

NORTHUMBERLAND HILLS HOSPITAL

BOARD OF DIRECTORS

May 5, 2011

5:00 pm - Boardroom

MINUTES

Present: J. Hudson, Chair; B. Carman; B. McInnes; J. Russell; J. Parravano; H. Pankratz; D. Broderick; J. Boycott; D. Mann; B. Gerber; K. Jackson; N. O'Nians; J. Farrell; L. Kaye; H. Sculthorpe; P. Fenner; R. Biron; A. Stratford;

Regrets: D. Pepper

Staff: E. Vosburgh, J. Gillard, H. Brenner, C. Turk

1. CALL TO ORDER

J. Hudson called the meeting to order at 5:00 pm.

2. EDUCATIONAL PRESENTATION

Pat Ryan, General Manager Hospital Diagnostic Imaging Repository (HDIRS) presented an overview of HDIRS and its role in improving patient care.

3. CONFLICT OF INTEREST

None

4. APPROVAL OF AGENDA

It was Moved by L. Kaye and Seconded by H. Pankratz that the agenda be approved as circulated. Carried

5. APPROVAL OF PREVIOUS MINUTES

It was Moved by J. Farrell and Seconded by N. O'Nians that the minutes of April 7, 2011 be approved as circulated. Carried.

6. CHAIR REMARKS

None.

7. CHIEF EXECUTIVE OFFICER'S REPORT

R. Biron provided an overview of the April 2011 CEO report that was pre-circulated to the Board.

- Health Quality Ontario (HQO), formerly the Ontario Health Quality Council (OHQC) has been established to coordinate and strengthen the use of evidence based practice initiatives, support quality improvement and continue to monitor and publicly report on health system outcomes.
- Conversations Speakers' Series wraps up on May 10th with Graham Scott and Maureen Quigley speaking about hospital governance in Ontario and the changing role of local boards. This topic is very relevant to the Board Directors and J. Hudson encouraged all members to attend.
- Dr. Walker has been appointed as Provincial lead for ALC Strategy in Ontario and recently visited the organization. April data shows NHH's ALC rate at 7.1%,

substantially beating our target percentage. Congratulations to H. Brenner and the entire team for all their hard work in this area.

8. CHIEF OF STAFF'S REPORT

D. Broderick reviewed a motion for staff appointments that was precirculated to the Board.

It was moved by J. Farrell and Seconded by B. McInnes that the Board approve the following physicians for Courtest privileges:

Dr. David Swales - Radiology

Dr. David Ng – ED-HFO

Dr. Brenneman – One Day Preceptorship Surgical Privileges

Carried

D. Broderick reviewed a motion for re-appointments for existing staff, noting that most remaining re-appointments are waiting for vaccination results.

It was moved by L. Kaye and Seconded by J. Russell that the Board approve the following physicians for re-appointment

Active/Associate/Locum:

Dr(s) Azzopardi, Barrie, Caldwell, Collins, Daskalopoulos, Hassard, Haukioja, Haunts, Hazell, Jones, Krishnan, Kwok, F. Marrocco, P. Marrocco, J. Parravano, Pepper, Routh, Taylor, Sobowale, P. Stratford, A. Tesluk, R. Tesluk, P. Woodward and R. Woodward

Carried

D. Broderick reviewed a motion for re-appointments for courtesy privileges.

It was moved H. Pankratz and Seconded by H. Sculthorpe that the Board approve the following physicians for re-appointment – Courtesy privileges:

Dr(s) J. Bayer, J. Beaubien, T. Cheung, Dahle, Doris, Fenton, Guy, P. Hughes, Kwan, Maher, Milroy, VanDusen and Zeiler

Carried

9. REPORTS FROM COMMITTEES

9.1 QUALITY AND SAFETY COMMITTEE

K. Jackson provided overview of minutes from the Quality and Safety Committee. The Medical Advisory Committee will report directly to the Quality and Safety Committee, with exception of physician credentialing. The Committee reviewed the recent train derailment which initiated a stage 1 Code Orange at NHH. Discussions continue with the County, Town and EMS regarding communications with the hospital.

The Committee members held a follow-up meeting to review material from the Effective Governance in Quality and Safety conference attended in March.

As part of the Committee's human interface goal, a patient case study was presented by J. Clarke, Director, Interprofessional and Ethical Practice.

9.2 GOVERNANCE COMMITTEE

B. Gerber provided overview of minutes from the Governance Committee. Hospital By-law reviews were undertaken over several months. Revised By-laws were pre-circulated to the Board and a motion was presented. J. Russell noted that section 8.04(b) requires clerical amendment to remove first instance of “by” – By-law to be corrected.

WHEREAS section 2(1) of Regulation 965 of the *Public Hospitals Act* (Ontario) requires that the Chief Executive Officer, Chief of Staff, President and Vice President of the Medical Staff Association, and Chief Nursing Executive be ex-officio non-voting members of the Board;

AND WHEREAS the Board wishes to amend the by-law of the Corporation to ensure compliance with the *Public Hospitals Act* (Ontario);

AND WHEREAS the Governance Committee of the Board reviewed additional matters that require proposed changes to the by-law as described in its minutes;

AND WHEREAS pursuant to section 29.01 of the existing by-law, the amendments shall have full force and effect upon being approved by the Board and that the amendments be presented to the members of the Corporation at a meeting duly called for confirmation;

It was moved by B. Gerber and Seconded by J. Russell that the Board approve the following:

- a. The by-law of the Corporation be amended to reflect all of the additions, deletions and changes indicated in the blacklined version annexed hereto, which has been marked to show all proposed additions, deletions and changes to the by-law.
- b. Subject to confirmation by the members of the Corporation, the revised by-law, a copy of which was directed to be inserted in the by-law section of the minute book, be hereby made as a by-law of the Corporation.
- c. The proposed amendments to the by-law be submitted to the members of the Corporation at the next annual meeting, or a special meeting of the members duly called for that purpose, for confirmation.

B. Gerber outlined a review of three Board policies that were recommended for deletion as these policies contents are covered within the legislation and hospital By-laws.

It was moved by B. Gerber and Seconded by B. McInnes that the Board approve to delete the following Board policies:

IV-002 Personnel
IV-003 Confidentiality
IV-005 Board Committees

Carried

9.3 FINANCE AND AUDIT COMMITTEE

B. McInnes presented the Finance and Audit Committee report. Board policies III-001 Budget Preparation and Monitoring and III-002 Capital Funding and Expenditures were pre-circulated to the Board. III-001 was revised and determined relevant as the MOHLTC and LHIN mandate the preparation of

operating and capital plans. III-002 was revised to reflect change in threshold, inclusion of a contingency, and a separate clause for emergency items.

It was Moved by B. McInnes and Seconded by N. O’Nians that the Board approve the following policies as presented:

III-001 Budget Preparation and Monitoring

III-002 Capital Funding and Expenditures

Carried

The 2010/11 draft financial statements were reviewed prior to release to the external auditors. The 2010/11 Audited financial statements will be recommended for approval to the Board after review by the Finance and Audit Committee.

It was Moved by B. McInnes and Seconded by J. Russell that the Board authorize the Chief Financial Officer to release the draft 2010/2011 Annual Financial Statements to the external auditors for their audit of the statements.

Carried

Four proposals were received in response to the RFP for Audit Services; briefing note was pre-circulated to the Board. The Evaluation team achieved consensus based on the evaluation and recommends re-appointment of KPMG for the provision of audit services for 2011/2012 to 2015/2016.

It was moved by B. McInnes and Seconded by H. Sculthorpe that the Board approve executing a five-year contract with KPMG for the provision of audit services commencing 2011/2012, subject to annual Board review and Hospital membership appointment at the Annual General Meeting.

Carried

9.4 FACILITIES AND CAMPUS DEVELOPMENT COMMITTEE

J. Russell presented the Facilities and Campus Development Committee report. The Committee has completed site visits of Life Lease campuses and will move forward with an RFP for consultants to assist with market feasibility study and conceptual design. The initial cost estimate for the Medical Office Building has been received, further review by the Committee is needed. The draft report of the Economic Impact Analysis has been received from Queen’s Business Consulting; revisions are required.

The Committee heard from VIP Energy on the Energy Audit report completed for NHH. The presentation highlighted energy saving opportunities for the hospital.

10. FOUNDATION REPORT

J. Boycott presented the Foundation report. Northumberland’s biggest coffee morning is scheduled for June 8th. This year’s event is in memory of two donors to the hospital and the Foundation has set a goal for 100 coffee parties that day. The Behind the Scenes tour is scheduled for May 17th at 7pm; this year’s tour will highlight the laboratory department and the new Restorative Care unit. Donor and Volunteer appreciation event will take place on June 9th from 4-6pm in the hospital bistro and courtyard.

The Foundation has completed development of the five year strategic plan and budget. This is an aggressive plan and the Foundation would welcome the opportunity to share with the hospital Board.

11. AUXILIARY REPORT

P. Fenner presented the Auxiliary report. The first Auxiliary Bowling for Bucks was a fun event for all volunteers in attendance. Twenty five bowlers took part and raised over \$5100 in pledges. The Auxiliary Wine Tasting event is June 29th at 7:00pm at the Lions tent; tickets are available at the Little Treasure Shop and Petticoat Lane.

The Auxiliary Annual General Meeting is on May 17th. The Dixie Mikel award is being presented to a student volunteer. The meeting will have an educational session on Elder Care which is very relevant to our hospital volunteers.

**It was Moved by J. Russell and Seconded by H. Pankratz that all reports be received.
Carried**

12. OTHER BUSINESS

None.

13. FOR INFORMATION/CORRESPONDENCE

None

14. QUESTIONS AND COMMENTS

None

15. IN CAMERA

The meeting moved to in-camera at 6:06 pm on a motion by N. O'Nians and seconded by D. Mann.

The in-camera meeting addressed matters relating to capital budget and physician recruitment.

16. NEXT MEETING

June 2, 2011

17. TERMINATION OF MEETING

The meeting terminated at 7:02pm on a motion by J. Russell.