

**Minutes of the Meeting of the MICs Board of Directors**  
**Wednesday, February 28<sup>th</sup>, 2018 – 18h00**  
**Via videoconference @ MICs Boardrooms (AGH Lead Site)**

<b>ANSON GENERAL HOSPITAL</b>	
x	Patrick Britton - Chair
x	Danielle Delaurier – Vice-Chair
x	Stan Denault - Treasurer
regrets	Stéphanie Giguère – Municipal Representative
<b>BINGHAM MEMORIAL HOSPITAL</b>	
x	Bob Dennis – Chair
x	Irma Clarke – Vice-Chair
regrets	Roy Onlock – Treasurer
regrets	Doug Bender – Municipal Representative
<b>LADY MINTO HOSPITAL</b>	
x	Patricia Dorff – Chair
x	Gilles Chartrand – Vice-Chair
regrets	Julie Papineau – Treasurer
x	Renelle Bélisle – Municipal Representative
<b>MICs GROUP OF HEALTH SERVICES</b>	
x	Paul Chatelain – MICs Chief Executive Officer
x	Isabelle Boucher - MICs Chief Nursing Officer
regrets	Dr. Stephen Chiang – MICs Chief of Staff
x	Dr. Joey Tremblay – MICs President of Medical Staff
<b>GUESTS</b>	
x	Suzanne Gadoury – MICs Executive Assistant ( <i>Recording Secretary</i> )
x	Gail Waghorn – MICs Chief Financial Officer / Executive Leader of Corporate Services
x	Kelly Baxter – MICs Director of Care
x	Jim Brown - Delegation

**1.0 Call to Order & Chairs Remarks (P. Britton)**

- 1.1 P. Britton opened the meeting and welcomed everyone. Pat inquired if there were any declarations of conflict. S. Denault declared a possible conflict as he is acquainted with Mr. Brown who is attending as a delegation. As this will not require voting, no conflict was declared.

**2.0 Approval of Agenda (P. Britton)**

The agenda was reviewed.

Add: 9.2 approval of SCM LSAA Declaration

Add: 9.3 approval of VM LSAA Declaration

Motion:

Moved by: D. Delaurier

Seconded by: G. Chartrand

Be it resolved,

**THAT** the MICs Board of Directors approve the board agenda as amended.

Carried.

### **3.0 Delegation Presentation (J. Brown)**

#### **3.1 Foot Care Tender**

- Mr. Brown thanked the board for allowing him to attend the meeting and declared that he is a long-standing Health Care Advocate
- The Northern Nine stood up a few years ago because there were health care issues in the community
- They felt that the hospital attempted to silence them with a law suit in an attempt to silence the criticism
- He feels that the organization is trying to quell freedom and democracy
- He went on to speak about the Foot care services, specifically regarding the letter sent to Mr. Chatelain dated Nov. 22<sup>nd</sup>, 2017; he asked for clarification on how that decision was made and if the process was driven by the finance department; he wants to know who decided that the current foot services were lacking; he wants assurances that the residents are free to choose their foot care provider; he believes that the Villa Minto staff were intimidating residents into signing consent forms to use Rainville's services but that has since been rectified; he is under the impression that as these residents pass on, future residents will not be allowed to choose their own provider due to the contract with Rainville; Mr. Brown requested a meeting with all parties to discuss the foot care matter and asked the CEO or Board of Directors to advise him of a date and location where this meeting will be held; he has made a FIPPA request but does not feel that he should pay for records that should be readily accessible; he is looking for terms of reference, the name of the personnel who actually determines these decisions, a copy of the approval process, why the need for a registered chiropodist as he doesn't see an apparent need as stated by anyone as this eliminates other foot care services, specifically Cochrane Foot Care Services
- The CEO responded that the request came from a need, mostly from Rosedale, which did not have any foot care services; CEO thought it would be good for residents to have chiropody services; Cochrane Foot Care did not lose any clients; residents have the right to choose their own service providers
- Director of Care stated that many of our residents require special foot care services and that adding a chiropodist to our team is beneficial to them; however any foot care provider is allowed to provide foot care to residents

#### **3.2 South Centennial Manor Incident**

- Mr. Brown spoke of a report which will be made public sometime in the near future; he looks forward to reading the report and asked the board to take a look at it
- The CEO responded that he could not speak to this as it is personal confidential health information; we are waiting for the report and it will be made public
- Director of Care stated that the ministry did come to do an inspection from January 22<sup>nd</sup> to January 26<sup>th</sup>; we received no compliance orders or director's referral; received four written notifications and one voluntary plan of correction
- Mr. Brown then brought up several other items that had not been part of his delegation request:
- He mentioned that he could not find the 2017 minutes of the meetings for the Anson

General Hospital; it was explained to him that each local board no longer has separate meetings; local issues are discussed in the Site Specific section of the MICs Board of Directors agenda and minutes are posted on the website under the MICs Group tab

- He then brought up the Iroquois Falls Family Health Team and how community members fundraised to build the clinic; he has been asking for a Board of Directors to oversee the Family Health Team for over a year
- He then proceeded to criticize the Governance Board Openness policy and made suggestions on how to improve it

### 3.3 Villa Minto Report

- Mr. Brown was upset to hear about the Villa Minto report and felt that this was obviously traumatic to the senior involved and family
- He quoted several items in the report and feels it should be published on the MICs website
- Mr. Brown stated that since his father spent four years at South Centennial Manor, he is very sensitive to matters concerning seniors and feels it is only appropriate that he speak on their behalf as many of them cannot speak for themselves.
- The CEO responded that the report is a public document; physician assessments were not being done; we have been working with the physicians and as of February 1<sup>st</sup>, 2018, we have rectified the physician problem; we have one sole physician who is taking care of Villa Minto and we are looking to have appropriate coverage from here on end
- In terms of the complaints, the Long-Term Care Home Act is very lengthy and we were not aware that any written complaint from the community has to be reported to the Ministry; this is something that we have learned and every complaint from a family member or community member will be forwarded to the ministry

### 3.4 Apology Request

- One of the reasons he requested a delegation was to ask for an apology
- He alluded that there were people in this group who sued him and eight other people because they stood up for health care for people who did not and were penalized for it; he officially requested a public apology to the Northern Nine for what they went through; he then proceeded to read a letter from the Northern Nine commending him for his actions
- The AGH Board Chair responded to Mr. Brown's request by stating that he and the other board members were not in office at the time of the lawsuit as it predates the current CEO and AGH Board of Directors; since they did not initiate the lawsuit, they do not feel an apology is merited; a letter will be sent to Mr. Brown advising him that his request is denied
- Motion: draft a letter to Mr. Brown advising him that an apology is not forthcoming  
Moved by: S. Denault  
Seconded by: I. Clarke  
Carried.

### 3.5 Corporation Membership Change; did not address this item

- Board does not usually take delegations or deputations; contradictions to openness

policy

#### 4.0 Approval of Minutes (P. Britton)

- 4.1 Minutes of the MICs Board of Directors meeting held January 24<sup>th</sup> 2018 were provided for information. Mover of the agenda is missing; this will be added.

Motion:

Moved by: G. Chartrand

Seconded by: P. Dorff

Be it resolved,

**THAT** the MICs Board of Directors approve the minutes of the meeting held January 24<sup>th</sup>, 2018 as amended.

Carried.

#### 5.0 Follow-Up Items

- 5.1 Review of the 2017-2018 Board Work Plan

- The Board Work Plan was reviewed for the month of February.
- By-laws and policies will be reviewed at the March 7<sup>th</sup> Ad Hoc Committee meeting

- 5.2 Strategic Plan

- Five-year plan was provided for information
- It was approved by the Strategic Planning Committee at their January meeting
- Strategic direction: person-centered care, safety, sustainment, partnering, engagement
- The next step is to determine the objectives and timelines for each goal

Motion:

Moved by: R. Bélisle

Seconded by: D. Delaurier

Be it resolved,

**THAT** the MICs Board of Directors approve the new Strategic Plan for 2018-2022 as presented.

Carried.

#### 6.0 MICs Finance

- 6.1 December 2017 Financial Statements – G. Waghorn

- The Q3 Financial Statements were provided for information; these were approved by the MICs Audit & Finance Committee in January
- Gail provided a detailed overview of the statements for all three sites.
- Bingham Memorial Hospital: was operating at a surplus of \$74,552; total margin as a percentage of revenue was 1.36%; operating revenue was \$250,961 under budget; differential and copayment revenue were under budget by \$40,033; operating expenses were \$277,916 under budget; budgeted expenditures were \$5.83 million; salaries were \$207,826 under budget; overtime costs were \$76,108; sick time costs were \$37,423; orientation costs were \$29,426.85; benefits costs were running at 30% of salaries; other supplies and expenses were under budget \$46,000 except for maintenance which was \$17,000 over budget; medical supplies were \$23,000 under

budget and drugs were \$59,000 under budget reflecting low activity in acute care; balance sheet was provided; line 10 - receivable from partnership is 2.4 million; money will be moved to longer term investments; current ratio is 6.59; capital budget purchases were \$757,808; a number of items were purchased early in 2017-2018; there is a number of building projects that were carried from earlier years; every item that has a PO next to it means it has been ordered; investment summary; contains fixed and mutual funds

- Anson General Hospital: reported a second quarter deficit of \$144,343; yearend forecast is projecting a hospital operating deficit of \$149,583; total margin for Q2 was -3.09; operating revenues were \$224,809 under budget; received a base increase of \$160,200; miscellaneous recoveries are under budget by \$40,000; operating expenses were \$46,484 under budget; budgeted expenditures were \$6.99 million; salaries were \$104,540 under budget; overtime costs were \$174,556; sick time costs were \$80,902; benefits costs were running at 29% of salaries; other supplies and expenses were over budget by \$197,476; South Centennial Manor ended Q3 with a deficit of \$189,515 due to increased nursing costs and 5% drop in Case Mix Index (CMI) funding; balance sheet current ratio is (0.86); line 10 – cash flow owing to partnership is \$2.2 million; investment summary – RBC Dominion Securities provided for information; capital budget - most budget items were in building area; number of items carried over from last year's projects; total capital spent was \$795,183.23
- Lady Minto Hospital: was operating at a surplus of \$110,770; yearend forecast was a surplus of \$320,000; operating revenue was under budget by \$348,025; received a 2% base increase totaling \$208,300; operating expenses were \$465,382 under budget; budgeted expenditures were \$10.0 million; salaries were under budget by \$285,502; overtime costs were \$290,045; sick costs were \$82,638; benefit costs were running at 31% of salaries; other supplies and expenses were under budget by \$77,240; balance sheet is very strong; current ratio is 2.09; Villa Minto ended Q3 with a deficit of \$112,480 partly due to the CMI cut; capital budget purchases are \$941,612.73 out of \$2,374,140.40 budgeted; some equipment items still need to be ordered; investment summary – provided for information; authorized signatures need to be updated; LMH needs a large capital investment in infrastructure

Motion:

Moved by: G. Chartrand

Seconded by: I. Clarke

Be it resolved,

**THAT** the MICs Board of Directors approve the December 2017 financial statements for Bingham Memorial Hospital, Anson General Hospital, South Centennial Manor, Lady Minto Hospital and Villa Minto as presented.

Carried.

## 6.2 Investment RFP – G. Waghorn

- The document was provided for information
- It was approved by the MICs Audit & Finance Committee
- We still have to identify the Team Members who will be part of the review committee
- The investments must be in-line with the policy
- The FIN-215. Investments policy will be part of the statement
- The RFP will go out in March

- Board members were invited to ask questions.

Motion:

Moved by: B. Dennis

Seconded by: P. Dorff

Be it resolved,

**THAT** the MICs Board of Directors approve the Investment RFP as presented.

Carried.

## 7.0 Presentations/Reports (P. Britton)

### 7.1 Chief Executive Officer Report: (P. Chatelain)

- The report was provided for information.
- The CEO provided the following overview:
- Pro Forma financial statements are being reviewed by the ministry; a meeting is scheduled for next week
- Accreditation survey went well; MICs achieved 95.7% of 1,998 quality standards; submitted some corrections to report and waiting for final rating; Paul thanked the senior executive team and board members for their participation in the process
- Executive compensation framework has been approved and has been posted on the website until March 6<sup>th</sup> (30 days)
- Dr. Boettcher has settled in Matheson having taken over Dr. Razack's practice; some renovations are being done to the locum house
- Rosedale renovations will begin soon as well as the oil tank replacement at AGH
- Announcement of Dr. Hoskins' resignation was distributed to board members
- Non-urgent patient transfer provider will remain until the end of March; we might have to extend their contract again until a permanent contract is awarded by the LHIN
- Board Members were invited to ask questions.

### 7.2 Chief Nursing Officer Report: (I. Boucher)

- Some of these reports are presented at the Quality meetings
- The report provided consisted of the following items:
  - Quality Improvement Plan Scorecard Q3: proposed indicators for 2018-2019 are: Hospital – wait time in ER, satisfaction with quality of service in ER, ALC rates, medication reconciliation on discharge, incidents of workplace violence; LTC – resident experience, inappropriate use of anti-psychotics, potential avoidable emergency visits
  - Client Experience Q2/Q3: results from LTC and ER surveys were provided; results to be shared with team leads, staff and members of the Patient & Family Advisory Council and the Resident/Family Council
  - Quality Improvement Initiatives: implement clinical competency modules to assist with nursing care in ER; promote use of Patient Order Sets; implement standardized tool to identify and reduce delirium and functional decline; complex discharge planning process; addition of “honour guard” to MAID policy; address items from gap analysis from Ontario College of Pharmacists' visit in May 2017
  - Improvement Opportunities: Patient Care Team reviewing their goals and objectives; reviewing wait times in ER; developing an accountability plan for staff who received LEAN training; education/training on FMEA process for team leaders; address Accreditation results

- Quality Improvement Plan Hospital Scorecard 2017-2018: identified a glitch in one of the databases; indicators are doing well except for person experience in ER (quality of service); we are under our initial performance; we will keep this indicator on the QIP this year; need to get a sense of what the issues are; wait times are high; Pat shared that while in the hospital yesterday, she witnessed the ER nurse announcing to the people in the waiting room that she had not forgotten them and would get to them shortly; this alleviated much of the patients' angst;
- Quality Improvement Plan LTC Scorecard 2017-2018: anti-psychotics are not used solely for psychosis; they are used for dementia and other conditions; this should be looked at; HQO feels this indicator should remain on the QIP
- Client Experience Quarterly Scorecard ER (Q2-Q3): top section shows response rates which are fairly low; full survey results are shared with patient care managers, LTC Resident Councils; we include positive comments when possible; action items need to be determined; length of stay – wait time to see physician, etc.
- Client Experience Quarterly Scorecard Inpatient (Q2-Q3): surveys are completed on an iPad at bedside; need to improve response rates therefore the process will be reviewed
- Resident Experience Quarterly Scorecard LTC (Q2-Q3): surveys are completed by family members at the annual care conferences; results serve as guidelines in the decision-making process; we will be reviewing and revising the survey questions as well as sharing them with the Family Advisory Council
  - Board members were invited to ask questions.

### 7.3 Accreditation Presentation: (I. Boucher)

- The presentation was provided for information

## 8.0 **Medical Staff** (Dr. S. Chiang)

### 8.1 Chief of Staff Report:

- The report was provided for information.
- Topics covered were:
  - OMA/MOHLTC Negotiation Update: waiting for binding arbitration
  - Education Group: February 23<sup>rd</sup> educational conference was a great success; 60 individuals attended
  - NOSM Medical Students: positive feedback received regarding their learning experience throughout their rotation at MICs
  - Physician Assistant Student: a second-year student will be doing a clinical rotation with Dr. Chiang; this is a two-year program; graduates of this program are licenced to practice under the supervision of a physician
  - Medical Staff: Dr. Klassen is finishing his contract at the end of May 2018; we are actively recruiting his replacement but he is willing to stay a little longer if required

## 9.0 **LHIN / MOHLTC Business** (P. Chatelain)

9.1 The announcement of the new CEO for the NE LHIN was provided for information; he is planning on visiting the hospitals in his area

9.2 Motion to approve the declaration for South Centennial Manor LSAA

Moved by: S. Denault

Seconded by: D. Delaurier

Be it resolved,

**THAT**, the AGH Board of Directors declares that to the best of its knowledge and belief, the hospital has fulfilled its obligations under the long-term care service accountability agreement in effect during the applicable period.

Carried.

9.3 Motion to approve the declaration for Villa Minto LSAA

Moved by: R. Bélisle

Seconded by: G. Chartrand

Be it resolved,

**THAT**, the LMH Board of Directors declares that to the best of its knowledge and belief, the hospital has fulfilled its obligations under the long-term care service accountability agreement in effect during the applicable period.

Carried.

**10.0 MICs Quality Committee (I. Boucher)**

10.1 Quality Committee Minutes

- Minutes of the meeting held January 10<sup>th</sup>, 2018 were provided for information

**11.0 Site Business (P. Britton)**

11.1 Anson General Hospital: N/A

11.2 Bingham Memorial Hospital:

- Approval of Rosedale Renovations Contract

Motion:

Moved by: B. Dennis

Seconded by: I. Clarke

Be it resolved,

**THAT** the BMH Board of Directors accept the bid from SMW Contracting for the sum of \$555,974.00 for renovations to Bingham Memorial Hospital and Rosedale to be completed by August 18, 2018 as presented.

Carried.

11.3 Lady Minto Hospital: N/A

**12.0 Partnership Business (Bob Dennis)**

12.1 January 2018 Board Effectiveness Survey Results

- 11 out of 15 surveys were submitted.

12.2 February Board Effectiveness Survey

- The survey was emailed via Survey Monkey.



12.3 Approval of Revised Policy GOV-012.MICs Chief of Staff Evaluation Process

Motion:

Moved by: B. Dennis

Seconded by: P. Dorff

Be it resolved,

**THAT** the MICs Board of Directors approve the revised GOV-012 policy as presented.

Carried.

12.4 Approval of revised MICs Chief of Staff Position Description

- The document was revised and recommended for approval by the MICs Board Ad Hoc Committee

Motion:

Moved by: G. Chartrand

Seconded by: R. Bélisle

Be it resolved,

**THAT** the MICs Board of Directors approve the revised MICs Chief of Staff position description as presented.

Carried.

12.5 Approval of Ratification of SEIU Local Agreement

- Negotiations took place December 12 and 13 and the agreed to terms consisted mostly of housekeeping items, committee composition, some scheduling language. The only financial impact was a slight increase to the uniform allowance which impacts all of MICs by ~\$2,200.
- There are 3 items which will be going to arbitration. The one with a potential financial impact is the RPN wage adjustment, and OHA is looking at a potential centralized approach given that all hospitals are dealing with the same issue.

Motion:

Moved by: B. Dennis

Seconded by: I. Clarke

Be it resolved,

**THAT** the MICs Board of Directors approve the ratification of the SEIU Local Agreement for the new term as presented.

Carried.

**13.0 Board Committee Minutes**

- 13.1 Minutes of the MICs Strategic Planning Committee meeting held January 17<sup>th</sup>, 2018 and MICs Board Ad Hoc Committee meeting held January 31<sup>st</sup>, 2018 were provided for information

**14.0 MICs News (P. Britton)**

- February 2018 MICs News was provided for information.

**15.0 Next Meeting Date** (P. Britton)

- Wednesday, March 28<sup>th</sup>, 2018 at 6:00 p.m. (LMH Lead Site)

**16.0 Generative Thinking** (P. Britton)

- N/A

**17.0 Upcoming Meeting Dates**

- As per agenda.

**18.0 In Camera**

## 18.1 Motion to go in camera

Moved by: B. Dennis

Seconded by: I. Clarke

## 18.2 Review of policy GOV-005

## 18.3 Motion to go out of camera

Moved by: G. Chartrand

Seconded by: R. Bélisle

**19.0 Motion**

## 19.1 Approval of revised policy GOV-005.Board Openness

- The policy was reviewed, revised and recommend by the MICs Board Ad Hoc Committee. Other changes were made by the board members.

Moved by: P. Dorff

Seconded by: R. Bélisle

Be it resolved,

**THAT** the MICs Board of Directors approve the revised GOV-005 policy as amended.

Carried.

**20.0 Adjournment** (P. Britton)

- There being no further business, the meeting adjourned at 8:04 p.m.

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CHAIR, Bingham Memorial Hospital

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CHAIR, Anson General Hospital

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CHAIR, Lady Minto Hospital

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SECRETARY, MICs C.E.O.