

**SOUTH HURON HOSPITAL ASSOCIATION
MINUTES OF BOARD OF GOVERNORS MEETING
Thursday, October 12, 2017 at 5:30 p.m.
SHHA Board Room**

Present: Christina Godbolt, *Chair* Brad Sheeler Bruce Shaw
Roberta Teahen Aileen Knip Karen Brown
Ellen Shapiro Kay Wise Shelley Bourne
John McNeilly Gina Taylor, *Ex Officio*
Todd Stepanuik, *Ex Officio*

Invited

Guests: Darlene Borland Heather Klopp
Bill Brintnell Liz Kendall
Katie Willert (*recorder*) Pat O'Rourke

Regrets: Drew Robertson
Dr. Ken Milne, *Ex Officio*

1. Call to Order and Welcome

C. Godbolt, Chair, called the meeting to order at 1731 hours.

2. Guests

Sheila Jackson-Elder, SHHA Diabetes Educator/Corporate Educator presented on Senior Friendly Hospitals.

Highlights included:

- Senior Friendly Care aligns with the SHHA Strategic Plan and SW LHIN
- Path to success “Person centred care provided in a way that is free from ageism and respects the unique needs of patients and caregivers”
- 3 “strands” make the path to success:
 1. **SEE WHO I AM** “Maintaining individual’s identity”
 2. **CONNECT WITH ME** “Showing you understand”
 3. **INVOLVE ME** “Sharing decision making”
- The full presentation will be posted on SHHAre for all members to review.

3. Declaration of Conflict

Members were asked to voice any declarations of conflict. There being no further declaration; the meeting continued. Should an unanticipated conflict arise during the course of this meeting, members are asked to notify the Chair immediately.



4. Opening Remarks from Board Chair

Thank you to members for accepting the meeting invite to attend an annual review with the Board Chair.

Reminder – The Hospital’s Accreditation survey is October 16th to 19th. Please take the time to review the preparation notes located on SHHAre, specifically the Governance tab of the Required Organizational Practice document.

5. Approval of Agenda/Consent Items

- Request to remove 7.2 CT
- Request to remove 6.2 Budget end of year forecast with new funding

Moved by: *Karen Brown*

Seconded by: *Shelley Bourne*

Motion: *To approve the October 12, 2017 agenda as amended. Carried.*

Consent Items

- Request to remove Patient Experience from the consent agenda and add as 11.4

Having heard no other objections, these items, motions and recommendations are considered adopted.

Moved by: *Ellen Shapiro*

Seconded by: *Aileen Knip*

Motion: *To approve the October 12, 2017 consent items as amended.*

6. SHHA Financial Update

6.1 Financial Report

Financial report for the period ending August 30, 2017 was included in the agenda package.

Discussion ensued:

- Statements reflect the first 5 months of the fiscal year.
- As reported in September, there was an expected turn in the budget. Earlier in the year, there was a significant rebate that was realized in August.
- Variances include:
 - 2% increase to base funding, which is 1% higher than expected.
 - Significant increase in sick time, vacation, and OT. It is expected this will continue later into the year.
 - Reallocations – Speech funding will now be received from the Ministry of Children and Youth, one time short term funding for the speech program.
 - Revenues are over in DI and under in semi-private accommodations and ALC copayments



- Unbudgeted O.P.P. costs for services in the ED
- Question posed by member with respect to concerns of reaching the goal of a balanced budget by March 2018.
 - There continues to be significant cost pressures necessitating a committed to cost containment to achieve a balanced budget.
 - Revenue generation is significantly limited in a Small Hospital.
- Suggestion to ensure Physicians are involved to understand cost pressures without compromising care.

Moved by: *John McNeilly*

Seconded by: *Brad Sheeler*

Motion: *To accept the financial report for the period ended August 30, 2017 as presented. Carried.*

7. Strategic Matters

7.1 Board Quality, Utilization & Risk

7.1.1 Reported Incident for Q1

Presentation authored by K. Willert was included in the agenda package. No further discussion.

7.1.2 Quality/Corporate Dashboard

Q1 Quality/Corporate Dashboard was included in the agenda package:

Discussion ensued:

- Members found the presentation with analysis of each indicator very helpful. This will be included with the dashboard in future agenda packages.
- Hand hygiene – Question posed with respect to hand hygiene compliance being within/below target.
 - S. McIntyre, Infection Control Practitioner is working on several initiatives as part of an Infection Control Strategy for the organization. Hand hygiene is part of the strategy including updated signage, audits and educational tools.
- Noted error on Total Margin – should read -2.73.

Moved by: *Kay Wise*

Seconded by: *Roberta Teahen*

Motion: *To approve the Quality/Corporate Dashboard for Q1 as presented. Carried.*



7.1.3 Draft Patient Safety Plan

Draft Patient Safety Plan was included in the agenda package:

Discussion ensued:

- The plan is aligned with the Hospital's mission, vision and values, Strategic Plan, Quality Improvement Plan and Accreditation Canada's Required Organizational Practices.
- The document is a three year working document with many action items already in place and being measured. For example, hand hygiene.
- Initiatives are designed to:
 - Attain optimal patient outcomes and patient and family experience
 - Support an engaged and safe workforce
 - Enhance appropriate utilization
 - Minimize risks and hazards of care
 - Develop and share best practices
- As noted, the plan is currently in draft form as outcomes/monitoring are still being established.

Moved by: Roberta Teahen

Seconded by: Ellen Shapiro

Motion: To approve the draft patient safety plan as amended. Carried.

Moved by: Aileen Knip

Seconded by: Roberta Teahen

Motion: To approve the September 18, 2017 Board Quality, Utilization & Risk minutes as amended. Carried.

8. President & CEO Report

President & CEO Report authored by T. Stepanuik was included in board package.

Discussion ensued:

Site Director/CNE

The Site Director/CNE interview process was completed in August and an offer was made to the successful candidate. For personal reasons, the candidate regrettably had to decline the offer. As a result, the position was reposted and will close on October 23rd.

SHHA Physician Survey

As part of South Huron Hospital Association's ongoing commitment to providing high-quality care, it was felt that it is imperative to engage the individuals providing the care. Therefore, a physician survey was generated asking for opinions on different aspects of the medical staff work environment. The results will help identify areas that



may need to be improved. Once the closing date has passed and the submissions collated, the results will be shared with both the Board Quality Committee and the MAC.

Moved by: *John McNeilly*

Seconded by: *Karen Brown*

Motion: *To accept the President & Chief Executive Officer report as presented.
Carried.*

9. Business Carried Forward

No business carried forward.

10. New Business

10.1 OHA Strategic Plan Brochure

The OHA's new Strategic Plan was included in the agenda package for information.

10.2 Huron Perth Sub Region

Initial meeting was held October 5, 2017. They will be meeting again in November. An update will be provided at the November Board meeting.

11. Other Business

11.1 Foundation Update

P. O'Rourke provided an update from the South Huron Hospital Foundation (SHHF):

- To date, the SHHF has received \$3 million in cash and \$500,000 in in kind donations for Jessica's House, which will be enough to build and operate Jessica's House for a minimum for 3 years without Foundation funding.
- For the upcoming Radiothon (Oct. 20th), people will have the option of donating to Jessica's House or the Hospital. This will be the last SHHF fundraiser for Jessica's House.
- Jessica's House will become its own entity with their own board and fundraising arm. One member from the Foundation Board will sit on Jessica's House Board.

P. O'Rourke left at 1855 hours.

11.2 Chief of Staff Position Description

The Chief of Staff Position Description was recently reviewed and revised by the Executive Committee.



Moved by: Karen Brown

Seconded by: Brad Sheeler

Motion: To approve the Chief of Staff position description as presented. Carried.

11.3 Accreditation (questions and answers)

No discussion.

11.4 Patient Experience

H. Klopp provided a summary of compliments and complaints for Q1 captured from the Hospital's incident reporting system, RL6. All patient feedback is recorded in this system and reported at the Quality and Board meetings.

Compliments are also posted on SHHAre if it includes special recognition to a staff member or doctor.

With respect to the number of complaints received, H. Klopp advised that this actually equated to under 1% of patients seen.

Complaints are typically due to the fact that the patient's expectation of how they felt they should be treated was not met. Upon review of complaints, including a review of the patient's chart (with their consent), medical care received was deemed appropriate.

12. Correspondence & Announcements

Various Hospital correspondence and announcements were included in the agenda package.

13. In-Camera Session

Moved by: Brad Sheeler

Seconded by: Bruce Shaw

Motion: To move to in-camera session at 1906 hours. Carried.

All guests were excused and left at 1906.

President & CEO & Executive Assistant remained.

Moved by: Bruce Shaw

Seconded by: Ellen Shapiro

Motion: To accept the in-camera report and proceed as directed and approve the recommendations of the Medical Advisory Committee for approval of the following applications for appointment to the Medical Staff.



Courtesy
Dr. Adrian Stacy
Dr. Nisarg Patel

Carried.

14. Next Meeting
November 9, 2017

15. Adjournment

Moved by: Kay Wise

Seconded by: Karen Brown

Motion: To adjourn open session at 1933 hours. Carried.



Christina Godbolt,
Board Chair



Todd Stepanuk,
President & Chief Executive Officer