

**Kemptville District Hospital  
Board of Directors Meeting  
Thursday, May 26, 2016  
Grenville Mutual Community Room,  
380 Colonnade Drive, Kemptville, ON  
6:30 pm**

**Minutes**

1. **Call to Order:** L. Angus called the meeting to order at 6:32 pm
2. **Regrets / Quorum:** Quorum was established.

Present:	L. Angus Dr. Leonard R. Noseworthy	K. Cooper J. Wolfe A. Hysert	P. Currie R. Morais C. Burke	F. Vassallo C. Chisholm G. Poapst
Regrets:	D. Ulrichsen P-E. Cloutier	J. Neubauer	D. Hart	F. Onasanya
Management/Staff and Guests:	Anthony Dale, OHA (T)	A. Pinhey	C. Van Vliet	L. LeClair

4. **Client Centred Care:** C. Burke shared both a compliment and a complaint from patients, reviewing findings and what improvements were made as a result of investigating the complaint, including education for staff on process and awareness of the patient experience, actual or perceived. Also, a change in procedure will be implemented during pre-op.
5. **Education Session:** Anthony Dale, President and CEO of the Ontario Hospital Association (OHA) attended via teleconference (for his presentation only) to provide the Board with an overview of The Evolving Health Care Agenda, and reviewed the PowerPoint presentation, that was handed out at the meeting.
3. **Re-affirming the Mission:** KDH's mission was re-affirmed by J. Wolfe, from her perspective.
6. **Additions / Changes to the Agenda:** 9.2.1 Chief of Staff Report removed from Consent Agenda to "for discussion"
7. **Approval of Consent Agenda Items:**

***Motion: On a motion duly moved, seconded and carried, the Board approved to receive for motion 8.0 Approval of Previous Minutes: April 28, 2016, and 9.2.3 Professional Staff Policy Reviews No. 7 Complaints, No. 15 Attendance at Meetings, No. 20 medical Products Evaluation Committee, No. 26 Discharge Summaries for Elective Surgeries, No. 28 Accessing Medical Care, No. 29 Physician Performance Review, 9.4.3 Board Policy Reviews No. 4 Emergency CEO Succession, No. 7 Signing Authority and***

***No. 16 Chief of Staff Evaluation Framework, and to receive for information 9.1.1 Compliance Report, 9.1.2 CEO Report, 9.1.3 CNO Report, 9.1.4 Accreditation Update – Mock Survey, 9.3.2 Quality and Safety Indicator Report, 9.5.3 Corporate Services Indicator Report, and 9.6 KDH Foundation Report.***

**9. Reports**

**9.2 Chief of Staff**

**9.2.1 Chief of Staff Report**

Dr. Leonard provided the details surrounding a credentialing issue. An audit was done, then the process reviewed, legal counsel was sought, and changes were made to mitigate the risk going forward, including a compliance statement at Medical Affairs Committee (MAC) and Board.

**9.2.2 Credentialing**

***Motion: On a motion duly moved, seconded and carried, the Board approved hospital privileges for the following physicians, who have been credentialed as set out under Article 4 Appointment and Reappointment to Professional Staff of the Professional Staff Bylaws:***

<b>Re-Application</b>	<b>Application</b>	<b>Physician</b>	<b>Privilege Category</b>
	✓	Dr. Mitchell FOX	Courtesy – Physical Medicine & Rehabilitation
	✓	Dr. Andrew B. LU	Courtesy – Radiology Realtime Medical

**9.2.4 Professional Staff Bylaws**

***Motion: On a motion duly moved, seconded and carried, the Board approved changes to Professional Staff Bylaws as approved by the Medical Advisory Committee, as they relate to Section 4.7 Application for Reappointment to the Professional Staff, for approval at the Annual General Meeting.***

**9.3 Quality and Safety Committee**

**9.3.1 Committee Chair Report**

The Quality and Safety Committee met recently and in the absence of the Committee Chair and Vice Chair, L. Angus provided a brief summary of the activities of the Committee indicating that most have been covered in other areas of the Agenda, with the exception of an education session on Alternate Level of Care

(ALC), as well as viewing a video from Dr. Forget on Building a Quality Patient Safety Committee.

#### **9.4 Governance Committee**

##### **9.4.1 Committee Chair Report**

The Governance Committee Chair provided a verbal report of the activities of the Committee including an update on Board Recruitment and the Policy Reviews. Interviews have been done with three candidates with financial backgrounds and two will be done next week with quality experience. The information regarding the selected candidates will be circulated prior to the AGM, and if no concerns, they will be elected at the AGM. The Officers and Committee Participation list is being drafted and all members are asked to convey their interests by email to K. Cooper for the coming year. An overview of the changes to the Hospital Bylaws was provided, and further edits were indicated.

##### **9.4.2 Hospital Bylaws**

*Motion: On a motion duly moved, seconded and carried, the Board approved the Hospital Bylaws as revised (with edits in 4.5 and 7.9 excerpts indicated below) for approval at the Annual General Meeting.*

#### **4.5 Election and Term**

~~A Director whose final year as Chair of the Board coincides with his or her ninth year on the Board may be elected for a tenth year in order to serve as Past Chair and thus provide continuity to the Board. In exceptional circumstances a Director may serve a tenth year at the discretion of the Board.~~

#### **7.9 Voting**

The vote on any question shall be taken by secret ballot if so demanded by any ~~Governor~~ Director present and entitled to vote. Such ballots shall be counted by the chair of the meeting. Otherwise a vote shall be taken by a show of hands. A declaration by the chair of the meeting that a resolution has been carried by a particular majority or not carried shall be conclusive.

*Brief Recess 7:40-7:50*

#### **9.5 Corporate Services**

##### **9.5.1 Corporate Services Chair Report**

P. Currie circulated a written report and provided an overview of Committee activities. One item spoken to is that approximately 78% of the cost of the Clinic Modernization Project is for the clinical areas, and improvements to the administrative area will be mostly covered under MOHLTC (HIRF) funding.

Therefore, almost all of the funding from the Foundation will be going towards clinical areas.

#### 9.5.2 Presentation of Draft Financial Statements

*Motion: On a motion duly moved, seconded and carried, the Board approved the Draft Audited Financial Statements for the Year ended March 31, 2016 for presentation at the Annual General Meeting.*

#### 11. Next Meeting:

- Thursday, June 23, 2016, 6:30 PM Annual General Meeting, held at Grenville Mutual.
- Thursday, June 23, 2016, 7:00 PM Board Meeting, held at Grenville Mutual.


#### 12. Moved to In Camera session at 8:00 pm. (Staff remained until 8:20)

#### 13. Moved out of In Camera at 8:32 pm.

*Motion: On a motion duly moved, seconded and carried, the Board approved the Performance Goals for the Chief of Staff for the 2016-2017 year.*

*Motion: On a motion duly moved, seconded and carried, the Board approved Performance Pay for Frank Vassallo for the six month period ending March 31, 2016, based on criteria set by the KDH Board of Directors at its October 29, 2015 meeting.*

14. **Adjournment:** There being no further business, the meeting was adjourned on motion at 8:37 pm.

  
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F. Vassallo, CEO

  
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L. Angus, Board Chair