

# Horizon Health Network

## Minutes of meeting

Minutes of a meeting of the Board of Directors held on Thursday, April 16, 2015, beginning at 1:00 p.m. at the Rodd Miramichi River.

**Present:** W. David Ferguson (Chair), Linda Aitken, François Beaulieu, Mike Coster, Jo-Ann Fellows, Linda Forestell, Dr. Erik Klein, John McKay, Kathleen McMullen, Luigi Rocca, Roxanne Sappier, Mary Schryer, Kay Simonds, John McGarry, Dr. Tom Barry, Cathy Cormier, Jean Daigle, Gary Foley, Geri Geldart, Dr. Edouard Hendriks, Janet Hogan, Dan Keenan, Dr. Pam Mansfield, Margaret Melanson, Andrea Seymour, Norma MaGee (recording)

**Regrets:** Michael McCoombs, Jane Mitton-MacLean

\*\*\*

1. Call to order and approval of agenda

The meeting was called to order at approximately 1:05 p.m. Mr. Ferguson noted that Agenda item 5.2 was deleted from the meeting agenda.

**MOTION:**

**MOVED BY M. BEAULIEU, SECONDED BY MS. SAPIER**

**THAT THE AGENDA FOR THE MEETING BE APPROVED AS CIRCULATED.**

**MOTION CARRIED.**

2. Consent agenda

**MOTION:**

**MOVED BY MS. SCHRYER, SECONDED BY MS. MCMULLEN**

**THAT THE CONSENT AGENDA BE APPROVED AS CIRCULATED.**

**MOTION CARRIED.**

3. Business arising from the minutes

Nil

4. Report of the President and Chief Executive Officer

Mr. McGarry explained the process used for follow up with staff and partner organizations for Horizon's Strategic Plan 2015-2020, approved by the Board of Directors at the last meeting. Most seem to be in agreement with Horizon's direction for the next five years.

5. Patient Safety and Quality Improvement Committee

Ms. Forestell, chair of the Patient Safety and Quality Improvement Committee, explained that the number of Alternate Level of Care (ALC) patients in Horizon facilities has increased, and now occupy 307 acute care hospital beds. These hospitals are operating over the accepted level of occupancy, some over 100%. This is a significant problem that will not be fixed overnight.

Given the continuing situation, it was proposed that the board support a motion of support for the Chief Executive Officer regarding the recent media coverage on his comments on hospital congestion.

**MOTION:**

**MOVED BY MS. FORESTELL, SECONDED BY MS. MCMULLEN**

**THAT HORIZON'S BOARD AGREES WITH CEO & PRESIDENT JOHN MCGARRY THAT IMMEDIATE ACTION IS REQUIRED TO DEAL WITH THE CONGESTION IN OUR ACUTE CARE HOSPITAL ARISING FROM THE HIGH NUMBER OF ALTERNATIVE LEVEL OF CARE PATIENTS.**

**HORIZON'S BOARD AND EXECUTIVE LEADERSHIP TEAM HAS ADVOCATED FOR THE PAST SEVERAL YEARS AND WILL CONTINUE TO ADVOCATE FOR PATIENTS AND FAMILIES WHO ARE UNDOUBTEDLY SUFFERING FROM THIS CONGESTION WHICH CAUSES DELAYS FOR IMPORTANT SURGERIES AND TREATMENTS.**

**THE BOARD LOOKS FORWARD TO COLLABORATING WITH DEPARTMENT OF HEALTH, DEPARTMENT OF SOCIAL DEVELOPMENT, NURSING HOMES, SPECIAL CARE HOMES AND COMMUNITIES TO ACTIVELY CONTRIBUTE TO A SOLUTION FOR THIS SYSTEMIC PROBLEM.**

**THE BOARD WANTS TO BE PART OF THE SOLUTION TO BEST SERVE THE AGING POPULATION AND ALL NEW BRUNSWICKERS.**

**MOTION CARRIED.**

5.1 Smoke-free Environment Policy: A steering committee comprised of individuals from all areas in Horizon was established in 2014 to pursue a smoke-free environment for the organization. Sub committees were also established to plan education to staff, physicians and the public, staff and patient smoking cessation supports, and compliance monitoring. The initiative was led by Margaret Melanson and Jean Daigle.

If approved, it is expected a 'soft launch' of the new policy will occur in late Spring 2015 through public and staff awareness, with the actual implementation of the policy beginning in September 2015 at Saint John Regional Hospital, to be followed through a graduated introduction to all other Horizon facilities within the next 18 months. Comprehensive smoke-free policies have been shown to encourage quit smoking attempts, decrease cigarettes smoked per day, decrease exposure to second-hand smoke and/or support relapse prevention with an additional benefit for employees and administrators being the correlated impact on decreases in absenteeism and increases in productivity.

This is in keeping with the direction in Horizon's Strategic Plan 2015-2020, A Healthier Future for New Brunswick.

Ms. Melanson introduced Dr. Rob Stevenson, Saint John Cardiologist, and Kerri Luck, Occupational Therapist, both with an interest in smoke-free environments who worked with the steering committee on the project. Dr. Stevenson provided a Power Point presentation (attached to minute book at corporate office for future reference) outlining reasons for a smoke-free Horizon.

**MOTION:**

**MOVED BY MS. FORESTELL, SECONDED BY MR. COSTER**

**THAT THE BOARD OF DIRECTORS APPROVE THE 'SMOKE-FREE ENVIRONMENT POLICY' AS PRESENTED.**

**MOTION CARRIED.**

5.2 Mixed gender patient rooms policy: deleted

5.3 Patient Experience Survey results: Lauza Saulnier, Regional Director Quality and Patient Safety Services, provided an overview of the results of the November 2014 patient experience survey.

The findings showed that 10 of 13 dimensions of care improved from the last survey (May 2014), and three of the 13 dimensions decreased from May 2014. These were responsiveness to care, communication about medications, and pain control.

Next steps are to disseminate the results both internally and externally, evaluate and identify quality improvement initiatives. The next survey will be carried out in May 2015.

5.4 Patient Safety Key Performance Indicators: Lauza Saulnier also provided current information (Quarter 3) on the five Key Performance Indicators -

Hand hygiene

Nosocomial Clostridium Difficile Infection (CDI)

Methicillin-Resistant Staphylococcus Aureus (MRSA) Nosocomial Rate

Medication Reconciliation on Admission

In-Hospital Hip Fracture in Elderly (65+) Patients

5.5 Patient and Family Centred Care: Margaret Melanson, VP Quality and Patient and Family Centre Care, provided a progress update on Patient and Family Centred Care in Horizon. The Patient Voices Forum held its first meeting in Fredericton in March 2015 to discuss how to improve patient and family centred care provincially. Thirty-eight Patient Experience Advisors have joined Horizon, and have been introduced to many projects, programs and focus groups. Ms. Melanson also outlined the next steps for the program.

## 6. Governance, Nominating and Planning Committee recommendations

6.1 Public participation policy: On behalf of the Committee chair, Ms. McMullen presented the revised Public Participation Policy. A number of amendments were made to this policy, which has existed since Horizon Health Network was established. These amendments better reflect current practice.

### **MOTION:**

**MOVED BY MS. MCMULLEN, SECONDED BY M. BEAULIEU**

**THAT THE BOARD OF DIRECTORS APPROVE THE REVISED PUBLIC PARTICIPATION POLICY AS PRESENTED.**

**MOTION CARRIED.**

6.2 Board Director self-evaluation policy and questionnaire: Ms. McMullen also explained that part of the committee's responsibilities is to advise the Board on matters relating to the Board's governance structure and processes, evaluation of Board effectiveness, education and evaluation of Board Directors. In 2014 the annual board evaluation was undertaken. A second evaluation is being undertaken under separate activity. Director self-evaluation process is being recommended, and a suggested questionnaire was proposed.

**MOTION:**

**MOVED BY MS. MCMULLEN, SECONDED BY MS. FORESTELL**

**THAT THE THE BOARD OF DIRECTORS APPROVE THE REVISED SELF-EVALUATION POLICY AS WELL AS THE FORM FOR DIRECTOR SELF-EVALUATION AS PRESENTED.**

**MOTION CARRIED.**

Board members will be asked to complete the form and send their responses directly to the Board Chair. The Chair will determine if additional communication with the responding director is necessary.

**7. Finance, Audit and Resource Committee**

Mr. McKay provided the report from the Committee's March 21 meeting on behalf of the Treasurer, Michael McCoombs.

7.1 2015-2016 capital equipment budget: Horizon has been allocated \$12,583,761 for Capital Equipment acquisition for fiscal year 2015-2016. The Department of Health requested information on the distribution of the funding to three specific equipment categories:

1. Regular Capital Equipment (\$5,000 to \$100,000)
2. Major Capital Equipment (over \$100,000)
3. Contingency for emergency replacements

The recommended allocation addresses the most urgent requirements and allows for a balanced acquisition of both major and regular items. Staff has recommended that the contingency amount be reduced from the traditional 10% to 7% and redistribute the percentage of total allocated to Major and Regular equipment priorities to better address the critical priorities for 2015-16.

**MOTION:**

**MOVED BY MR. MCKAY, SECONDED BY MS. SIMONDS**

**THAT THE BOARD OF DIRECTORS APPROVE THE ALLOCATION OF THE CAPITAL EQUIPMENT BUDGET FOR 2015-2016:**

<b>REGULAR EQUIPMENT</b>	<b>\$ 2,783,810</b>
<b>MAJOR EQUIPMENT</b>	<b>\$ 8,919,088</b>
<b>CONTINGENCY</b>	<b>\$ 880,863</b>
<b>TOTAL ALL</b>	<b>\$ 12,583,761</b>

**MOTION CARRIED.**

(Ms. Schryer and Dr. Barry were excused for agenda item 7.2, and returned following the passing of the motion.)

7.2 Employee volunteer program: Horizon has guidelines that allow for employees to serve as volunteers in Horizon sponsored community programs. This applies to employees who demonstrate excellent attendance/performance and are approved by their manager. Annually, Horizon may sponsor up to two volunteer programs that are aligned with organizational goals and objectives. Elementary Literacy Foundation (ELF) is a charitable organization that manages the delivery of two volunteer reading achievement programs for striving readers in grade two. Education, literacy, and other social and economic factors have long been recognized as contributing to the health of a population. Literacy is a determinant of health that Horizon can impact through a partnership with ELF, and the organization is engaging in an employee volunteer program with the intent to improve the literacy levels of grade two students.

Horizon's goal is to introduce the ELF employee volunteer program in all locations that can allow for staff participation without disruption in service. ELF has identified a number of communities that are currently in need of volunteers. It is hoped that eventually the program can be expanded to other staff and institutions after an evaluation of the current pilot.

**MOTION:**

**MOVED BY MR. MCKAY, SECONDED BY MS. FORESTELL**

**THAT THE BOARD OF DIRECTORS APPROVE THE RECOMMENDATION FOR HORIZON TO PROCEED WITH THE PILOT PROJECT TO DETERMINE EFFECTIVENESS OF THE COMMUNITY VOLUNTEER PROGRAM AND WHETHER IT WORKS EFFECTIVELY WITHIN THE ORGANIZATION.**

**MOTION CARRIED.**

7.3 Financial results at January 31, 2015: Mr. Keenan explained that year to date financial results for the ten-month period ending January 31, 2015 continue to show a small surplus. He noted that the cost of natural gas has more than doubled since last summer, precipitated by the contract expiring with the provider in October. Early indications show that the February results are essentially unchanged from January.

**8. Environmental Services (EVS) review update**

Mrs. Seymour provided an update on the EVS review which was undertaken in October 2014. Through her power point presentation, she explained that cleanliness continues to be a top priority at Horizon, and all staff is committed to restoring the public's trust in our facilities. The EVS team has made significant progress with the latest patient survey results showing improvement.

It was noted that EVS Visual Audit tool and ATP swab tool have led to better training of staff. Steve Savoie, EVS review project manager, provided a demonstration of the ATP swab tool, a scientific tool that measures the amount of organic matter left after cleaning.

Mr. Ferguson acknowledged the excellent work carried out during this review and thanked the staff who have gone above and beyond in improving the cleanliness of Horizon's facilities.

**9. Official Languages update**

Ms. Melanson provided an overview of Official Languages and the ongoing work being carried out in increasing staff capacity to provide the active offer. The Francophone Liaison Committee continues to meet, and has recently revised the Official Languages Policy which will be reviewed by the Governance, Nominating and Planning Committee at its next meeting.

**10. Appointment to Regional Professional Advisory Committee**

Mr. McGarry explained that there was resignation from a member of the Regional Professional Advisory Committee representing the Medical Laboratory Technology Professional Practice Council. The Council has named a replacement to complete the term.

**MOTION:**

**MOVED BY M. BEAULIEU, SECONDED BY MS. MCMULLEN**

**THAT THE BOARD OF DIRECTORS APPROVE THE APPOINTMENT OF GREG SHAW TO THE REGIONAL PROFESSIONAL ADVISORY COMMITTEE TO COMPLETE THE TERM OF PAULINE STEWART, TO EXPIRE AT THE ANNUAL MEETING IN JUNE 2016.**

**MOTION CARRIED.**

**11. Appointment to First Nations Liaison Committee**

Mr. Ferguson explained that Chief Candice Paul was appointed as the Board's representative to the First Nations Liaison Committee in October 2012, and with her resignation from the Board in December, this position is now vacant.

**MOTION:**

**MOVED BY MR. COSTER, SECONDED BY M. BEAULIEU**

**THAT ROXANNE SAPIER BE NAMED AS THE BOARD REPRESENTATIVE TO THE FIRST NATIONS LIAISON COMMITTEE.**

**MOTION CARRIED.**

**12. Items removed from the consent agenda**

Nil

**13. Other business**

Nil

**14. Questions from the public**

Monica McNally complimented the board and all involved in the cleanliness issue, especially as it relates to the Dr. Everett Chalmers Regional Hospital. She also spoke to issues she has encountered with the College of Physicians and Surgeons of New Brunswick.

**15. Dakota Rose Linfield Teaching Tool presentation**

Donna Collins, CEO and Consultant, Crystal Clear Transitional Care Inc., provided the board with a presentation entitled "The Dakota Rose Linfield Story" (appended to minute book at Corporate Office for future reference). Ms. Collins has requested the advanced cardiac algorithm be updated to include Narcan, an opioid drug used for the complete or partial reversal of opioid overdose; as well as looking for national methadone strategy guidelines.

Mr. Ferguson thanked Ms. Collins for presentation, and indicated he would ensure the presentation will get to the appropriate people within the health care system.

**16. Adjournment**

There being no further business, the meeting was adjourned on motion by Ms. Fellows at approximately 5:05 p.m.

---

W. David Ferguson, Chair

---

John McGarry, Corporate Secretary