



**Nipigon District Memorial Hospital
Annual Meeting
June 25, 2012
7:00 pm**

PRESENT J. Lasook (Chair), J. Pothof, E. Stefanidis, V. Bull, L. Harbinson, B. Lance,
T. Lasook, M. Kusick, Dr. John Jackson Hughes (Chief of Staff), Carl White (Chief
Executive Officer), D. Hill, J. Jean (Recorder)

REGRETS S. Stephenson (Chief Nursing Officer), E. Rutherford

1. CALL TO ORDER

J. Lasook, Chair, called the Annual Meeting of the Board of Directors of the Nipigon District Memorial Hospital to order on June 25th, 2012 at 7:00 p.m.

2. APPROVAL OF AGENDA

The agenda was approved as presented.

MOTION #1

Moved by E. Stefanidis, seconded by T. Lasook that the agenda of the June 25th, 2012 Annual Meeting of the members of the corporation be approved. All in favour.
Carried.

**3. REVIEW AND APPROVAL OF MINUTES OF THE PREVIOUS ANNUAL MEETING OF
JUNE 27th, 2011**

Minutes of the June 27th, 2011 Annual Meeting of the Nipigon District Memorial Hospital were approved as printed and distributed to the members of the Board. J. Lasook called for a motion to accept the minutes as presented.

MOTION #2

Moved by _____, seconded by J. Pothof that the minutes of the June 27th 2011 Annual Meeting of the members of the corporation be approved as presented.
All in favour. Carried.

4. PRESENTATION OF ANNUAL REPORTS

i. Board Chair

The NDMH is really about the people we care for, our staff, physicians, and volunteers who provide these valuable services to our community. On behalf of the Board I would like to thank everyone who contributes to the patient care experience in our Hospital, in our outreach programs and at the Beardmore Clinic.

Health care is ever changing with new demands from patients for services and from the LHINs on reorganization and many other centrally driven initiatives.

The LHIN Blueprint project which provides a ten year plan to reorganize health care services will focus on integration and has the potential to change the way we govern health care services. There are a number of governance options being discussed which will certainly influence us in Nipigon.

During the past year we signed an Energy Retrofit contract to update our heating and ventilation systems to provide a safer and more comfortable environment in our building. This contract will be repaid with energy savings over the next ten years.

We received funding for a Telehealth coordinator and the related equipment to enable us to access the services of medical specialists closer to home without travel. We also received a grant for new equipment at the Beardmore Clinic.

Financially, our hospital had a balanced budget at the end of 2011/12. We will be challenged to show the same results in the coming year.

We have worked with other hospitals and providers on central initiatives such as Supply Chain management which will enable us to purchase supplies and services at the best possible prices.

We have had significant changes at the senior staff levels with the retirement of Cathy Collinson who was replaced by Carl White and our new Chief Nursing Officer, Sonja Stephenson.

Thanks to the staff for their support in enabling the Board to function as well and make informed decisions on behalf of our community.

Respectfully submitted,

Judy Lasook
Board Chair

ii. **Chief Executive Officer**

I began my work at NDMH in February 2012 after Cathy Collinson retired. She did a great job here for several years and is certainly missed in the Hospital.

Working in a community hospital is a new experience for me and I have felt welcomed by the staff and I thank you all for that. It is nice to work in a place where you know everyone after a month or so.

We face all the challenges around budgets, legislative requirements and seem to manage in a positive fashion. We also care for a large number of clients on both and in and out patient basis.

Thank you to all our staff and physicians who provide patient focused care. There have been a number of new initiatives and challenges during the year -

Year of Transition

Our senior team are relatively new with Dan Hill being here the longest time of about a year, Sonja Stephenson for six months, Judy Jean in a new position for about a year and myself for five months. While we are on somewhat of a learning curve we have worked well together and are quite capable of meeting the challenges facing our Hospital and the health care system in general.

Family Health Team (FHT)

We have a new FHT in Nipigon which is now in their second year of operation. They have developed many innovative programs and work well with both the Hospital and the broad community. They provide a valuable link with the physicians and all the programs of the Hospital.

Local Health Integration Network (LHIN) Blueprint

The LHIN have released their Blueprint or plan to change and reform health care services in the next ten years. A review of the plan would certainly indicate it is leading us in a positive direction which focuses on patient care and improving the experience and health of the people we serve.

There will certainly be challenges and work to be accomplished from a leadership and governance perspective and our focus in the next year will be to prepare for the changes.

Quality Improvement Plans (QIP)

This is our second year of submitting QIP and we would observe that changes have been positive and are improving what we do. Under the Blueprint project we will be developing regional plans and it will be interesting to work with others and to develop quality indicators across the Region.

Work Well Audit

We were subjected to a Work Well audit this past year and thanks to a good deal of effort by all our staff we were able to pass with an 85% score. We are now creating a new health and safety structure to ensure we are providing a safe work environment for the future.

Demand for Services

We face a constant demand for Long Term Care services as our population ages. In part, this demand is not met because there is no supportive housing in our community although the community has submitted a proposal.

We received funding for an Assisted Living project to help frail seniors live in their own homes. The planning for this program is completed and it will soon be serving some clients.

Some of larger challenges are meeting the needs of clients with mental health and addiction issues. This can be met in part by partnerships with community providers but also results in some in patient admissions which may not always be appropriate.

The future will be interesting as we see what changes the Blueprint projects brings and the support by the LHINs for small community hospitals and what they will look like in the future.

Having made that observation we know people can adapt and make changes to meet the needs of our communities and those we serve.

Sincerely yours,

Carl White
Chief Executive Officer

iii. Chief Financial Officer

The 2011-12 year continued to be one of significant budget pressures within the province. Health care spending and practices remained under scrutiny after the release of the Drummond Report and North West Local Health Integration Network's Health Services Blueprint Project which all signaled future change. Hospitals have also spent the last year complying with a numerous new legislation aimed at increasing efficiency, transparency and accountability.

The Nipigon Hospital ended the 2011-2012 fiscal year with a minor deficit of \$1,882 before building amortization (2011 \$77,200 deficit) and a \$52,612 deficit after building amortization (2011 \$134,135 deficit). The following table outlines the Hospital's cost and activity indicators for the past five years which continue to demonstrate strong leadership and governance.

Nipigon Hospital Five Year Trend

Selected Activity & Indicators	2007-2008	2008-2009	2009-2010	2010-2011	2011-2012
Financial Activity (from financial statements and Ministry of Health & Long-term Care (MOHLTC) indicators)					
Total Revenue	\$7,396,490	\$7,558,197	\$7,835,444	\$8,096,353	\$8,298,624
Total Expense	\$7,392,294	\$7,576,101	\$7,857,641	\$8,230,488	\$8,351,236
Net Surplus (Deficit) all funds	\$4,196	(\$17,904)	(\$22,197)	(\$134,135)	(\$52,612)

Total Margin ⁱ	1.0%	0.8%	0.6%	(1.0%)	0.0%
Current Ratio ⁱⁱ	2.72	2.03	1.95	1.85	1.47
Working Capital ⁱⁱⁱ	\$920,457	\$738,795	\$751,674	\$637,104	\$447,938
Inpatient (IP) Cost per Patient Day	\$206	\$237	\$247	\$253	\$261
IP Food Expense per Patient Day	\$30	\$31	\$33	\$34	\$34
Patient Activity (from registered patient activity/patient care system and statistical ledger)					
Acute Patient Days	4,557	3,108	3,311	3,749	3,927
ALC Days	2,052	1,173	842	808	1,187
Acute % Occupancy	83%	57%	60%	68%	72%
LTC/CCC Patient Days	7,874	7,710	7,561	7,747	7,785
LTC/CC % Occupancy	98%	96%	94%	96%	97%
Emergency Visits	5,997	5,770	5,908	6,614	5,528
Lab Tests & ECGs	64,330	71,965	81,489	125,626 ^{iv}	315,067
Diagnostic Imaging Exams	4,077	3,778	4,355	5,088	4,976
Staff Activity (from statistical ledger and MOHLTC reports)					
Full-time Equivalents all funds	69	67	70	72	71
% Paid Sick Time of full-time hrs	4.6%	4.4%	5.1%	5.1%	4.6%
% Paid Overtime of all hours	1.8%	1.2%	2.0%	2.6%	1.7%
Average Hourly Rate with benefits	\$37	\$39	\$39	\$40	\$39

Within Financial Services, 2011-2012 was a year of refinement as I joined the team in April 2011 and existing staff continued to improve current processes. Shannon Ratcliffe in addition to her current payroll duties also assumed those of North of Superior Counseling Programs which were previously performed by Thunder Bay

Regional Health Sciences Center.

The Operations Committee of the Board remained diligent in their fiscal responsibility to ensure that management fulfills its responsibilities for internal controls and financial reporting. The next fiscal year will present new challenges including a zero percent increase in global funding and no Health Care Infrastructure Renewal Funding which will require a joint Board, management and staff effort in order to be fiscally responsible. Finally, I would like to acknowledge the generous support and donations of the community as they are extremely important to assist us in hospital operations and equipment acquisition for patient care.

Respectfully submitted,

Dan Hill
Chief Financial Officer

iv. Chief of Staff

Ladies and gentlemen, Board members and honoured guests, I am pleased to report to the Board that the Medical staff at the Nipigon District Memorial Hospital has had another very busy and productive year.

This year has seen acceptance of 2 new members to the Medical staff with the Family Health Team; Dr. David Janhunnen and Dr. Shannon Wesley. Sadly we also faced the loss of Dr. Jeremy Mozzon who has been with us for the last several years. Also departing in December was Dr. Rebecca Bond although the latter 2 physicians may return from time to time to attend to locum duties.

Other changes anticipated would be the imminent departure of Dr. Shannon Wesley at the end of July and the removal of myself from the on-call schedule after having been on call for 39 years with 36 of those years being here in Nipigon/Red Rock. I will however, stay on as an active member of the Family Health Team.

In so far as the interaction of Medical staff and the Hospital is concerned, there have been a great number of changes with the departure of Cathy Collinson in February and the welcoming of Carl White as Chief Executive Officer and Sonja Stephenson as Chief Nursing Officer. Equally, we have bade farewell to senior staff Linda Enders, Helen Foulds, Don Rosborough, LeeAnn Lange and Marlene Pawluk over the last year, but have also had the opportunity to welcome many new staff on board as well.

Many projects progress and continue to expand and are being actively worked on through the Family Health Team including dietary, counselling, smoking cessation, etc. The Medical staff remains deeply involved in all aspects of the hospital care to our patients and we continue to offer services on a regular basis to Rocky Bay, Beardmore and Pays Plat as well.

Sue Powell, our nurse practitioner, continues to attend the Nip-Rock High School on a weekly basis during the school year and the above mentioned locations on a regular basis also.

The Medical staff continues to be involved with the Northern Ontario School of Medicine helping the education of medical residents and medical students. As mentioned by Dr. Rebecca Bond last year, all financial awards that the preceptors receive in the program are devoted to annual educational bursaries for the high school, college and university students aspiring to health related careers. There is also a regular contribution to the Hike for Health here locally in Nipigon/Red Rock.

The Medical staff has also benefited from the close proximity to the Thunder Bay Regional Health Sciences Centre and certainly over the last year has made very good use of Advanced Cardiac Care, Angiography intervention and other modalities. The addition and use of the Electronic Medical Record (EMR) to the Family Health Team is definitely progressing at a rapid rate as well as the improvements brought forth by Meditech. The ability to communicate both written and electronic records along with x-rays and other reports has greatly facilitated care. We are able to offer patient care in a more expedited and reasonable fashion.

In summary, therefore, the Medical staff feels that the capability of deliverance of quality care to the communities around Nipigon and Red Rock continues to be excellent and will of course be open to further improvements and suggestions as needed in the future. On that note, I would like to take this opportunity to thank both all the Board members for their cooperation with the Medical staff, and of course, the Hospital staff, nursing staff and all other conjunctive services.

Thank You,

Dr. J.F. Jackson Hughes, MD, CCFP, FCFP
Chief of Staff

v. **Presentation of Audited Financial Statement**

MOTION #3

Moved by E. Stefanidis, seconded by L. Harbinson that the membership approves the 2011-12 audited financial statements. All in favour. Carried.

5. **APPOINTMENT OF AUDITORS FOR 2012-13 FISCAL YEAR**

MOTION #4

Moved by E. Stefanidis, seconded by T. Lasook that the membership appoint Grant Thornton Chartered Accountants LLLP as auditors for the 2012-13 fiscal year. All in favour. Carried.

6. BY LAW AMENDMENTS

None.

7. NOMINATION AND ELECTION OF DIRECTORS

MOTION #5

Moved by J. Pothof, seconded by V. Bull that the following be appointed for a two year term as Directors of the Board, on the recommendation of the Governance and Nominating Committee –

Judy Lasook, Township of Hurkett Representative
Tracey Lasook, First Nations Representative
Johan Pothof, Township of Nipigon Representative
Eric Rutherford, Greenstone/Beardmore Ward Representative
Emilios Stefanidis, Member at Large
Maureen Kusick, Member at Large

All in favour. Carried.

8. ADJOURNMENT

MOTION #6

Moved by J. Lasook, Chair, that the Annual the Annual Meeting of the Board of Directors of the Nipigon District Memorial Hospital be adjourned at 7:10 pm.


Judy Lasook, Chair


Carl White, Secretary