



Regular Board Meeting
October 26, 2020

PRESENT K. Pristanski, Chair R. Beatty, Director
N. Gladun, Vice Chair J. Foulds, Director
E. Rutherford E. Wawia
D. Murray, S. Jean, Executive Director J. Jean, Recorder
President & CEO FHT/Community Services
C. Covino, CNE/COO
L. Haskell, CFO

REGRETS Dr. R. Dhaliwal, COS Dr. D. Scott, FHT Lead Dr. R. Foulds, President,
G. Mackenzie Medical Staff

Due to the continued restrictions as a result of the COVID-19 pandemic, Board members continue to attend the meeting via videoconference / teleconference.

Each Board member received a copy of the presentation and board package contents via email in advance of the meeting.

1.0 CALL TO ORDER

K. Pristanski called the meeting to order at 4:34 pm.

K. Pristanski began the meeting with an Indigenous Land Acknowledgement Protocol. *“Aannii, Boozhoo. Before we begin, I’d like to acknowledge the traditional territories that we sit on today. Northwestern Ontario sits on the traditional lands of the Ojibwe/Chippewa/Anishnaabe, Oji-Cree and Mushkegowuk/Cree peoples and occupies the lands of Robinson-Superior Treaty, Treaty 9, Treaty 5 and the Ontario portion of Treaty 3. We recognize the footsteps placed before our time and are grateful for the opportunities to work together towards true health equity.”*

1.1 QUORUM

2/5 of voting members. Achieved.

1.2 CONFLICT OF INTEREST

There were no declarations of conflict of interest.

1.3 APPROVAL OF AGENDA

MOTION #1

Moved by – J. Foulds

Seconded by – R. Beatty

Opposed – None

“That the agenda be accepted as amended.” Carried.

2.0 PATIENT STORY

2.1 C. Covino shared a story where a patient was admitted to acute care who had been prescribed methadone. NDMH pharmacy nor Rexall, Nipigon had this medication in their stock. Patient drove to get her own.

C. Turpin, RN Pharmacy staff to get methadone from TBRHSDC. NDMH needs to develop a process for more efficient access to methadone.

In addition, a collaborative effort needs to be made between Dilico, NOSP, and the Hospital when discharge planning.

3.0 PRESENTATION / EDUCATION

Included in the pre reading packages, the following were two YouTube links were provided for viewing prior to the meeting:

Empathy, The Human Connection to Patient Care -
https://www.youtube.com/watch?v=cDDWvj_q-o8

We are ALL the Patient Experience -
<https://www.youtube.com/watch?v=iBLQnThJ6w0>

The first video discusses patient care as more than just healing. Patient care is about building a connection that encompasses mind, body and soul. It asks the viewer “If you could stand you treat them differently?”

The second video reinforces that no matter what our role in health care, we all form part of the patient’s experience.

C. Covino provided a presentation on Quality at Nipigon Hospital. The presentation highlights -

- the definition of Quality as defined in our Quality Health Care Framework
- Quality of Care as a contributor to patient safety, health outcomes and the patient experience
- a timeline of the Hospital’s journey to quality and patient/resident safety
- definition of a Just Culture

the alignment of our Strategic Plan (including the Hospital’s Vision, Mission, Values and Philosophy and the LTC Home’s Vision, Mission and Philosophy of Care) with Patient/Resident and Family Centred Care, Patient Declaration of Values, Residents’ Bill of Rights, Quality Healthcare Framework, Patient/Resident Safety Plan and our Quality Improvement Plan.

4.0 MEETING MINUTES

4.1 Board

The minutes of the September 28, 2020 Board meeting were reviewed. Attendance corrections were noted.

MOTION #2

Moved by - E. Rutherford

Seconded by – E. Wawia

Opposed – None

“That the Board meeting minutes of September 28, 2020 be accepted as amended.” Carried.

4.2 Medical Advisory Committee Meeting

The minutes of the October 14, 2020, MAC meeting were reviewed.

MOTION #3

Moved by – J. Foulds

Seconded by – N. Gladun

Opposed – None

“That the Medical Advisory Committee meeting minutes of October 14, 2020 be accepted as presented.” Carried.

4.3 Quality Committee Meeting

The minutes of the October 14, 2020, Quality Committee meeting were reviewed.

MOTION #4

Moved by – N. Gladun

Seconded by – J. Foulds

Opposed – None

“That the Quality Committee meeting minutes of October 14, 2020 be accepted as presented.”
Carried.

4.4 Quality Committee Meeting Highlights

K. Pristanski led discussion around the requirement to ensure that the board spends at least 25% of its meeting time dedicated to quality and safety issues.

The members agreed that quality and safety is embedded in the Board’s annual work plan and at each meeting.

5.0 GENERATIVE

5.1 Senior Management Report

C. Covino provided a report to the Board on the following:

- Recent LTC Compliance Visit
- COVID-19 / Funding
- Temporary Wage increase for PSW staff
- Mandatory College of Nurses’ Standards education
- Indigenous Awareness Day

MOTION #5

Moved by - N. Gladun

Seconded by - E. Wawia

Opposed – None

“That the Senior Management report of October 2020 be accepted as presented.” Carried.

5.2 Nipigon District Family Health Team Executive Director Report

S. Jean provided a report to the Board on the following:

- COVID-19 Assessment Centre update
- Swab demands
- Influenza vaccination
- Funding grants
- Seniors programs

MOTION #6

Moved by - E. Rutherford

Seconded by - J. Foulds

Opposed – None

“That the NDFHT Executive Director report of October 2020 be accepted as presented.” Carried.

6.0 STRATEGIC

6.1 Finance – Q2, NDMH

L. Haskell provided the Disbursements for Q1. Summary by Department / Variance Analysis, and Summary of Operations / Variance Analysis were also provided and reviewed.

6.2 Finance – Q2, NDFHT

L. Haskell provided the Disbursements for Q1. Financial Performance / Variance Analysis, was also provided and reviewed.

6.3 NDFHT Annual Operating Plan

K. Pristanski stated that the annual operating plan has been submitted to the Ministry by S. Jean.

6.4 Strategic Plan, Q2

C. Covino discussed the progress made on the Strategic Plan referring to the presentation at the onset of the meeting. Progress on the Plan has been hampered due to the ongoing and immediate changes required of the COVID-19 pandemic.

6.5 Enterprise Risk Management

C. Covino reviewed the risks. Cyber security continues to be the number one risk for the organization, as it is in all health care sectors across Ontario. Northern Computers and Telus have been conducting phishing exercises to identify gaps. Staff will be assigned cyber security education in order to create awareness.

7.0 GENERATIVE

7.1 Director Declaration and Consent and Attachments

K. Pristanski reminded the members of the annual requirement. Policies cited in the declaration are attached for member review. Members are asked to return the signed declaration prior to the next meeting.

7.2 Governance Centre of Excellence Board Self Assessment

K. Pristanski requested that the directors complete the self assessment as early as possible. The results of the assessment will be available after the 8th of December when the portal closes. The results will measure NDMH against other small rural hospitals.

7.3 Accreditation Governance Self Assessment Survey

C. Covino reviewed the briefing notes for the assessment. The link to the survey will be sent to the members via email on the 27th of October for completion prior to the 5th of November.

Once this portal closes, Accreditation Canada will send a roadmap to us which will identify our deficiencies. A work plan will be developed and rolled out to ensure we achieve the governance requirements of Accreditation Canada.

7.0 FOR INFORMATION

7.1 Flu Clinics

S. Jean discussed the Flu clinics planned.

7.2 Indigenous Awareness Day

C. Covino asked the members for their feedback on the indigenous awareness day events held at the Hospital. Those that attended felt that the event was meaningful and effective in growing relationships. E. Wawia suggested that at the next event, the Chiefs are provided with an opportunity to provide a message.

7.3 Meeting Effectiveness Results

Reviewed from the September meeting. A meeting evaluation will be emailed to each member in attendance for completion and return to admin@ndmh.ca

7.2 IN CAMERA

MOTION #7

Moved by – E. Rutherford

Seconded by – R. Beatty

“That the Board of Directors moves to In Camera at 5:41 pm.” Carried.

ADJOURNED – 6:06 PM

Kal Pristanski, Board Chair

David Murray, Chief Executive Officer