



**BOARD OF DIRECTORS  
MINUTES**

May 09, 2018 5:30 pm  
NGH Boardroom

**PRESENT:** V. Pepper Chair, M. Dawson, K. Davy, R. Duwyn, R. Gelbard, Dr. Gabel, F. Gelinas, M. Kokus, J. Mulheron, S. Pongracz, T. Stickl, Dr. Thorpe, V. Young, K. Isfan-CEO, T. Thomson-VP Finances, P. Emslie (Recorder)

**REGRETS:** E. Coffey, T. White, H. Riddell-VP Patient Services

**GUESTS:** G. Hamill, Communication Specialist

**1.0 CALL TO ORDER**

The Chairperson called the meeting to order at 5:40 pm.

**2.0 MISSION REVIEW**

T. Stickle read the mission statement.

**3.0 EDUCATION – RISK MANAGEMENT**

With the aid of a powerpoint presentation Vice-President of Finance, T. Thomson provided an update on Enterprise Risk Management. The risks have remained the same as the previous year (see Risk Profile in presentation) and updates to the strategies used to mitigate these risks were discussed. Three specific high risk items were highlighted.

It was agreed to engage a governance expert to enhance the knowledge of both hospital Boards (NGH and West Haldimand General Hospital). The CEO will be involved in the curriculum but participation will be for Board members only and the event will be in place of the annual Board retreat.

The need to recruit a new Chief of Staff to replace Dr. Gabel when her term expires next spring was discussed. Pros and cons as to whether the position should independent or part of physician group were deliberated. The position reports to the Board and the Medical Advisory Committee may make recommendations. A workplan will be developed to assist the Board in the recruitment and interview process.

The issue of inadequate funding for medium-sized hospitals continues to be a high risk item. While the Ministry has acknowledged the negative effects on medium-sized hospitals it doesn't appear to be willing to change anything at this time. More discussion will take place during the In Camera portion of the meeting.

#### **4.0 APPROVAL OF AGENDA**

It was MOVED by K. Davy and SECONDED by R. Duwyn to:

**Approve the agenda as circulated.**

CARRIED

- 5.0 DECLARATION OF CONFLICT OF INTEREST** – F. Gelinas advised, due to the fact that he is a Clerk in the upcoming provincial election, he may have Conflict of Interest in the In Camera conversation depending on the content of that conversation.

#### **6.0 QUALITY/STRATEGIC MATTERS FOR DECISION/DISCUSSION**

##### **6.1 Patient Story**

In the absence of the Vice-President of Patient Services the CEO elected to share a compliment that came across her desk via the website. An individual who recently had day surgery at the hospital was very complimentary to all involved “thank you for the wonderful service”.

##### **6.2 Physician Human Resource Plan**

This annual plan presented to the Board comes from the Medical Advisory Committee and will form the basis of a workplan. Given any Doctor can apply for privileges at any hospital and cannot be unduly refused, one of the things the plan does is provide evidence in the event a physician is turned down. Additionally, it points out where succession planning is needed, e.g. NGH will be in need of a Pathologist in the not too distant future. The role is a very busy one and it is uncertain as to whether one full-time person will be able to fill the position. It was also noted that many physicians have withdrawn from hospitals citing a better payment schedule in their own clinics and the desire to have a lifestyle today that is different than years ago (e.g. spending time with family).

On motion by Kathy Davy and seconded by J. Mulheron **the 2018-2019 Physician Human Resource Plan be received for information.**

CARRIED

#### **7.0 MATTERS FOR DISCUSSION**

##### **7.1 Report from Senior Management**

Members were reminded of the Radiothon fundraiser taking place on Friday May 11<sup>th</sup> in the lobby. At the recent Studor Conference held in Toronto, V. Florio Manager of Nurses was presented with one of three inaugural “Living Values Awards” honouring the exemplary contributions of a leader. The Board asked that a letter of congratulations be sent to her.

The CEO presented the 4<sup>th</sup> Quarter 2017-2018 Quality Indicators Report noting ED wait times (to admission) is above target of 14 hours. Historically occupancy in Q4 (Jan-Mar) tends to be higher in part due to seasonal illness which bring challenges to patient placement opportunities. Compliance continues to increase in Hand Hygiene. The Patient Experience indicator measure is also increasing with each quarter.

**8.0 CONSENT AGENDA**

**8.1** Minutes of the Board of Directors Meeting of April 11, 2018

**8.2** Report of the Joint Quality Committee of May 04, 2018

It was MOVED by F. Gelinas and SECONDED by M. Dawson to:

**Approve the consent agenda which includes approval of the Board of Directors Meeting Minutes of April 11, 2018 and receipt of the Joint Quality Committee report of May 04, 2018.**

CARRIED

**9.0 ADJOURNMENT TO IN-CAMERA**

It was moved by K. Davy and seconded by T. Stickle that:

**The Board move In Camera.**

CARRIED

The meeting adjourned at 1910 hours.

---

V. Pepper Chair

---

K. Isfan, Secretary