

OPEN SESSION MINUTES

Thursday, May 14, 2015 at 5:30 p.m.
South Muskoka Memorial Hospital Boardroom
Approved June 11, 2015

PRESENT:

<i>Elected Directors:</i>	Charles Forret	Gregg Evans	Nicholas Popovich	Christine Featherstone
	Donna Denny	Brenda Gefucia	Joe Swiniarski	Phil Matthews
	Kevin King	Evelyn Brown	Cameron Renwick	Larry Saunders
<i>Ex-Officio Directors:</i>	Natalie Bubela (T)	Karen Fleming	Dr. Kersti Kents	Dr. Jan Goossens
	Dr. Jennifer Macmillan			
<i>Executive Support:</i>	Tim Smith	Harold Featherston	Robert Alldred-Hughes	
<i>Staff Resource:</i>	Tammy Tkachuk			
GUESTS:	Alison Brownlee, Metroland News			

1.0 CALL TO ORDER

With a quorum present, the Board Chair, Charles Forret 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 with the addition of a report from the Chief of Staff.

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

1.3 CHAIR'S REMARKS

The Chair acknowledged MAHC's physicians, nurses, physiotherapists and speech pathologists in recognition of Ontario Doctors Day May 1st, National Nurses Week May 11-17 and National Physiotherapy and Speech month. On behalf of the Board, gratitude and thanks were expressed for the life-saving and life-changing work they do every day. K. Fleming shared a video of staff celebrating the week.

Included in the Board package for information was notice from the Huntsville Hospital Auxiliary with respect to the installation of their new Executive.

The Chair referred Directors to the report of the Quality and Patient Safety Committee and noted that the Committee has now completed an in depth review of the results of the physician engagement survey; it was highlighted that the 19% rating of physician trust equated to seven physicians. Further comment was made with respect to many of the percentages in the report represented very few people. It was noted that 100% of the survey respondents did express satisfaction with their nursing colleagues. Board members were encouraged to review the full report to gain further context.

Board members were informed of a review conducted by the Governance Committee with respect to elected representatives as excluded persons within the MAHC Bylaw. The result of this review reflects that MAHC is current with its practices. In addition, an Auditor General report was also identified as further indication that the practice at MAHC is consistent with industry trends. The full report will be circulated to Board members.

The Chair explained that a decision was made to hold a special meeting of the Board to consider the recommendation of Master Program/Master Plan Steering Committee for the preferred model of health care service delivery for the future – the year 2030 and beyond as the decision was far too important to be considered alongside regular Board business. Board members were encouraged to review the feedback that has been collated to date.

1.4 GOMED (CERNER) PROJECT IMPLEMENTATION

Further to the technical update provided at the Resources Committee, Tim Smith provided an overview of the progress of the project. The go-live date is set for June 15, 2015. The project is progressing very well and the support received from the Grey Bruce team has been outstanding. Planning is underway for as many of Grey Bruce staff as possible to be on site for the first week of go live to provide extra support. All areas of the Hospital will be up staffed. Generally there are no significant concerns with the exception of Pharmacy. It was confirmed that quality assurance testing is ongoing; the Team is running various scenarios to identify issues and develop solutions or work arounds.

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 April 9, 2015*
- 2.2 Receipt of the Quality & Patient Safety Committee Report of April 30, 2015*
- 2.3 Receipt of the Patient Relations Quarterly Report*
- 2.4 Receipt of the Governance Committee Report of April 29, 2015*
- 2.5 Approval of the revised Community Engagement Framework*
- 2.6 Approval of the revisions to Role Description – Committee Chair Policy #GOV-2-50*
- 2.7 Receipt of the Executive Committee Report of May 6, 2015*

3.0 ENSURE PROGRAM QUALITY & EFFECTIVENESS

3.2 BALANCED SCORECARD REPORT

Evelyn Brown and Karen Fleming presented the new format for the Balanced Scorecard explaining that it will be in a colour trifecta approach utilizing green, yellow and red visual cues. The format is similar to how Cancer Care Ontario manages metrics. Once a quarter is completed, it will be rolled up and display as Q1 and at that time the next quarter will be expanded to show monthly results. As well, additional information with respect to the objective and methodology will also be available. The control charts will remain in place as previously presented. A third component to the new scorecard will be a balanced scorecard map reflective of MAHC's branding and identifying the top areas of focus. A question was asked with respect to the map and if the intent is to rotate what is being reported should an initiative be consistently meeting target. It was explained that should that situation occur a conversation will need to occur to decide if the reported metric should be replaced. A suggestion was also made to post the department specific information in a visible area. Although the intent of the report was to report a corporate perspective, this will be considered with the Quality & Patient Safety Committee. It was also noted that each individual department will soon begin receiving their own Infection Prevention and Control reports.

It was moved, seconded and carried that upon the recommendation of the Quality & Patient Safety Committee, the new Balanced Scorecard format be approved.

4.0 REPORTS

4.1 REPORT OF THE CHIEF EXECUTIVE OFFICER

A copy of the May Report of the Chief Executive Officer was pre-circulated and appended to the agenda package for information. N. Bubela reviewed the information and confirmed that the Expression of Interest process related to Integrated Stroke Funding has been ongoing for two years. Any discussions with respect to cross LHIN patients would occur between the North Simcoe Muskoka and North East Local Health Integration Networks.

4.2 REPORT OF THE CHIEF OF STAFF

A copy of the report of the Chief of Staff and Medical Advisory Committee was pre-circulated and appended to the meeting package for information. Dr. Goossens highlighted the formation of the Maternal/Newborn Quality Assurance Committee and explained that the formation of the Committee was in part a result of the work related to the MORE^{OB} program. It was confirmed that midwives and nursing will have representation on the Committee. In response to a

request for more information related to the reports from the MAC Sub-Committees it was stated that the information is technical and would not come forward to the Board.

5.0 ENSURE BOARD EFFECTIVENESS

5.1 NOMINATIONS COMMITTEE UPDATE

Donna Denny, Nominations Committee Chair provided an overview of the nominations process and the factors considered as they have moved through to developing the slate of nominees. The Guidelines for the Nominations Committee as approved by the Board in the Fall was followed. As a result of the Expression of Interest process from current Board members, it was identified that two individuals did not wish to stand for reelection. At the same time, Larry Saunders also communicated his intent to resign from the Board as of June 22, 2015. From this information, the Committee identified the skills and experience as well as other factors to focus the process.

It was moved, seconded and carried that the resignation of Larry Saunders effective June 22, 2015 be accepted, with regret.

6.0 ADJOURNMENT

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



Charles Forret, Chair



Natalie Bubela, Secretary