

Regular Board Meeting, April 25, 2017

A **Regular Board Meeting** of the Board of Directors of the Hornepayne Community Hospital was held on Tuesday, April 25th, 2017 at 4:00 p.m. in the Hospital Board Room.

PRESENT:

- R. Kelly - Chair
- H. Jaremy-Berube – Secretary
- C. Fort
- A. Morrison
- S. Peroff
- J. Roy-Ward
- Y. Vaillancourt
- H. Verrino
- M. Zajac

LATE: L. MacEachern

REGRETS:

- Dr. Cameron
- Dr. Henderson
- A. Le Fort
- A. Liebigt
- A. Sloan

IN ATTENDANCE: S. Collins - Recording Secretary

1. CALL TO ORDER - APPROVING AGENDA

The meeting was called to order at 4:05 p.m. Richard welcomed Sherri to her first Board meeting.

Amendments to the Agenda:

Delete:	4	Report of Officers
	4.4	Chief of Staff

***39-04-17 Motion:**

It was moved by M. Zajac and seconded by C. Fort to accept the agenda as amended.

CARRIED

2. RECEIVING AND PASSING OF MINUTES

2.1 Minutes of the Regular Board meeting of March 28^h, 2017

Errors or Omissions

- 4. Report of Board Committees
 - 4.1 Finance Committee, March 27, 2017

READS:

There has been an increase of \$100,000 over the past year in energy consumption.

SHOULD READ:

There has been an increase of \$100,000 over the past **5 years** in energy consumption.

***40-04-17 Motion:**

It was moved by Y. Vaillancourt and seconded by L. MacEachern that the minutes of the Regular Board meeting of March 28th, 2017 be accepted as amended.

CARRIED

3. REPORT OF BOARD COMMITTEES

None.

4. REPORT OF OFFICERS:

4.1 Chief Executive Officer

Strengthening Homecare - Funding proposal for .5 FTE¹ Homecare Coordinator is pending. We are considering combining the funding that we may receive with other base funding to create perhaps a Home Care /Palliative Care Nurse Coordinator. There are many Nursing gaps that we have identified, that one CNO² cannot possibly undertake.

Physiotherapy – A Physiotherapist from Wawa, Carol-Anne Robinson has agreed to contract her services to us for one year to provide Physiotherapy to our LTC³ residents. She has visited once already, and jointly, we are preparing all the necessary paperwork, and creating necessary policies etc. required to deliver this program. Nôtre Dame Hospital has informed us that they may be able to recruit another Physiotherapist in the fall. It is possible that if they do, we may enter into a sharing agreement as we did a few years ago, to provide Physiotherapist services a couple of days a week, for our out-patients.

Information Technology (IT) - The IT department in Hearst has begun their work with us effective April 1st, with a fairly smooth transition of all hospital systems. Jeannette Vaillancourt, Chief Information Officer/IT Manager for Hornepayne, Hearst, Kapuskasing, and Smooth Rock Falls, has visited once already to discuss future IT needs and capital planning of Information Technology assets together with our Administrative team.

The Hornepayne Community Hospital, in along with a number of hospitals in the North have decided to purchase an online scheduling software program, which will alleviate the time and attention required by Departmental Managers and Payroll department commitments to schedules and payroll weekly.

1 Full-Time Equivalent

2 Chief Nursing Officer

3 Long-Term Care

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4.1 Chief Executive Officer (continued)

LEAN - LEAN methodology is working quite well, with staff beginning to feel empowered, and part of solutions to improve our services. I encourage Board members to walk around the facility to view our huddle boards, and the ideas and projects we have in progress.

Two employees, Liz and Jim, in early April attended a Green Belt Project Management LEAN session in Timmins, which they said was very intensive. This course is conducted in two sessions, with another two days to be scheduled soon.

Hospice Suite - The hospice suite renovation was completed on time, the end of March. A financial accounting of the costs associated with this renovation was submitted early-mid April to the LHIN. We have received documentation that the money in the amount of \$1,740,000 will be released via CCAC⁴ to 17 community based hospice suites. Once furnished and fully ready we will be notifying the media, and preparing a press release with photos of this important project. Further palliative care training is being scheduled, which Alison will speak to.

Diagnostic Imaging (DI) - The DI digital retrofit is awaiting arrival of some miscellaneous desk equipment, which should be arriving shortly to complete that installation.

Executive Compensation - Since the last Board meeting, our Region 1 group of hospitals has further evaluated 3 consultant proposals to comply with the Executive Compensation framework for public consultation, which we must comply with by September 2017.

The successful firm was DiBrina with a fee of a little under \$10,000 and evaluation of 4 executive positions.

The hiring of this firm will be conducted via legal counsel to provide protection of information, which the group of 6 hospitals also jointly decided, at the advice of DiBrina.

(Other two were Hay at a cost of \$17000 for 3 positions)

(Single consultant who has access only to OHA5 Salary grids)

In order to comply we must:

- Recognize and address the reality that compensation is a basic factor to enable successful recruitment and retention of well qualified leadership in a remote location.
- Attract, retain, motivate and develop a quality workforce.
- Pay competitively within the broader public service while remaining cost effective

Salary and Performance

The Broader Public Sector Executive Compensation Act was proclaimed in March 2015. The executive compensation framework is contained in a regulation under the BPSECSA. The framework applies to employees and office holders of designated employers who are entitled to receive cash compensation of more than \$100,000 or more annually. Regulation directs that compensation be capped no greater than the **50th percentile** in a range of comparator positions in at least 8 similar organizations. The comparator organizations will be chosen with these factors in mind.

- Scope of the responsibilities of executives
- Type of operations the organization engages in
- Industries with which the organization competes for executives
- Size of the organization
- Location of the organization

At this point in time, without any comparators defined, Hornepayne Community Hospital executive salaries appear to be dramatically lower than comparable hospitals in the North.

4 Community Care Access Center

5 Ontario Hospital Association

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- **4.1 Chief Executive Officer (continued)**

Example CEO Scale Hornepayne start **\$101,575 - \$118,482** (Current CEO remain on start at \$101,575)

Smooth Rock Falls CEO assuming top of scale in 2016 **\$158,652.**

Lady Dunn Wawa CEO assuming top-mid scale **\$136,000.**

To this end, in the CFO⁶'s report will be a request for a motion to approve the expense for the services of DiBrina to assist us in conducting this exercise on behalf of HCH⁷ along with other OHA Region 1 to ensure compliance with current regulation, as well as remain competitive and fair with respect to compensation.

***41-04-17 Motion:**

It was moved by S. Peroff and seconded by L. MacEachern to accept the Chief Executive Officer's report as presented.

CARRIED

4.2 Chairman of the Board

Nothing to report.

4.3 Chief Financial Officer

Summary of Revenue and Expenses – March 2017

The March 31st, 2017 Summary of Revenue and Expenses was reviewed and discussed.

This is a Preliminary report. We have lots of projects on the go in order to receive funding.

The funding hasn't come in yet. Auditors will finalize the Summary of Revenue and Expenses.

Monthly Actual:

Total Revenues:	\$409,375
Total Expenses:	<u>\$573,415</u>
Operating Deficit:	(\$165,587)

***42-04-17 *Motion**

It was moved by M. Zajac and seconded by S. Peroff to accept the Summary of Revenue and Expenses of March 31st, 2017 (preliminary report) as presented.

CARRIED

Small Hospital Funding – LEAN Training

The overall cost for the LEAN training was \$40,000.

The funding paid by the LHIN⁸ for LEAN training was \$15,000.

The funding paid by the LHIN for Physiotherapy was \$25,000, which we couldn't use because we didn't have a Physiotherapist. Therefore, the LHIN has agreed to transfer the Physiotherapy funding to the LEAN training which will cover the total cost.

Hospice Suite Funding

The funding we received for the Hospice Suite from the LHIN was for \$102,000. The total cost for the renovations was \$119,000.

6 Chief Financial Officer

7 Hornepayne Community Hospital

8 Local Health Integrated Network

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4.3 Chief Financial Officer (continued)

2017/18 HIRF⁹ Funding

We have \$187,000 in outstanding projects for the electrical upgrades.

Funding Application – Exceptional Circumstance Project and Grant Business Case Form Due April 26th, 2017 – We are applying for an elevator upgrade.

Hospital House (52 Neesomadina)

We have received two quotes from Fern Girard for the renovations to the house.

Renovations will include the following:

Remove all carpets and underlay (both floors and both stairs)

Remove all casings and baseboards

Supply materials and prep for new flooring

Supply and install new flooring

Supply and install new casings and baseboards

Baseboards and casings to be stained and varnished

The total business case for this project is for \$205,000.

We would like all the renovations done as soon as possible as we have given notice to vacate the two apartments by June 30th, 2017. Vacating the apartments will save the hospital approximately \$40,000 annually.

Laurie MacEachern mentioned that the pavement was getting done at the Holy Name of Jesus School; therefore, if it needed to be done at the house it would be a good time to mention it.

Service Contracts:

ASCO Power Technologies – ASCO automatic transfer switch scheduled maintenance, annual price for basic regular maintenance is \$4355 + HST.

***43-04-17 Motion:**

It was moved by S. Peroff and seconded by L. MacEachern to get the scheduled maintenance from ASCO Power Technologies at a cost of \$4355 + HST as presented.

CARRIED

Total Power Service Agreement and Inspection for 5 years – The cost of the plant service contract and inspections for the generator is \$6,000 annually.

***44-04-17 Motion:**

It was moved by M. Zajac and seconded by Y. Vaillancourt to purchase the Service Agreement and get the Inspections from Total Power Service at a cost of \$6,000 annually as presented.

CARRIED

DiBrina Sure Human Resources – Ontario Broader Public Sector Executive Compensation Framework – As previously mentioned in the CEO report. A copy of the work plan is attached listing all activities and tasks involved in the proposal. They have given us a quote at a fixed rate project price of \$9,750 + HST.

***45-04-17 Motion:**

It was moved by L. MacEachern and seconded by C. Fort to go ahead with DiBrina Sure Human Resources at a cost of \$9,750 + HST as presented.

CARRIED

⁹ Health Infrastructure Renewal Fund

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4.4 Chief of Staff

Deleted from the agenda

4.5 Chief Nursing Officer

Infection Control:

- We declared an enteric outbreak in LTC from March 23rd – 31st, 2017. It was identified as Norovirus. Jim says it is the first time we had to declare an outbreak since he can remember. We had 8 residents and 14 staff affected. We closed the hospital to visitors and food services. No cases on Acute, which demonstrates the effectiveness of our increased precautions and cleaning.
- We identified that we need updated policies for infection control. I have access to the policies from Thunder Bay Regional and St. Josephs Health, but need time to create them.
- We identified that we really need an Infection Control Practitioner.
- Hand Hygiene – Patient Safety Indicator – Reported to the Ministry annually – before: 62.96% and after 81.82%. We have room for improvement. We will create a benchmark based on the provincial average. The Porcupine Health Unit has offered to do some in-servicing with staff, so we will re-test after the intervention to determine if we have improved.
- N95 Mask Fitting is being done this week

Acute Care/Emergency:

- Good use of Virtual Critical Care as a resource this month.
- Entry Point (Electronic Physician Orders) for Patient Order Sets is getting consistent use. I thank the physicians for this.

Long-Term-Care:

- Still have some outstanding programs to build in order to meet the LTC Act requirements. We are so busy with day-to-day issues that we just can't get ahead in developing new programs. We will make it a priority for the month of May.
- Door Locks – still waiting on Steel Communications to get back to us on a solution (since February, despite several communications). I will reach out one more time then I will ask Jeanette from Hearst to provide a different contact.
- Physiotherapy will begin next month. Our Physiotherapist had her first site visit and is working on getting administrative items completed.

Pharmacy:

- Liz and Satvir are working on Pharmacy Accreditation. They will be on site June 21, 2017
- LTC – We were hopeful to switch from Fenlons Pharmacy to our Local Pharmacy for LTC medications. We now feel that the infrastructure and requirements of LTC cannot be met, so we have spoken to Hearst. Liz and I are scheduled for a site visit to discuss our options and to ensure that we meet the LTC Act requirements.
- In my LTC Director of Care group I meet with quarterly, it was mentioned that medication is what the Ministry Inspectors are targeting this year, so we want to be prepared.

4.5 Chief Nursing Officer (continued)

Hospice:

- Construction is complete.
- Marilyn has been shopping for furnishings.
- We will use the \$1,000 donation from the Priest family to purchase some of this.
- We still have to name the Hospice Suite and have our Media Blast.
- Admission Criteria/Orderset – is ready to bring to MAC¹⁰ for final approval.
- PCS Standard of Care (SOC) in Meditech – completed by Rachel and ready for use in Live.
- We are ready for clients.
- Fundamentals of Palliative Care Course we will host in Hornepayne May 10, 11, 12th. We have about 8-10 confirmed. We were hoping for 12.

Staffing:

- Staffing has been a nightmare! Lots of sick time.
- RN's – Haafizah has put in her notice. Her last day shift is May 12th, 2017. Her full-time position has been posted internally.
- RPN's – I presently have a sick leave going on until August and an upcoming maternity leave to plan for.
- PSW - Geraldine has announced her retirement, so we will fill her full-time position at the end of July. I have a sick leave until August, but I hired Jessica Lavigne as a casual PSW. I have many casuals, but none that are able to take shifts.

Public Awareness:

- Public Awareness Day at the Legion is on May 19, 2017. We intend to promote 3 things:
 1. One Initiative – One Health Record for all of Ontario. We want to make the public aware that this is happening. With respect to privacy, the public needs to be well informed.
 2. Volunteers Program – We want to make people aware that we are recruiting for meal-time feeding (Loving Spoonful Program), After-School Program for High School students 16 years and over, and perhaps eventually a reading program in collaboration with the school. Police clearance is required.
 3. Community-Exercise Program – We have 2 trained. This is targeted at Well Seniors for fall prevention and strengthening. We will let the community know that we will begin this program as we did before in our LTC Lounge.

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4.5 Chief Nursing Officer (continued)

Legion Grant:

- We submitted this. The big item we asked for was the EvacuSled. We asked for 5. This will enable us to evacuate bed-bound patients by dragging them on their mattress. We would like to collaborate with the Township, perhaps in the summer to have a mock evacuation, where we evacuate the building in approximately 2 minutes. We are supposed to have them annually. Table top drills count I believe, but we need to have a real one before our next accreditation. Cheryl will communicate this with the Township.

***46-04-17 Motion:**

It was moved by S. Peroff and seconded by L. MacEachern to accept the Chief Nursing officer report as presented.

CARRIED

4.6 Manager of Nutritional, Domestic & Plant Services

Nutritional:

The Dietary department has been steady with catering (graduations) expecting to increase in the next few months.

Javis Brown – Javis has been working/training under myself. We are discovering that there are a lot of unwritten duties that have been done over the past many years that have just been an added responsibility. So moving forward, we are implementing procedures, updating policies, etc.

Shuffling - It has been a very disruptive month with having all the staff moving around in different jobs. This has taken a great toll on many of us, with so many changes all at once. But moving ahead, they are all good changes and we will persevere.

Painting – We are finally getting the kitchen painted, so we are pretty excited to finally get this done.

Dishes – We are donating a lot of dishes, that were given to us from Craig’s Place, to the Legion.

Health Inspector – A new Health Inspector was in today. They checked everything and all was compliant.

Domestic:

Christine Trudel – We will be hiring a new part-time housekeeper. Christine Trudel has handed in her resignation. Her last shift and coffee break are tomorrow.

Plant:

Maintenance has, also, been very steady with the work flow.

HIRF – We are going to be getting the work done on a few HIRF grant projects. Replacement of the master switch will be completed in May.

Summer Student – We have asked for one summer student hoping that we will get approved for this, as there are many more duties in the summer months, as we now have the house on Neesomadina to maintain as well. (We have tossed around the idea of maybe catering this out but we will look further into it in the following weeks.)

House on Neesomadina - We will be moving out of our two apartments before the end of June. We are bringing forward a few projects that we would like to get done prior to moving if possible (flooring/lighting).

Hospice Suite – The hospice suite is complete, cleaned and ready for use. We have taken an inventory of what we need to furnish the room. We are working closely with Purchasing to find the right size furniture.

Jordan Kelly – Jordan has been signed up to take a mandatory “Working at Heights” program sometime in June. This is being spearheaded through the HEDC.

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4.6 Manager of Nutritional, Domestic & Plant Services (continued)

Temporary Control System – Maintenance is working on installing a temporary control system for the Lab fridges – 12 fridges will be on this system with the main computer located at the nurse’s station. We are working with IT in setting this up.

***47-04-17 Motion:**

It was moved by Y. Vaillancourt and seconded by L. MacEachern to accept the Manager of Nutritional, Domestic & Plant Service’s report as presented.

CARRIED

4.7 Hospital Auxiliary

Trade Fair – Spring is in the air, the Ladies Auxiliary are diligently preparing for the Trade Fair on May 6th at the Legion.

Mother’s Day Spa – The Mother’s Day gift basket is now on display at the Tuck Shop. Tickets are available at \$1 each.

Mixed Bonspiel Catering – As reported at the last Board meeting, the catering for the Annual Mixed Bonspiel was a success. The final numbers are in with a profit of \$2,100.

Donations – The Auxiliary purchased 2 ophthalmic/optic scopes for the examination rooms at \$2,200 each. Two pairs of padded booties were purchased for patients in the community that needed them and could not afford them.

***48-04-17 Motion:**

It was moved by S. Peroff and seconded by C. Fort to accept the Hospital Auxiliary’s report as presented.

CARRIED

5. CORRESPONDENCE – April 2017

1. Hornepayne Community Hospital
Re: 2017 Legion Grant Application
2. OHA
Re: Upcoming Governance Centre of Excellence (GCE) Educational Offerings

6. NEW BUSINESS

None.

7. OPEN FORUM

Alison Morrison – mentioned that long-time worker, Sandra Moreau, has retired after 40 years of service. She didn’t want a coffee break or a ceremony. Sara Baker has filled her position. She is doing well.

Laurie MacEachern – mentioned that the Bell answering machine needs to be updated. It was mentioned that our telephone system is obsolete and needs to be looked at.

Cheryl Fort – mentioned that there is a Canada 150 sub-committee. If anyone is interested in volunteering or partnering with events, funds are limited, so we are looking for volunteers.

Sherri Peroff – enjoyed her first Board meeting.

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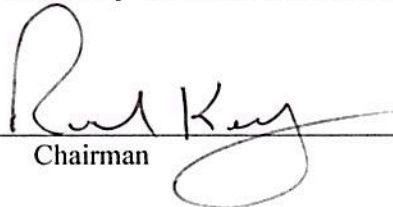
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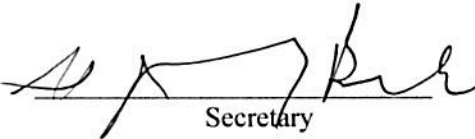
9. ADJOURNMENT

*49-04-17 Motion:

It was moved by L. MacEachern that the meeting be adjourned at 5:25 p.m.

CARRIED


Chairman


Secretary