

NORTHUMBERLAND HILLS HOSPITAL BOARD OF DIRECTORS

**March 5, 2015
Boardroom**

MINUTES

Present:	J. Russell, Chair; J. Hudson, B. Carman (phone), T. McLean, M. Bhargava, L. Kay, B. Selby, C. Tozer, D. Mann (phone), B. Gerber, E. Merbis, C. Stewart, L. Davis, H. Brenner, A. Stratford, T. Sears (phone), D. Broderick
	P. Went, K. Hook, M. Parker, S. Olsen, J. Farrell (phone)
Regrets:	G. Metson

Staff:	E. Vosburgh, J. Gillard, C. Turk
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1. CALL TO ORDER

J. Russell called the meeting to order at 5:00 pm. M. Canfield was introduced and welcomed, filling in for S. Connell, on vacation, as Recording Secretary.

J. Gillard presented the Education Session – **"NHH Community Engagement Framework"**. L. Davis confirmed that the framework document will come before the Board at the next meeting for formal adoption; members will receive a copy in their package.

2. CONFLICT OF INTEREST

None declared.

3. APPROVAL OF AGENDA

It was Moved by L. Kay and Seconded by C. Tozer to approve the agenda as circulated. Carried.

4. APPROVAL OF PREVIOUS MINUTES

It was Moved by T. McLean and Seconded by C. Stewart that the minutes of February 5, 2015 be approved as circulated. Carried.

5. CHAIR REMARKS

J. Russell recognized and extended his personal gratitude to the NHH Senior Staff, Board and J. Hudson for the work and timely efforts put forth with respect to recent demands regarding the short-term improvement plan. He reiterated that although there is significant work ahead, the Board is confident that they have the right people at the table. J. Russell reported that following recent discussions with members of the medical staff, they are engaged and committed and actively working on solutions.

J. Russell reported on the upcoming PATH Summit scheduled March 10th in Toronto where Senior Staff and community patient advocates (RISE Team members) will be presenting on our Path project and individual patient experiences. This is a significant accomplishment and speaks volumes to the overall achievements and will provide

Provincial / National recognition of the PATH Project work.

6. SENIOR STAFF REPORT

L. Davis recognized and thanked Senior Staff for their efforts in meeting the challenges as presented while she was away on vacation.

She reported that the hospital once again was dealing with the challenges of another surge in patient volumes, with good efforts by the staff. She noted that with the processes now in place, the hospital is far better prepared to deal with these ongoing challenges. The fatigue and strain on the frontline staff was recognized.

L. Davis reported on continued strengthening of positive relations with Lakeridge Health in recent weeks in relation to the temporary provision of some chemotherapy at the Lakeridge Cancer Centre. NHH will be looking to repatriate patients back to NHH over the next several weeks.

L. Davis shared the Board Chair's recognition and comments with respect to the upcoming PATH Summit, adding that J. Russell is also a scheduled Guest Speaker at the Summit. It is hoped that this summit will assist with efforts in our PATH sustainability efforts.

L. Davis reported that members of the Senior Team continue to work closely with our LHIN with respect to the upcoming Operational Review.

NHH was recently informed that our hospital is in the Top 15 hospitals in our Province with respect to our Pay-For-Results performance, and as such, we have received requests to participate in surveys, sharing our successes.

NHH Value Ambassadors were recognized for their ongoing support and recent efforts focusing on raising awareness of cultural diversity within our community. As well, L. Kay recognized the Spirit Award to the NHH United Way Campaign Committee in response to their outstanding campaign efforts.

7. CHIEF OF STAFF REPORT

D. Broderick reported on recent discussions with his Department Chiefs with respect to engaging the medical staff to assist the hospital with financial challenges.

8. REPORTS

8.1 Finance and Audit Committee

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

Recent discussion centred around adopting a name change for this committee however following discussion the decision was made to maintain the current name.

The variance report for period ending January 31, 2015 was reviewed. Year to date, the hospital experienced a net operating deficit of \$63,435 compared to a planned net operating surplus of \$289,111. Main pressures relate to staffing, including unplanned capacity surges. The hospital continues to anticipate a

small surplus of \$34,000 at fiscal year-end; however, will be challenged to meet the Working Funds Deficit Initiative requirement.

8.2 Governance Committee

J. Hudson provided the report of the Governance Committee.

The committee met 26 February 2015 and the following three Motions were presented:

Approval of the FINAL Foundation Letter of Understanding

It was Moved by J. Hudson and Seconded by L. Kay to accept and approve the Foundation Letter of Understanding.
Carried.

Approval of the Revised Board Policy 1-001 Selection and Development Process for Board Officers

It was Moved by J. Hudson and Seconded by B. Selby to accept and approve the revised Board Policy 1-001 Selection and Development Process for Board Chairs.
Carried.

Approval of the Revised Board Policy 1-013 Community Members

It was Moved by J. Hudson and Seconded by C. Stewart to accept and approve the revised Board Policy 1-013 Community Members.
Carried.

L. Davis spoke briefly to the value to the organization of the added category in the revised Community Members policy regarding Advisors / Expert Resources, confirming that this would be an added value open to all Board Committees and Subcommittees.

8.3 Quality and Safety Committee

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

The Committee received education on Infection Prevention and Control, presented by Denise Kearsey, Infection Control Practitioner. The presentation highlighted the key priorities and goals of the program including patient and staff safety and reduced length of staff.

The Committee reviewed the Draft Quality Improvement Plan, noting that the final plan will be brought forward in March.

The Committee reviewed the Q3 Quality Indicator Report (2014-15) noting significant improvements. Of significance, Preventable Falls are now indicated separately within the narrative for the report.

The Committee discussed patient satisfaction results and expressed concerns with respect to access to real-time data regarding patient satisfaction. The Committee will be looking at ways to get in-house data on a more timely basis. There is dissatisfaction with the timelines of data via the NRC Picker / Canada.

D. Broderick reported on the recruitment of a third internist (Dr. Entisar Ben Issa) who will be establishing a rheumatology practice for community-based referrals and providing general internal medicine service support in the hospital. The addition of Dr. Ben Issa will enhance the closer-to-home delivery of this service as referrals are currently sent outside of our community. A communication strategy will roll-out within the next couple of weeks that will include referral information.

8.4 Nominating Committee

L. Kay provided the report of the Nominating Committee.

Recruitment advertisements for Director and Community Members for the Board will be published locally March 12th and March 19th. A link will also be available via the NHH website and communicated via social media streams. L. Davis requested that all expressions of interest should be funneled through the CEO's office for appropriate tracking and timely follow-up.

9. MATTERS FOR INFORMATION

9.1 Auxiliary Report

J. Russell referred to the written report submitted by Pat Page Hoisak.

J. Gillard shared information regarding the upcoming Polar Dip scheduled for Saturday, March 14, 2014.

9.2 Foundation Report

No Report

It was Moved by B. Selby and Seconded by J. Hudson to receive all reports. Carried.

10. IN CAMERA

On a motion from J. Hudson and Seconded by C. Stewart, the meeting moved to In-camera.

The in-camera meeting addressed matters related to the Improvement Plan, Medical Arts Building and Media Alert Notification.

11. TERMINATION OF MEETING

The meeting was terminated at 8:25 pm on a motion from T. McLean.