the Board and board development as opposed to being operationally focused. The Chair opened the floor for discussion. Several suggestions were made including the following:

- Each board member attend one governance related session or read a report
- Understanding generative governance and how to operationalize that at the Board table
- A board development topic at each board meeting

It was requested that the Executive Committee have further discussion regarding the goals and bring back suggested revisions for Board consideration and approval.

7.2 BOARD RECOGNITION

Larry Saunders expressed sincere appreciation to departing Board members and presented Catherine King and Dr. Herr with a token of appreciation. It was explained that Eric Spinks will also be presented with a token of appreciation at a future date.

Evelyn Brown, on behalf of the Board recognized Larry Saunders for his Chairmanship over the past two years and presented Mr. Saunders with a token of appreciation.

8.0 MEETING TERMINATION

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



Charles Forret, Chair



Natalie Bubela, Secretary