

Horizon Health Network

Minutes of meeting

Minutes of a meeting of the Board of Directors held on Thursday, April 24, 2014, beginning at 2:30 p.m. at the Delta Brunswick, Saint John.

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

Regrets: Jane Mitton-MacLean, Chief Candice Paul, Dr. Pam Mansfield, Andrea Seymour, Dr. John Steeves

1. Call to order and approval of agenda

The chair called the meeting to order at approximately 2:30 p.m.

MOTION:

MOVED BY M. BEAULIEU, SECONDED BY MS. FELLOWS

THAT THE AGENDA FOR THE BOARD MEETING BE APPROVED.

MOTION CARRIED.

2. Consent agenda

Agenda items 2.2, 2.4, 2.5, 2.6.2 were requested to be removed from the consent agenda.

MOTION:

MOVED BY MR. ROCCA, SECONDED BY MS. FORESTELL

THAT THE CONSENT AGENDA BE APPROVED AS AMENDED.

MOTION CARRIED.

3. Business arising from the minutes

Nil

4. Recommendations from Governance, Nominating and Planning Committee

In the absence of the committee chair, Ms. Schryer highlighted the recommendations from the Governance, Nominating and Planning Committee's March 12 meeting.

4.1 Board and Director self-evaluation policy: the committee proposed a policy for self-evaluation by each member of the Board of Directors, suggesting that this practice should help ensure continuous improvement in the performance of individual members. It can also serve in setting education topics as well as help advise Chair and Minister in re-appointing members to roles of officers and to committees.

The Committee developed an evaluation form for board members to use as a tool to evaluate their own individual performance on the board of directors. The Board developed a form for evaluation of the board's work in April 2012. The Committee suggested that if approved by the Board at this meeting, a survey be carried out and the results reported to the Board at the June 2014 meeting.

MOTION:

MOVED BY MS. SCHRYER, SECONDED BY M. BEAULIEU

THAT THE BOARD AND DIRECTOR SELF-EVALUATION POLICY, AS WELL AS THE DIRECTOR SELF-EVALUATION FORM, BE APPROVED.

MOTION CARRIED.

4.2 Role and responsibilities of the Chief Executive Officer policy: The Committee reviewed a draft policy on the role and responsibilities of Chief Executive Officer at both the December 2013 and the March 2014 meetings, and recommended a policy to the Board.

MOTION:

MOVED BY MS. SCHRYER, SECONDED BY MS. FORESTELL

THAT THE ROLE AND RESPONSIBILITIES OF CHIEF EXECUTIVE OFFICER POLICY BE APPROVED.

On the question, Mr. McKay suggested two wording amendments to the policy, which were accepted by the Board.

MOTION:

MOVED BY MR. MCKAY, SECONDED BY MS. MCMULLEN

THAT THE ROLE AND RESPONSIBILITIES OF CHIEF EXECUTIVE OFFICER POLICY BE APPROVED AS AMENDED.

MOTION CARRIED.

4.3 Community Needs Assessment Reports: Two community needs assessments were presented to the committee and discussed. These documents, reflecting considerable input and teamwork by the local communities, were presented to the Board. Both assessments highlight the need for improved transportation access. Other expressed needs vary between communities but both generally indicate a need for improved primary care, connectedness and care for seniors, the indigent and youth.

- 4.3.1 Petitcodiac, Salisbury and Surrounding Areas: the report contained six recommendations:
- increase community connectedness
 - address nutrition and food security
 - increase public transportation
 - develop new model and facility for primary health care services
 - increase opportunities for children, youth and adults
 - address the regulatory maze encountered when seeking services

MOTION:

MOVED BY MS. SCHRYER, SECONDED BY M. BEAULIEU

THAT THE BOARD OF DIRECTORS ENDORSE RECOMMENDATIONS PROVIDED BY THE PETITCODIAC, SALISBURY AND SURROUNDING AREAS COMMUNITY ADVISORY COMMITTEE ALLOWING THAT COMMITTEE TO EXPLORE FEASIBILITY OF RECOMMENDATIONS AND PROPOSE ACTION PLANS.

MOTION CARRIED.

- 4.3.2 St. Stephen, St. Andrews and Surrounding Areas: this report contained seven recommendations:
- develop new collaborative model
 - improve affordability of transportation
 - address Addictions and Mental Health needs
 - simplify long-term care assessment and placement process
 - support development of safe/affordable housing and emergency shelter for men
 - enhance services at Charlotte County Hospital
 - improve navigation for information sharing

MOTION:

MOVED BY MS. SCHRYER, SECONDED BY M. BEAULIEU

THAT THE BOARD OF DIRECTORS ENDORSE RECOMMENDATIONS PROVIDED BY THE ST. STEPHEN, ST. ANDREWS AND SURROUNDING AREAS COMMUNITY ADVISORY COMMITTEE ALLOWING THAT COMMITTEE TO EXPLORE FEASIBILITY OF RECOMMENDATIONS AND PROPOSE ACTION PLANS.

MOTION CARRIED.

- 4.4 Gift acceptance policy: Ms. Schryer explained that a Gift Acceptance Policy was discussed by the Committee at the March 21 meeting, after referral from the Board of Directors. This policy will ensure good understanding by Foundations, and others, that gifts should be consistent with the mission of the local facility in question. The Foundations support this proposed policy.

MOTION:

MOVED BY MS. SCHRYER, SECONDED BY MS. FORESTELL

THAT THE BOARD OF DIRECTORS APPROVE THE ‘GIFT ACCEPTANCE POLICY’ AS PRESENTED.

MOTION CARRIED.

4.5 Appointment of members to Regional Professional Advisory Committee: Ms. Schryer explained that the committee received information that two members of the Regional Professional Advisory Committee have resigned the committee. Professional Practice Councils were made aware of these resignations and asked for replacements to complete the terms of the former committees.

MOTION:

MOVED BY M. BEAULIEU, SECONDED BY MR. ROCCA

THAT THE BOARD OF DIRECTOR APPROVE THE APPOINTMENT TO THE REGIONAL PROFESSIONAL ADVISORY COMMITTEE OF ART GALLANT TO COMPLETE THE TERM OF TANYA WILSON WHICH WAS TO EXPIRE AT THE ANNUAL MEETING IN JUNE 2015; AND ANNETTE LEBOUTHILLIER TO COMPLETE THE TERM OF BRENDA KINNEY WHICH WAS TO EXPIRE AT THE ANNUAL MEETING IN JUNE 2014.

MOTION CARRIED.

4.6 Role of Board Director (referred from Incamera meeting): The Governance, Nominating and Planning Committee was asked by the Board at the January meeting to again review the draft policy, and did so at the March 21 meeting. An amendment was made to the Application section, and it was suggested that the document be recommended to the board at this time with further review over the next year.

MOTION:

MOVED BY MR. ROCCA, SECONDED BY MR. COSTER

THAT THE ‘ROLE AND RESPONSIBILITY OF A BOARD DIRECTOR’ POLICY BE APPROVED AS AMENDED, TO BE REVIEWED ANNUALLY.

On the question, Mr. McKay asked how the guidelines/policy would be managed. He questioned the wording under the application of the policy “A director shall confirm in writing that he or she will abide by this policy and other policies of the board.” Following discussion, an amendment was put forward to remove that sentence from the policy.

Amendment to motion:

MOVED BY MS. MCMULLEN, SECONDED BY MR. MCKAY

THAT THE SENTENCE “A DIRECTOR SHALL CONFIRM IN WRITING THAT HE OR SHE WILL ABIDE BY THIS POLICY AND OTHER POLICIES OF THE BOARD” BE DELETED FROM THE POLICY.

AMENDING MOTION CARRIED.

(Nay votes recorded:

Ms. Forestell and M. Beaulieu)

MOTION CARRIED.

5. Patient Safety and Quality Improvement Committee

5.1 Presentation re New Brunswick Perinatal Health Program (moved to #1 item on agenda): The Chair welcomed Dr. Lynn Murphy-Kaulbeck, Chief, Department of Obstetrics and Gynaecology, The Moncton Hospital; and Beth McGinnis, Senior Health Human Resource Advisor, Department of Health. (Complete presentation appended to Minute Book at Corporate Office.)

The New Brunswick Perinatal Health Program, announced by the Minister of Health in February 2014, will assume a leadership role for perinatal health care in the province, striving to complement Canadian perinatal health practice standards across the province, participating in quality improvement initiatives, and responding to the education and professional needs of care providers across the province. The Minister’s announcement included that Horizon Health Network would assume the leadership for this provincial program, based in Moncton.

Dr. Murphy-Kaulbeck provided the board with the program Mission, Vision and Core Values and the governance structure for the program. Being a provincial program, membership on the advisory committee will include representatives from both health authorities and the Department of Health. Requests from board members to have the Francophone Liaison Committee and patient and family centred care represented will be taken into consideration.

5.2 Presentation on Patient and Family-Centred Care: Margaret Melanson, VP Quality and Patient Centred Care, provided the board with an update on activities. (Complete presentation appended to Minute Book at Corporate Office.) Focus group sessions have been held with themes emerging around identification, cleanliness, caring culture, coordination of care, and efficiency of care. Her team visited Kingston General Hospital to learn about their program. A Horizon Steering Committee was established in November 2013 with cross-team representation by area and portfolio.

The Patient and Family Advisory Committee held its first meeting, and the first patient and family advisor has been identified. A ‘hospital experience survey’ will be undertaken in May, the HELP initiative is underway, and the staff ID card is being revamped.

6. Finance, Audit and Resource Committee recommendations

Mr. McCoombs, Treasurer and Chair of the Finance, Audit and Resource Committee, provided an overview of three recommendations from the March 22 meeting of the committee.

6.1 2014-2015 budget: In January the Board approved the Health and Business Plan, recognizing that the amount of anticipated 2014-15 funding was estimated at a 1% increase. This increase equalled approximately \$9.3 million of additional revenue. A letter was received from the Department of Health outlining the funding increase would amount to approximately \$6.0 million (or about .65 % increase), covering existing collective agreements only. The difference between projection and actual increase therefore represents a gain of approximately \$200,000. Additionally the Department approved an increase of \$350,000 related to Cost of Weighted Case in Miramichi Regional Hospital. These two items represent a net gain of \$550,000 from the financials included in the Regional Health and Business Plan.

MOTION:

MOVED BY MR. MCCOOMBS, SECONDED BY MR. MCKAY

THAT THE BOARD OF DIRECTORS REDUCE THE EXPECTED SAVINGS FROM THE KRONOS/BENCHMARKING PHASE 4 INITIATIVE FROM \$3,920,000 TO \$3,370,000 FOR FISCAL 2014-15 TO MAINTAIN A BALANCED SPENDING PLAN BASED ON THE LETTER FROM THE DEPARTMENT OF HEALTH.

MOTION CARRIED.

6.2 Capital Equipment 2014-15: The five-year capital equipment plan for Horizon was approved by the Board in September 2013 and submitted to the Department of Health with a recommendation to acquire the top six Major Capital Equipment priorities, which included an MRI, SPECT/CT Gamma Camera, Medical Linear Accelerator, DR X-Ray System, Mammography Unit and CT Scanner.

In February 2014 the Interventional Radiology System at the Saint John Regional Hospital failed and was determined to be irreparable and end of life. This item was #11 on the five-year Capital Equipment Plan. The Department of Health gave verbal approval for emergency replacement of that equipment in mid-February, with the funding to come from the 2014-2015 budget.

One of the top six Major Capital priorities, the DR X-Ray System, was purchased with contingency funds and in March 2014 the Department of Health confirmed additional funding for MRI.

The Department of Health has communicated that Horizon's Capital Equipment Budget for 2014-2015 is \$12,931,221. Once the 10 % contingency and carry over are deducted the total amount available for allocation is reduced to \$11,053,807.

The funding requirement for the remaining Major Capital Equipment priorities is \$8,131,400. Over and above this, an additional \$2,197,583 is required for emergency replacement of the Interventional Radiology System. This brings the total requirement for Major Capital Equipment to \$10,328,983.

It was suggested that the Department be asked to fully fund the replacement Interventional Radiology Unit at the Regional, and if the request is denied, then the special/board funds of the Saint John Regional Hospital will be used.

MOTION:

MOVED BY MR. MCCOOMBS, SECONDED BY MR. MCKAY

THAT THE BOARD OF DIRECTORS MAKE A FORMAL REQUEST TO THE DEPARTMENT OF HEALTH FOR THE APPROVAL, ALLOCATION AND USE OF \$2.2 MILLION FROM SPECIAL/BOARD FUNDS FOR REPLACEMENT OF THE INTERVENTIONAL RADIOLOGY UNIT AT THE SAINT JOHN REGIONAL HOSPITAL IN ORDER TO ASSURE THAT APPROPRIATE INVESTMENT CAN BE MADE IN REGULAR CAPITAL EQUIPMENT ACQUISITION; AND THAT THE DEPARTMENT OF HEALTH REIMBURSE THESE FUNDS USED.

MOTION CARRIED.

MOTION:

MOVED BY MS. SCHRYER, SECONDED BY MR. MCKAY

THAT A LETTER BE SENT TO THE MINISTER OF HEALTH REQUESTING THAT OWNERSHIP OF THE BOARD FUNDS ACROSS THE PROVINCE BE REDIRECTED BACK TO HORIZON.

MOTION CARRIED.

6.3 Metro Health: Following Board approval in January to stop providing subsidy to Metro Health Inc., that organization presented a budget projecting a small surplus at the end of 2014. Mr. McGarry explained that there is a possibility that this projection may be somewhat optimistic and a small deficit may occur. However, given that Horizon does earn rent from Metro Health, there is reasonable case to be made to attempt to support the organization to find a new sustainable level of activity.

MOTION:

MOVED BY MR. MCCOOMBS, SECONDED BY MS. SCHRYER

THAT THE BOARD OF DIRECTORS SUPPORT METRO HEALTH INC.'S OPERATIONAL PLAN FOR 2014 ALLOWING IT TO LIVE WITHIN ITS RESOURCES, RECOGNIZING THERE IS A SLIGHT RISK OF SUBSIDIZATION NECESSARY. IN ADDITION, MANAGEMENT BE DIRECTED TO CONTINUE TO INFORM THE FINANCE, AUDIT AND RESOURCE COMMITTEE IF THE FISCAL SITUATION DETERIORATES AND A MORE SIGNIFICANT DEFICIT RISK APPEARS IMMINENT.

**MOTION CARRIED.
(NAY RECORDED – DR. KLEIN)**

7. Items removed from consent agenda

2.2 Report of the President and CEO: Mr. McKay referenced the decision taken by the board at the January 2014 meeting regarding the Policy on Chapels for Horizon, and the subsequent directive from

the Minister of Health to rescind the policy. He asked if the Minister had given a reason for rescinding the policy. Mr. McGarry had no further information on the topic other than verbal direction from the Minister.

2.4 Report from Governance, Nominating and Planning Committee: Mr. McKay asked for the list of attendees to be added to committee reports.

2.5 Report from Patient Safety and Quality Improvement Committee: as in 2.4, attendees were asked to be added to committee reports.

2.6.2 Financial Results at January 31, 2014: M. Beaulieu had a question about obsolete equipment inventory, and Mr. Keenan suggested this would be reviewed by Finance, Audit and Resource Committee.

8. Other business

8.1 Neguac ambulance services: Mr. McKay referenced conversations with the Mayor of the Village of Neguac regarding concerns on where residents from the Village were transported by Ambulance New Brunswick – Tracadie versus Miramichi. Mr. McGarry will contact the Mayor and discuss his issues.

8.2 Mr. Ferguson extended a welcome to the guests in attendance.

9. Questions from the public

Nil

10. Adjournment

There being no further business, the meeting was adjourned at approximately 5:30 p.m. on motion by M. Beaulieu, seconded by Mr. Rocca.

W. David Ferguson, Chair

John McGarry, Corporate Secretary