

**ALMONTE GENERAL HOSPITAL  
MINUTES OF THE BOARD OF DIRECTORS  
OPEN MEETING HELD ON  
MONDAY, NOVEMBER 26, 2018  
IN THE AGH BOARDROOM**

**PRESENT:**

√	Mrs. F. Bird	√	Dr. U. McGarry
√	Ms. D. Bremner	√	Mrs. S. Muston
√	Dr. C. Deschenes	√	Mr. D. Perley – Acting Chair
√	Dr. L. Heslop	√	Ms. J. Rolph
√	Ms. C. Hobbs	√	Mr. E. Williams
√	Dr. M. Leonard	√	Mrs. M. Wilson Trider
√	Ms. B. Lowry Bagshaw		

**REGRETS:**

X	Mr. R. Larkin - Chair		
---	-----------------------	--	--

**STAFF:**

√	Ms. K. Harbord	√	Ms. M. Dillibaugh – Volunteer Services Chair
√	Ms. T. McLelland	√	Inspector Derek Needham - Detachment Commander Lanark County Detachment
√	Mr. R. Shaw	√	Robert Scott – Foundation Board Chair
√	Mr. A. Roberts		

**GUESTS:**

**Presentation:** Inspector Derek Needham joined the meeting to provide a short presentation on two initiatives to support residents in Lanark County – the assignment of a Registered Nurse to work with O.P.P. officers responding to calls with a suspected mental health component and the Lanark County Situation Table. Mr. Perley introduced him and after the presentation thanked him for his time and enlightening information. Inspector Needham left the meeting.

<b>1.0</b>	<b>Call to Order</b>
	Mr. Perley called the meeting to order at 7:35 pm.
<b>2.0</b>	<b>Declaration of Conflict of Interest</b>
	No conflicts were declared.
<b>3.0</b>	<b>Reminder to Consider Ethical Issues</b>
	Members were reminded to consider ethical issues.
<b>4.0</b>	<b>Approval of Agenda</b>
	Mr. Perley requested the addition of item 8.1- Strategic Plan Update and item 8.2 – Board Candidate to the agenda.  <b>IT WAS MOVED AND SECONDED THAT THE AGENDA BE APPROVED AS AMENDED.</b>
	<b><u>MOTION CARRIED</u></b>
<b>5.0</b>	<b>Chair’s Remarks</b>
	Mr. Perley addressed the following:

	<ul style="list-style-type: none"> <li>• Thanked everyone for their continued dedication and hard work as a Board Member.</li> <li>• Reminded Members of the AGH Board and Foundation Board Christmas function being held on December 9 from 3-5 pm at the Heirloom. Those who have not RSVP's yet should do so by messaging Ms. McLelland.</li> <li>• Noted the HR Committee has approved a Pizza lunch and dinner for Staff/Physician/Volunteer Appreciation Day – now scheduled for Tuesday, February 5, 2019 – you may contact Ms. McLelland to sign up for the 11-12, 12-1 or 4-5 shift.</li> </ul> <p>Mr. Perley invited Mr. Scott, Foundation Board Chair to address the Members.</p> <p>Mr. Scott referred to the Foundation Report included in the package and emphasized that both organizations would benefit greatly if each was better informed and engaged in helping each other to achieve their common goal – enhancing quality health care close to home. Mr. Scott stressed that he would like to work toward a closer working relationship between the Boards beginning with better communication. Mr. Scott noted that he, Mr. Virgin and Mr. Perley will be reaching out to Mr. Larkin and Mrs. Trider to look at ways in which to better align the work of both Boards.</p>
<b>6.0</b>	<p><b>Consent Agenda Matters</b></p> <p>A question was raised regarding the MAC minutes which contained an agreement to cap the Midwife deliveries. Dr. Deschenes explained that the GP Obstetricians are working on increasing their referrals and trying to shift more deliveries by the physicians. From time to time the 5-bed unit has to close because it is at capacity. Midwives are able to deliver at the Queensway Carleton Hospital and at the patient's home. The physicians have no other options and by capping the midwife births this will enable both the GP Obstetricians and Obstetricians to increase their patients and deliver at AGH. The cap will create a better balance between them.</p> <p><b>IT WAS MOVED AND SECONDED THAT THE FOLLOWING ITEMS CONTAINED IN THE CONSENT AGENDA BE APPROVED:</b></p> <ul style="list-style-type: none"> <li>a. Minutes of the September 24, 2018 Board of Directors meetings</li> <li>b. Financial statements for the 7 months ended October 31, 2018</li> <li>c. Policy # IV-8 Asset Protection</li> <li>d. Human Resources Committee Terms of Reference</li> </ul> <p style="text-align: right;"><b><u>MOTION CARRIED</u></b></p>
<b>7.0</b>	<p><b>Business Arising from the Minutes</b></p> <p>There was no business arising from the minutes.</p>
<b>8.0</b>	<p><b>Matters Requiring Decision</b></p> <p><b>8.1 Strategic Plan Update</b></p> <p>Mrs. Trider reported that in light of a discussion at the Governance Committee review and compliance with the Accreditation Governance Standards, it was suggested that the word "safety" be included in the Strategic Plan whenever there is a reference to quality.</p> <p><b>IT WAS MOVED AND SECONDED THAT THE ADDITION OF THE WORD "SAFETY" TO THE ALLIANCE VISION AND THE DESCRIPTION OF "OUTSTANDING CARE CLOSE TO HOME" IN THE CONSOLIDATED STRATEGIC PLAN DOCUMENT BE APPROVED.</b></p> <p style="text-align: right;"><b><u>MOTION CARRIED</u></b></p> <p><b>8.2 Board Candidate</b></p> <p>Mrs. Trider reminded the Members of the resume she had circulated by email of the candidate that</p>

the Governance & Nominating Committee interviewed. She reported that the Governance Committee is recommending Mr. Lyman Gardiner to the Board of Directors to replace the vacancy left by Ms. Kadoke and also as a member of the Finance & Audit Committee.

As a member of the Governance Committee who interviewed Mr. Gardiner, Ms. Bird agreed that he is a collaborative individual and has a good knowledge of the contribution needed as a Board Member. She also reported that she has checked his references and they all stated that he would be an asset to the Board.

**IT WAS MOVED AND SECONDED THAT MR. LYMAN GARDINER BE APPOINTED TO THE BOARD OF DIRECTORS AS A VOTING MEMBER TO COMPLETE THE TERM LEFT VACANT BY INGRID KADOKE'S RESIGNATION, AND TO THE FINANCE & AUDIT COMMITTEE, SUBJECT TO A SATISFACTORY VULNERABLE SECTOR CRIMINAL REFERENCE CHECK.**

**MOTION CARRIED**

**9.0 Matters for Discussion**

**9.1 Board to Board Relationship with the Foundation**

Mr. Perley referred to Mr. Scott's message to the Board and added that 100% of Foundation Board members make an annual donation. Mr. Perley encouraged the Hospital Board Members to also donate and hoped that they could match the 100%. Mr. Perley indicated that participating in Foundation events will also help align the two Boards and the shared goal. He suggested that a list of the events be posted with a sign-up sheet to ensure the Board is represented at their events. Mr. Perley asked Mr. Scott to extend the Board's appreciation for the work that they do to raise funds for the Hospital and Fairview Manor.

**9.2 Upcoming Studer Group Presentation**

Mrs. Trider referred to the memo included in the package and asked for input for the next Studer education session to be held at the January Board meeting. The following suggestions were made:

- How is success measured
- Success stories – real experiences of other hospitals of similar size
- High performance – how is it observed and can they refer to strategic plan on how it will impact the outcomes
- Is Studer making an impact, how do they provide value and are we getting value for cost

**9.3 Corporate Goals Update**

Mrs. Trider provided a power point presentation on the 2018-19 Corporate Goals and provided the following mid-year update:

PILLAR	GOAL	STATUS
Care	Achieve Exemplary Standing Accreditation	In progress
	Achieve 100% of QIP goals	In progress
	Increase Emergency Department satisfaction by 5% over 2017/18 average	Final data for Q1 and Q2 not available yet, interim results tracking to 93.1%, 2017/18 avg 93%
Access	Increase Obstetrics volume at AGH to 450	YTD October 247 births, mathematically tracking to 420 births
People	Increase flu shot uptake to 75 % of full-time and part-time staff and physicians	FVM - 53%; AGH - 62%; Physicians – 59%
	Reduce the % of paid sick time hours by 1.5%	Reductions in short term sick leave offsetting long term sick leave
Resources	Achieve/maintain a balanced operating budget for the 2019/20 fiscal year	Balanced budget plan submitted and accepted by the LHIN. Implementation of cost saving initiatives in progress.
Alliance	Recruit 3 new specialists to serve the Alliance hospitals	In dialogue with two specialists regarding outpatient clinics and inpatient consultation beginning Summer 2019

Mrs. Trider noted that the flu campaign is not yet complete and the organization’s leaders are mindful of strategies to increase uptake.

Mrs. Trider reported the following projects in progress and the status:

- Branding/logo for the Alliance - In progress – Alliance Committee
- Cerner system upgrade - Capital budget proposed for approval at the November Board meeting
- HIRF projects - No funding announcement to date
- Emergency Department triage area improvement - In progress – construction began early November
- Clinical Services Plan - Approval of funding proposed for approval at the November Board meeting

### 9.3 QIP Mid-Year Review

Mrs. Trider provided the following update on the progress of the QIP:

- Effectiveness AGH – on track
- Medication Safety AGH – on track
- Medication Safety FVM – Target is 18% by March 31. Currently at 22% in Q1. Action plans are being implemented.
- Workplace Violence AGH/FVM – on track

	<p><b>9.4 Report of the CEO &amp; Senior Team</b></p> <p>Mrs. Trider noted that the Report was included in the package. No questions were asked.</p> <p>Mrs. Trider provided a verbal update informing the Members that Chief McPherson, who has been a long time Councillor, has been elected Deputy Mayor of the Town of Perth.</p> <p>Mrs. Trider reported that as part of the LHIN Integration of Services the Sub Acute Care Evaluation Framework Committee has completed a multi-year plan. Ms. Trider noted that there is no immediate impact on AGH at this time. It has not yet been identified whether the beds are being gained or lost but AGH will continue to participate in the planning process.</p>
	<p><b>9.5 Compliment/Concern – Quality Committee</b></p> <p>Ms. Rolph shared a concern received by a patient brought into the ER by ambulance and who upon triage stressed that she had mental health issues and post-traumatic stress syndrome. She was told to get off the stretcher, sit at triage and then wait in the waiting room. She asked to lie down and was declined. In her letter, she inquired whether a Mental Health Nurse had even been informed of her presenting at ER. Ms. Rolph reported that a session has been scheduled for the ER staff to provide education on the mental health stigma and better utilization of the Mental Health Crisis support that is available.</p> <p>Ms. Rolph shared positive feedback from a patient who consumed too much marijuana and was brought in by the Paramedics. She realized she was not easy to manage and made it difficult for everyone to care for her. She apologized for her behaviour and thanked the full team for helping her and being so patient.</p>
<b>10.0</b>	<b>Matters for Information</b>
	<p>Mr. Perley noted that the Board Workplan and Cyber Security Conference Reports from Mrs. Trider Ms. Harbord and Mr. Perley have been included in the package for information. A short discussion was held.</p>
<b>11.0</b>	<b>Other Business</b>
	<p>There was no other business.</p>
<b>12.0</b>	<b>Next Meeting(s)</b>
	<p>The next meetings are scheduled for:</p> <ul style="list-style-type: none"> <li>• Regular Board of Directors Meeting –January 28, 2019.</li> </ul>
<b>13.0</b>	<b>Adjournment</b>
	<p>There being no further business, <b>IT WAS MOVED THAT THE MEETING BE ADJOURNED.</b></p>
	<p>_____</p> <p><b>Mr. D. Perley, Acting Board Chair</b></p>
	<p>_____</p> <p><b>Mrs. M. Wilson Trider, Secretary</b></p>