

**REGULAR MEETING
BOARD OF BLUEWATER HEALTH
November 24, 2010**

Directors:

Bryan Bouck√	Lorri Kerrigan√	Brent Steeves√
David Campbell(r)	Robert McKinley√	Cindy Thayer√
Bruce Davies√	Richard Newton-Smith√	Stéphane Thiffault√
Sue Denomy√	Wayne Pease√	Dr. Angela Wang(r)
Jim Elliott√	Dr. Alvaro Ramirez(r)	
Dr. Michel Haddad√	Pasquale Rossi√	

Professional Staff: Dr. Brian Hynes(r); Dr. Anil Garach(r)

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

Guests: Jennifer McCullough, Director, Performance Management√
Sue Roger, Director, Medicine

1. EDUCATION SESSION (*attached in the minute record book)

1.1 Releasing Time to Care©

Jennifer McCullough and Sue Roger provided a presentation on the Releasing Time to Care© (RTC©) initiative. J. McCullough provided an overview of the background and the RTC© experience at the hospital. She advised that as of December 2010, the RNs and RPNs on the participating unit will have increased their time providing direct patient care by 30 minutes per 12 hour shift. Sue Roger highlighted the methods of communication and engagement (i.e. flip-chart messages and visual banners), measurement, the literature, the leadership development. J. McCullough reviewed the RTC© connection to the Employee Engagement Survey priorities. They advised that this initiative has received very positive feedback from staff.

2. CALL TO ORDER – 6:25 p.m. (*attached in the minute record book)

2.1 Welcome/Opening Remarks

B. Davies welcomed everyone to the meeting and advised that Dr. Ramirez, D. Campbell and Dr. Wang were not able to attend the meeting.

2.2 Approval of Agenda*

Motion (R. McKinley/B. Bouck) and carried: to approve the agenda as presented.

2.3 Declaration of Conflict of Interest

None was declared.

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

3.1 *Motion (R. Newton-Smith/R. McKinley) and carried: to approve the minutes of October 27, 2010 as presented.*

4. REPORT FROM IN-CAMERA MEETING

B. Davies reported that the quarterly litigation report and some personnel matters were discussed in the in-camera meeting. In addition, the Board discussed the resignation of Dr. Ramirez as President of the Professional Staff Association (PSA) which comes into effect December 1, 2010. He noted that the PSA will be holding elections for all of the professional staff executive positions in the near future and that the Board looks forward to working with the successful candidates.

5. ITEMS REQUIRING DECISIONS - none

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

6.1 Financial Statement*

S. Anema presented the Statement of Revenues and Expenses for the period ending September 30, 2010. The current statement shows the hospital's year-to-date revenues are \$82.9 million against expenses of approximately \$84.2 million. He advised that the hospital's operating deficit has decreased significantly from August as a result of the PCOP funding. S. Anema noted that discussions are ongoing with the Ministry regarding transition costs associated with the move (i.e. training/orientation) and that the hospital anticipates to have the first year's costs paid by the end of the year.

Motion (B. Steeves/S. Thiffeault) and carried: to accept the Financial Statement.

6.2 Capital Project/Facilities Planning Report*

M. Lapaine reported that Capital Redevelopment project is 93 percent complete and that EllisDon has been given direction to proceed with the Mental Health consolidation and that the final costs are still being negotiated. He noted that the demolition of the Russell building is underway and that a contemplated change order has been prepared for the demolition of Block X at the north end of the Russell building. He provided the rationale for the decision noting concerns from the Fire Department regarding the sprinkler system. He indicated that the space could be used for parking. He reported that discussions are underway with the Ministry regarding funding the contemplated change order.

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

6.3 Balanced Scorecard

Resource Utilization and Audit Committee Report*

S. Thiffeault presented the Resource Utilization and Audit Committee Indicator report. He noted that the Committee had a lengthy discussion regarding performance indicators and how it is difficult to evaluate how the indicators are tracking in terms of efficiencies with the current balanced scorecard. He advised that Jim Elliott will be coming to the December committee meeting to discuss the Performance Indicator Taskforce.

An inquiry was made regarding the Facility Operating Cost per Day, Overtime Expense and the Absenteeism Rate-Unionized Staff indicators. The Board was advised the facility expenses were related to minor equipment purchased made in August and transitional costs and for the new building. S. Anema advised that the increase in overtime expense was due to the training and orientation of staff to the new facility. S. Anema will report back at the December meeting regarding the increase in absenteeism of unionized staff.

Action: S. Anema

Quality Indicator Report*

R. McKinley presented the Quality Committee Indicator report on behalf of D. Campbell. He noted that the majority of the indicators are tracking in green. He noted that the indicators tracking in red, in particular MRI and CT, are for reasons which are of the hospital's control as the hospital needs to receive additional funding to increase the operating hours.

Motion (M. Haddad/L. Kerrigan) and carried: to accept the Resource Utilization and Audit Committee and Quality Indicator Reports.

7. POLICY FORMATION – none

8. ITEMS FOR DISCUSSION - none

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

The following updates and Committee reports were presented:

9.1 CEO/Management Reports*

- S. Denomy highlighted the events planned for the CEEH 100th anniversary and nursing recruitment in the Critical Care Unit. She advised that Lynda Robinson has been hired as the Vice President Operations and will be joining the organization on January 4th. An inquiry was made regarding the Workplace Violence Prevention training and if this training should be extended to Board members as well. S. Denomy will follow-up and report back.

Action: S. Denomy

9.2 Board Chair Report

- B. Davies noted that the agenda for tonight's Board meeting was lighter than it has been in some time. He acknowledged the work of the Board over the past several months and commended the Directors for their diligence. B. Davies highlighted the November 12th Board mini-Retreat with Dr. Ross Baker regarding the Board's role in driving the quality agenda. He advised that the second part of the retreat will be scheduled in the new year and that details be provided.

B. Davies advised that he will be attending the LHIN Governance Advisory Council meeting on Monday, November 28th on behalf of the Board.

9.3 President of Professional Staff Report

- No report

9.4 Medical Advisory Committee – November 17

- Dr. Haddad reported that the hospital is considering expanding the hospitalist program to cover surgery and mental health and that the programs are preparing business plans to support this initiative.

Dr. Haddad highlighted the Anaesthesia program. He advised anaesthesia will be structured similar to the surgery program and that the program will have a representative on the Medical Advisory Committee. Dr. Haddad reported that the hospital is currently recruiting anaesthetists in order to maintain and expand services in the surgery program. One anaesthetist has resigned effective January 2011 and another may be leaving as well.

Dr. Haddad advised that the hospital is working hard to expand epidural services for expectant mothers by February 1st. The Board was advised that the service will be transitioned in as the hospital does not have the full complement of anaesthetists. It is contemplated that the service will initially be provided from 6:00 a.m. to 11:00 p.m. daily. Discussion ensued regarding risks of not having the service available between 11:00 p.m. to 6:00 a.m. The Board was advised that the long-term plan is to offer the service to expectant mothers 24/7 once the full complement has been achieved. Clarification was sought regarding how many anaesthetists are required to achieve the complement. The Board was advised that two to four more are needed. Dr. Haddad advised that many of the applicants applying for the position are not fully qualified which is making the recruitment difficult.

An inquiry was made regarding the number of women who leave the community to deliver their babies at hospitals where epidural services are available. The Board was advised that approximately 200 women resident in Lambton County deliver babies elsewhere each year and that approximately half of that number are thought to be associated with the lack of availability

of epidurals. In addition, approximately half of the women who do deliver at Bluewater Health would use this service if it were offered.

9.5 Quality Committee Report – November 4*

- R. McKinley reported on behalf of D. Campbell highlighting the litigation claims report and the surgical checklist. He advised that the Committee had a good discussion regarding the *Excellent Care for All Act*, in particular the quality care plan.

9.6 Governance and Nominating Committee – November 9*

- R. Newton-Smith reported that the Committee had a lengthy discussion regarding the *Excellent Care for All Act*. He advised that a compliance tracking chart has been prepared tracking the status of items in accordance with the Act. He highlighted the performance indicator taskforce, the community engagement strategy and operational plan and the December 10th OHA Balanced Governance Scorecard webcast and accreditation. He noted that the Self Assessment survey will be sent out to Directors next week for completion.

R. Newton-Smith thanked Directors for attending the November 12th Board mini-Retreat.

9.7 Resource Utilization and Audit Committee Report – November 18*

- S. Thiffault reported that the Committee received a presentation from the auditors highlighting the schedule and process for the 2010-11 audit which includes a review of PROcure controls. He noted that the Committee received an update regarding the arbitration awards, recruitment and the H-SAA and HAPs process. He advised that the hospital is awaiting direction from the LHIN or Ministry regarding this 2011-12 H-SAA process.

9.8 Foundation Report*

- The Board was informed that Donor Wall ceremony was held on November 18th and that the charity ball was a great success. The ball raised approximately \$40,000 which will be used for medical equipment. The Board was reminded that the 2011 Dream Home is now open from 1:00-4:00 p.m. every weekend until February 10th in the Glenview Estates in Petrolia.

Motion (P. Rossi/B. Steeves) and carried: to receive the above reports as presented.

10. OPEN FORUM

- No items were discussed.

11. NEXT MEETING

December 15, 2010

12. ADJOURNMENT

There being no further items for discussion, the meeting adjourned at 7:33 p.m.

Bruce Davies
Chair
Board of Bluewater Health

Sue Denomy
Secretary
Board of Bluewater Health

Jacqueline McGregor
Senior Executive Assistant
Recorder