

BOARD OF DIRECTORS MEETING

Thursday, April 9, 2015 – 4:05 p.m. – 6:00 p.m.

Location: CMH Board Room

PRESENT – Tim Chennette (Chair), Norah McGowan, Pat Sheridan, Gord Park, David Pollack, Jill Stewart, Karen MacGinnis, Brad Hilker (non-voting), Jan Raine (non-voting), Dr. Celeste Collins (non-voting), Dr. Joe Barbero (non-voting), Bruce Thompson, Alex Davidson, Rosemarie Peikes, Derek Nice.

REGRETS – Valerie Przybilla, David Carlaw, Ann Anderson.

GUESTS – Sandra Beatty & Susan Redhead (for education sessions), Susan Armstrong.

RECORDER – Lynda Tinney, Executive Assistant.

THE PRESSS WAS PRESENT

AGENDA ITEMS and DISCUSSION	DECISION POINTS
1. INTRODUCTION & EDUCATION	
1.1 Privacy Officer Report	For information purposes.
Sandra Beatty, CMH's Privacy Officer, gave a presentation to the Board on Health Records	
and Privacy. Sandra talked about how CMH manages collection, use and disclosure of	
information and explained how audits are done monthly. She touched on physical security,	
destruction of health records, the Health Records Committee and incomplete Health	
Records.	
1.2 Occupational Health & Safety	
Susan Redhead, CMH's Human Resources Director and member of the Occupational Health	
& Safety Committee, gave an overview in terms of legislative changes, what the Ministry of	
Labour is focusing on and how CMH is responding to their focus.	
There was a question and answer session at the end of each presentation.	
2. CALL TO ORDER	Tim Chennette called the meeting to order at 4:45 p.m.
3. APPROVAL OF AGENDA	MOVED by Gord Park; SECONDED by Pat Sheridan and CARRIED
	that the Board of Directors approve the April 9, 2015 agenda as
	circulated.
4. APPROVAL OF MINUTES OF PREVIOUS BOARD MEETING	MOVED by Alex Davidson; SECONDED by Karen MacGinnis and
	CARRIED that the minutes of the Board of Directors meeting held
	on March 5, 2015 be approved.
5. BUSINESS ARISING FROM PREVIOUS BOARD MEETING	There was no business arising.
6. STRATEGIC MATTERS FOR DISCUSSION/DECISION	
6.1 President & Chief Executive Officer Report	For information purposes.
Brad Hilker referenced his report which was pre-circulated.	
A business case to support the Health Links program has been developed and submitted to	

AGENDA ITEMS and DISCUSSION **DECISION POINTS** the CE LHIN who is creating a committee to implement individual case plans for those complex patients. This is great progress in this initiative and the health care providers within Northumberland County will continue to work together. The bundled payments concept is being funded among a number of agencies and the Ministry of Health and Long-Term Care has issued a request for expression of interest in pilot projects, so stay tuned to see what comes out of these projects. The Accountability Agreement transfer from the Campbellford Memorial Multicare Lodge to CMH was effective April 1, 2015. More details will be coming on Hilker Hustle 2. 6.2 Chief Nursing Officer Report For information purposes. Jan Raine highlighted her report which was pre-circulated. Jan Raine will provide the Board with a profile of the hospital's The hospital advertised for a new surgeon and received 12 applications. The 12 applications surgical program comparing where we were five years ago and have been short listed down to 6 and interviews are currently underway. Two candidates where we are today. have excellent qualifications and they will be re-evaluated. CMH's general surgeon, Dr. Sue-Chue-Lam, is playing an important collaborative role in this process and is part of the interviewing committee. The volunteer role in the Emergency department has started. There will now be one of our own volunteers in the ER department during peak hours from 10:00 am to 2:00 pm. Their goal and role is to liaison in the waiting room of the ER department and keep the flow of communication going. This will be evaluated on a regular basis and the NRC Picker Patient Satisfaction results will reflect the results of this new program. Joan Dorland is currently filling in as the CM Multicare Lodge Manager during Jessica Holt's maternity leave. Joan has extensive background in risk management and she has joined CMH's new Falls Committee which is doing an exercise on quality improvement and looking at the current state and best practices. CMH's 2015/16 Quality Improvement Plan is complete and has been posted on line. A discussed ensued around considering enhancing surgery procedures while interviewing candidates. The question was also raised as to what the Board's role was in deciding what surgical services can be offered and what surgical services does CMH offer? It was also noted that budget considerations are part of the recruitment process Brad Hilker pointed out that the Board has had discussions as part of the hospital's strategic, operating and capital planning and according to the hospital's website there were more than 2,000 surgical procedures performed last year. 7. BUSINESS/COMMITTEE MATTERS FOR DISCUSSION/DECISION MOVED by Pat Sheridan; SECONDED by David Pollack and 7.1 Audit Plan Pat Sheridan advised that the Finance/Audit Committee received and approved the Audit CARRIED that the Audit Plan for 2015/16 prepared by Wilkinson & Plan for 2015/16 from Jeff Lay at Wilkinson & Company and is recommending approval to Company be approved by the Board as recommended by the

AGENDA ITEMS and DISCUSSION	DECISION POINTS
the Board. The plan outlines who is responsible for the audit and how the process is	Finance/Audit Committee.
conducted. Jeff explained how the materiality figure of \$130,000 is determined.	
7.2 2015/16 Operating Budget	MOVED by Pat Sheridan; SECONDED by Alex Davidson and
Pat Sheridan advised the Finance/Audit Committee received and recommends to the Board, approval of the 2015/16 Operating Budget. The operating budget reflects the approved changes by the committee and the Board. Revenues are projected to increase in this year's budget because of the GAIN clinic and revenues derived from the new ultrasound and echocardiography programs. The MoH funding reflects the accumulation in base funding and the 1% funding increase and continuation of the Small Rural and Northern Transformation funding.	CARRIED that the 2015/16 Operating Budget be approved by the Board as recommended by the Finance/Audit Committee.
7.3 2015/16 Capital Plan Pat Sheridan outlined the list of critical capital needs that have been identified for the current year. Pat pointed out that the capital equipment listed will not be purchased unless funding sources are available. The source of funding include: - CMH Foundation - \$750,000 - Auxiliary to CMH - \$25,000 - HIRF - \$250,000 - Funding for Clinical Information Systems - \$468,000 The Clinical Information Systems purchase has been on hold for two years. Eventually the hospital will have to find a source of funding to cross link electronic health records.	MOVED by Pat Sheridan; SECONDED by Bruce Thompson and CARRIED that the Board of Directors accepts the 2015/16 Capital Plan as presented and recommended by the Finance/Audit Committee.
7.4.1 Board Peer Assessment Questionnaire (1-075) This peer assessment questionnaire is designed to assist the Board Chair and the Board member to evaluate his/her performance as a Board member and to identify areas for improvement. Arising out of a presentation at HealthAchieve last fall, current best practice is board members should be doing some sort of peer evaluation. The Governance Committee came up with this Board Peer Assessment questionnaire that is primarily lifted from OHA's Guide to Good Governance. The point of this questionnaire is to try to help each individual director to proactively make better decisions for the hospital. All 18 Board members will be asked to rate 12 of the criteria. 7.4.2 Chief of Staff (2-040) The Governance Committee reviewed the Chief of Staff policy (2-040) and made one minor change and is recommending approval to the Board.	MOVED by Gord Park; SECONDED by David Pollack and CARRIED that the Board Peer Assessment Questionnaire (1-075) be approved by the Board for implementation in December 2015. MOVED by Gord Park; SECONDED by Bruce Thompson and CARRIED that the Chief of Staff policy (2-040) be approved with the change recommended by the Governance Committee.
7.5 2014 Corporate Membership List	MOVED by Gord Park; SECONDED by Karen MacGinnis and

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Gord Park referenced the 2014 Corporate Membership List that was pre-circulated.	CARRIED that the Board of Directors adopts the 2014 Corporate		
The By-Laws require that the Board approve the members who will be entitled to vote at	Members List as circulated.		
the Annual General Meeting.			
7.6 Board Work Plan	For information purposes.		
Gord Park advised that the Governance Committee reviewed the Board Work Plan and	' '		
made a few tweets to make it work better. Committee and Board work plans are helpful in			
that they provide some structure to not overlook items that require committee and Board			
attention.			
7.7 Individual Board Member Self Reflection	All Board members are to complete the Individual Board Member		
This Board policy (1-070) was circulated in advance. The Individual Board Member Self	Self Reflection tool and reflect on the results.		
Reflection tool complements the board assessment process and is designed to help the			
Board member review his/her contributions and identify personal development goals			
annually.			
7.4 Chief of Staff Report	MOVED by Bruce Thompson; SECONDED by Rosemarie Peikes and		
Dr. Collins referenced the Chief of Staff report that was pre-circulated and authored by Dr.	CARRIED that the Board of Directors approves the attached list of		
Bob Henderson. An update was provided regarding the new change in the pattern of	physician re-applications as recommended by the Credentials		
medical staff attendance on inpatients that was put into practice just recently.	Committee and Medical Advisory Committee.		
Dr. Collins reported good progress and discussions with PRHC in terms of supporting			
physicians who are attending very ill inpatients and who ideally would be better cared for in			
a larger centre with greater specialist input. Dr. Richard Schabas has volunteered to do			
rounds with the Doctor of the Week on all complex patients twice weekly and this will be			
very helpful.			
Dr. Joe Barbero presented the Credentials Committee report and recommendations for			
approval of privileges.			
8. THE MATERIALS			
8.1 Auxiliary to CMH Report	There were no requests to remove any of the Materials listed to		
8.2 CMH Foundation	the Board meeting agenda.		
8.3 Campbellford Memorial Multicare Lodge			
9.0 TERMINATION OF BOARD MEETING	MOVED by Norah McGowan; SECONDED by Jill Stewart and		
	CARRIED to terminate the meeting at 6:00 p.m.		
	On behalf of the Board, Tim Chennette thanked Norah McGowan		
	for her commitment and dedication on the Board for the past two		
	years and welcomed new Co-President Susan Armstrong to the		
	Board.		
10.0 IN CAMERA MEETING – Minutes recorded.			
11.0 IN CAMERA MEETING WITH CEO (EXCLUDING STAFF) – No minutes recorded.			

12.0 IN CAMERA MEETING (EXCLUDING STAFF & CEO) – No minutes recorded.			
Tim Chennette,	Brad Hilker,		
Chair, Board of Directors	Secretary, Board of Directors		

AGENDA ITEMS and DISCUSSION

DECISION POINTS