

Horizon Health Network

Minutes of meeting

Minutes of a meeting of the Board of Directors held on Thursday, October 24, 2013, beginning at 2:00 p.m. at the Crowne Plaza Fredericton Lord Beaverbrook Hotel.

Present: W. David Ferguson, Linda Aitken, François Beaulieu, Mike Coster, Jo-Ann Fellows, Linda Forestell, Dr. Erik Klein, Michael McCoombs, John McKay, Kathleen McMullen, Jane Mitton-MacLean, Mary Schryer, Kay Simonds, John McGarry, Dr. Tom Barry, Danica Wallace, Gary Foley, Geri Geldart, Dr. Edouard Hendriks, Janet Hogan, Dan Keenan, Dr. Pam Mansfield, Margaret Melanson, Andrea Seymour, Norma MaGee (recording)

Regrets: Chief Candice Paul, Luigi Rocca

(1) Approval of agenda and opening remarks

The Chair called the meeting to order at approximately 2:50 p.m. and extended a welcome to those in attendance.

Mr. Ferguson announced that Accreditation Canada has awarded Horizon Health Network with an accredited four-year status. During the September on-site survey visit, 3,269 separate criteria were evaluated, with Horizon meeting 3,157 of those criteria (97%). The report will be shared with the public at a later date once the report has been translated.

He offered congratulations to the staff at Horizon Health Network for the good work, and noted that a letter of congratulations will be sent on behalf of the Board of Directors.

MOTION:

MOVED BY M. BEAULIEU, SECONDED BY MS. SCHRYER

THAT THE AGENDA FOR THE MEETING BE APPROVED AS CIRCULATED.

MOTION CARRIED.

(2) Minutes of last meeting

June 27, 2013

MOTION:

MOVED BY MS. FELLOWS, SECONDED BY MS. MCMULLEN

THAT THE BOARD OF DIRECTORS APPROVE THE MINUTES OF THE JUNE 27, 2013 MEETING OF THE BOARD OF DIRECTORS AS CIRCULATED.

MOTION CARRIED.

(3) Business arising from the minutes

3.1 Update on Kennebecasis Valley and Fredericton Community Needs Assessments: An update on the status of the recommendations from the Community Needs Assessments in Kennebecasis Valley (KV) and Fredericton was provided for information.

Ms. Schryer noted one of the recommendations from the Needs Assessment in KV related to sexual health services for teens not meeting the current demand. M. Daigle explained that staff is working with the student population to determine how they could better access this service.

(4) Report of President and Chief Executive Officer

Mr. McGarry referred to his previously circulated report, which highlighted the organization's focus since the last board meeting in June. These included undertaking Phase III of the benchmarking process; implementing model of care staffing alterations in Family Practice units; the development of a patient-centred philosophy of providing care to the communities; and managing risk issues, namely at the Miramichi Regional Hospital and the Dr. Everett Chalmers Regional Hospital. Mr. McGarry also referred to the "Community Report" dated October 24, 2013, distributed at the meeting, which was a compilation of all the reports to today's meeting. It will also be available on Horizon's website following the meeting.

Mr. McGarry introduced Margaret Melanson, newly appointed Vice President, Quality and Patient Centred Care for Horizon Health Network. Ms. Melanson will be responsible for implementing a sustainable approach, Horizon-wide, to patient-centredness as well as Patient Advocacy, Patient Safety, Privacy, Quality, Risk Management and Official Languages. He explained that this strategic senior leadership position will be effected by a realignment of duties amongst other administrative positions after eventual appointment of a new Executive Director for Saint John Regional Hospital.

Mr. McKay asked about the colposcopy disclosure in Miramichi, noting that the issue had been ongoing for a long time and wondered when it would be brought to a close. Ms. Geldart provided an update on the status of contacting patients.

Mr. McGarry also explained the Executive Leadership Team's '20 touches' with patients each month. This allows the group to stay grounded in issues faced by patients and front-line staff. This has received very positive comments to date.

(5) Patient care initiatives at Dr. Everett Chalmers Regional Hospital and other facilities

Through a PowerPoint presentation (attached to Minute Book at Corporate Office for future reference), Mr. McGarry explained how the senior team and others have addressed concerns recently received regarding care provided at the Dr. Everett Chalmers Regional Hospital. He outlined steps that have been taken since receiving a letter with a report from Penny Ericson regarding the care received by her late husband while he was a patient at the hospital.

He acknowledged that the system could do better and committed that the situation would improve. Ms. Melanson will be tasked with operationalizing the planned measures to heighten the patient centred care Horizon-wide, and in January the board will receive an update from Mr. McGarry and Ms. Melanson.

(6) Committee reports

Board of Directors' Committees

(a) Governance, Nominating and Planning: Ms. McMullen reported for the Committee Chair, Jane Mitton-MacLean, from the September 18 meeting. Traditionally all committees review terms of reference at the first meeting of the board year. A major change to this committee's terms relates to the specific function of planning being a key responsibility.

MOTION:

MOVED BY M. BEAULIEU, SECONDED BY MS. SIMONDS

THAT THE BOARD OF DIRECTORS APPROVE THE REVISED TERMS OF REFERENCE FOR THE GOVERNANCE, NOMINATING AND PLANNING COMMITTEE AS CIRCULATED.

MOTION CARRIED.

Board of Directors' Goals: Good governance is enhanced by having a governing body explicitly commit to goals for its governance function. This is distinct from goals and objectives for the organization's mission. These goals relate more to the way the Board would practice governance in their periodic meetings, and form a basis for assessing board

and member performance at a later date. The committee reviewed proposed goals and recommended them to the board for approval.

MOTION:

MOVED BY M. BEAULIEU, SECONDED BY MR. MCCOOMBS

THAT THE BOARD OF DIRECTORS APPROVE THE BOARD GOALS FOR 2013-2014 TO BE USED AS A BASIS FOR BOARD SELF-ASSESSMENT.

MOTION CARRIED.

Ms. McMullen said that the committee reviewed a draft work plan for the current board year. The work plan is intended to be reviewed at each meeting of the committee to ensure that the committee is undertaking its assigned responsibilities in a timely fashion, as well as providing members with a projection of committee activity in its periodic meetings.

Proposed Consent Agenda: Ms. McMullen explained that the committee discussed the concept of ‘consent agenda’, which many organizations use to optimize the time that their governing bodies spend on key governance functions. A consent agenda affords a board the opportunity to have routine items dealt with in summary fashion, thereby allowing board time to be best spent on more important items of governance. Typically, minutes, routine reports, scorecards and other “*for information*” items are included in a consent agenda format. It is important that members understand that consent agendas **never** preclude any items from being fully discussed as a separate board discussion item; this could be done if any one member requests it be removed from the consent agenda.

MOTION:

MOVED BY M. BEAULIEU, SECONDED BY MS. MITTON-MACLEAN

THAT THE BOARD OF DIRECTORS ADOPT A CONSENT AGENDA PRACTICE IN ITS BOARD AND COMMITTEE MEETINGS.

MOTION CARRIED.

Telephone Participation in Board and Committee Meetings: Ms. McMullen reported that the committee discussed the challenges in having effective board meetings where there is participation by telephone. Although the bylaws are permissive, there is a requirement that all members must agree to such participation. Recent committee meetings have clearly demonstrated that telephone participation is frequently dysfunctional to good meeting practice. The Committee concluded that face-to-face meetings should be encouraged to maintain effective meeting practice and that teleconference, or videoconference should only

be employed in exceptional circumstances (e.g., one item, or urgent meetings) at the discretion of the Board Chair.

Strategic Planning Process: The current strategic plan for Horizon expires in 2013. Ms. Seymour gave an overview to the board members on how the process would unfold, beginning with the initial discussion in September 2013, through to a completed report being presented to the board in June 2014. Progress reports will be presented at regular intervals.

(b) **Patient Safety and Quality Improvement:** Ms. Forestell reported that the Committee also reviewed its terms of reference at the September meeting. The establishment of this committee shows the board's commitment to a culture of patient safety and quality improvement. Minor suggestions were made for revisions under functions and the number of members.

MOTION:

MOVED BY MS. SCHRYER, SECONDED BY MR. MITTON-MACLEAN

THAT THE TERMS OF REFERENCE FOR THE PATIENT SAFETY AND QUALITY IMPROVEMENT COMMITTEE BE APPROVED AS REVISED.

MOTION CARRIED.

Ms. Forestell explained that the committee received information on patient care in psychiatric facilities, and update on the ALC patients following the May meeting with representatives from the Department of Social Development; services provided to francophone population, risk management dashboard, and a status report on the disclosure at the Miramichi Regional Hospital. Ms. Forestell added that the committee had a lengthy discussion on the patient care deficiencies outlined in the report received from Penny Ericson.

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At this point Mr. Ferguson departed and Kathleen McMullen, Vice Chair, assumed the chair for the remainder of the meeting.

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(c) **Finance, Audit and Resource:** Chair Michael McCoombs reported from the September 19 meeting at which time information was received on the balanced scorecard, investment fund management fees, committee work plan for the year, financial results for July 31, and benchmarking.

He also explained that revised terms of reference for the committee, incorporating responsibilities assigned to the former Finance and Audit Committee and the Human Resources Committee, were provided for discussion and approval.

MOTION:

MOVED BY MR. MCCOOMBS, SECONDED BY MR. MCKAY

THAT THE BOARD OF DIRECTORS APPROVE THE TERMS OF REFERENCE FOR THE FINANCE, AUDIT AND RESOURCE COMMITTEE AS PRESENTED.

MOTION CARRIED.

Management Certification Reports: Certification reports were provided for Occupational Health and Safety and on the statutory remittances, both signed by the CEO and COO as a way of ensuring the Board that all responsibilities relevant to these issues have been met. These will be provided on a quarterly basis as management's assurance that the appropriate requirements are dealt with properly. The committee accepted the management certification reports, which were provided for the board members' information.

Board members were also provided with a copy of the financial results for the end of August 2013, which shows the organization still tracking positive to budget.

Board of Directors' Advisory Committees

(d) Regional Medical Advisory: Dr. Barry provided a report from the September and October meetings of the RMAC. Among other topics of discussion, he noted that a subcommittee of the RMAC on Quality Care Efficiencies is working on several initiatives which involve laboratory and diagnostic testing and will result in cost saving measures; a trial of the Provincial Neurology weekend call schedule is continuing; and a structure for a Medical Quality Improvement Committee and its mandate has been finalized. This will ensure standards for quality patient safety are being met and will also offer protection for physicians performing quality improvement activities and to ensure the Right to Information and Privacy Acts are followed. A reporting calendar to the VP of Medical Affairs and Quality Committee will be developed

(e) Regional Professional Advisory Committee: One of the topics for discussion at the October meeting was a request from New Brunswick Nurses Union (NBNU) to protect the uniform colour combination of all white or white/black to only registered nurses. This will be discussed following further consultation with NBNU membership and the professional councils.

(7) For information

Nil

(8) Other business

Nil

(9) Questions from the public

(a) Monica McNally: Ms. McNally said she was pleased with the report given by Mr. McGarry. She said that there needs to be a patient advocate that would act as the voice for all patients in New Brunswick. She said Horizon's board supported her request and she has met with the Premier and the Minister of Health on the topic, but at this time does not know the status of her request. Mr. McGarry will follow up with the Province and relay information to Mrs. McNally.

(b) Penny Ericson: Ms. Ericson expressed appreciation to Mr. McGarry and staff for the work done in response to her letter.

(10) Adjournment

There being no further business, the meeting was adjourned at approximately 5:25 p.m. on motion by Ms. Simonds, seconded by Dr. Klein.

The meeting was immediately followed by an in-camera session for board members only.

W. David Ferguson, Chair

John McGarry, Corporate Secretary