

OPEN SESSION MINUTES

November 14, 2013 at 5:30 p.m.

Huntsville District Memorial Hospital Boardroom

Approved December 17, 2013

PRESENT:

<i>Elected Directors:</i>	Charlie Forret, Chair	Evelyn Brown	Philip Matthews	Eric Spinks
	Donna Denny	Christine Featherstone	Cameron Renwick	Joe Swiniarski
	Catherine King	Kevin King		
<i>Ex-Officio Directors:</i>	Dr. Jan Goossens	Dr. Steven Herr	Bev McFarlane	
<i>Executive Support:</i>	Tim Smith	Vivian Demian	Harold Featherston	
<i>Resources:</i>	Tammy Tkachuk			
<u>REGRETS:</u>	Larry Saunders	Gregg Evans	Natalie Bubela	Dr. K. Kents
	Robert Alldred-Hughes			

1.0 CALL TO ORDER

With a quorum present, the Chair, Charlie Forret 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 EDUCATION: HEALTH LINKS IN MUSKOKA

V. Demian provided the Board with an overview of the Muskoka Health Links project; how Health Links is intended to work, the partners involved, the goals as well as data related to Muskoka Algonquin Healthcare's high users. To date, the Ministry of Health and Long-term Care has funded 37 Health Links across the province. The government has committed \$1 million dollars to support the objective of improving care at a lower cost for the identified population. From the \$1 million, \$600K is put aside for technology advancements. The remaining funding for Muskoka is directed to the District of Muskoka who has been identified as the Project Lead. The District will direct the funding for programs and initiatives for the entire Muskoka Health Links. A business plan is in development and will be submitted in December 2013 to demonstrate how the project will achieve short and long-term goals. A question was raised as to how the Seniors Assessment and Support Outreach Program (SASOT) ties into this program. It was explained that all stakeholders have come together to develop a plan to develop a central intake system and streamline services. The benefit of the SASOT team is that go into the home to conduct the assessments and help the same population that Health Links is targeting. In response to a question with regards to the relationship with Muskoka Algonquin Healthcare's Master Program/Planning project, it was explained that the Health Links proposal is within a timeframe to provide a notional sense of its direction that will coincide with the timing of the Master Plan.

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 Minutes from October 10, 2013**
- 2.2 Receipt of the Governance Committee Report**
- 2.3 Approval of the Board Work Plan for 2013/14**
- 2.4 Approval of the Recognition of Board Service Policy**
- 2.5 Approval of the Rules of Procedure Policy**
- 2.6 Receipt of the Quality & Patient Safety Committee Report**
- 2.7 Receipt of the Patient Relations Report**

3.0 PROGRAM QUALITY AND EFFECTIVENESS

3.1 REPORT OF THE CHIEF OF STAFF/MEDICAL ADVISORY COMMITTEE

Further to the report pre-circulated and appended to the agenda, Dr. Jan Goossens shared with the Board information regarding a new partnership with the Trillium Gift of Life Network. The hope is that by implementing a formal program, the result will be an increase in the number of organ and tissue donors and the number of lives saved through donation. The partnership will provide the hospital with enhanced policies and procedures. Every unit, organization wide, will be required to notify the Network when patients meet the referral indicators for high risk of imminent death and within an hour of death. Notification to the Network triggers an algorithm that leads to a core team of physicians and allied health professionals from the Network having discussions with the family directly about donation. From this point on, the Trillium Gift of Life Network Team coordinates the donation through a 'Recovery Team'. This practice has proven successful in helping to increase organ and tissue donation.

3.2 BALANCED SCORECARD

Bev McFarlane reviewed the results of the Balanced Scorecard as pre-circulated and appended to the meeting package. Highlighted from the report were the remedial actions to address the Emergency Department Wait Times, the increase in Alternate Level of Care numbers, readmission rate for COPD and the hospital acquired infection rates. It was clarified that the increase in C-Difficile is related to antibiotic use; additional education is planned regarding antibiotic stewardship and guiding standardization.

3.3 UTILIZATION REPORT

Tim Smith reviewed the Utilization Report as pre-circulated and appended to the meeting package. Of note were the differences between sites in the Alternate Level of Care levels. It was explained that with these high levels, patient flow is seriously impacted. Comprehensive review of every ALC patient is occurring daily.

3.4 QUALITY BASED PROCEDURE REPORT

The Quality Based Procedure Report was reviewed and provided an overview of the activity data related to applicable Quality Based Procedures and the related financial data. The Board was reminded that the Ministry of Health and Long-Term Care removed the funding at the average rate and then reimburses the Hospital at that rate per procedure conducted. It was noted that the Hospital has little control over these volumes as they are not elective procedures. The volumes are based on past performance.

4.0 REPORTS

4.1 REPORT OF THE BOARD CHAIR

Charlie Forret noted that there were four groups celebrating their Professional Recognition weeks during November - Health Records, Information Technology, Ultrasound & MRTs and Diabetes Education. Appreciation was expressed to each of these groups for their daily contribution to achieving a vision of Outstanding Care, People Focused.

Board Members were reminded that Christmas Party tickets are still available.

In respect of National Philanthropy Day on November 15th, C. Forret recognized and thanked all Hospital donors for their continued support and as well the Foundations.

The trend continues with terrific Hand Hygiene results for October marking the seventh consecutive months with above target compliance rates in the "before" component! Of note, the SMMH Site scored 100% in the "before" compliance in all areas for the month. This is terrific work and congratulations to all staff, physicians and volunteers for driving significant improvement and sustaining the results.

On November 7th the Government announced that a unanimous motion was passed in the legislature to conduct a comprehensive review of the Local Health System Integration Act. The Standing Committee on Social Policy will review the decision making process at the Local Health Integration Networks and whether local representation,

accountability and transparency are incorporated into the process and if not how and where these can be better achieved. The Committee has a year to complete the review and make any recommendation of amendments to the Act.

The chair provided a brief overview of the North Simcoe Muskoka LHIN Board Advance held on Tuesday, October 29th that was attended by the Chair and Natalie Bubela. It was an enlightening event from the standpoint of hearing how Care Connections is working. Muskoka Algonquin Healthcare was invited to present three cases of how MAHC has benefited from working with partners. There was also a speaker on designing and creating the 'second curve' for health care. There is to be a paradigm shift in health care that will be seen through Care Connections, driven by quality, continuum of care and will be ongoing.

A copy of a report Financial Literacy for Hospital Board Directors Course was pre-circulated and appended to the meeting package. Cameron Renwick spoke to the report and noted that a benefit of the course were the best practice information for finance and Audit Committees. Within a question period arising from a question was the notion of 'ought to know' and the need for Board members to make it your duty to ask questions of Chief Financial Officers.

4.2 REPORT OF THE CHIEF EXECUTIVE OFFICER

The report of the Chief Executive Officer was pre-circulated and appended to the agenda package. Tim Smith spoke to the report on behalf of Natalie Bubela and highlighted that the organization has received Hospital Infrastructure Renewal Funding of \$233K; this is a decrease from previous years and is indicative of provincial funding levels. The criteria to qualify for the funding are very specific and based on prescribed scoring system. Also of note was a proposal from the District with regards to the establishment of Nurse Practitioner Clinics; Muskoka Algonquin Healthcare has agreed to work with them in the development of the proposal. No details are available at this time.

4.3 REPORT OF THE PRESIDENT OF THE MEDICAL STAFF ASSOCIATION

Dr. Steven Herr had nothing to report at this time but thanked the Chair for the opportunity and explained that the intent of the report will be to convey to the Board the pulse of the medical staff. Work is underway to develop an online survey for physicians.

5.0 FOSTER RELATIONSHIPS

5.1 HDMH FOUNDATION DONOR RECOGNITION POLICY

Harold Featherston spoke to the HDMH Foundation Donor Recognition Policy as pre-circulated and appended to the meeting package. The policy was created by Foundation staff with support from the Senior Leadership Team. In addition, the SMH Foundation was also engaged in the process to ensure alignment. The Board received the policy and there were no concerns raised. It was suggested that the Board Chair send a letter of appreciation to the Foundation for working with the SMH Foundation in its development.

6.0 IN-CAMERA SESSION

It was moved, seconded and carried that the meeting be terminated.


Larry Saunders, Chair


Natalie Bubela, Secretary