

Nipigon District Memorial Hospital Regular Board Meeting

Monday, November 30, 2015

PRESENT K. Pristanski (Chair), E. Rutherford (Vice Chair), M. Kusick, J. Pothof,
E. Hill, Dr. Rhonda Crocker Ellacott*, Sonja Stephenson* Judy Jean (Recorder)

OTHER Dan Hill (CFO)

ABSENT Dr. R. Dhaliwal*

1.0 CALL TO ORDER

K. Pristanski called the meeting to order at 5:40 pm.

2.0 PATIENT STORY

S. Stephenson shared a letter of thanks from a current resident's family.

3.0 QUORUM

Achieved.

3.1 CONFLICT OF INTEREST

There were no declarations of conflict of interest.

3.2 APPROVAL OF AGENDA

Moved by: E. Rutherford

Seconded by: J. Pothof

"That the Agenda be approved as circulated."

3.3 CHAIR REMARKS

K. Pristanski welcomed the members to the meeting and extended his best wishes for the upcoming holiday season. After this evening's meeting, the Board will adjourn until January 25, 2016.

4.0 PRESENTATION

Patient Family Advisors . . . The Heart of Patient Family Centred Care

Dr. Rhonda Crocker Ellacott provided a presentation around Patient Family Advisors and its role in patient and family centred care. The presentation provided information on the necessary steps to be successful at creating effective patient and family partnerships.

Dr. Crocker Ellacott received direction from the Board to proceed with the development of a Philosophy for Patient Family Centred Care representing a commitment from the Board to patient and family centred care.

K. Pristanski requested that Dr. Crocker Elacott provide a presentation to the Medical Advisory Committee (MAC) on Patient Family Advisors. This will be arranged for the January 2016 MAC meeting.

5.0 CONSENT AGENDA

Moved by: E. Rutherford

Seconded by: M. Kusick

"That the Board of Directors approves the Consent Agenda as presented."

6.0 REPORTS AND DISCUSSIONS

6.1 Report from President and CEO

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

- Hospital Accessibility Plan (HAP) / Hospital Improvement Plan (HIP)
- Fiscal Advisory Meeting summary
- Information Technology (IT) Strategy
- Accreditation Update
- Health & Safety Committee update
- Helipad Compliance update
- Hike for Health Donation

General discussion took place.

Moved by: J. Pothof

Seconded by: E. Rutherford

"That the President and CEO report of November 2015 be accepted as presented."

6.2 Board Director Recruitment

E. Rutherford reported that he has been in contact with the new board candidate. At this time, the candidate is still considering application.

6.3 Health Achieve

Participants shared their experiences.

7.0 BUSINESS MATTERS

7.1 Finance, Q2

Department Summary

D. Hill reviewed. Discussion followed.

Operations Summary

D. Hill reviewed. No comments.

Statement of Financial Position

D. Hill reviewed. No comments.

Statistical Activity Summary

D. Hill reviewed. No comments.

2016/17 Fiscal Budget Assumptions

D. Hill reviewed. Discussion followed.

2016/17 Fiscal Budget DRAFT

D. Hill reviewed. Discussion followed.

2016/17 Hospital Improvement Plan DRAFT

D. Hill reviewed. Discussion followed.

7.2 Quality Improvement, Q2

Targets/Initiatives (Acute & LTC) – Falls/Safety/Security/Other

S. Stephenson reviewed. No Comments.

Medication Reconciliation/Venous Thromboembolism (VTE) Prevention

S. Stephenson reviewed. No Comments.

Utilization Data/OTN Stats Beardmore

S. Stephenson reviewed. No Comments.

Satisfaction Surveys – In Patient/Post Discharge/ER

S. Stephenson reviewed. Directors stated that comparison of last fiscal year's quarter would be beneficial. S. Stephenson to include in quality improvement reporting.

QIP Progress

S. Stephenson reviewed. No comments.

7.3 Policies/Procedures

Northwest Regional Appointment and Credentialing Policy and Procedure

The NW Regional Appointment and Credentialing Policy and Procedure was revised by the Credentialing Committee. The document now represents the change from paper application to online application for new applicants.

Moved by: M. Kusick

Seconded by: J. Pothof

"That the NW Regional Appointment and Credentialing Policy and Procedure be accepted as presented."

Health and Safety Statement, OHS 01

Internal Responsibility System, OHS 02

Joint Health and Safety Committee, Terms of Reference, OHS 13

Moved by: E. Hill
Seconded by: E. Rutherford

"That the review/revision of documents Health and Safety Statement, OHS 01 / Internal Responsibility System, OHS 02 / and Joint Health and Safety Committee, Terms of Reference, OHS 13 be accepted as presented."

Whistleblower Policy, FIN 12

Moved by: J. Pothof
Seconded by: M. Kusick

"That the review/revision of document Whistleblower Policy, FIN 12 be accepted as presented."

7.4 Director Declaration and Consent

Board Directors were provided with the documentation and requested to complete the required review of documentation and return the declaration/consent to the January 2016 meeting.

8.0 FOR INFORMATION

8.1 Intranet instructions to Patient Family Centred Care (PFCC) Tab

Navigation instructions were provided to Directors for access to videos and information pertaining to PFCC.

8.2 Notice of NW LHIN Chief Executive Officer

Reviewed without comment.

8.3 Geraldton Hospital appoints new CEO

Reviewed without comment.

8.4 NWA Leadership Announcements

Reviewed without comments

9.0 BOARD MEMBER COMMENTS

None.

10.0 DATE OF NEXT MEETING

Monday, January 25, 2016 – Boardroom 5:30 pm

11.0 IN CAMERA

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

"That the Board of Directors moves to in camera."

12.0 ADJOURNED

There being no further business, the meeting adjourned at 7:40 pm.