Kemptville District Hospital Board of Directors Meeting

Thursday, January 23, 2020 Grenville Mutual Building, 380 Colonnade Dr., Kemptville, ON 6:30 pm

Minutes

- 1. Call to Order: R. Morais, Board Chair, called the meeting to order at 6:30 pm.
- 2. Regrets / Quorum / Declaration of Conflicts: Quorum was established and there were no conflicts declared.

The following Territorial Acknowledgement was made by Board Chair R. Morais:

In the spirit and understanding that we continue to gain in today's world, we would like to acknowledge the Algonquin nation, whose traditional and unceded territory we are gathered upon today.

	Present	Regrets		Present	Regrets		Present	Regrets	
B. Baxter	$\sqrt{}$		C. Burke	√		C. Chisholm	$\sqrt{}$		
PE. Cloutier			P. Currie	V		B. Hale			
M. Harrison			E. MacPherson	V		Dr. P. McGregor			
J. Nolan			Dr. Z. Saleh	V		S. Saslove	$\sqrt{}$		
B. Steacy			K. Strackerjan	V		D. Ulrichsen			
F. Vassallo			A. Vignuzzi	V		A. Yee	$\sqrt{}$		
Staff, Management & Guests:									
L. LeClair			L. Mignault (Recorder)	√		A. Pinhey			
J. Read									

- **3. Re-affirming Mission:** KDH's mission was re-affirmed by K. Strackerjan.
- **4. Client Centred Care:** L. LeClair shared a compliment and complaint, including the learning opportunities as a result of the complaint investigation.
- **5. Education:** Nicolija Lukich, Regional Ethicist, Champlain Centre for Healthcare Ethics (CCHCE), The Ottawa Hospital, Civic Campus, was introduced to the Corporate Services VP Lana LeClair. Ms. Lukich delivered an informative session on the CCHCE, including a presentation on Ethics and Frameworks for Decision Making, highlighting specifically how it relates to the Board responsibilities. The members were taken through a few case study examples where the Board would be faced with an ethical decision. An Accountability for Reasonableness (A4R) workbook was distributed; this is designed to provide the framework to help decision makers reflect on three key questions that are

central to making practical and fair priority setting decisions in healthcare: What should we do? Why should we do it? and How should it be done?

Members took the opportunity to ask questions and make comments throughout the presentation. It was noted that many of the aspects of the framework are already implemented regularly as part of KDH's culture, and leadership and the Board are always aware of the ethical impacts of their decisions.

N. Lukich left the meeting at 7:30 pm.

Dr. P. McGregor joined the meeting at 7:35 pm.

6. Additions/Changes to the Agenda: Addition of item 9.1.3.1 CNO Report – Coronavirus Update, and revised item 9.5.2 2020-2021 Hospital Accountability Planning Submission (HAPS) Budget.

7. Approval of Consent Agenda Items:

Motion: On a motion duly moved, seconded and carried, the Board approved to receive for information or approval for motion, items 8.0 Approval of Previous Minutes: November 28, 2019, 9.1.1 Compliance Report, 9.1.3 CNO Report, and 9.4.2 Quality Improvement Plan 2020-2021 Development.

Under the Consent Agenda, the following motion was approved:

8.0 Motion: On a motion duly moved, seconded and carried, the Board approved the Minutes of the Previous Meeting of November 28, 2019, as presented.

9. Reports

9.1 Hospital

9.1.2 CEO Report - The report was provided by F. Vassallo, and included an update on the OHT process and details on the recent submission of the OHT Progress Report. Also discussed were next steps, which include notification from the Ministry of Health in late March if we are proceeding to Full Application. Plans are underway for Workshop #3, which will include the development of the Leadership Council, with an anticipated date of early March 2020.

9.1.3 CNO Report

9.1.3.1 CNO Report – **Coronavirus Update** – In light of the emerging health concerns over the Coronavirus, the Board was provided with an up to date report from federal and provincial health services as well as details about what KDH is doing to ensure the safety and well-being of our patients, physicians, staff and volunteers.

9.2 Chief of Staff

9.2.1 Chief of Staff Report – The report was provided and no discussion arose.

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 7 Appointment and Reappointment to Professional Staff of the Professional Staff Bylaws:

Re- Application	Application	Physician	Privilege Category
		Dr. Neera AGGARWAL	Courtesy – Family Medicine
$\sqrt{}$		Dr. Wade BROCKWAY	Courtesy – Emergency
$\sqrt{}$		Dr. Suzanne CHRISTIE	Courtesy – Neurology
	√	Dr. Christine NUNWEILER	Courtesy – Radiology (Real Time Medical)
$\sqrt{}$		Dr. Christopher RAYNOR	Courtesy – Orthopaedics
V		Dr. Paul SHIM	Courtesy – Orthopaedics
	V	Dr. Shantel MINNIS	Courtesy – Radiology (Real Time Medical)

STATEMENT OF COMPLIANCE

It is attested that currently there are no physicians practicing at Kemptville District Hospital who do not hold valid privileges.

9.2.3 Medical Staff Policies

Motion: On a motion duly moved, seconded and carried, the Board approved the Medical Staff Policy No. 08 Admission of Patients and Inpatient Coverage, as reviewed and approved by the Medical Advisory Committee.

Motion: On a motion duly moved, seconded and carried, the Board approved the Medical Staff Policy No. 16 Late Applications to Medical Staff, as reviewed and approved by the Medical Advisory Committee.

9. Reports

9.4 Quality and Safety Committee

9.4.1 Quality and Safety Committee Chair Report

B. Hale, Chair, provided a verbal report on the Quality and Safety Committee meeting of January 9, 2020.

9.4.5 Workplace Violence Presentation

L. LeClair presented the Board with an update on KDH's Workplace Violence Risk Assessment, which included a progress report on six overarching control measures identified in the toolkit that will further protect our staff and volunteers from incidents of violence and provide training to prevent workplace violence.

Next steps will include a focus on Emergency Preparedness Codes in general, specifically Code White (Act or Threat of Violence), as well as Electronic Employee Incident Reporting. A Code White Task Force is being developed and the call for membership was very well received by staff in all departments. This high level of engagement is going to enhance the work of the Task Force as the members review all aspects of the Code White process to improve their own safety going forward.

9.5 Corporate Services Committee

9.5.3 2020-2021 Hospital Accountability Planning Submission (HAPS) budget Status Update

Motion: On a motion duly moved, seconded and carried, the Board approved the 2020-2021 HAPS presented with a deficit position of \$160,348 previously approved, with no further changes.

The motion was preceded by a well-received summary from senior leadership highlighting how the budged furthers our Strategic Directions, including the net new investments' alignment with organizational priorities. The summary included a discussion of potential risks to achieving our strategic objectives. There was unanimous agreement among the members that this step be included in future budget motions put forward to the Board.

- **10. KDH Board Action Registry:** *No outstanding Actions.*
- 11. Next Meeting: Thursday, February 27, 2020, at 6:30 pm., Grenville Mutual Building.
- **12.** *Brief pause at 8:20 pm.*
- **13. In Camera:** *No In Camera session was required.*
- **14. Adjournment:** There being no further business, the meeting was adjourned on a motion at 8:20 pm.

∦rank J. Vassallo, CEO

Robert Morais, Board Chair