



Board Meeting Minutes

February 28, 2023 at 5:30 pm, via Zoom / NDMH Boardroom



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

Membership	O	T	V	R	A
Nancy Gladun, Chair	x				
Robert Beatty, Vice Chair	x				
Eric Rutherford, Director	x				
Gordon Mackenzie, Director	x				
Shannon Cormier, Director			x		
Deana Renaud, Director			x		
Cathy Eady, CEO	x				
Madison Boudreau, CNE	x				

O: On-site / T: Telecon. / V: Videocon. / R: Regrets / A: Absent

Non-Voting Membership	O	T	V	R	A
Shannon Jean, Director, NDFHT	x				
Dr. Ravi Dhaliwal, Chief of Staff			x		
Dr. Doug Scott, FHT Physician Lead					x
Dr. Jonathon Scully, Pres., Prof. Staff			x		
Lauren Gilbert, CFO (invited)	x				
Dino Armenti, Interim CFO (invited)			x		
Judy Jean, Interim EA/Bd Liaison	x				

1.0	CALL TO ORDER Board Chair, N. Gladun called the meeting to order at 5:30 pm. A land acknowledgement protocol in recognition of indigenous lands, treaties and peoples was recited.
1.1	WELCOME L. Gilbert welcomed Interim Chief Financial Officer, Dino Armenti to the meeting. Introductions were made around the table.
2.0	QUORUM With 6/6 members present, quorum was attained.
2.1	CONFLICT OF INTEREST None.
2.2	APPROVAL OF AGENDA Moved by - R. Beatty Seconded by - E. Rutherford Opposed - None

	<p><i>“That the agenda for the Board of Directors of Nipigon District Memorial Hospital and the Nipigon District Family Health Team meeting of January 30, 2023 be accepted as presented.”</i> Carried.</p>
3.0	<p>EDUCATION Quality Improvement Plan M. Boudreau provided education on Quality Improvement Plans. The presentation highlighted the definition and specific aims of quality improvement from a healthcare perspective and the legislated requirements of a quality improvement plan under the Excellent Care for All Act.</p>
4.0	<p>PATIENT STORY At a recent Northwest Palliative meeting C. Wotherspoon, Nurse Manager learned that Manitouwadge Hospital was working on the transfer of an end of life patient to Nipigon Hospital to fulfill their dying wish. The Nurse Manager had not yet been successful and C. Wotherspoon initiated the end of week transfer to NDMH. A coordinated effort between Manitouwadge Hospital, ORNGE, Nipigon Hospital’s nursing staff and physician successfully transferred the patient to our Hospice Room where she died surrounded by her family.</p> <p>This story demonstrates our patient centered commitment, the importance of small rural hospitals working together, and the power to make a positive impact on the life, and death, of a patient when multiple partners work together.</p> <p>G. Mackenzie took the opportunity to share a story that required a patient to travel for health care.</p>
5.0	<p>MEETING MINUTES</p>
5.1	<p>NDMH Board Minutes - Jan 30, 2023 Moved by - D. Renaud Seconded by - G. Mackenzie Opposed - None</p> <p><i>“That the meeting minutes of January 30, 2023 for the Board of Directors of Nipigon District Memorial Hospital and the Nipigon District Family Health Team be accepted as presented.”</i> Carried.</p>
5.2	<p>Medical Advisory Committee Minutes - February 8, 2023 Moved by - E. Rutherford Seconded by - R. Beatty Opposed - None</p> <p><i>“That the meeting minutes of February 8, 2023 for the Medical Advisory Committee be accepted as presented.”</i> Carried.</p>
5.3	<p>Quality Committee Meeting - February 14, 2023 Moved by - R. Beatty Seconded by - D. Renaud Opposed - None</p>

	<p><i>“That the meeting minutes of February 14, 2023 for the Quality Committee be accepted as presented.” Carried.</i></p>
6.0	GENERATIVE
6.1	<p>Senior Management Report</p> <p>C. Eady and M. Boudreau reported on the following -</p> <ul style="list-style-type: none"> • Partnership with Confederation College • Laboratory Director • Chief Financial Officer • ONA Central Bargaining • COVID-19 Update • Nursing Education • LUCAS Chest Compression system • Meals on Wheels • Behavioural Support funding • Acknowledging Retiring Director <p>General discussion took place.</p> <p>Moved by - G. Mackenzie Seconded by - E. Rutherford Opposed - None</p> <p><i>“That the Senior Management report for February 28, 2023, be accepted as presented.” Carried.</i></p>
6.3	<p>Chief of Staff Report</p> <p>Dr. Dhaliwal stated that the MAC has made 4 recommendations to the Pandemic Committee regarding current COVID-19 practices. A working group has been formed to review all current legislation and practices with a final meeting being scheduled for March 3rd. The Pandemic Committee will report to the MAC at its March 8th meeting.</p> <p>Dr. Dhaliwal and Dr. Labine have responded to the open call from the College of Family Physicians with a part proposal for paramedicine and pharmacy integration with the NDFHT.</p> <p>Dr. Dhaliwal reported that the wait times for clinic appointments has seen a significant reduction and he is hopeful, that with a full complement of physicians, this will continue to decline in the coming months. The Chief of Staff also reports that support from the Health Records Clerk in registering patients for Urgent Care has been most helpful.</p> <p>Moved by - R. Beatty Seconded by - S. Cormier Opposed - None</p> <p><i>“That the Chief of Staff report for February 28, 2023, be accepted as presented.” Carried.</i></p>
6.4	<p>Executive Director Report</p> <p>S. Jean provided and reviewed patient encounters broken down by programs for the month of January 2023. Pap Clinics are returning in the near future with D. Verville, RN and B. Goodman, NP performing the procedures. The RN and L. Malette, Dietician staff have started to visit the Best Start Program.</p>

	<p>S. Jean provided a legend identifying the number of patient encounters per program for Q3.</p> <p>A detailed breakdown of each program’s statistics for the month of January 2023 was provided and reviewed.</p> <p>Moved by - E. Rutherford Seconded by - D. Renaud Opposed - None <i>“That the Executive Director report for February 28, 2023, be accepted as presented.”</i> Carried.</p>
7.0	FIDUCIARY
7.1	<p>NDMH Financials, Q3</p> <p>L. Gilbert reviewed the following -</p> <ul style="list-style-type: none"> • Disbursement • Pay Register Reports • Summary of Operations • Summary by Department
7.2	<p>Balanced Budget Waiver Update</p> <p>L. Gilbert reported that she has not yet received direction from Ontario Health North.</p>
7.3	<p>Salaries and Benefits Attestation</p> <p>L. Haskell advised the board that the 2022 NDMH Salaries and Benefits Attestation has been submitted.</p>
7.4	<p>NDFHT Financials, Q3</p> <p>L. Gilbert reviewed the following -</p> <ul style="list-style-type: none"> • Disbursement • Pay Register Reports • Budget Summary, FHT • Budget Summary, Diabetes Education • Budget Summary, Opioid Addiction Treatment
7.5	<p>Salaries and Benefits Attestation</p> <p>L. Haskell advised the board that the 2022 NDFHT Salaries and Benefits Attestation has been submitted.</p>
8.0	STRATEGIC
8.1	<p>Strategic Plan, 2020/23 Update</p> <p>C. Eady provided an update on the Strategic plan progress. S. Cormier asked how the Board engages with the community and considers their input into its planning and development process. C. Eady responded by sharing the engagement efforts made with our community partners, Board, patient/resident and family advisors’ staff, physicians and volunteers. General discussion took place.</p> <p>D. Renaud stated that it would be most beneficial to go to our stakeholders for input in development and planning, rather than anticipating that they will meet us where we are at. Members agreed.</p>
8.2	<p>Enterprise Risk Management</p> <p>C. Eady identified and discussed our most significant risks.</p>
8.3	<p>NDMH Quality Improvement Plan, Q3</p> <p>M. Boudreau reviewed the progress to date on the 2022/23 QIP.</p>

<p>8.4</p>	<p>NDMH Quality Improvement Plan, 2023/24</p> <p>M. Boudreau shared the draft Plan reviewed by the Senior Team, Patient/Resident and Family Advisors and the Quality Committee. She noted that this QIP is for both the Hospital and LTC Home.</p> <p>Each indicator was reviewed. Four indicators will be carried over from 2022/23. New experiences of care questions will be asked of patients and residents. The physicians have identified the indicator which measures the percentage of potentially avoidable ER visits for LTC residents.</p> <p>Discussion and careful decisions were made about the Targets for the 2023/24 QIP.</p> <p>The indicators that will be tied to the executive compensation at 1% for the CEO, CNE and COS were identified. As the CFO will be on leave this position will be exempt from executive compensation at this time. These include -</p> <ol style="list-style-type: none"> 1. Workplace Violence Prevention (1) - # of reported workplace violence incidents by hospital workers overall 2. Workplace Violence Prevention (2) - # of reported workplace violence incidents by hospital workers overall resulting in staff lost time 3. Repeated ER visits for Mental Health - % of unscheduled repeat ER visits following an ER visit for a mental health condition <p>Moved by - B. Beatty Seconded by - G. Mackenzie Opposed - None</p> <p><i>“That the Quality Improvement Plan, including indicators and targets, for the year 2023/24 be accepted as amended.”</i> Carried.</p> <p>Moved by - B. Beatty Seconded by - E. Rutherford Opposed - None</p> <p><i>“That Performance Based Compensation for the 2023/24 Quality Improvement Plan be tied to the indicators and targets as identified above, at a rate of 1% for the CEO, CNE and Chief of Staff.”</i> Carried.</p> <p>** The Quality Improvement Plan 2023/24 is attached to the meeting minutes.</p>
<p>8.5</p>	<p>NDMH Quality Improvement Plan Work Plan, 2023/24</p> <p>M. Boudreau provided and reviewed the work plan. The processes identified in the work plans were discussed.</p>
<p>8.6</p>	<p>Patient Declaration of Values</p> <p>N. Gladun shared that the Patient Declaration of Values is a requirement of the Excellent Care for All Act and must be developed in consultation with the public. The requirement is unique to each healthcare facility and is a declaration to our commitment to patient centred care. NDMH’s Patient Declaration of Values centers around the four core principles of patient centred care; Dignity and Respect, Information Sharing, Quality and Safety and Partnership and Participation.</p>

	<p>The document has been reviewed at Patient/Resident and Family Advisory Council, Quality Committee and now to the Board for Approval.</p> <p>Moved by - B. Beatty Seconded by - Deana Renaud Opposed - None</p> <p><i>“That, the revised Patient Declaration of Values be recommended to the Board of Directors for approval.”</i></p>
8.7	<p>LTC 3-01, Fundamental Principle / Residents’ Bill of Rights N. Gladun stated that the LTCHA 2007 identified 27 Residents’ Bill of Rights. Fixing Long Term Care Act, 2021 has added 2 additional rights. The two additional rights include</p> <p># 20. Every resident has a right to ongoing and safe support for their physical, mental, social and emotional wellbeing and their quality of life and to assistance in contacting a caregiver or other person to support their needs. # 25. Every resident has the right to be provided with care and services based on a palliative care philosophy.</p> <p>The Fundamental Principle and the Residents’ bill of and is a declaration to our commitment to resident centred care and must be posted throughout the long term care home.</p> <p>Just as the Patient Declaration of Values commits to patient centred care, this statement is a part of the Fixing Long Term Care Act that commits to resident centred care.</p>
9.0	<p>INFORMATION</p>
9.1	<p>Application for Board Director Revised N. Gladun provided a copy of the revised application to include the requirement of a Police Record Check. The amended application has also been posted to the hospital’s website. Applications were available for the Directors.</p>
9.2	<p>Board Director Recruitment N. Gladun has been in contact with a person who has expressed interest. She is also in receipt of a recent application to the Board. She will provide a progress report at the March meeting.</p>
9.3	<p>City and District of Thunder Bay Ontario Health Team Key Messages C. Eady provided to the Directors.</p>
9.0	<p>IN CAMERA (CLOSED SESSION)</p> <p>Moved by - G. Mackenzie Seconded by - D. Renaud Opposed - None</p> <p><i>“That the Board of Directors moves to its In Camera meeting at 7:53 pm.”</i> Carried.</p>
10.	<p>RESUME REGULAR MEETING Report from Closed Session</p> <ul style="list-style-type: none"> • Credentialing

	<ul style="list-style-type: none"> • NDMH NDFHT Integration Opportunity • Executive Recruitment
<p>11.</p>	<p>ADJOURNMENT Meeting evaluations were provided to the Directors.</p> <p>Moved by - R. Beatty Seconded by - G. Mackenzie Opposed - None</p> <p><i>“That the Board of Directors moves to adjourn its Regular meeting at 8:54 pm.”</i></p>



N. Gladun, Board Chair



C. Eady, Chief Executive Officer



S. Jean, Executive Director