

## MINUTES

March 14, 2013 at 5:30 p.m.  
Huntsville District Memorial Hospital Boardroom  
Approved April 11, 2013

**PRESENT:**

<i>Elected Directors:</i>	Larry Saunders	Catherine King	Charlie Forret	Gregg Evans
	Rick Durst	Joe Swiniarski	John Sinclair	Philip Matthews
	Bill Garriock			
<i>Ex-Officio Directors:</i>	Natalie Bubela	Bev McFarlane		
<i>Executive Support:</i>	Tim Smith	Harold Featherston	Robert Hughes	Vivian Demian
<i>Staff Resource:</i>	Tammy Tkachuk			

**REGRETS:**

Evelyn Brown	Eric Spinks	Sven Miglin	Dr. Jan Goossens
Dr. A. MacLennan	Dr. Steven Herr		

**1.0 CALL TO ORDER**

The Chair, Larry Saunders called the meeting to order at 1730 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 MUSCULOSKELETAL INTEGRATION PROPOSAL**

Bev McFarlane provided Directors with an overview of the North Simcoe Muskoka Local Health Integration Network Musculoskeletal (MSK) Project. This project is a component of Care Connections and the integration proposal project has been under discussion for about three years. It is anticipated that a formal request for Board's to approve the integration will come forward in the next few months. The positive benefit for Muskoka Algonquin Healthcare will be around the common registry and equitable access for all patients in North Simcoe Muskoka. As well, the enhanced rehab services will be beneficial, further discussion is occurring currently to understand the impact of rehab of better.

It was further explained that the registry will be a 'real-time' registry of bed availability along with surgery and anaesthesia availability. In terms of the development of the registry, it was explained that Waypoint Mental Health Centre initially developed a registry for mental health as well as Complex Continuing Care. This same model will be used for the orthopaedic registry.

**2.0 CONSENT AGENDA**

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

- *Approval of the Minutes from February 14, 2013*
- *Receipt of the Quality & Patient Safety Committee Report*
- *Receipt of the Senior Leadership Team Report*

**3.0 PROGRAM QUALITY AND EFFECTIVENESS****3.1 PATIENT EXPERIENCE**

N. Bubela shared a letter of thanks from the spouse of a patient.

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

The report was received. Any questions were deferred to the next meeting given Dr. Goossens absence.

## **3.3 BALANCED SCORECARD FOR JANUARY 2013**

B. McFarlane reviewed the results of the Balanced Scorecard for January 2013 which include the Quality Improvement Plan and Patient Safety Plan indicators. Although in January the hand hygiene compliance results remained below target, it was reported that following the February audits the compliance rate is only 0.81% below target. There has been a 20% improvement in hand hygiene compliance in the 2012/13 year which is a significant achievement. In terms of medication reconciliation compliance, the February results showed a vast improvement with a 95% compliance rate at SMMH and 90% compliance rate at HDMH. It was explained that with the new Pharmacist lead in place there has been a renewed focus on medication reconciliation.

## **3.4 QUALITY IMPROVEMENT PLAN 2013-2014**

B. McFarlane reviewed the documents pre-circulated with the meeting package that included the 2012-13 progress report and the proposed metrics for the 2013-2014 Quality Improvement Plan. It was questioned if the Total Margin target is an effective financial goal. It was explained that the total margin refers to a balanced budget position which is a requirement annually. Discussion ensued with regards to potentially including the current ratio/capital deficit as a more meaningful target. T. Smith explained that MAHC has just agreed to participate in the capital relief program which will reduce the working capital deficit. In terms of management annual assessments it was explained that each manager is required to have annual goals that are linked to the Quality Improvement Plan. Further explanation was provided in terms of the 200 quality improvements; this indicator is an evolution of the process implemented previously whereby each department has at least three key performance indicators posted on Huddle Board. The new metric is an effort to implement a continuous quality improvement culture.

***It was moved, seconded and carried the 2013-2014 Quality Improvement Plan be approved for submission to Health Quality Ontario not later than April 1, 2013.***

## **4.0 REPORTS**

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

The Chair highlighted that the Huntsville Hospital Foundation Annual Gala is approaching and is scheduled to occur on April 13<sup>th</sup>; tickets can be purchased through the Foundation.

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

The report was received.

## **5.0 ENSURE EXCELLENT MANAGEMENT**

### **5.1 CEO PERSONAL BUSINESS COMMITMENTS FOR 2013-2014**

N. Bubela presented the updated business commitments and incorporated suggestions received at the January Board meeting. In terms of the absenteeism targets, these will be populated once the data is received from the Ontario Hospital Association. These goals are posted publicly on MAHC's website and are utilized to determine the risk portion of the CEO and Senior Leadership salary; the weighting is 50% Quality, 30% Financial and 20% Strategic.

***It was moved, seconded and carried that the 2013-2014 CEO Personal Business Commitments be approved.***

## **6.0 FOSTER RELATIONSHIPS**

### **6.1 SOUTH MUSKOKA HOSPITAL AUXILIARY REPORT**

The report was received. The Chair commended the Auxiliary for their efforts and diligence in volunteering and fund raising for the hospital.

## 7.0 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.*

  
Larry Saunders, Chair

  
Natalie Bubela, Secretary