

Board Meeting

April 25, 2022 at 5:30 pm via ZOOM

Minutes

Decision Making Framework

NDMH is committed to ensuring decisions and practices are ethically responsible and align with our vision, mission, values, philosophy and strategic directions. All decision makers should consider issues from an ethics perspective, including their implications of patients/residents and their families, staff and the community.

The following questions should be considered for each issue:

- 1 Does the decision put **Patient's First** by responding respectfully to needs, values and preferences of our patients/residents and their families, our communities and by considering input from our Patient/Resident and Family Advisory Council?
- 2 Does the decision support the pursuit of high-Quality care through the adoption of best practices and innovation?
- 3 Does the decision demonstrate **Accountability** by advancing a high-quality patient/resident experience that is socially and fiscally accountable?
- 4 Does the decision demonstrate **Respect** by honoring the uniqueness of each individual and the diversifying natures of our communities?
- 5 Does the decision foster Compassion, Fairness, Integrity and Teamwork?

Agenda

	Time	Presenter	Item & Purpose on Decision/Action E: Education D: Discussion I: Informatio					Expected Outcome		Page #			
	R:	Recommendatio					E: Educ	ation D: Discussion 1: Information	on =	n = R-E-D-I			
1.0	Roll C	all											
Membership			0	Т	V	R	Α	Non-Voting Membership	0	T	V	R	Α
Nancy Gladun, Chair					Х			Cathy Eady, CEO			Х		
Ed Wawia, Director					Х			Madison Boudreau, CNE			Х		
Eric Rutherford, Director			Χ					Lauren Haskell, CFO	Х				
Gordon Mackenzie, Director			Х					Shannon Jean, Director, NDFHT	Х				
James Foulds, Director				Х			Dr. Ravi Dhaliwal, Chief of Staff			Х			
Robert Beatty, Director				Х			Dr. Doug Scott, Physician Lead					Х	
Vacancy			E NO.				125	Dr. Robert Foulds, Pres., MAC					X
O: On-site / T: Telecon. / V: Videocon. / R: Regrets / A: Absent					Janice Nicol Vella, EA/Bd Liaison	Х							

	Time	Presente	er	Item &	Purpose		Expected Outcome	Page #
	R: R	ecommendat	tion Decision/Action	E: Education	D: Discussion	I: Information		
2.0	2	Call to Ord	ler at 5:33.					
2.1	N. (V t a V n	ndigenous Land Acking Nelcome and boozhoo. Oday. While we meet to technowledge the impositions and to improving the acknowledge that call this nationally before the acknowledge that call this nationally before the traditional freaty 9 and Treaty 5.	. We acknowled today in-person reance of the lar our commitmening our own und neestral and un tion home, and hnaabe, Oji-Cre	lge the Indigenot and/or on a virte nd, which we eac it and responsibil erstanding of loc ceded territory o acknowledge the e and Mushkego	us Peoples of all to ual platform, let's th call home. lity in improving r cal Indigenous peo f all the Inuit, Mé e territory of the pwuk/Cree people	take a mon relationships oples and th itis, and Firs	nent to between eir cultures. t Nations estern
		C	Please join in a momen consider how we can e collaboration. Thank yo	ach, in our own	_		-	-
2.2	N.	Gladun <u>G</u>	Quorum	-				

	N. Gladun	Conflict of Interest
2.3		No conflicts of interest were declared.
	N. Gladun	Additions/deletions to agenda, approval of the agenda, Motion #1
2.4		Motion: E. Rutherford Second: J. Foulds Opposed: None
		"That the agenda for the NDMH and the NDFHT Board of Directors meeting for April 25, 2022 be accepted as presented." CARRIED
3.0	Education / Pr	esentation
3.1	M. Boudreau	Education / Briefing: Accreditation
		Going forward, we have a workplan started on how we will become compliant, and will submit supplementary evidence to show that we've met or have a plant to meet those two criteria.
		Other comments they noted were about evaluating our programs and how what we are doing is effective or not, i.e. evaluation tools for our programs, service contracts and ensure follow up (re: signed copies), some documentation is paper and electronic (duplication/double-charting, and spoke to legal implications of this), equipment (use a red-tag system when out of order), and quality boards and leadership rounding and engaging with staff regarding improvements and at the clinical level. Some suggestions around infection control and some advice around finances (capital reserve fund) were provided. It was overall a good experience. Thank you to everyone who worked so hard.
		The capital reserve was clarified, and that any surpluses (i.e. rental revenue) can be put into this reserve, and that if the hospital doesn't use the surplus it can be kept.
3.2	M. Boudreau	Patient/Resident Story
		A story was brought to the CNE by an RN, about the use of the whiteboards that are in each patient room, sometimes used for stats, and to ensure communications/plans, meetings, personal items (glasses) are being updated for the patient every day. Families find it helpful. One whiteboard wasn't being updated, creating tension. Once the team ensured that the board was used, they discussed the goals together, with no further issues brought forth. This shows how useful these boards are to patients/families.
4.0	Meeting Minu	ites
4.1	N. Gladun	NDMH Board Meeting Minutes, March 28, 2022, Motion #2
		Motion: R. Beatty Second: G. Mackenzie Opposed: None
		"That the minutes for the NDMH Board meeting for March 28, 2022 be accepted as presented." CARRIED.
4.3	N. Gladun	MAC Meeting Minutes for April 20, 2022, Motion #4
		Motion: G. Mackenzie Second: E. Rutherford Opposed: None
		"That the minutes for the MAC meeting minutes for April 20, 2022 be accepted as presented." CARRIED.

5.0	Generative	
5.1	N. Gladun	Board Chair Report
		Our board has been busy, thank you to the board members who participated in accreditation and ensured we were well prepared. We are proud of what was done.
5.2	C. Eady	Senior Management Report, April 2022, Motion #5
		In addition to the report, the board was also advised that J. Harvey is in TO as part of anti-racism in healthcare conference and discussing end-of-life order set. A question was asked about the job fair and going into the local high school. The board was advised that the College does this. We have recruiting information on our website, as well as links to the college's programs, and that previously, there was a local opportunity to bring students here, and the regional HHR plan includes these strategies. A board member added that our student numbers in schools has shrunk so courses aren't always available. The board was also advised that challenges exist in getting students to volunteer.
		Moved: E. Rutherford Seconded: R. Beatty Opposed: None
		"That the Senior Management Report for April 2022, be accepted as presented." CARRIED.
5.3	R. Dhaliwal	Chief of Staff Report, April 2022, Motion #6
		Discussed summer staffing issues A verbal report was provided, indicating that a new Nurse Practitioner student has started and in May there will be two residents here. The FHT RPN help is appreciated, and two locums have helped in the clinic (appointments). A SIM will be done once per month, and others are possible and it was noted that it is good to have someone who's not on the team to run the SIM (makes them more formal). The board was advised that there may be staffing issues at the end of May though closures not anticipated right now. Moved: J. Foulds Seconded: E. Wawia
		Opposed: None
6.0	Chuntania	"That the Chief of Staff report for April 2022, be accepted as presented." CARRIED.
6.0 6.1	Strategic N. Gladun	Board Member Recruitment Update
0.1	iv. Gladuii	Names of applicants may be brought to the AGM, if accepted then they would have orientation prior to the first meeting. The board chair asked the members about interest and nominations for the role of vice-chair, of which there were none. She asked the board members to think about this role, as it is required and some wording/criteria would need to be sought about a rotating chair concept.
		R. Beatty noted our chair has done a wonderful job, re: accreditation, and as someone new, certain knowledge is required, and someone new may not have that knowledge.
6.2	N. Gladun	Board Member Skills Inventory
		Details: The skills inventory is ready in survey monkey, Janice will send the link before the end of the meeting. Board members can complete the skills inventory on any device and responses are submitted automatically once the survey is completed. and we'll be able to tally and report out more effectively and efficiently. Paper copies are still available.

		Since this is something new, and a brief demonstration of the survey was provided. It will be sent out the board shortly after the end of the meeting.
6.3	N. Gladun	Intention for Re-Election: J. Foulds, E. Rutherford The board chair should request that they consider a three-year commitment to the board as they will be up for re-election in June, and a response is not required at this time. One member noted that they may not seek re-election, and will serve out the term due to commitments with other organizations/boards.
6.4	M. Boudreau	NDMH OHS 71 - Review, Motion #8 A copy of the policy was in the meeting package with changes in yellow, and the hospital will keep the course with the region regarding vaccinations (three-doses of the COVID-19 vaccine). Any staff who haven't received it have been suspended without pay (impact is 1 casual employee). Sites who have LTC are requiring three doses. The board was concerned about liability around terminating employees. for those who haven't taken the vaccine. Further discussions would be held in-camera.
		This pandemic committee would be advised of the board's discussion, and C. Eady will do a briefing note for the next board meeting.
	0.5.1	This motion was deferred.
6.5	C. Eady	Revision to motion for NDMH QIP and Executive / CoS Compensation from Feb 2022 Board Meeting, Motion #9
		Background: a correction is required regarding the measure/target for the reduction of workplace violence, where it was originally noted as 100% in the initial motion. Instead, the measure will be set in January 2023, after process measures have occurred between now and January.
		This is currently a process measure where an objective target will be finalised in January 2023.
		Motion: R. Beatty Second: J. Foulds Opposed: None
		"That the NDMH CEO, CFO, CNE, and Chief of Staff compensation tied to the 2022-2023 QIP be as follows: 1) Reduction of Workplace Violence will be a process measure until January 2023, rate: 1% and 2) Mental Health Readmissions objective: 1.25, rate 1%. Upon successfully achieving the objectives for 2022-2023, the compensation tied to the QIP is paid out through a motion by the board. CARRIED.
6.6	N. Gladun	NDMH/NDFHT By-Laws Review
		The bylaws were sent out for review, any suggestions for changes can be sent to the chair or board liaison by mid-May to ensure revisions can be made in for the next board meeting. The bylaws are expected to be reviewed and approved in June.
		The board was advised that the NDMH and NDFHT have separate administrative bylaws, and that C. Eady is revising the professional staff bylaws in time for the AGM. With regards to a previous amalgamation, the board was advised that the Public Hospitals Act governs the hospital bylaws and since the FHT does not fall under this act, the bylaws were separated.
7.0	-	to In-Camera Meeting
7.1	N. Gladun	Adjournment to In-Camera Meeting, Motion #10 Motion: J. Foulds Second: E. Wawia

		Opposed: None
		"That the Board of Directors move to in-camera at 6:49."
7.2	N. Gladun	Gift for Previous Chair
		In light of the on-going pandemic, a small event will be planned to coincide with the AGM.
8.0	Adjournment	
8.1	N. Gladun	Meeting evaluation
		A link to the meeting evaluation (survey) will be sent by email by the board liaison at the end of this meeting. Board members should find the survey easier to complete than, and we'll be able to tally and report out more effectively and efficiently.
8.2	N. Gladun	Adjournment at 8:47 p.m. Next meeting on May 30, 2022 at 5:30 p.m., Motion #11 Motion: J. Foulds Second: G. Mackenzie
		Opposed: None "That the Board of Directors meeting be adjourned at 8:47 p.m."

N. Gladun, Chair

C. Eady, Secretary