

## OPEN SESSION MINUTES

September 12, 2013 at 5:30 p.m.  
Huntsville District Memorial Hospital Boardroom  
Approved October 10, 2013

---

**PRESENT:**

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

---

**REGRETS:**

Philip Matthews	Vivian Demian	Harold Featherston
-----------------	---------------	--------------------

---

**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 QUALITY BASED PROCEDURES AT MAHC**

B. McFarlane presented information related to Quality Based Procedures and the impact on Muskoka Algonquin Healthcare. Quality based procedures (QBP) are a key driver of the new patient based funding methodology in Ontario and Hospitals will need to implement best-practices in order to meet QBP quality benchmarks and provide care within the new cost per case funding methodology which has been set at the 40th percentile. "Tool kits" or clinical handbooks have been developed by expert provincial working groups which explain the evidence-based expectations of care; MAHC is continuing with this expert working group model and initially focusing on Congestive Heart Failure (CHF) and Chronic obstructive pulmonary disease (COPD). As further case mix groups are involved in QBP funding, this working group model will be extended to those. It was explained that medical staff are beginning to accept the new model and emphasis continues to be that it is about better patient care. It was further explained that there is new terminology; a glossary of terms is available. Discussion ensued with regards to keeping the Board abreast of progress and it was explained that there will be additional reports generated that will be matched to costs and shared with the Board at least quarterly.

**2.0 CONSENT AGENDA**

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

- *Approval of the Minutes from June 13, 2013*
- *Approval of the Minutes from June 24, 2013*
- *Receipt of the Quality & Patient Safety Committee Report*
- *Approval of the Quality & Patient Safety Committee Terms of Reference*
- *Approval of the Quality & Patient Safety Committee Work Plan*
- *Receipt of the Patient Relations Report, Q1 2013-2014*

## **3.0 PROGRAM QUALITY AND EFFECTIVENESS**

### **3.1 QUALITY MATTERS - PATIENT EXPERIENCE**

B. McFarlane explained that the members of the 1963 graduating class of nurses from Toronto General Hospital were at the SMMH Site for their 60<sup>th</sup> anniversary and received a tour. The group expressed how impressed they were with the Hospital and made a donation to the Foundation.

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

Dr. Jan Goossens acknowledged members of medical staff and congratulated Dr. Herr who is now the President of the Medical Staff Association and Dr. Kents, Vice-President and Dr. MacMillan the member at large. Dr. Goossens also acknowledge the passing of Dr. Gordon Riddle. The medical staff will be making a donation in his memory. It was reported that work continues on updating the Rules and Regulations.

### **3.3 BALANCED SCORECARD REPORT**

B. McFarlane reviewed the scorecard and focused on the metrics not meeting target. It was explained the Emergency Department target is an aggressive target set through the Pay For Results program. There continues to be much focus on Alternate Level of Care (ALC) patients, and the team is reviewing all ALC to Long-Term Care with the Community Access Centre to explore other possibilities. The Medication Reconciliation is just below target although it was noted that has been a vast improvement from the previous year.

### **3.4 UTILIZATIONS REPORTS**

A series of graphs tracking utilization was pre-circulated with the meeting package. It was explained that a snapshot of this data is circulated every morning across the organization. These reports will be provided to the Board monthly and additional reports will be added. The intent is to ensure that all are aware of the activity occurring within the Hospitals.

## **4.0 REPORTS**

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

The Chair welcomed the four new Board members to the first official meeting of the year - Christine Featherstone, Donna Denny, Cameron Renwick and Kevin King. Dr. Kersti Kents and Dr. Herr were also welcomed.

The Chair noted that over the summer months, there have been a number of different events from the Auxiliary Appreciation Dinners to various golf tournaments and fundraisers throughout the District. The Chair thanked all of the organizers for their continued support of Muskoka Algonquin Healthcare as well as all of the Board members who either volunteered to help at events or participated.

It was noted that September 9 - 13 is Healthcare Environmental Services Support week. The Chair extended sincere appreciation to all of Environmental Services staff for the work they do every day to ensure MAHC has a safe, clean environment for patients, visitors and staff.

It was announced that the Huntsville Auxiliary has been nominated for a Muskoka Award. The Board wished the Auxiliary all the best and agreed that they are a very deserving group and have made a significant difference to health care in our communities.

The Chair advised that the Huntsville Hospital Foundation has approved a request to provide support, up to \$100,000, for the renovation to the Medical Devices Reprocessing Department at the Huntsville Site.

Cameron Renwick provided a brief overview of a recent governance education event at the Governance Centre of Excellence. The synoptic review will be circulated to all members.

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

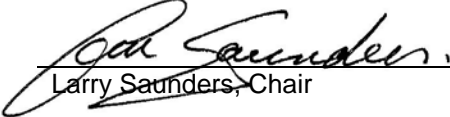
A copy of the September Report of the CEO was pre-circulated and appended to the agenda package for information. N. Bubela referenced the information related to the North Simcoe Muskoka Local Health Integration Network (NSM LHIN) Strategic Priorities and provided additional information. The NSM LHIN will be distributing

\$10.2 million of funding; \$6.9 million will be directed to the community sector to enhance programs such as Personal Support Workers, care in the home as well as re-launching the Home First program. Twenty convalescent beds will also be supported with \$1.8 million in the Barrie area, \$1 million for assisted living and \$0.5 million for seniors programs. The balance of \$700,000 will be utilized for other funding requests.

N. Bubela explained that for Staff Appreciation Week, the Team Building Committee has planned a number of activities as well as a staff barbeque. There will also public announcements recognizing staff on local radio throughout the week.

## 5.0 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