

**REGULAR MEETING  
BOARD OF BLUEWATER HEALTH  
June 23, 2010**

Directors:            Bryan Bouck√            Dr. Martin Lees√            Brent Steeves√  
                         David Campbell√            Don McGugan√            Cindy Thayer√  
                         Bruce Davies√            Robert McKinley(r)            Stéphane Thiffeault√  
                         Sue Denomy√            Richard Newton-Smith√            Dr. Angela Wang√  
                         Jim Elliott√            Dr. Alvaro Ramirez√  
                         Lorri Kerrigan√            Pasquale Rossi√

Staff:                    Steve Anema√; Kim Bossy√; Connie Courtney√; Mike Lapaine√; Barb O'Neil√

Guests:                Sheila Chappell, President, Bluewater Health Foundation√  
                         Liz Kenny, Director, Bluewater Health Foundation√

**1. CALL TO ORDER - 5:49 p.m. (\*attached in the minute record book)**

1.1 Welcome/Opening Remarks

J. Elliott welcomed everyone to the meeting.

1.2 Approval of Agenda\*

*Motion moved, seconded and carried: to approve the agenda as presented.*

1.3 Declaration of Conflict of Interest

Dr. A. Ramirez declared a conflict of interest for Item 4.1 – Cancer Care Plan. It was noted that A. Ramirez would participate in the discussion of the item but would excuse himself for the deliberations.

**2. APPROVAL OF MINUTES (\*attached in minute record book)**

2.1 *Motion (B. Bouck/R. Newton-Smith) and carried: to approve the minutes of May 26, 2010.*

**3. REPORT FROM IN-CAMERA MEETING**

J. Elliott reported that the in-camera meeting had included discussions regarding personnel.

**4. ITEMS REQUIRING DECISIONS (\*attached in the minute record book)**

4.1 Cancer Care Plan\*

As noted above, A. Ramirez excused himself from the deliberations of this item.

M. Lees presented the Cancer Care Plan (the Plan) for consideration and endorsement. M. Lees provided an overview of the Plan highlighting the background, goals, the approach, wait times and volumes and reviewed the recommendations.

He advised that a decision was made by the Steering Committee to focus on Breast, Colorectal, Thoracic Oncology/Lung, Prostate and Palliative and End of Life Care in order to improve the cancer care services for Lambton County residents and embrace the Cancer Care Ontario (CCO) guidelines.

The Board was advised that the Plan will improve accessibility, continuity of care, shorten wait times, provide care closer to home, enable the hospital to meet CCO standards and guidelines, and that the Plan is in alignment with the strategic priorities.

An inquiry was made regarding thoracic surgery. The Board was advised that the hospital did not meet the CCO standards last year and is, therefore, required to refer patients to Level 1 Centres by

the fall of 2010. M. Lees advised that the hospital is considering issuing a request for proposal to Level 1 Centres to provide the service and ensure time frames are met. The Board was advised that the ESC LHIN will be working with the hospital to make this possible and ensure the best outcomes for the patients.

S. Denomy advised that CCO supports the Plan on the condition that the hospital moves away from thoracic surgery. She advised that it has not yet been determined which Level 1 Centre patients will be referred to and that details are still being worked out with the ESC LHIN, CCO and the LHIN 2. The Board was advised that CCO is withholding funding until a decision is made.

Discussion ensued regarding the November 1<sup>st</sup> date in Item 2 of the proposed motion. The Board agreed that item 2 of the proposed motion is conditional of the agreement with a Level 1 approved Centre set out in Item 3. The Board inquired if the November 1<sup>st</sup> was possible for Management to negotiate an agreement with a Level 1 approved Centre.

Concerns were raised regarding the quality of service, wait times and repatriation of patients to Sarnia.

J. Elliott thanked S. Denomy and M. Lees for their work on the Cancer Plan. He expressed his thanks to the subcommittee as well.

***Motion (S. Thiffeault/P. Rossi) and carried: to endorse the Bluewater Health Cancer Care Plan and that:***

- 1. Bluewater Health cease doing all surgeries covered by Cancer Care Ontario's Thoracic Surgical Oncology Standards as of November 1, 2010, and***
- 2. Management be directed to establish and negotiate an agreement no later than November 1, 2010 with a Level 1 approved Centre for the completion of Thoracic Oncology Surgery.***

**5. MONITORING/OVERSIGHT (\*attached in minute record book)**

**5.1 Financial Statement\***

S. Anema presented the Statement of Revenues and Expenses for the period ending April 30, 2010. The current statement shows the hospital's year-to-date revenues are \$13,317M and expenses are \$13,597M. He advised that the hospital has an operating deficit of \$280M and that this is an improvement from April 2009 where the deficit was \$366M. S. Anema highlighted lower-than-expected WSIB and room differential revenues and the chronic care co-payment as factors contributing to the deficit.

***Motion (B. Steeves/R. Newton-Smith) and carried: to accept the Financial Statement.***

**5.2 Capital Project/Facilities Planning Report\***

M. Lapaine reported that the Capital Project/Facilities Planning Report was similar to the previous month's report. He advised the hospital expects the City of Sarnia to issue the hard Occupancy notice on June 24<sup>th</sup>. He advised that the Norman site patient moves are on track for July.

***Motion (B. Bouck/B. Steeves) and carried: to accept the Capital Project/Facilities Planning Report.***

**5.3 Balanced Scorecard\***

**Resource Utilization and Audit Indicator Report\***

B. Steeves presented the Resource Utilization and Audit Committee indicators. He reported that the projected year-end column will be completed once the budget has been finalized. He highlighted the improvement in the working capital indicator and advised this indicator will fluctuate as payments are made to EllisDon on the capital building project. He noted that the

majority of the indicators for the incremental volume funding section are tracking green with the exception of colonoscopies and hips and knees. He noted that the efficiency indicators for weighted cases are tracking red and that the hospital is addressing these measures through prospective planning.

**Quality Indicator Report\***

D. Campbell presented the Quality Committee indicators. He highlighted the indicators tracking in green. He reported that the hand hygiene improvement plan is being revised. He highlighted the medication reconciliation, one patient incident and the alternate level of care indicators. He noted that there was a slight decrease in wait times for general surgery but that there was a significant increase in the cancer surgery indicator and that the MRI and CT indicator wait times continue to be elevated.

***Motion (M. Lees/R. Newton-Smith) and carried: to accept the Resource Utilization and Audit and Quality Indicator Reports.***

**6. POLICY FORMATION (\*attached in minute record book)**

6.1 Policy 5.40 – Governance and Nominating Committee Terms of Reference\*

R. Newton-Smith presented Policy 5.40 – Governance and Nominating Committee Terms of Reference for approval. He advised that the Terms of Reference were revised to include the community engagement strategy and that the Committee will monitor the implementation and effectiveness on a regular basis.

***Motion (R. Newton-Smith/P. Rossi) and carried: to approve Policy 5.40 – Governance and Nominating Committee Terms of Reference Ethics.***

**7. ITEMS FOR DISCUSSION (\*attached in minute record book)**

7.1 Board Work Plan\*

The Board reviewed the Board work plan and no changes were proposed.

***Motion (L. Kerrigan/A. Wang) and carried: to approve the Board Work Plan.***

**8. ITEMS FOR INFORMATION & ANNOUNCEMENT (\*attached in minute record book)**

The following updates and Committee reports were presented:

8.1 CEO/Management Reports\*

8.2 Board Chair Report\*

- J. Elliott highlighted the Minister of Health and Long-Term Care's letter dated June 9<sup>th</sup> regarding the *Excellent Care for All Act*.

8.3 President of Professional Staff Report\*

- Dr. Ramirez advised that Dr. Austin resigned as the President of the Professional Staff Association (PSA) and that the PSA held elections on June 16<sup>th</sup>. He announced that he is the newly elected President, that Dr. Garach is the Vice-President, Sarnia and that a memo was sent out yesterday to the PSA seeking candidates for the Secretary Treasurer position. He noted changes to Bill 46 and Regulation 965 under the *Public Hospitals Act*.

8.4 Medical Advisory Committee Report – June 16\*

8.5 Quality Committee Report – June 3\*

- D. Campbell reported that the Committee had a presentation on the Surgical Safety Checklist. He noted that the Committee received an update on Releasing Time to Care® and highlighted an article in the Sarnia Observer regarding hand washing.

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- 8.6 Governance and Nominating Committee Report – June 9\*
- R. Newton-Smith reminded committees to review and update their work plans for the upcoming year.
- 8.7 Resource Utilization and Audit Committee Report – June 10\*
- B. Steeves advised that the Committee reviewed its work plan and identified financial stewardship principles and financial risk management under Item 7 of the Resource Utilization section of the Terms of Reference as two areas that need to be added to the work plan. He advised that the review of banking arrangements of the Corporation was deferred to October when the CKLAG review of banking arrangements is complete. He noted that the Committee will be bringing forth policies for review and approval in the fall.
- 8.8 Foundation Report\*
- L. Kenny advised that the food court will be opening in July and that the Foundation has been cataloguing the art work for the Mitton, Norman and Russell sites. She advised that the ceremony for the donor wall has been deferred to mid-July and that donations were up from the previous year. She inquired if any of the Directors might be available to assist with greeting guests at the Open House tours to let her know.
  - An inquiry was made regarding what will happen to the art work that will not be displayed at the new hospital.

*Motion (L. Kerrigan/D. Campbell) and carried: to receive the above reports as presented.*

**9. OPEN FORUM**

No issues or concerns were raised.

**10. NEXT MEETING**

August 25, 2010

**11. ADJOURNMENT**

J. Elliott acknowledged Dr. Lees and thanked him for his contributions to the Board. On behalf of the Board, he wished him well.

There being no further items for discussion, the meeting adjourned at 7:02 p.m.

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Jim Elliott  
Chair  
Board of Bluewater Health

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Sue Denomy  
Secretary  
Board of Bluewater Health

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Jacqueline McGregor  
Senior Executive Assistant  
Recorder