



Regular Board Meeting
Monday, April 24, 2017

PRESENT K. Pristanski (Chair), N. Gladun, A. O'Connor, J. Pothof, E. Wawia,
Dr. R Crocker Ellacott (CEO), R. Dhaliwal (COS), D. Allen (CNO), D. Hill (CFO),
R. McEwen (Nurse Manager), J. Jean (Recorder)

EDUCATION

J. Keay, Community Services Worker of the Family Health Team provided a presentation on the Assisted Living Program.

1.0 CALL TO ORDER

K. Pristanski called the meeting to order at 5:20 pm.

1.1 QUORUM

Achieved.

1.2 CONFLICT OF INTEREST

There were no declarations of conflict of interest.

1.3 APPROVAL OF AGENDA

MOTION #1

Moved By: J. Pothof

Seconded By: N. Gladun

"That the Agenda be approved with the addition of Item 6.9 Communication Plan."
Carried.

1.4 CHAIR REMARKS

K. Pristanski thanked the Directors for their participation in the Accreditation Canada Governance survey earlier today.

Our Strategic Plan 2020 Launch took place on April 10th. K. Pristanski expressed his satisfaction with the recent strategic planning process stating that it was very successful. A Strategic Plan Sign On Board is available for Directors, staff and physicians to sign indicating their commitment to the new 3 year Plan.

2.0 PATIENT STORY

D. Hill shared a story of congratulations to Acute Care nursing staff that was printed in a recent edition of the Chronicle Journal. The Board will also send expression of congratulations to the staff.

3.0 CONSENT AGENDA

MOTION #4

Moved By: J. Pothof

Seconded By: A. O'Connor

"That the Consent Agenda be accepted as amended." Carried.

4.0 PRESENTATION

D. Allen provided the Directors with a presentation highlighting the achievements of the 2016/17 Quality Improvement Plan.

Performance Based Compensation

MOTION #3

Moved By: A. O'Connor

Seconded By: N. Gladun

"That the Board of Directors acknowledges that targets related to the Quality Improvement Plan of 2016/17 have been achieved, and that the disbursements of funds held back as per the QIP percentage by position will be reimbursed (CEO 2%, CNO 1%, CFO 1% and COS 1%)." Carried.

5.0 REPORTS AND DISCUSSIONS

5.1 Report from President and CEO

R. Crocker Ellacott, President and CEO began her report by expressing her appreciation of the Director's participation in the Accreditation Canada Governance survey.

The CEO report of April 2017 included the following -

- Capital Projects
- Patient Direct
- HIRF Exceptional Circumstances Proposal
- Strategic Planning 2020
- Ministry of Labour Inspection
- Laboratory Accreditation Self Assessment
- Fire Marshall Visit
- Education System Refresh

MOTION #4

Moved By: E. Wawia

Seconded By: N. Gladun

"That the President and CEO Report of April 2017 be accepted as presented." Carried.

5.2 Report from COS

R. Dhaliwal provided the Directors with an update on physician staffing and the nurse practitioners contribution to the Clinic.

MOTION #5

Moved By: A. O'Connor

Seconded By: J. Pothof

"That the COS Report of April 2017 be accepted as presented." Carried.

6.0 BUSINESS MATTERS

6.1 Board Terms

Reviewed. K. Pristanski's 2 year term is up for renewal.

6.2 Individual Director / Board Evaluation Results

K. Pristanski expressed satisfaction at the results of the Governance Centre of Excellence's Board Evaluation noting that NDMH scored above average in most assessment criteria as compared to the other 6 participants. The results of each will be utilized to develop the 2017/18 Work Plan.

FINANCE

6.3 Q4 Disbursements

Disbursements from January, February and March 2017 were reviewed.

6.4 2017/18 Capital Plan

D. Hill reviewed and discussed.

MOTION #6

Moved By: J. Pothof

Seconded By: N. Gladun

"That the Board of Directors approves the 2017/18 Capital Plan with the exception of the skylight which shall be returned to the Board for further consideration once funding has been secured." Carried.

6.5 Declaration of Compliance M-SAA

D. Hill reviewed.

MOTION #7

Moved By: J. Pothof

Seconded By: N. Gladun

"That the Declaration of Compliance for the period October 1, 2016 to March 31, 2017 issued pursuant to the M-SAA effective April 1, 2014 which outlines the Hospital's compliance be approved as presented." Carried.

6.6 Declaration of Compliance H-SAA

D. Hill reviewed.

MOTION #8

Moved By: E. Wawia

Seconded By: A. O'Connor

"That the Declaration of Compliance issued pursuant to the Hospital Services Accountability Agreement for the period of April 1, 2016 to March 31, 2017 be accepted as presented." Carried.

6.7 Broader Public Sector Accountability Attestation

D. Hill reviewed.

MOTION #9

Moved By: A. O'Connor

Seconded By: J. Pothof

"That the Broader Public Sector Accountability Attestation prepared in accordance with Section 15 of the Act for the period April 1, 2016 to March 31, 2017 be accepted as presented." Carried.

6.8 Finance Policies/Procedures

The following Finance policies/procedures were submitted for review and approval.

- FIN 01, Expenses and Reimbursements (reviewed/revised)
- FIN 02, Perquisites (reviewed)
- FIN 03, Capital Operating Budgets (new)
- FIN 05, Single or Sole Sourcing (reviewed)
- FIN 06, Competitive and Non-Competitive Procurement Processes (reviewed)
- FIN 07, Approval Authority, Procurement Method, Segregation of Duties (reviewed)
- FIN 08, Expense Approvals and Purchasing (reviewed)
- FIN 09 (reviewed)

A brief discussion followed.

MOTION #10

Moved By: N. Gladun

Seconded By: E. Wawia

"That the Finance policies and procedures be accepted as presented." Carried.

6.9 Communication Plan

K. Pristanski briefly discussed the Communication Plan document which outlines the hospital's current internal and external communication initiatives.

MOTION #11

Moved By: A. O'Connor

Seconded By: N. Gladun

"That the Communication Plan be accepted as presented." Carried.

7.0 FOR INFORMATION

7.1 25 Year Anniversary at 125 Hogan Road

K. Pristanski discussed with the Directors how best to mark the occasion. Directors were encouraged to consider options. Further discussion will take place at the September 2017 meeting.

7.2 CCAC Leadership and Organizational Changes

Discussed.

7.4 Hospital Naming Directive

Discussed.

7.5 Accreditation Debriefing Meeting

Board Directors are invited to attend the debriefing on Thursday, April 27th at 11:00 am in the cafeteria.

7.5 Meeting Effectiveness Evaluations

March 2017 Evaluation Results provided. No Comments. 100% meeting effectiveness.

April 2017 Board Meeting Effectiveness Evaluation provided, completed and returned.

8.0 IN CAMERA

MOTION #12

Moved By: J. Pothof

Seconded By: N. Gladun

"That the Board of Directors moves to In Camera at 6:58 pm." Carried.

9.0 DATE OF NEXT MEETING

Monday, May 29, 2017

10.0 ADJOURNED - 8:05 pm.



K. Pristanski, Board Chair



Dr. R. Crocker Ellacott, Secretary