# NORTHUMBERLAND HILLS HOSPITAL

# **BOARD OF DIRECTORS**

February 6, 2014 Boardroom

# **MINUTES**

Present: D. Mann, B. Carman, J. Hudson, C. Stewart, J. Russell, B. Gerber, E. Merbis,

M. Essak, C. Kwok, C. Tozer, H. Sculthorpe, L. Davis, D. Broderick, H. Brenner

Phone: T. Sears, J. Farrell

Regrets: B. Copland, G. Metson, B. Brook, D. Pepper,

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

#### 1. CALL TO ORDER

D. Mann called the meeting to order at 5:00 pm.

#### 2. EDUCATION SESSION

Dr. Haig Basmajian presented an overview of the physician credentialing process at Northumberland Hills Hospital.

#### 3. APPROVAL OF AGENDA

It was moved by B. Carman and Seconded by J. Hudson to approve the agenda as circulated. Carried.

### 4. APPROVAL OF PREVIOUS MINUTES

It was moved by C. Stewart and seconded by C. Tozer that the minutes of December 5, 2013 be approved as circulated. Carried.

# 5. CONFLICT OF INTEREST

None

#### 6. CHAIR REMARKS

D. Mann noted that B. Brook has given notice of her intention to resign from the Board of Directors following the June Annual General Meeting. The Board expressed their regrets for this news and D. Mann extended gratitude to B. Brook for her service on the Board. H. Sculthorpe, Chair of the Nominating Committee, was called upon to fill vacancy and plan for replacement for 1<sup>st</sup> Vice Chair position.

# 7. CEO REPORT

The Senior Management report was pre-circulated. H. Sculthorpe expressed congratulations on the staff engagement activities at the hospital.

L. Davis highlighted some of the items in the report and noted that due to the number of initiatives currently underway across the hospital, Senior Management will be reviewing the strategic plan with the goal to prioritize the objectives that will be acted upon in the coming year.

J. Hudson noted that the January In Touch article was well written and provided the community with the reality of the Hospital's financial challenges.

# 8. Chief of Staff Report

D. Broderick presented the report of the Credentials Committee. Two physicians have completed their credentials review and were recommended for appointments. C. Tozer recommended a standard Board motion be drafted for medical staff privileges approval.

It was Moved by C. Stewart and Seconded by J. Hudson to approve the following appointments:

- Dr. Emma Smith, Associate Family Medicine
- Dr. Kevin Shiffman, Courtesy Psychiatry

#### Carried.

#### 9. REPORTS

#### 9.1 Finance and Audit Committee

B. Gerber provided the report of the Finance and Audit Committee.

The Committee received a copy of a letter addressed to Anthony Dale at the OHA from L. Davis addressing the hospital concerns regarding the recently negotiated union settlements. Mr. Dale has requested a telephone call to discuss.

The contract for non-urgent patient transportation was brought to the Committee for review. The preferred vendor has been selected through an RFP process with Central Ontario Healthcare Procurement Alliance. The RFP was issued with the intent to leverage volumes to obtain best pricing and improve service levels. The selected vendor meets these expectations. Based on a sampling of invoices for current costs associated with non-urgent patient transportation, the new contract is anticipated to save approximately 1.6% per year.

It was Moved by B. Gerber and Seconded by J. Farrell to approve NHH to sign the agreement for a three year term which would expire on January 4, 2017 with an option to extend the term for an additional two terms of up to one year each with Voyageur Patient Transfer Services Inc. Carried.

A partnership with Lakeridge Health (LH) has been chosen as the preferred option for moving forward on a new Clinical Information System (CIS). NHH, Ross Memorial, Campbellford Memorial and Haliburton Highlands are in agreement to partner in the LH-led single, multi-facility CIS initiative. This initiative is strongly supported by the CE LHIN. A non-binding MOU has been drafted and refined outlining the joint selection, purchase, implementation and operation of a shared CIS to support the clinical operations of each hospital.

It was Moved by B. Gerber and Seconded by C. Stewart to approve NHH to sign a non-binding Memorandum of Understanding (MOU) to participate in the Lakeridge Health-led initiative to explore a joint CIS partnership. Carried.

The Foundation Capital campaign "Equipped to Care" will focus on major equipment requirements including cardiac and telemetry units. A complete review and prioritization of the hospital's capital needs for 2014/15 has been completed and the equipment needed is in line with the items identified in the Foundation campaign as priority.

The financial results ending December 31, 2013 show a net operating deficit of \$252,832 compared to a planned net operating deficit of \$148,820. Main pressures continue in staffing and supplies due to occupancy and acuity. Mitigation strategies are in process.

The Committee reviewed the requirement for a permanent increase in the bank operating line of credit. A temporary increase has been in place since September 2013 due to timing of payments from the CE LHIN and the MOHLTC. The permanent increase is required due to several contributing factors including timing of payroll obligations and LHIN funding dates which do not match.

It was Moved by B. Gerber and Seconded by J. Hudson to approve the bank operating line of credit be increased to \$4.5 million on a permanent basis, to be reviewed on an annual basis Carried.

The Committee reviewed the draft 2014-15 operating plan and outline of mitigation strategies to address the anticipated deficit. Several of the proposed mitigation strategies will also be implemented in the current fiscal year to address the 2013-14 operating deficit.

# 9.2 Governance Committee

J. Russell provided the report of the Governance Committee on behalf of T. Sears.

The Committee received an update on the integration planning process. The final proposal is in development with the inclusion of further detail on potential cost savings, union impact, and electronic data integration.

The Committee continues to follow the proposed changes to the not-for-profit legislation and will complete an initial review of Board specific documents such as the indemnity agreement.

The Chief of Staff Selection Committee has completed their due diligence in the selection process. Following a 360 review process on the incumbent Dr. David Broderick, the Selection Committee recommended the appointment of Dr. David Broderick for a three year term.

- D. Broderick has shared with the Selection Committee his vision and the activities he would undertake in a new term. The Selection Committee also noted that the Chief of Staff will be expected to provide mentoring and build leadership capacity within the NHH Medical Staff.
- D. Broderick was excused from the Board meeting prior to the presentation of a motion and discussion. The Board discussed succession planning for the Chief

of Staff position and the mandate of the CEO / COS Compensation Committee to review the goals and objectives for the positions.

It was Moved by J. Russell and Seconded by J. Hudson to appoint Dr. David Broderick as Chief of Staff for a three (3) year term commencing April 1, 2014. Carried.

D. Broderick returned to the meeting. D. Mann extended thanks to the members of the Selection Committee for completing their due diligence. The Selection Committee was discharged from duty.

The Committee reviewed physician communication concerns that were brought forward during the selection process for the Chief of Staff position. L. Davis suggested the implementation of a Joint Conference Committee with members from the Board of Directors, CEO, COS and Medical Advisory Committee. Draft terms of reference were circulated. The Board recommended one amendment to establish the Chair of the Committee as the Chair, Board of Directors. It was also suggested that the Committee be incorporated into the hospital By-laws.

It was Moved by J. Russell and Seconded by C. Stewart to establish the Joint Conference Committee with membership as outlined in the Terms of Reference. Carried.

# 9.3 Quality and Safety Committee

C. Stewart provided the report of the Quality and Safety Committee

The Committee received a presentation from the Director of Quality, M. Allan on the Infection Prevention and Control program which highlighted the key initiatives in ensuring safety for all patients and staff at the hospital.

An update on the C-section rate reduction initiatives was reviewed. The Committee also discussed the process of reporting critical incidents and requirements under the Excellent Care for All Act. A reminder of the privacy legislation was extended to the Board of Directors. Senior Management will be reviewing the current process of reporting critical incidents/sentinel events and making a recommendation to the Committee.

The second quarter Quality Improvement Plan and Quality Indicator Report updates were reviewed and the Committee discussed reporting times for critical incidents and incomplete charts.

## 9.4 Facilities and Campus Development Committee

J. Russell provided the report of the Facilities and Campus Development Committee.

The Committee continues discussions on revenue generating options for the hospital lands. A review of a community / medical development in King

Township was circulated to the Committee and various aspects were discussed for components that may be a good fit for the hospital and community.

Discussions continue on a possible joint development with the County and concerns of revenue loss if partnering with a private developer.

# 10. Foundation Report

D. Mann presented the Foundation Report on behalf of B. Copland.

The 2013 Light up a Life event was a success with \$126,000 raised. One anesthetic machine and two stretchers will be purchased with the proceeds.

The Foundation has raised \$1,531,472 to date and is currently in budget planning for 2014-15.

The Docs vs. Cops hockey tournament will be held in February and Linda Davis will be taking part in the game opening puck drop.

Northumberland's Biggest Coffee Morning is scheduled for June 11<sup>th</sup>.

## 11. Auxiliary Report

D. Mann provided the report of the Auxiliary on behalf of G. Metson.

The NHH Auxiliary has cancelled the February Polar Dip event due to the ice and snow at the waterfront. Discussions are underway for possible reschedule in the early spring.

Spring Fever this year will include a one-of-kind craft sale scheduled for May 24<sup>th</sup> at the Cobourg Community Centre.

The Auxiliary Annual General Meeting will be held in May and will feature a volunteer recognition.

It was Moved by B. Gerber and Seconded by H. Sculthorpe to receive all reports. Carried.

# 12. OTHER BUSINESS – Integration Update

12.1 Northumberland County Hospital and Community Health Services Integration

The Final Integration Plan was pre-circulated to the Board. L. Davis reviewed the details of the plan, highlighting recent changes. Community engagement through the CE LHIN website has closed with a small number of comments received. The final plan was made available to the public on the CE LHIN website on February 4<sup>th</sup>.

The Board queried on the financial implications of the integration plan. L. Davis noted that the plan is cost neutral; union concerns have been raised around the diabetes education partnership with Port Hope CHC. Questions were raised on feedback from the CE LHIN and L. Davis reported that the CE LHIN Board will be discussing the plan at their February 26<sup>th</sup> meeting. The IPT table has been clear in their messaging that the geography of the partners as well as the lack of some potential partners has made it

more challenging. There is a sense that the CE LHIN is supportive of the technology integration plans but had hoped for greater structural integration.

It was Moved by C. Stewart and Seconded by J. Hudson that Northumberland Hills Hospital approves the components of the Final Integration Plan, Hospital and Community Health Services Integration, Northumberland County, dated January 31, 2014 that pertain directly to our organization, and supports the overall Plan in principle. Carried.

C. Stewart queried on any issues during the December ice storm at the hospital. E. Vosburgh noted that there were not any extended power outages at the hospital that caused any issues. L. Davis extended gratitude to the staff and physicians for their support of the patients during that time period and to C. Turk for her two week stint in managing on behalf of the Senior team.

## 13. IN CAMERA

The meeting moved in-camera at 7:05 p.m. on a motion by J. Russell and seconded by J. Hudson.

The in-camera meeting addressed matters relating to the Hospital Service Accountability Agreement.

## 14. TERMINATION OF MEETING

The meeting was terminated at 8:35 pm on a motion from B. Gerber.