



Regular Board Meeting  
September 28, 2020

<b><u>PRESENT</u></b>	K. Pristanski, Chair N. Gladun, Vice Chair E. Rutherford D. Murray, President & CEO C. Covino, CNE/COO L. Haskell, CFO	R. Beatty, Director J. Foulds, Director E. Wawia S. Jean, Executive Director FHT/Community Services	J. Jean, Recorder
<b><u>REGRETS</u></b>	Dr. R. Dhaliwal, COS G. Mackenzie	Dr. D. Scott, FHT Lead	Dr. R. Foulds, President, Medical Staff

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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.

**PRESENTATION**

Jessica Logozzo, TBRHSC Executive Vice President, Regional Transformation and Integration joined the Board and provided an overview of the newly created Regional Transformation and Integration Committee jointly supported by all hospitals in the northwest.

The presentation discussed the portfolio and initial priorities of the Committee. J. Logozzo requested that the Board endorse the DRAFT Terms of Reference and appoint a member of the Board to the Regional Transformation and Integration Committee.

The Board will appoint the Chair, Vice Chair or alternate to the Regional Transformation and Integration Committee.

The DRAFT Terms of Reference will be discussed in Item 10.5 in the agenda.

**PRESENTATION**

D. Murray provided a presentation on the progress to date of the Northwestern Ontario Health Team.

**1.0 CALL TO ORDER**

K. Pristanski called the meeting to order at 11:50 am.

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.”*

## **2.0 PATIENT STORY**

### **2.1 Patient Experience Defined**

C. Covino shared that the patient experience encompasses the range of interactions that patients have with the health care system. Patient satisfaction and patient experience are often used interchangeably, but they are not the same thing. To assess patient experience, one must find out from patients whether something that should have happened in the health care setting actually happened, or how often it happened. Satisfaction is about whether a patient’s expectations about a health encounter were met. Two people can receive the exact same care but have different expectations about the care they received. Different satisfaction rates are a result of different expectations.

### **2.2 Model for Improvement**

C. Covino reviewed the patient story from June 2020. The Activity Coordinator made a remarkable difference in the lives of the residents during the mandatory social isolation and distancing of family and friends during COVID-19. The Hospital hired a summer staff to assist the Activity Coordinator and the residents enjoyed a healthy, happier summer with opportunity to visit as the restrictions were relaxed.

E. Rutherford commended the staff for their efforts with the residents.

### **2.3 Patient Story**

C. Covino shared a story regarding patient transfer from the ER Department to TBRHSC for diagnostic intervention. The difficulties around EMS stable patient transfers, the prioritizing of additional transfers, and physician decision making was discussed.

C. Covino discussed her ongoing work with EMS and identified opportunities for improvement.

## **3.0 QUORUM**

**3.1** 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 – J. Foulds

Seconded by – N. Gladun

Opposed – None

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

## **4.0 MEETING MINUTES**

### **4.1 Board**

The minutes of the June 29, 2020, Board meeting were reviewed.

#### MOTION #2

Moved by - E. Rutherford

Seconded by – E. Wawia

Opposed – None

*“That the Board meeting minutes of June 29, 2020 be accepted as presented.”* Carried.

### **4.2 Special Board Meeting**

The minutes of the August 20, 2020, Special Board meeting were reviewed.

#### MOTION #3

Moved by – N. Gladun

Seconded by – J. Foulds

Opposed – None

*“That the Special Board meeting minutes of August 20, 2020 be accepted as presented.”*  
Carried.

### **4.3 Medical Advisory Committee Meeting**

The minutes of the September 9, 2020, MAC meeting were reviewed.

#### MOTION #4

Moved by – J. Foulds

Seconded by – E. Wawia

Opposed – None

*“That the Medical Advisory Committee meeting minutes of September 9, 2020 be accepted as presented.”* Carried.

## **5.0 GENERATIVE**

### **5.1 Senior Management Report**

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

- COVID-19
- Long Term Care Developments
- Facilities Report
- Pandemic Pay
- COVID-19 Expense Tracking
- Nursing Report
- Accreditation
- Indigenous Advisory
- Indigenous Awareness Day

#### MOTION #5

Moved by - R. Beatty

Seconded by - J. Foulds

Opposed – None

*“That the Senior Management report of September 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 - increase in demand for screening
- Frailty in Seniors Program
- Influenza Vaccination
- Virtual Hike for Health

#### MOTION #6

Moved by - E. Rutherford

Seconded by - N. Gladun

Opposed – None

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

#### **5.3 French Language Services**

In June 2019, NDMH was designated a French Language institution. C. Covino is completing a report for the NW LHIN and a policy has been developed.

DRAFT ADM 26, French Language Services was reviewed.

The French Language Services summary report was included in the meeting package for review by the Directors.

#### **5.4 Accreditation’s Organization Self Assessment - Governance**

C. Covino provided a review of the current self assessment and provided clarification on the completion of the self assessment.

Supporting documentation will be provided to the directors for the completion of the self assessment.

#### **5.5 Individual Director Self Assessment Revision**

Updated revision includes the assessment from one outstanding Director

#### **5.6 Board Self Assessment**

The Governance Centre of Excellence has opened the portal for the completion of the Board’s Self Assessment. This self assessment provides us with the opportunity to measure ourselves against other similar sized organizations. The link will be provided to the Directors for completion. Once the results are available, they will assist in further development of our work plan to address any gaps identified.

**6.0 STRATEGIC**

**6.1 Quality Healthcare Framework**

C. Covino reviewed the Hospital's definition of quality and patient safety as identified in the framework.

**6.2 Hospital Attestation of Compliance with Hospital Parking Directive**

L. Haskell reported that the annual documentation that attests that we are in compliance with the Ministry's Parking Directive has been executed and returned to the LHIN.

**6.3 Finance - Q1, NDMH**

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

**6.4 Finance - Q1, NDFHT**

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

**6.5 DRAFT Terms of Reference, TBRHSC Services Committee of the Board of Directors**

The DRAFT Terms of Reference, as previously discussed in Jessica Logozzo's presentation was endorsed by the Board of Directors of Nipigon Hospital.

**7.0 FOR INFORMATION**

**7.1 Meeting Effectiveness Results**

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

**7.2 IN CAMERA**

MOTION #9

Moved by - N. Gladun

Seconded by - E. Rutherford

*"That the Board of Directors moves to In Camera at 1:04 pm."* Carried.

**ADJOURNED - 1:10 PM**

**MEETING EVALUATIONS - to be emailed to Directors.**



Kal Pristanski, Board Chair

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David Murray, Chief Executive Officer