

**Grand River Hospital  
Minutes Of A Public Meeting  
Of The Board Of Directors  
Held On September 26, 2017  
In the Freeport Boardroom**

**Present:**

G. Bellew  
D. Bennett  
B. Collingwood  
J. Deganis  
D. Freeman  
D. Graham  
S. Hanmer  
H. Hodiono  
Z. Janecki

L. Kotseff  
J. Linton  
M. Maxwell  
P. Potts  
G. Sarkaria  
S. Spracklin  
H. Wakeling  
K. Wetteskind

**Regrets:**

P. Hendrikse  
J. McMurray  
J. Schlegel  
B. Vrbanovic

**Staff:**

T. Bailey  
B. Cheal  
C. Delenrdo  
C. Easton  
C. Heal

M. Karjaluo  
K. Lavoie  
T. Mah  
J. Martin  
J. O'Brien  
D. Wren

**Guest:**

None

**Recorder:** C. Heal

**1.0 Call To Order**

The meeting was called to order at 4:05 p.m. by Chair, J. Deganis.

**1.1 Acceptance of Agenda**

The agenda was accepted as amended.

**Motion:**

**It was moved by H. Hoediono and seconded by Z. Janecki that the amended public agenda for the September 26, 2017 Board of Directors meeting be accepted as presented.**

**Carried.**

**1.2 Declaration Of Conflict Of Interest**

None.

**1.3 Public Meeting Highlights**

**1.3.1 Board Chair**

None.

**1.3.2 President and Chief Executive Officer**

Management would be seeking guidance from the Board on the proposed final version of the Strategic Plan at this meeting.

**2.0 Quality**

**2.1 Report by the Chair of the Quality and Patient Safety Committee – QPS Committee Orientation Presentation**

H. Hoediono reported that the September committee meeting was held as an orientation session and to refresh the focus of the QPS Committee. D. Wren streamlined the reporting mechanism to the Committee and the Board. H. Hoediono thanked the Governance and Community Engagement Committee for its guidance on committee terms of reference. Management pointed out that the committee's mandate and work plan largely remain the same but the refreshed reporting approach should help the committee focus on its quality program processes and structures as well as outcomes reporting.

### **3.0 Resources**

#### **3.1 Report by the Chair of the Resources Committee**

D. Graham reported that the committee has recommended several changes to the work plan, which will be brought to the Board in November. There were three items for consent put forward by the committee. The Annual Report on the KW Pension Plan and the Statement Investment Policies and Procedures were provided to board members for review.

### **4.0 Audit**

#### **4.1 Report on behalf of the Chair of the Audit Committee Report**

B. Cheal reported that Audit committee will meet four times a year, two on internal auditing and two on external auditing. This is the fifth of the current 5-year contract with KPMG as the external auditor. Management will provide a recommendation about whether to issue an RFP for the auditing contract upon the expiry of the current contract with KPMG.

Internal Auditor, Amit Mehta, is connected to Canadian Health Audit Group. He has reviewed the 2016 Large Community Hospital Operations Report by the Office of Auditor General of Ontario and will report back to the committee on any pertinent items. He also presented to the Resources Committee.

### **5.0 Governance and Community Engagement**

#### **5.1 Report by the Chair Of The Governance and Community Engagement Committee**

S. Hanmer reported that throughout the summer, GCEC developed recommendations on changes to all committees' terms of reference with the objective to more effectively utilize board and staff resources. Feedback from each committee will be reviewed by GCEC in October and recommendations will be brought to the Board in November.

#### **5.2 Legislative Compliance Review, 2017**

Committee reviewed the Legislative Compliance Review for 2017 and was satisfied with the management of legislative compliance and is recommending approval. That being said, the committee noted the lack of environmental standards on the checklist and will be looking into adding them.

##### **Motion:**

**It was moved by S. Hanmer, and seconded by H. Wakeling that the Legislative Compliance Review, 2017 be accepted.**

**Carried.**

#### **5.3 Fall Board Education**

The GCEC recommends that an education session on Health System Funding Reform (HSFR) be held in October. A poll will be sent out to identify a date. In addition to board members, committee community members will be invited to attend.

## **6.0 Health Information System Renewal**

### **6.1 Report by the Chair of the Health Information System Renewal Committee**

J. Deganis deferred discussions on the HIS project to the in-camera session, and acknowledged the dedication and accomplishments of the senior leadership team on the project. The Chair also thanked the GRH Foundation for its commitment on the project.

## **7.0 Executive Committee**

### **7.1 Report by the Chair of the Executive Committee**

J. Deganis reported that the Executive Committee is now responsible for executive compensation and resources issues, formerly the mandate of the Compensation and Executive Resources Committee. The key discussion on related items would take place during the in-camera session.

## **8.0 Other**

### **8.1 2017-2019 Strategic Plan – Final Version**

A briefing note and the proposed final 2017-2019 Strategic Plan were included in the package. The Board had been consulted at various points of its development. The final version encapsulates all the input gathered from various stakeholders.

#### **Motion:**

**It was moved by G. Bellew, and seconded by H. Wakeling that the Board of Directors approve the 2017-2019 Strategic Plan.**

**Carried.**

M. Maxwell thanked B. Vollmer for her excellent work on the development of the strategic plan. J. Deganis drew the Board's attention to the communication plan included in the materials.

### **8.2 Q1 Board Scorecard**

A briefing note was included in the package to facilitate the interpretation of the Q1 Board scorecard. M. Maxwell highlighted the higher than usual Emergency Department Length-of-Stay indicators (ED LOS). The higher figures are an indication of the recent high capacity experienced by hospitals across the province, which has impacted patient flow in emergency departments.

The underlying cause is the lack of long-term care facilities and personal support workers (PSWs) to care for people whose needs would be best met in that setting. The shortage in PSWs is believed to be a matter of competitive wages versus other employment opportunities. Management is investigating options including increasing Alternative-Level-of-Care beds (ALC). Staff mix, space, use of beds and the associated costs and regulatory requirements all need to be addressed. This is a time sensitive issue as winter approaches. Management will provide an update at the next meeting.

A discussion ensued on the systemic nature of the issue. There is a need for a model of long-term care facilities equipped to handle the higher level of care needed by the population segments at stake. Some of the patients have specialized mental health needs and some lack family support. In the absence of other safe and comfortable alternatives, hospitals end up being the only places where they can be cared for. This issue is systemic, province-wide and is tied to infrastructure issues such as the lack of suitable housing and specialized mental health care.

L. Kotseff arrived at 4:40 p.m.

### **8.3 Hospital Service Accountability Agreement**

This motion to authorize management to sign the 2017 HSAA was previously deferred due to a lack of clarity in the expectations listed in Appendix H of the agreement. Management had since clarified the 2017 expectations with WWLHIN and recommends acceptance of the agreement.

#### **Motion:**

**It was moved by H. Hoediono, and seconded by B. Collingwood that the Board of Directors approve the acceptance of the 2017 HSAA including Appendix H Local Obligations and authorize the Chair and Chief Executive Officer to sign the document.**

**Carried.**

### **8.4 Report of MAC**

Dr. P Potts gave a verbal report on MAC and remarked the sad and sudden death of Dr. Nathan Roth, one of the candidates of the PGY3 Program. Dr. Roth was previously a volunteer at GRH. A notice had been sent to GRH staff. The Board asked that a letter of condolence be sent on behalf of the Board to Dr. Roth's family.

The Physician Leadership Conference will be held on September 29th. It will focus on the interface between physicians and LEAN, and emotional intelligence.

Dr. Potts noted this would be Dr. Sarkaria's last meeting on the Board. As President of the Medical Staff Association, Dr. Sarkaria has been a good advocate for issues raised by physicians and a good balance to the Chief of Staff's role. Dr. Potts thanked Dr. Sarkaria for his contributions both as a board member and as President of the Medical Staff Association. A new President of the MSA is expected to be elected in October.

Dr. Sarkaria expressed that serving on the GRH Board of Directors had been a good experience and he believed that his to-be successor would be a valuable asset to the Board.

The Board Chair thanked Dr. Sarkaria for bringing his perspective as a physician and informing the Board about physician engagement. Staff will contact Dr. Sarkaria to identify a formal form of recognition for Dr. Sarkaria.

## **9.0 Executive Highlights**

### **9.1 Board Chair Report**

None.

## **9.2 President and Chief Executive Officer Report**

The President and CEO Report was included in the package.

M. Maxwell introduced Cassandra Easton, Governance and Communications Assistant. Cassandra brings ten years of experience supporting elected officials and will be providing support to the Board.

A discussion ensued on the hips and knees wait times. GRH is performing far more hips and knees surgeries than the number for which it is funded. Management has been working with WWLHIN on a coordinated access program, and communicating the demand versus capacity to the LHIN. In addition, there have been on-going efforts to improve data accuracy.

### **9.2.1 2017-18, Q1 Operating Plan/ERMA Update**

Members of the Board sought clarifications on a few of the priorities in the update. Management acknowledged that the presentation of this update could be simplified and improved. For example, the presentation of risk level could be clarified. A summary instead of the entire report will be provided at future meetings.

S. Spracklin arrived at 5:15 pm.

## **9.3 Chief Nursing Executive Report**

The Chair thanked staff at the Neonatal Intensive Care Unit for achieving high patient and family satisfaction upon discharge despite of high patient volumes.

J. Linton met with management at the LHIN regarding the management of high ALC volumes and was encouraged by the discussion.

## **9.4 Foundation Report**

T. Bailey highlighted some of the fund-raising events and shared the journey of a bequest from former nurse, Alex Rustin. Decades after her passing, the gift grew significantly thanks to her family's good investment management. Upon the recent passing of a beneficiary of the estate, who was also a nurse, the bequest will soon be transferred to the Foundation. The gift is dedicated to radiology and cancer palliative care. This story demonstrates how community giving is built over time on community members' commitments to support the hospital.

T. Bailey further expressed her condolences to Dr. Nathan Roth's family. The event scheduled for October 4<sup>th</sup> was cancelled due to sad passing of Dr. Nathan Roth.

Directors were enthused about the Grand Ride and highlighted that Dr. Raymond LaFlamme, an accomplished physicist and cancer survivor, participated in the event. Motivated by his observations during his treatment, Dr. LaFlamme is interested in helping GRH with future technological research. This is an example of community building through the work of GRH and GRH Foundation.

## **10.0 Items for Consent**

The following motions and associated information were included in the package.

**10.1 Board Minutes of June 27, 2017**

That the Board of Directors approve the minutes of the Board of Directors meeting held on June 27, 2017 as presented.

**10.2 Enterprise Risk Management Policy**

That the Board of Directors approve the changes to Policy 8-2 Enterprise Risk Management.

**10.3 Annual Report of Management of KW Pension Plan 2016.**

That the Board of Directors approve the Annual Report on Management of the Kitchener-Waterloo Hospital Pension Plan Covering the Year 2016.

**10.4 Statement of Investment Policies and Procedures**

That the Board of Directors approve the Revised Statement of Investment Policies and Procedures (SIP&P) for the Pension Plan for Employees of The Kitchener-Waterloo Hospital.

**10.5 Pension Plan External Providers**

That the Board of Directors approve the recommendation that GRH continues with the attached list of external providers for the next year subject to any change that may be required due to performance issues.

**10.6 Appointment of Staff Representative to QPS Committee**

That the Board of Directors approve the appointment of Christine Bruce, Administrative Director, Integrated Department of Pathology & Laboratory Medicine, to serve on the QPS Committee as a staff representative for the 2017-18 committee year, effective immediately.

**It was moved by G. Bellew, and seconded by Z Janecki that the Board of Directors approve the above listed motions.**

**Carried.**

**11.0 Items for Information**

The following items for information were included in the package and received:

**11.1 Committee Items**

11.1.1 Medical Advisory Committee Public Minutes

11.1.2 Resources Committee

11.1.2.1 Minutes

11.1.2.2 Resources Scorecard

11.1.3 Governance Committee Minutes

**11.2 Board Education Opportunities**

**11.3 WWLHIN Dashboard**

**11.4 Calendar of Board and Board Committee Meetings**

**11.5 Board Work Plan 2017-18**

**11.6 Committee Structure Chart**

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## **12.0 Adjournment**

**There being no further business, it was moved by B. Collingwood and seconded by K. Wakeling that the public meeting be adjourned.  
Carried.**

The public meeting adjourned at 5:35 p.m.

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M. Maxwell,  
Secretary

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J. Deganis,  
Chair