



OPEN SESSION MINUTES

Thursday, October 13, 2016 at 5:30 p.m.
South Muskoka Memorial Hospital Boardroom
Approved November 10, 2016

Elected Directors:	Evelyn Brown	Philip Matthews	Brenda Gefucia	Frank Arnone
	Cameron Renwick	Ross Maund (T)	Dave Wilkin	Beth Goodhew
	Moreen Miller	Michael Walters	Rhonda Lawson	Christine Featherstone
Ex-Officio Directors:	Natalie Bubela (T)	Dr. Dave McLinden	Karen Fleming	Dr. Paulette Burns
	Dr. Jan Goossens			
Executive Support:	Tim Smith	Esther Millar	Harold Featherston	Robert Alldred-Hughes
Resources:	Tammy Tkachuk			

(T) denotes participation via teleconference

1.0 CALL TO ORDER

With a quorum present, the Board Chair, Evelyn Brown called the meeting to order at 5:33 pm.

1.1 APPROVAL OF AGENDA

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

1.2 NEW DIRECTOR WELCOME & INTRODUCTION

Evelyn Brown asked each of the Mentors to introduce the new Directors. Brenda Gefucia introduced Moreen Miller. Dave Wilkin introduced Rhonda Lawson. Frank Arnone introduced Beth Goodhew. Christine Featherstone introduced Michael Walters.

1.3 DECLARATION OF CONFLICT OF INTEREST

Directors 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.

1.4 HEALTH CARE GOVERNANCE & LEADERSHIP SUMMIT

Evelyn Brown and Natalie Bubela provided Directors with an overview of the learnings obtained from attending the Ontario Hospital Association's Health Care Governance and Leadership Summit September 7 -9, 2016. The reported benefits of attending the conference included learning from experts on the current and potential changes in healthcare, their impact on governance as well as networking with board members from other hospitals. The topics highlighted in the presentation included health care reform, governance in a patients first environment, cyber security, medical assistance in dying and maintaining integrity and accountability in governance. All presentation material is available for Directors on the board portal.

1.5 CHAIR'S REMARKS

Evelyn Brown informed the Board of the various outreach activities the Board Chair has taken part in over the past month including the Foundation Radiothons, meeting with each of the hospital auxiliary chairs to express gratitude for all the hours the volunteers provide to our patients and staff, the staff Long Service Awards, the SMMH Awards Ceremony and the HDMH Auxiliary Fall House Tour. The second meeting of the acute care hospitals hosted by the LHIN occurred in September and was attended by the Chair as well as Phil Matthews. It was reported that the meeting was more informative and hearing about some of the initiatives undertaken and hot issues arising at other hospitals led to very robust discussion. A third meeting of this group is planned for early December with the focus on more regional issues; a full report will be provided following the meeting. The Chair and CEO have now met with all

media outlets from across Muskoka. Community outreach will now be focused on community leaders. It was reported that Phil Matthews has been appointed to the Executive Council of MAHST; congratulations were extended. Allyson Snelling was recognized for providing media training as well as the publication of the Community Health Bulletin. Encouraged Board members to obtain tickets for the November 26th Christmas Party.

2.0 CONSENT AGENDA

A question was raised with respect to Agenda item 2.11 – Chief of Staff Position description. It was noted that the Demands of Position has a formatting error as the section should be completed and tailored. It was confirmed that the demands would be similar to that of the Chief Executive Officer.

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 September 15, 2016

2.2 Receipt of the Resources Committee Report of September 23, 2016

2.3 Approval of the Resources Committee Terms of Reference

2.4 Approval of the Resources Committee Work Plan

2.5 Receipt of the Compliance Report as at August 31, 2016

2.6 Receipt of the Executive Committee Report of September 26, 2016

2.7 Approval of the Executive Committee Terms of Reference

2.8 Approval of the Executive Committee Work Plan

2.9 Approval of the Freedom of Information Delegation of Authority

2.10 Approval of the CEO Position Description Revisions

2.11 Approval of the Chief of Staff Position Description Revisions

3.0 ENSURE PROGRAM QUALITY & EFFECTIVENESS

3.1 PATIENT STORY

Karen Fleming shared a follow up to a patient story initially shared with the Board in late winter. The experience highlighted the challenges that can occur in successfully transitioning alternate level of care patients home and that there are often complexities involved that need careful planning to ensure patients are transitioned safely to the right environment. In response to a question from the floor it was explained that patient stories are shared with the Board monthly to provide a richer understanding of the hospital environment and help achieve a continual focus on patients, quality care and safety.

3.2 REPORT OF THE CHIEF OF STAFF & MEDICAL ADVISORY COMMITTEE

Dr. Jan Goossens presented the October report of the Medical Advisory Committee and provided a brief overview of the role and responsibilities of the Medical Advisory Committee. It was also highlighted that a physician task force will be developed to focus on physician engagement. There were no questions arising from the report.

4.0 ENDEAVOUR TO ENSURE FINANCIAL VIABILITY

4.1 FINANCIAL RESULTS

Brenda Gefucia presented the financial results and explained that the Resources Committee has revamped the report to the Board. The Committee received a more details set of information and data to enable them to drill down into the variances, and have developed a summary report for the Board. The approach is to help understand the volume and rate drivers between the revenue and expense lines. The summarized items as pre-circulated with the meeting package were reviewed. A question was raised with respect to the line of credit and it was explained that different options are under consideration such as an interest free loan from the NSM LHIN; the issue is that the organization will not require the loan until January and within the NSM LHIN model, the loan would need to be repaid in February. Discussions for assistance are also occurring with the organization's bank.

It was moved, seconded and carried that the Financial Statements for the period ending August 31, 2016 be approved.

4.2 HOSPITAL SERVICES ACCOUNTABILITY AGREEMENT

Brenda Gefucia explained that the original Hospital Services Accountability Agreement (HSAA) was initially signed in 2008 and since that time has been extended several times. The current extension is to the end of the current fiscal

year, March 31, 2017. This approach to extending the HSAA is uniform across the province. Legally the LHINs must have a signed funding agreement in order to flow funding to health service providers. The Ministry of Health and Long Term Care has been working on developing a new template for all hospitals and until that work is complete, the extensions will likely continue. The volumes included in the agreement are based on prior year volumes and provide wide corridors for health service providers to meet those volumes. Some metrics are set by the Ministry with no ability for health service providers to negotiate. It was confirmed that staff do not have concerns with meeting the included volumes and metrics. It was also confirmed that upon receipt of the agreement, the deliverables are shared for feedback and input at the clinical level. The requirement to have a balanced budget remains; for organizations that cannot meet a balanced budget, a Hospital Improvement Plan is required and MAHC has met this submission requirement. It will be important to have a signed agreement to ensure the discussions with the NSM LHIN are focused on this issues requiring addressing as opposed to the specifics of the agreement.

It was moved, seconded and carried that the that the Board of Directors approve the Hospital Services Accountability Amending Agreement Extension to March 31, 2017, and that the Board Chair and CEO be authorized to sign the extension.

4.3 ENTERPRISE RISK MANAGEMENT PROGRAM

Brenda Gefucia presented the decision support document outlining the recommendation to move to the HIROC integrated risk management system. The Resources Committee made the recommendation as it provides a risk register and is based on best practices in enterprise risk management. The system is also available to MAHC at no charge given the organization is a member of HIROC. The Resources Committee received additional detail on the program and was very comfortable that it is a positive step in enterprise risk management. A concern was raised around potential risk of conflict of interest with HIROC being the insurer and increased premiums. It was noted that MAHC also takes part in HIROC's risk self-assessment process and received a reduction in premiums.

It was moved, seconded and carried that the Board of Directors approve the implementation of the HIROC Integrated Risk Management Program.

5.0 PROVIDE FOR EXCELLENT MANAGEMENT

5.1 CEO PERSONAL BUSINESS COMMITMENT STATUS REPORT

Evelyn Brown explained that the Falls and Medication Reconciliation goals were established prior to the Quality Improvement Plan being finalized. The recommended revision will align the CEO commitments with the Quality Improvement Plan. There were no questions arising from the floor.

It was moved, seconded and carried that the Board of Directors approve the revisions to the Falls and Medication Reconciliation CEO Goals to be consistent with the goals in the Quality Improvement Plan.

6.0 REPORTS

6.1 REPORT OF THE CHIEF EXECUTIVE OFFICER

The October report of the Chief Executive Officer was received for information. It was clarified that the organization has not received any formal notification directly from Booth Centennial with respect to the transfer to Ecotex and Fengate. The contract with MAHC is not expiring in the near future and there have been no guarantees with respect to price increases as a result of the transfer.

7.0 ADJOURNMENT

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



Evelyn Brown, Chair



Natalie Bubela, Secretary