



**Stevenson Memorial Hospital
Meeting of Board of Directors**

October 3, 2019
Physical Therapy Department
5:00 p.m.

**Vision: Setting a New Standard for Community Hospital Care
Mission: Promising Progress, Pursuing Perfection**

Committee Members: "P"= Present, "R"= Regrets, "T"=Teleconference, "S"= Staff, "G"= Guest, "E"= Ex-Officio							
Colleen Butler	P	John Murray	R	Norm Depta	P	David Knight	P
Wendy Fairley	P	Jan Tweedy	P	Sheila Kaarlela	P	Kevin Mullins	R
Shelly Cunningham	P	Jeff Stubbs	P	Alison Howard	P	Nishika Jardine	R
Jody Levac	E,P	Carrie Jeffreys	E,R	William Bye	S,P	Barry Nathanson	S, P
Margaret Barber	P	Gary Munro	P	Oswaldo Ramirez	E,P	Jennifer Manicom	G
Vicki Hoffman	G						

Chair: Colleen Butler

Recorder: Sharon Crowe

1.0 WELCOME & CALL TO ORDER

C. Butler welcomed everyone to the meeting. Meeting started at 5:03 pm.

1.1 Quorum

C. Butler advised the Directors there was a quorum.

1.2 Declaration of Conflict of Interest

C. Butler reminded those in attendance of their responsibilities as Board members with respect to the conflict of interest as outlined in the Corporation Bylaws and asked if anyone present wished to declare a conflict of interest. No declarations were made.

1.3 Approval of the Agenda

Motion: Moved by W. Fairley, seconded by N. Depta.

"That the Board of Directors accepts the agenda as presented."

All in favour. Motion passed.

2. PRESENTATION – Balanced Scorecard – Update on Red items.

Jennifer Manicom, HR Manager presented on Item 17 on the Board Scorecard, Percentage of Annual Reviews Completed. She noted the creation of a new fillable PDF form that is easier for Managers and staff to fill in. J. Manicom discussed the challenges of evaluating casual staff and the Board had some questions and recommendations in this regard. Each manager receives on a monthly basis a list of reviews to be performed that month. All employees are to receive a performance review on the anniversary of their hire date.

Vicki Hoffman, Manager of Paramedical Services presented on Item 2 of the Board Scorecard, Medication Reconciliation at Discharge. She mentioned the challenges in completing the medication reconciliation are due in large part to this being a manual process and is subject to error. This reconciliation process is also not a routine part of the nursing process and there are resource time constraints in completing the reconciliation. Action plan includes reviewing data for accuracy, retraining staff on the medication reconciliation process and engaging the physicians.

3. CONSENT AGENDA

- 3.1** Board of Directors Minutes – September 5, 2019
- 3.2** Board Quality Committee Minutes – September 11, 2019
- 3.3** Governance and Nominating Committee Minutes – September 19, 2019
- 3.4** Finance, Audit and Property Committee Minutes Sept 20, 2019
- 3.5** Redevelopment and Communications Committee Minutes Sept 25, 2019

The following changes to the minutes were requested – There were no changes requested.

Motion: Moved by A. Howard, seconded by J. Tweedy.

“That the Board of Directors accepts the consent agenda as presented.”

All in favour. Motion passed.

4. BUSINESS ARISING FROM CONSENT AGENDA

There was none.

5. REPORTS

5.1 Report of President and CEO

J. Levac made a power point presentation with the following update:

- CLHIN and the \$200,000 one-time funding
- OHT Data
- ICU Update – showed the architectural drawing
- CLHIN endorsement of Redevelopment
- Accreditation 2020 – Need for Board members to do 2-hour survey with J. Walker. J. Tweedy, C. Butler and J. Murray have agreed to this.

5.2 Report of the Chief of Staff

Dr. Nathanson provided the following update:

- Completed C-MARS application and it is live. Says it takes less than 15 minutes to complete
- Encouraged everyone to get the flu shot
- Vaping Policy should be ready for Stevenson staff tomorrow
- Expectation of physicians to provide continuity of care
- Due to resource constraints, the Sick Kids ACTS program (Acute Care Transport

Services) is not being offered this year for OBS staff. Hopefully they will offer it again in the future

- Model of Care for ICU, admission criteria, inclusion and exclusion criteria being worked on
- Purdue Pharma and the opioid crisis

5.3 Report of President of Professional Staff

Dr. Ramirez provided the following update:

- Issues with Departmental HOC (Hospital On-Call) funding – looking to do an internal reorganization
- Discussed the cuts to P4R funding and DND funding and impact on physicians
- Anesthetists retiring
- Birthing Unit very busy
- X-ray unit, will be using portable unit during accreditation
- The Professional staff was able to provide two \$1,500 scholarships to Banting high school students

5.4 Report of VP, Patient Services/Chief Nursing Executive

C. Jeffreys did not attend the meeting.

5.5 Report of the Foundation

M. Barber referenced her written report circulated with the agenda and highlighted the following:

- General Highlights – achieved 51% towards 2019-2020 Annual Fund Goal, 51% for overall Redevelopment goal and 47% towards overall 43M
- New accounting system “Go Live” starting January 2020
- Capital Campaign Cabinet is meeting regularly and the capital campaign is underway
- Community Engagement – Participated in Community and donor recognition events.

5.6 Report of Auxiliary

G. Munro provided the following update:

- Full executive again
- Oct 26 will be their big raffle draw and craft sale
- Tree lights ceremony planning is well underway and will take place the beginning of December
- Gift shop loading Christmas stock with an excellent inventory of gift items
- Audit coming up shortly
- Getting a point of sale terminal for the coffee corner, can pay with debit, credit etc.
- Student information night recently and 6 students showed up – 23 students volunteer presently

5.6.1 Report of the VP/Chief Financial and Information Officer – HIS Update

W. Bye provided the following update:

- Launched patient portal on Monday. No glitches

- Next phase will be completed in the next fiscal
- Taking time on implementation of next phases, so there will be less problems when it goes live

6. Care – S. Kaarlela

6.1 Patient Experience Update – from June meeting

S. Kaarlela provided an update on a patient experience that was initially discussed in June. The Board discussed a Hospital staff recognition program.

6.2 Critical Incident Report – None

6.3 Report of the Chair, Quality Committee

Last meeting concentrated on the Balanced Scorecard and any HR issues that were given to Quality with the dissolution of the HR Committee.

7. Partnerships – W. Fairley

7.1 Report of the Co-Chair, RCEC

W. Fairley discussed some changes in membership on this committee.

7.2 Resolution to update the State 2 Submission to the Government

Motion: Moved by N. Depta, Seconded by S. Cunningham.

That the Board of Directors of Stevenson Memorial Hospital, authorize senior management to work with Chefurka Consulting International Limited (CCIL) on moving the Draft Stage 2 currently attached to the latest submission to the Ministry of Health Capital Branch, into the Ministry of Health Capital Branch's most current mandated template and approve the use of the 2019-20 redevelopment budget of \$110,000 for this purpose in addition to the \$303,814 previously capitalized to the Draft Stage 2.

All in Favour. Motion passed.

7.3 Motion to Accept the Community Engagement Plan

Motion: Moved by D. Knight, Seconded by S. Kaarlela.

On the recommendation of the Redevelopment and Community Engagement Committee, The Board of Directors of Stevenson Memorial Hospital accepts the 2019-2020 Community Engagement Plan.

All in favour, Motion passed.

8. Investments – D. Knight

8.1 Report of the Chair, FAPC

We had the first meeting of the new FAP Committee.

8.2 Financial Statements as of August 31, 2019

Motion: Moved by N. Depta, Seconded by J. Stubbs.

That the Board of Directors of Stevenson Memorial Hospital accept the Financial Statements as of August 31st, 2019.

All in Favour, Motion passed.

8.3 Request for Sign

Motion: Moved by S. Kaarlela, Seconded by A. Howard.

That the Board of Directors of SMH authorize the Board Chair to request to the Stevenson Memorial Hospital Foundation that it provide capital funding in the amount of \$50,000 for a new exterior sign for the main entrance of the Hospital.

All in favour, Motion passed.

Dr. Ramirez left the meeting at this point – 7:22 pm

9.0 Governance

9.1 Report of the Chair, GNC

J. Tweedy updated the Board on the ongoing policy revisions and thanked the directors for their work to date on the policies. GNC is hoping to complete the policy review and bring the new policy document to the Board at the January Board meeting.

9.2 Terms of Reference for all Committees

Motion: Moved by W. Fairley, Seconded by A. Howard.

The Board of Directors of Stevenson Memorial Hospital accepts all the Board Committee Terms of Reference as presented.”

All in favour, Motion passed.

9.3 Board Education

N. Jardine approved by GNC to attend the OHA Financial Literacy for Board Directors course.

9.4 Work Plans for all Committees

Work plans were received.

9.5 Board Evaluation Results – OHA

The Board discussed the board evaluation results completed by the Directors in the spring of 2019. The Board reviewed the three following lower scoring areas:

- Board wants to see how the Strategic plan is operationalized.
- CEO and COS development and succession
- Number of committees to support the work of the Board

The CEO invited Board members to attend the weekly huddle meetings to see the operationalization of the strategic plan. The Board discussed that there was an extensive review of the committee structure after the evaluation was completed and the concerns identified in the evaluation have been addressed. The Executive Committee is developing the CEO and COS succession plan, which will be brought to the Board in the spring.

9.6 Motion to accept Committee Structure

Motion: Moved by W. Fairley, Seconded by N. Depta.

That the Board of Directors of the Stevenson Memorial Hospital accepts the Committee Structure as presented.

All in favour, Motion passed.

10. REPORT OF THE BOARD CHAIR

10.1 Moving June Board Meeting from June 4th to June 11th

Accepted

10.2 Ensure full public disclosure of Board Meetings

C. Butler ensured Board Minutes will be put on the SMH Website when approved.

10.3 Political Engagement Plan

RCEC to develop a Plan. Talked about Social Media and it was recommended that the Board members utilize Social Media, and how the board are ambassadors for the hospital. Wanted J. Levac and R. Ogorek to provide the Board with some consistent messaging for the Board to use.

10.4 Capital Campaign Launch

C. Butler thanked M. Barber for a great, classy event on Tuesday October 1st, the Capital Campaign Launch.

C. Butler assured the BOD that both our Board and the Foundation board are aligned and need to be supportive of each other and consistent with messaging.

Motion: Moved by J. Tweedy, seconded by A. Howard.

“That the Board of Directors received all reports as presented”

All in favour. Motion passed.

A. Howard left the meeting at 7:51 pm

G. Munro left the meeting at 7:51 pm

11. In Camera Session

Motion: Moved by S. Kaarlela, seconded by S. Cunningham.

“That the Board moves to the in-camera session.”

All in favour. Motion passed.

Motion: Moved by S. Kaarlela, seconded by D. Knight.

“That the Board move back into the open session.”

All in favour. Motion passed.

The Board Chair advised that the following motions arose from the in-camera session:

- *Three (3) changes in privileges for members of the medical staff; and*
- *Six (6) renewals of temporary privileges.”*

12. Next Meeting Date

The next Board meeting will be held on Thursday November 7, 2019.

There being no further business, the meeting adjourned at 8:02 p.m. Moved by N. Depta.



Colleen Butler, Board Chair

Recording Secretary: Sharon Crowe