

**Kemptville District Hospital
Board of Directors Meeting
Thursday, February 22, 2018
Grenville Mutual, 380 Colonnade Dr., Kemptville, ON
6:30 pm
Minutes**

1. **Call to Order:** K. Cooper, Chair, called the meeting to order at 6:35 pm.
2. **Regrets / Quorum / Declaration of Conflicts:** Quorum was established and there were no conflicts declared.

Present:	B. Baxter C. Chisholm K. Cooper (Chair)	P. Currie E. MacPherson Dr. P. McGregor	F. Onasanya C. Parsons D. Ulrichsen	F. Vassallo
Regrets:	C. Burke P.-E. Cloutier	M. Harrison R. Morais	J. Neubauer G. Poapst	Dr. S. Rutherford S. Saslove
Management / Staff and Guests:	L. LeClair	L. Mignault (Recorder)	J. Read	

3. **Additions/Changes to the Agenda:** Add Item 9.1.2 Executive Compensation “For Discussion”.
4. **Re-affirming Mission:** KDH’s mission was re-affirmed by F. Onasanya.
5. **Client Centred Care:** J. Read shared a compliment and complaint, including the learning opportunities as a result of the complaint investigation.
6. **Education:** F. Vassallo and L. LeClair presented an in-depth view of the Environmental Scan and elaborated on how it is prepared and updated (refreshed). Both highlights and challenges were reviewed with questions from members on various aspects of the Scan.
7. **Approval of Consent Agenda Items:**

Motion: On a motion duly moved, seconded and carried, the Board approved to receive for information or approved for motion, items 8. Approval of Previous Minutes: January 25, 2018, 9.2.1 Compliance Report, 9.2.2 CEO Report, 9.2.5 Enterprise Risk Management Dashboard at February 2018, 9.3.1 Chief of Staff Report, 9.5.2 OHA GCE Board Self-Assessment, 9.6.2 2017-2018 Q3 Financial Report and 9.6.3 RVHS Report - Operations.

9. Reports

9.1 Board Chair Report

9.1.1 Occupancy Pressures

At the request of the LHIN Board Chair, J.P. Boisclair, K. Cooper shared a document titled: *Dealing with Hospital Occupancy Pressures: Pathways to Appropriate Levels of Care*, with the KDH Board of Directors. Discussion occurred with respect to the content of this document as well issues regarding capacity and repatriation.

9.1.2 Executive Compensation

K. Cooper updated the Board on the Executive Compensation Framework. KDH's Framework has been approved by the Ministry; however, there has been new information shared from the Ministry regarding the inclusion of the Chief of Staff data that may or may not apply to KDH and will be addressed in due course. KDH's Framework will be published for the 30 day public consultation as approved.

9.2 Hospital

9.2.4 KDH Strategic Dashboard Indicator Reporting – *Addressed under agenda item 9.4.1 Quality and Safety Committee Chair Report.*

9.3 Chief of Staff

9.3.2 Credentialing

Motion: On a motion duly moved, seconded and carried, the Board approved the 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:

Re-Application	Application	Physician	Privileges	Speciality
	LoGS	Dr. Mona Effendi	Courtesy	S/OR (Surgical Assist)

* LoGS = Letter of Good Standing

9.4 Quality and Safety Committee

9.4.1 Quality and Safety Committee Chair Report

D. Ulrichsen provided a verbal report on the Quality and Safety Committee meeting of February 21, 2018.

9.2 Hospital

9.2.4 KDH Strategic Dashboard Indicator Reporting

There were two indicators from the Dashboard that were discussed in detail under the Quality and Safety Committee report: 1. Low Acuity Patients seen in the Emergency Room and 11. Moderate/Severe Harm Incidents.

Dr. P. McGregor provided further insight into the Low Acuity indicator as well as a summary of the two Harm Incidents and where each incident is at in the review process. It should be noted that Fall Risk Assessment changes have been made as a result of these 2 incidents (both falls).

9.6 Corporate Services Committee

9.6.4 Approval of Insurance RFP

P. Currie provided the rationale for the selection of the successful firm.

Motion: On a motion duly moved, seconded and carried, the Board approved that Marsh McLennan be awarded the Insurance contract commencing April 1, 2018 with the option of 3, 1 year renewal terms.

F. Onasanya left the meeting at 8:02 p.m.

9.4 Quality and Safety Committee

9.4.2 Violence in the Workplace

L. LeClair conveyed to the Board the Hospital's proactive efforts with regard to Workplace Violence. This included KDH being invited by the Institute for Work and Health, as the only representative of small hospitals in Ontario, to participate in a study of *Implementation of Workplace Violence Legislation in the Ontario Acute Healthcare Sector*. KDH also had a thorough on-site assessment conducted through the Public Services Health and Safety Association (PSHSA) to identify any and all risks at the Hospital, and will be developing action plans to address the risks identified.

9.4.3 2018-2019 QIP Development Status Report

The 2018-2019 Quality Improvement Plan (QIP) will be presented to the Quality and Safety Committee next month, and will be subsequently brought to the Board Meeting. Workplace Violence is a mandatory Indicator that will be included on this year's QIP and the quality initiative will be based on the Assessment Report from the PSHSA.

9.6 Corporate Services Committee

9.6.1 Corporate Services Committee Chair Report

P. Currie provided a verbal report on the February 15, 2018, Corporate Services meeting.

10. KDH Board Action Registry: *No outstanding Actions.*

11. Next Meeting: Thursday, March 22, 2018, 6:30 p.m. in the **KDH Boardroom**. K. Cooper reminded members of the KDH Foundation Casino Night Fundraiser on March 2, 2018.

12. Brief pause.

13. In Camera:

Moved In Camera at 8:25 pm on a motion moved.
Moved out of In Camera.

14. Adjournment: There being no further business, the meeting was adjourned.



F. Nassallo, CEO



K. Cooper, Board Chair