Minutes of the Meeting of the MICs Board of Directors Wednesday, March 27th, 2019 – 18h00 Via videoconference @ MICs Boardrooms (LMH Lead Site)

ANSON GENERAL HOSPITAL	
X	Danielle Delaurier – Chair
х	Ann Zsigmond
Х	Stan Denault – Treasurer
х	Darcy Cybolsky – Municipal Representative
BINGHAM MEMORIAL HOSPITAL	
х	Bob Dennis – Chair
Х	Irma Clarke – Vice-Chair
regrets	Roy Onlock – Treasurer
х	Jenny Gibson – Municipal Representative
LADY MINTO HOSPITAL	
х	Patricia Dorff – Chair
х	Gilles Chartrand – Vice-Chair
х	Julie Papineau – Treasurer
Х	Desmond O'Connor – Municipal Representative
MICs GROUP OF HEALTH SERVICES	
Х	Paul Chatelain – MICs Chief Executive Officer
Х	Isabelle Boucher – MICs Chief Nursing Officer
х	Dr. Stephen Chiang – MICs Chief of Staff
Х	Dr. Joey Tremblay – MICs President of Medical Staff
GUESTS	
Х	Suzanne Gadoury – MICs Executive Assistant (Recording Secretary)
х	Gail Waghorn – MICs Chief Financial Officer / Executive Leader of Corporate Services

1.0 Call to Order & Chairs Remarks (P. Dorff)

1.1 The chair opened the meeting and welcomed everyone. She then inquired if there were any declarations of conflict of interest. There were none.

2.0 Approval of Agenda (P. Dorff)

The agenda was reviewed.

Motion:

Moved by: G. Chartrand Seconded by: J. Papineau

Be it resolved,

THAT the MICs Board of Directors approve the board agenda as presented.

Carried.

3.0 Trustee Education / Presentations

3.1 N/A

4.0 Approval of Minutes (P. Dorff)

4.1 Minutes of the MICs Board of Directors meeting held February 27th, 2019 were provided

for information.

Motion:

Moved by: D. Delaurier Seconded by: A. Zsigmond

Be it resolved,

THAT the MICs Board of Directors approve the minutes of the meeting held February 27th, 2019 as presented.

Carried.

5.0 Follow-Up Items

- 5.1 <u>Review of the 2018-2019 Board Work Plan</u>
 - The Board Work Plan was reviewed for the month of March.
 - Will work on the Hospital Improvement Plan in April.
 - The HIRF and Capital Budget review will be presented in April.
 - The self-assessment tool has been emailed to all board members.
 - Every other item is being reviewed today.

6.0 MICs Finance

- 6.1 January 2019 Financial Statements G. Waghorn
 - Chief Financial Officer gave a quick review of the financial statements for all sites **BMH**:
 - Hospital operating at a surplus of \$105,689; total operating revenue was \$6,387,165; total operating expenses came up to \$6,281,476; will be ending the year in a good surplus position

AGH:

Hospital operating at a deficit of \$11,563; operating revenue was \$8,054,277; total operating expenses came up to \$8,065,840; a few adjustments were done with expenses shared with the IFFHT; will end the year in a surplus position due to investment income realized; overtime costs keep increasing

SCM:

 ended third quarter with a total deficit of \$624,492 including amortization expense; total revenue was \$4,092,378; operational deficit was \$437,268; paying a lot of overtime for nursing; balancing the budget will be difficult; nursing overtime could be mitigated by hiring more nurses but we have been unable to hire any

LMH:

Hospital operating at a surplus of \$207,079; operating revenue was \$11,713,588; total operating expenses were \$11,506,509; there is a high cost in nursing overtime here as well; there was an unfilled physiotherapist job; we just recruited for this position which will show up in the 2020 statements

VM: ended the third quarter with a surplus of \$25,605; total revenue was \$2,323,694

Motion to approve January 2019 Financial Statements

Moved by: S. Denault Seconded by: J. Papineau

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Be it resolved,

THAT, the MICs Board of Directors approve the January 2019 Financial Statements for Bingham Memorial Hospital, Anson General Hospital, South Centennial Manor, Lady Minto Hospital and Villa Minto as presented. Carried.

7.0 **Presentations/Reports** (P. Dorff)

- 7.1 <u>Chief Executive Officer Report</u>: (P. Chatelain)
 - The report was provided for information.
 - The CEO provided the following overview:
 - Initial soil samples required more testing; final soil testing results on land behind AGH should be provided this month; dialogue is ongoing with the MOHLTC; will have to decide which site we will be building on and advise the ministry; a change of scope will require a public consultation.
 - SCM fundraising committee is hosting its annual lobster dinner on May 25, 2019.
 - We have not heard back from the NELHIN regarding our HAPS or the Hospital Improvement Plan.
 - LMH roof is completed; work on AGH and BMH generators has begun.
 - The Canadian Healthcare Facilities will be doing an article on the MICs Group and Honeywell Energy and Facility Renewal Program in their fall 2019 issue.
 - We are aggressively recruiting for 6 physicians and 1 general surgeon; we will be attending two recruitment fairs in April: the General Surgery conference and the Society of Rural Physicians of Canada conference. Director of H.R. and CEO presented at the BR-M and Cochrane town council meetings to discuss Physician Recruitment incentives. A task force will be established to develop a plan.
 - The open forum in Matheson in March was well attended and very engaging; a similar forum will be scheduled in Iroquois Falls in conjunction with the IFFHT.
 - Board Members were invited to ask questions.
- 7.2 <u>Hospital Mergers</u>: (P. Chatelain)
 - Document was provided for information regarding the amalgamation of Wilson Memorial General Hospital and the McCausland Hospital which are similar to MICs
 - Their situation was similar to MICs although they were not partnered beforehand
 - Paul spoke to the North Shore CEO who was willing to come and speak to us; they
 received funding from the NWLHIN to integrate
 - Amalgamation was discussed at the MICs MAC and they have requested a
 presentation on the pros and cons at their next meeting; much work would need to be
 done if we decide to move forward
 - Board members request a presentation of a cost analysis at a future meeting; looking for comparatives
- 7.3 <u>Chief Nursing Officer Report</u>: (I. Boucher)
 - The CNO provided the following overview:
 Nursing

Nursing

• Will be attending a recruitment fair at Northern College on April 16th and RNAO in Toronto on May 9th. Offers were made to some of our new grads currently in placement. New grads have a temporary license and must be let go if they don't pass their exam. Now offering part-time hours to new hires; in preparation for the recruitment fairs, will be working with the unions to offer guaranteed full-time hours to the new grads.

- Patient Care Manager at AGH is retiring on April 30th. Currently recruiting to fill her position.
- One-on-one meetings will all nursing staff are being scheduled.

<u>Pharmacy</u>

- MICs Pharmacist is resigning from his position to relocate closer to home. We are currently recruiting for his position.
- Training for sterile compounding staff is scheduled for later in April.
- Automated dispensing unit project had resumed but is now on hold due to another glitch.
- We now have a new EMS deployment strategy in place; as of March 25th, EMS is reducing transportation service to our patients; this will impact all hospitals
- Will be receiving some reimbursement for the cost of non-urgent patient transfers.
- OCP (Ontario College of Pharmacists) visit scheduled for June 2019

Infection Prevention and Control

- No outbreaks at the time of this report
- Respiratory outbreak at VM Feb. 27-Mar. 7, 2019. Agent that caused the outbreak was not identified.
- Enteric outbreak at LMH Feb. 11-26, 2019. Agent was identified as Norovirus.

Accreditation

- Received letter in February. Two criteria remain unmet; need to submit further evidence.
- Discussions held with affected departments.

Quality Improvement Plans

- DRAFT QIPs are being presented this evening. Due to submit by April 1st, 2019
- Board members were invited to ask questions.

8.0 Medical Staff (Dr. S. Chiang)

- 8.1 <u>Chief of Staff Report</u>:
 - The report was provided for information.
 - Topics covered were:
 - Medical Staff News
 - Initially Dr. Affleck advised that she was closing her office practice on April 22, 2019 and would just do locum work; she has since delayed her date to an undetermined date in the near future.
 - When Dr. Affleck closes her practice, Dr. McPherrin will take over the care of her patients at the Cochrane Family Health Team. When a new physician is recruited, he will transfer these patients to the new physician.
 - Once Dr. McPherrin has taken over Dr. Affleck's patients, due to heavy workload at the Cochrane FHT, he will stop working on a regular basis in both Lady Minto Hospital and Villa Minto. This will take effect on June 1, 2019. He will continue to do some surgical assists on occasion; Dr. McPherrin stated he would retire in 2 years.
 - Dr. Chiang's three-year term as Chief of Staff will end on June 30, 2019. He will not stand for re-nomination for Chief of Staff. He recommends Dr. Joey Tremblay be nominated for the Chief of Staff position.

• MICs Amalgamation

- MICs amalgamation was discussed at MAC.
- Medical staff requested that Paul make a presentation outlining the pros and cons of amalgamation; Paul will make a presentation at the next MAC meeting.

• Provincial Government's Health Reform

- The People's Health Care Act (Bill 74) has passed both first and second readings in the Ontario Legislature.
- We are still waiting for the government to give us more details about the health reform.

• Recruit of Medical Staff Update

- We still have not been able to recruit physicians needed in our 3 hospitals.
- The CEO, Dr. Bruno, the Executive Director of the IFFHT and the Executive Director of the Cochrane FHT will attend this year's annual conference by the Society of Rural Physicians of Canada in Halifax to help increase recruitment efforts.
- 8.2 <u>Medical Advisory Committee Minutes</u>
 - Minutes of the meeting held February 20th, 2019 were provided for information.

9.0 LHIN / MOHLTC Business (P. Chatelain)

- 9.1 <u>The Critical Role of Small Hospitals</u>
 - Document was provided for information
 - The organization has taken the lead in advocating for small and rural communities
 - Asking for continued support from the PC government
- 9.2 <u>MOHLTC Announcement</u>
 - On March 8th, the Ontario government announced the early slate of the Ontario Health Board of Directors.
 - The board members will provide oversight of Ontario Health and be accountable to the Ministry of Health and Long-Term Care. As of March 8, the Board of Directors for Ontario Health now also constitute the boards that oversee the Local Health Integration Networks (LHINs), Cancer Care Ontario, eHealth Ontario, Health Force Ontario, Health Shared Services Ontario, Health Quality Ontario and the Trillium Gift of Life Network.
 - As such, the Orders in Council that appointed the LHIN Boards have been revoked. Previously scheduled North East LHIN board meetings have been cancelled and their website has been revised to reflect this change.
 - The Ministry has confirmed that the Ontario Health Board will be focused on developing a plan to harmonize the programs and services delivered by the agencies and that while transition planning is underway, LHINs, agencies and transfer payment recipients should maintain their standard level of excellence in delivering their programs, services and patient care.

10.0 MICs Quality Committee (I. Boucher)

- 10.1 Quality Committee Minutes
 - Minutes of the meeting held January 23rd, 2019 were provided for information
- 10.2 <u>Quality Improvement Plan</u>
 - The QIP was provided for information
 - Two draft narratives were presented: one for hospital and one for Long-Term-Care

- There will be six documents submitted to the ministry; one for each hospital and long-term care homes
- ALC indicator is a challenge for us which is why we are keeping it for next year
- New indicator looks at % of patients discharged from hospital for which discharge summaries are delivered to primary care provider within 48 hours of patient's discharge form hospital.
- Percentage of complaints acknowledged to the individual who made a complaint within five business days is at 100% for each hospital; target is to maintain current performance
- Percentage of respondents who responded positively to the following question:
 "When I left, I had a good understanding of the things I was responsible for in managing my health " we are hoping to maintain current target; this will be tied to executive compensation and chief of staff compensation
- Mandatory indicator "Number of workplace violence incidents reported by hospital workers within a 12-month period: goal is to reduce number of incidents and improving the reporting culture; tied to executive compensation
- Medication reconciliation at discharge is a priority indicator; striving to maintain current performance of 100%; tied to executive compensation
- Rate of mental health or addiction episodes of care that are followed within 30 days by another mental health and addiction admission is a new indicator; striving to maintain below 5% at AGH and BMH while decreasing current performance below 10% at LMH
- Long-Term Care: there are four indicators
- First indicator Number of Emergency Department visits for modified list of ambulatory care per 100 long-term care residents: we are striving to achieve a 10% reduction at SCM while maintaining below 10% at Villa Minto and Rosedale
- Second indicator percentage of complaints received by a LTCH that were acknowledged to the individual who made a complaint within 10 business days; there is currently no process to capture data; will start tracking information using the hospital template this year
- Third indicator percentage of residents responding positively to: "You and your loved ones are encouraged to participate in your care.": will keep the same question; goal is to maintain current performance; this will be tied to executive compensation
- Fourth indicator percentage of residents who experience harmful falls; number of falls is low; we should focus on the level of harm

Motion to approve the 2019-2020 QIPs and work plans

Moved by: G. Chartrand Seconded by: D. Delaurier

Be it resolved,

THAT the MICs Board of Directors approve the 2019-2020 hospital and Long-Term Care Quality Improvement Plans for each site as well as the acute and Long-Term care work plans as presented.

Carried.

- 10.3 <u>Corporate Scorecard</u>
 - The Quality Improvement Scorecards for 2018-2019 were provided for information.
 - Four of the five hospitals' objectives ended with a green thumb at the end of the year
 - The only objective in red is the total number of ALC inpatient days which is difficult to meet; none of the other hospitals are able to meet their target

- The LTC scorecard has met three of its four objectives
- The Person Experience rated a yellow thumb at the end of the year which will require monitoring
- A new scorecard format will be introduced at the next board meeting.
- 10.4 <u>Sentinel Events / Near Misses & Adverse Events Reports Summary</u>
 - The report was provided for information.
 - RL6 is the online reporting system averaging about 300 incidents per quarter
 - Top graph indicates total number of incidents; bottom graph indicates number of near misses and good catches
 - Numbers should remain the same if team members continue reporting
 - Critical Incident Aggregate Report for hospitals was provided for Q2 and Q3 of 2018-2019: one incident occurred at AGH in Q3 which was a fracture
 - Top incidents are reported for LTC
 - Different categories of incidents reported: abuse/neglect, outbreaks, injury for which resident is taken to hospital

11.0 Site Business (P. Dorff)

- 11.1 <u>Anson General Hospital</u>:
 - Motion to approve the HSAA

Moved by: D. Cybolsky Seconded by: D. Delaurier

Be it resolved,

THAT the AGH Board of Directors approve the 2019-2020 Hospital Service Accountability Agreement for Anson General Hospital as presented.

Carried.

Motion to approve the LSAA

Moved by: D. Cybolsky Seconded by: A. Zsigmond

Be it resolved,

THAT the AGH Board of Directors approve the 2019-2020 Hospital Service Accountability Agreement for South Centennial Manor as presented.

Carried.

Motion to approve two high school bursaries

Moved by: A. Zsigmond Seconded by: D. Cybolsky

Be it resolved,

THAT the AGH Board of Directors approve one \$500.00 bursary for an English speaking graduate and a \$500.00 bursary for a French speaking graduate from Iroquois Falls and surrounding area going into the health sciences as presented.

Carried.

- 11.2 <u>Bingham Memorial Hospital</u>:
 - Motion to approve the HSAA

Moved by: I. Clarke Seconded by: J. Gibson

Be it resolved,

THAT the BMH Board of Directors approve the 2019-2020 Hospital Service Accountability Agreement for Bingham Memorial Hospital as presented.

Carried.

Motion to approve two high school bursaries

Moved by: I. Clarke Seconded by: B. Dennis

Be it resolved,

THAT the BMH Board of Directors approve one \$500.00 bursary for an English speaking graduate and a \$500.00 bursary for a French speaking graduate from Black-River Matheson going into the health sciences as presented.

Carried.

Motion to approve the painting project for Rosedale, SCM and VM

Moved by: J. Papineau Seconded by: I. Clarke

Be it resolved,

THAT the BMH Board of Directors approve the Environment paint project for Rosedale Centre, SCM and VM as presented.

Carried.

11.3 Lady Minto Hospital:

Motion to approve the HSAA

Moved by: G. Chartrand Seconded by: D. O'Connor

Be it resolved,

THAT the LMH Board of Directors approve the 2019-2020 Hospital Service Accountability Agreement for Lady Minto Hospital as presented.

Carried.

Motion to approve the LSAA

Moved by: D. O'Connor Seconded by: G. Chartrand

Be it resolved,

THAT the LMH Board of Directors approve the 2019-2020 Hospital Service Accountability Agreement for Villa Minto as presented.

Carried.

Motion to approve two high school bursaries

Moved by: J. Papineau Seconded by: D. O'Connor Be it resolved,

THAT the LMH Board of Directors approve one \$500.00 bursary for an English speaking graduate and a \$500.00 bursary for a French speaking graduate from Cochrane going into the health sciences as presented.

Carried.

12.0 Partnership Business (P. Dorff)

- 12.1 February 2019 Board Effectiveness Survey Results
 - 11 out of 16 surveys were submitted.
- 12.2 March 2019 Board Effectiveness Survey
 - The survey was emailed via Survey Monkey.

12.3 GCE Board Self-Assessment Tool

- The link to the survey was emailed to each board member.
- Every board member should complete the tool and advise the E.A. once it has been submitted as the GCE will close the survey once everyone has participated.

13.0 Board Committee Minutes

13.1 N/A

14.0 In Camera

14.1 Motion to go in camera

Moved by: J. Papineau Seconded by: G. Chartrand

- 14.2 Discussion of physician privileges
- 14.3 Motion to go out of camera

Moved by: G. Chartrand Seconded by: D. Delaurier

14.4 Approval of physician's hospital privileges

• Motion to approve hospital privileges for Dr. Mary Randazzo and Dr. Rasha Shaikh

Moved by: J. Papineau Seconded by: D. Delaurier

Be it resolved,

THAT the MICs Board of Directors approve privileges for Dr. Mary Randazzo in the locum tenens category and Dr. Rasha Shaikh in the dental surgery category as recommended by the MICs Medical Advisory Committee as presented.

Carried.

15.0 MICs News (P. Dorff)

• March 2019 MICs Newsletter was provided for information.

16.0 Next Meeting Date (P. Dorff)

• Wednesday, April 24th, 2019 at 6:00 p.m. (BMH Lead Site)

17.0 Upcoming Meeting Dates

- As per agenda.
- **18.0** Adjournment (P. Dorff)
 - There being no further business, the meeting adjourned at 7:36 p.m.

CHAIR, Bingham Memorial Hospital

CHAIR, Anson General Hospital

CHAIR, Lady Minto Hospital

SECRETARY, MICs CEO