

BOARD OF DIRECTORS MEETING

Thursday, June 4, 2015 – 5:05 p.m. – 6:55 p.m.

Location: CMH Board Room

PRESENT – Tim Chennette (Chair), Susan Armstrong, Gord Park, David Pollack, Jan Raine (non-voting), Dr. Celeste Collins (non-voting), Alex Davidson, Valerie Przybilla, Ann Anderson, Rosemarie Peikes.

REGRETS – Pat Sheridan, Derek Nice, David Carlaw, Karen MacGinnis, Brad Hilker, Bruce Thompson, Jill Stewart, Dr. Joe Barbero.

RECORDER – Lynda Tinney, Executive Assistant and Lisa Curle, CMH Finance Manager (left after agenda item 7.2).

AGENDA ITEMS and DISCUSSION	DECISION POINTS
1. EDUCATION	
Jennifer McKelvie, Case Worker/Crisis Worker, and Robin English, Program Coordinator, at	For information purposes.
the Campbellford & District Community Mental Health Centre, gave a presentation to the	
Board about the program and the clients it serves. Jennifer provides counselling and	
therapy case management advocacy and support. The centre has 305 active clients as of	
June 1. Their current wait list is approximately 3 to 4 months for non-urgent referrals.	
People can self-refer or be referred by their family physician or other health care	
professional.	
The centre's mission is to empower their clients, their families and caregivers to understand	
and cope with the challenges of serious mental illness and improve the quality of their lives.	
CMH also has an agreement with Ontario Shores Centre for Mental Health Sciences which	
includes arrangements for an onsite clinical manager who provides consultation and	
supervision to the clinicians. The centre also uses OTN services to facilitate consultations for	
clients with psychiatrists based at PRHC or Ontario Shores.	
The centre's goals for the future include increasing group programming in an attempt to	
reduce wait times for service, continued professional development for staff and the	
planning of events to raise awareness.	
All services are free and confidential.	
2. CALL TO ORDER	Tim Chennette called the meeting to order at 5:50 p.m.
3. APPROVAL OF AGENDA	7.6 OHA's Rural & Northern Health Care conference report from
	Rosemarie Peikes was added to the agenda.
	MOVED by Valerie Przybilla; SECONDED by Ann Anderson and
	CARRIED that the Board of Directors approve the June 4, 2015
	agenda with the addition of agenda item 7.5.
4. APPROVAL OF MINUTES OF PREVIOUS BOARD MEETING	MOVED by Alex Davidson; SECONDED by Valerie Przybilla and
	CARRIED that the minutes of the Board of Directors meeting held

AGENDA ITEMS and DISCUSSION	DECISION POINTS
	on May 14, 2015 be approved.
5. BUSINESS ARISING FROM PREVIOUS BOARD MEETING	
5.1 Board Chair Evaluation Tim Chennette met with Brad Hilker, Derek Nice and Jill Stewart and reviewed the Board Chair evaluation results. There were constructive ideas that will be considered moving forward. The process was a valuable experience for Tim although the response rate was not 100%.	The Board Chair evaluation process was conducted and completed according to the Board policy.
6. STRATEGIC MATTERS FOR DISCUSSION/DECISION	
6.1 President & Chief Executive Officer Report The CEO report was circulated in advance. Brad reported on the Pharmacy Accreditation, ED physician coverage and Hilker Hustle 2 fundraiser. Brad is meeting with Deborah Hammons, CE LHIN CEO, today (June 4) to talk about our ER physician coverage.	Jan Raine will arrange for CMH's pharmacist Jing Zhang to come and speak to the Board in the fall once the final accreditation report has been received. For information purposes.
6.2 Chief Nursing Officer Report Jan Raine reported the Pharmacy accreditation went very well and there will be some recommendations. They would like to see a pharmacist on site 7 days per week. CMH just increased the scope of practice with our pharmacy technicians. A formal report will follow in 2 to 3 months.	For information purposes.
7. BUSINESS/COMMITTEE MATTERS FOR DISCUSSION/DECISION	
 7.1 Q4 Quality Care & H-SAA Indicator Report 1) ED Wait Time for Admitted Patients - Jan Raine reported it has been known for some time that the Q4 results for this indicator were going to be high. The target is 13.90 hours and Q4 results were 30.30 hours. 2) % Alternate Level of Care Days – Today (June 4) CMH has 15 ALC patients. 3) Patient Satisfaction – CMH is exceeding the both targets for 1) Would you recommend? And 2) Overall Rating? 	For information purposes. Jan Raine will work with the Campbellford & District Community Mental Health Centre quality improvement initiative regarding repeat unplanned ER visits within 30 days for mental health conditions.
7.2 Draft Financial Statements	Report for information purposes.
Lisa Curle advised the Finance/Audit Committee conducted a review of the draft financial statements for the period April 1, 2014 to March 31, 2015. The hospital reported a surplus from operations of \$1,240 before net building depreciation during the fiscal year ending March 31, 2015. This meets the CE LHIN target and all MoHLTC obligations. The committee will be meeting again with the Auditor to receive and approve the finalized	
Financial Statements and Auditor's Report. This will require Board approval before the Annual General Meeting on June 18.	
7.3 Q4 Financial & H-SAA Indicator Report	Report for information purposes.

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AGENDA ITEMS and DISCUSSION	DECISION POINTS
The Q4 report shows CMH is in compliance with the Accountability Agreement and is	
reflective of good results for our organization having met the accountability agreement	
standards from financial and volume-related perspectives.	
In all indicators, CMH is either meeting the performance standard or meeting or exceeding	
the performance target.	
Total ER visits for 2014/15 were 21,427 compared to 20,050 in 2013/14.	MOVED by Velevia Devikilla, CECONDED by David Dallad, and
7.4 Board Policies	MOVED by Valerie Przybilla; SECONDED by David Pollack and
Valerie Przybilla advised the Quality Committee discussed the Disclosure and Point of Care	CARRIED that the Disclosure policy (5-060) be approved with the
Board policies and recommends to the Board that they be reconfirmed with no changes.	changes discussed at the Board meeting.
Jan Raine pointed out that there was no mention in the Disclosure policy about having a	Approval of the Point of Care Testing policy (5-070) was deferred.
'note taker' present during the disclosure. Jan recommended that the policy be changed to	Jan Raine will investigate the reasons behind the necessity of
reflect that there should be more than one person present during the disclosure and the	having a Board policy on Point of Care Testing and report back to
Board agreed with her recommendation.	the Board.
Gord Park advised that the Governance Committee reviewed the Chief Executive Officer	MOVED by Gord Park; SECONDED by Alex Davidson and CARRIED
Board policy (2-050) and recommends to the Board that it be re-confirmed with no change	
	without any changes as recommended by the Governance
	Committee.
7.5 OHA Small Rural & Northern Conference	
Rosemarie Peikes gave a report from OHA's Rural and Northern Health Care Governance	
workshop she recently attended. There were 6 sessions within a 5 hour period covering:	
1) Haliburton Highlands Health Services update on their integration journey and som	e
of their challenges and lessons learned.	
2) Generative Governance – There are 3 modes of governance leadership 1. Fiduciary	
 oversight 2. Strategic – insight and 3. Generative – foresight. It was recommended 	d
that 60% of board time be spent on strategy and generative thinking (Rotman ICD	
program) & 40% on day to day. The most important part is to be involved early	
before decisions are made. Strategies for how to operate with a 'trifocal lens' in	
presentation and this would make an excellent hands on workshop for our Board.	
3) Tips for Effective Board Meetings – Use of Consent Agendas	
4) Strategic Planning for Small Rural & Northern Organizations – What Boards Need	
to Know. A key message was "a strategy is essential and a good process leads to a	
good plan."	
5) The Board's Role in Quality Oversight – Our Board is doing what it should be doing	.
6) Relationships - Volunteer Associations/Hospital Foundations. Communication is ke	у
both within association and with the Foundation and the Hospital. When the	
partnership is strong the results will be too.	

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7.6 Chief of Staff Report Dr. Celeste Collins gave the Chief of Staff report authored by Dr. Bob Her the hospitalist program for inpatient care is working quite well, there are on the hospitalist if the ward beds are all full of active patients, with other and a busy OR schedule needing surgical assists. Dr. Collins presented the applications for physician privileges and the an Resource Plan that are being recommended to the Board for approval by Advisory Committee.	MOVED by David Pollack; SECONDED by Alex Davidson and CARRIED that the 2015 Professional Resource Plan be approved as recommended by the Medical Advisory Committee. MOVED by Valerie Przybilla; SECONDED by Rosemarie Peikes and CARRIED that the reapplications of Drs. Kip Millitz and Steve Millward for Consulting privileges in Radiology be approved, and
8. THE MATERIALS	
 8.1 Auxiliary to CMH Report 8.2 CMH Foundation 8.3 Campbellford Memorial Multicare Lodge 8.4 Trent Hills Recruitment & Retention Committee 8.5 Quarterly Compliance Certificate – January to March 2015 8.6 BPSA Reports – Use of Consultants & Expenses 8.7 Accessibility Plan 2013-2016 Annual Update 	There were no requests to remove any of the Materials listed to the Board meeting agenda.
9.0 TERMINATION OF BOARD MEETING	MOVED by Valerie Przybilla; SECONDED by Gord Park and
	CARRIED to terminate the meeting at 6:55 p.m.
10.0 IN CAMERA MEETING – Minutes recorded.	
11.0 IN CAMERA MEETING WITH CEO (EXCLUDING STAFF) – No min	
12.0 IN CAMERA MEETING (EXCLUDING STAFF & CEO) – No minutes	ecordea.
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Chair, Board of Directors	ecretary, Board of Directors