

# Regular Board Meeting Monday, March 26, 2018

**PRESENT** 

K. Pristanski (Chair), J. Pothof, N. Gladun, E. Rutherford, James Foulds,

D. Mangoff, Madison Boudreau, Dr. R. Crocker Ellacott (CEO), Dot Allen, (CNE) J. Garofalo (Interim CFO), Beth Wills, (Director NDFHT/Community Services),

Dr. R. Dhaliwal (COS), J. Jean (Recorder)

REGRETS

A. O'Connor, E. Wawia, Dr. D. Scott (FHT Physician Lead)

#### 1.0 CALL TO ORDER

K. Pristanski called the meeting to order at 5:30 pm.

#### 2.0 PATIENT STORY

J. Jean shared a story that a previous family member spoke about with her on an occasion where a PSW creatively attended to her confused and frustrated parent. Rather than redirecting the resident to the current date and location, the PSW role played the period of time that the resident was recalling. Upon recollecting this occasion, the family member referred very fondly to the PSW. This story was also shared with the PSW.

3.0

## 3.1 QUORUM

2/5 of voting members. Achieved.

### 3.2 CONFLICT OF INTEREST

There were no declarations of conflict of interest.

## 3.3 APPROVAL OF AGENDA

MOTION #1

Moved by - N. Gladun

Seconded by - J. Foulds

"That the agenda be accepted as presented." Carried.

#### 3.4 CHAIR REMARKS

K. Pristanski welcomed Beth Wills to Nipigon Hospital as Director NDFHT/Community Services and Madison Boudreau as Nurse Manager.

#### 4.0 CONSENT AGENDA

**MOTION #2** 

Moved by - J. Pothof

Seconded by - N. Gladun

"That the consent agenda be accepted as presented." Carried.

#### 5.0 REPORTS AND DISCUSSIONS

## 5.1 Report from the President and CEO

R. Crocker Ellacott, President and CEO reported on the following:

- Correspondence from the Ontario College of Pharmacists
- Increased Census and Staffing Issues
- Small Hospital Transformation
- Community Engagement
- Hospital Energy Efficiency Program
- NDMH / NDFHT / Urgent Care Clinic Integration
- EMS
- Director of Finance

### MOTION #3

Moved by - E. Rutherford Seconded by - J. Pothof

"That the President and CEO report of March 2018 be accepted as presented." Carried.

## 5.2 Report from the Family Health Team

K. Pristanski reported on the following:

- Hiring of Director NDFHT / Community Services
- RPN Resignation
- RN position
- NDFHT / NDMH / Urgent Care Clinic Integration
- Quality Improvement Plan, 2018-19

### **MOTION #4**

Moved by - N. Gladun Seconded by - J. Pothof

"That the Family Health Team report of March 2018 be accepted as presented." Carrie

Concluding his tenure as acting Director of the NDFHT, K. Pristanski provided B. Wills the opportunity to expand upon the FHT report.

- B. Wills stated that a recent review of the existing computer equipment and software has been conducted. The assessment revealed that the computers are original to the FHT Program and current software/firewall licenses require updating.
- B. Wills asked for the Direc tors consideration of the replacement of the computers, software/anti-virus licenses and explained that this purchase would be made within this current fiscal year. The cost for the purchase is estimated to be \$10,456.17 including HST.

#### MOTION #5

Moved by - E. Rutherford Seconded by - J. Foulds

"That the Board approve the replacement of computers, software/firewall licenses for the FHT at an estimated cost of \$10,456.17 in this current fiscal year." Carried.

## 5.3 Report from the Chief of Staff

Dr. R. Dhaliwal stated that subsequent to a recent site visit from the Northern Ontario School of Medicine NDMH has been rated, by NOSM, as a number one destination for residents, undergrads and medical students. Dr. Dhaliwal has also received positive patient feedback about Locum staff.

### MOTION #6

Moved by - N. Gladun Seconded by - J. Foulds

"That the COS report of March 2018 be accepted as presented." Carried.

#### 6.0 BUSINESS MATTERS

## 6.1 NDFHT Quality Improvement Plan (QIP) 2018-19

J. Stansell, Quality Improvement Decision Support Specialist (QIDDS) of the Family Health Team provided a presentation on the progress of the NDFHT's 2017/18 QIP and its Plan for 2018/19. With the approval of the Board, the QIP will be submitted to the Health Quality Ontario portal prior to the 31<sup>st</sup> of March, 2018.

## **MOTION #7**

Moved by - J. Foulds Seconded by - N. Gladun

"That the NDFHT's 2018/19 Quality Improvement Plan be accepted as presented." Carried.

## 6.2 NDMH Quality Improvement Plan (QIP) 2018-19

D. Allen, Chief Nursing Executive provided a presentation on the progress of the Hospital's 2017/18 QIP and its Plan for 2018/19. With the approval of the Board, the QIP will be submitted to the Health Quality Ontario portal prior to the 31<sup>st</sup> of March, 2018.

#### MOTION #8

Moved by - J. Pothof Seconded by - N. Gladun

"That the NDFHT's 2018/19 Quality Improvement Plan be accepted as presented." Carried.

## 6.3 NDMH Attestation of Records of Employees, 2017 Salaries and Benefits

J. Garofalo reported that the Attestation has been submitted.

### 6.4 NDFHT Attestation of Records of Employees, 2017 Salaries and Benefits

J. Garofalo reported that the Attestation has been submitted.

## 6.5 Multi Sector Accountability Agreement effective April 1, 2018

J. Garofalo presented the agreement that funds the Assisted Living Program noting that this is a new agreement as opposed to the previous extension agreements.

### **MOTION #9**

Moved By: N. Gladun Seconded By: J. Pothof

"That the Board of Directors approves the M-SAA Agreement effective April 1, 2018." Carried.

### 6.6 Hospital Services Accountability Agreement 2018-20

J. Garofalo presented the agreement noting that this is a new agreement as opposed to the previous extension agreements.

### MOTION #10

Moved By: J. Foulds Seconded By: N. Gladun

"That the Board of Directors approves the H-SAA 2018-20." Carried.

## 6.7 Clean Needle Exchange Program

D. Allen discussed the Hospital's participation in the program.

### MOTION #11

Moved by - N. Gladun Seconded by - J. Foulds

"That the Board of Directors approves the transition of the Clean Needle Exchange Program from the Hospital's ER Department to Rexall Pharmacy." Carried.

## 6.8 Q3 (Oct, Nov, Dec) Reporting

#### Score Card

D. Allen reviewed and discussion followed.

### **Incident Report Summary**

D. Allen reviewed Q3 and provided the data from Q3 2016/17 for comparison.

### 7.0 OTHER BUSINESS

7.1 As a new Director of the Board, J. Foulds was provided the opportunity for clarification on questions regarding Board matters.

### 7.2 Individual Director Self Assessment

The completed annual self assessment was returned by the Directors in attendance.

# 7.3 Meeting Evaluation

100% Director satisfaction achieved at the January 2018 meeting.

## 8.0 BOARD MEMBER COMMENTS

None.

## 9.0 IN CAMERA

MOTION #12

Moved By - N. Gladun Seconded By - J. Pothof

"That the Board of Directors moves to In Camera at 7:40 pm." Carried.

- 10.0 DATE OF NEXT MEETING Monday, April 30, 2018 @ 5:30 pm
- 11.0 ADJOURNED 9:50 pm
- 12.0 MEETING EVALUATION

K. Pristanski, Board Chair

Dr. R. Crocker Ellacov, Secretary