

**Grand River Hospital  
Minutes Of A Public Meeting  
Of The Board Of Directors  
Held On February 28, 2017  
In the Freeport Boardroom**

**Present:**

G. Bellew  
D. Bennett  
B. Collingwood  
J. Deganis  
D. Freeman  
D. Graham  
S. Hanmer  
P. Hendrikse

H. Hoediono  
Z. Janecki  
L. Kotseff  
J. Linton  
M. Maxwell  
P. Potts (Teleconference)  
H. Wakeling  
K. Wetteskind

**Regrets:**

G. Sarkaria  
J. Schlegel  
B. Vrbanovic

**Staff:**

Bailey, T.  
Cheal, B.  
Karjaluo, M.

Lavoie, K.  
Mah, T.  
O'Brien, J.  
Wren, D.

**Guest:**

J. Heintzman

**Recording Secretary:** K. Taylor

**1.0 Call To Order**

The meeting was called to order at 4:00 p.m. by Vice Chair, J. Deganis. Members from the public were welcomed to the meeting. B. Collingwood, Chair of the Governance and Community Engagement Committee, introduced two members from the Brant Community Health System (BCHS) Board who observed the public meeting.

**1.1 Acceptance Of Agenda**

The agenda was accepted as presented.

**Motion:**

**It was moved by H. Wakeling and seconded by D. Freeman that the public agenda for the February 28, 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**

A welcome was extended to Dr. J. Heintzman, Deputy Chief of Staff (COS), who was participating along with Dr. P. Potts, COS. Board Committee Chairs were invited to relay highlights from their meetings during their public reports.

**1.3.2 President And Chief Executive Officer**

A key discussion will consider the health information system. The majority of this discussion will occur during the in-camera meeting.

## **2.0 Quality**

### **2.1 Report by the Chair Of the Quality And Patient Safety Committee**

The Committee scorecard and Waterloo Wellington Local Health Integration Network (WWLHIN) dashboard appeared in the meeting package as items for information.

## **3.0 Resources**

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

Resources Committee minutes, scorecard and financial statements appeared in the package as items for information. Motion recommendations, briefing notes and background material pertaining to the Hospital Services Accountability Agreement (H-SAA) and Multi-Sector Service Accountability Agreement (M-SAA) were included in the public meeting package.

#### **3.1.1 H-SAA Amending Agreement**

The H-SAA enables the WWLHIN to make funding transfers from the Ministry of Health and Long-Term Care (MOHLTC) to Grand River Hospital (GRH).

##### **Motion:**

**It was moved by D. Graham and seconded by Z. Janecki that the Board of Directors authorize the Board Chair and the President and Chief Executive Officer to sign an amending agreement to the April 1, 2008-2016 H-SAA agreement.**

**Carried.**

#### **3.1.2 M-SAA Amending Agreement**

The M-SAA outlines the accountabilities between GRH and the WWLHIN pertaining to community mental health services. The current M-SAA expires on March 31, 2017 and the amending agreement would enable the WWLHIN to continue provision of funding through to March 31, 2018.

##### **Motion:**

**It was moved by D. Graham and seconded by L. Kotseff that the Board of Directors authorize the Board Chair and the President and CEO to sign the Multi-Sector Accountability Agreement, effective for the period April 1, 2017 to March 31, 2018.**

**Carried.**

## **4.0 Audit**

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

On behalf of the Chair of the Audit Committee, G. Bellew advised that during the February 23 meeting the members of the Audit Committee reviewed the draft Enterprise Risk Management plan and have sought additional feedback from the Quality and Patient Safety and Resources Committees. A motion for

recommendation of the plan to the Board will be considered by voting Committee members prior to the March Board meeting.

## **5.0 Governance And Community Engagement**

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

B. Collingwood, Chair of the Governance and Community Engagement Committee (GCEC), advised that the Board Committee Chairs and their senior staff resources would receive within the week a copy of their Committee Terms of Reference for annual review. The version provided for update will include reference to any recent legislative changes and other relevant updates such as changes in membership. Additionally, 2017 survey results for their Committee will be forwarded to Board Committee Chairs.

The results of the 2017 Board survey indicated no significant variance from previous years and four possible areas for future consideration, not specific to the performance of a Board Committee, were identified as:

- the Board considers the strategic plan in developing policies and making decisions;
- the Board has a sound plan for the CEO's development and succession;
- the Board has a sound plan for the COS's development and succession; and,
- the Board understands and performs its governance role and does not become overly involved in operational issues.

Plans are underway to address the first three items with Chairs of the Committees whose Terms of Reference reflect a mandate to oversee them and with respect to the last item, Directors were reminded to be mindful of maintaining a governance perspective.

Board manual documents are reviewed on a three year cycle and in the event that Board Committees wish to undertake review of a document off-cycle it was requested that an update be provided to the Governance Coordinator.

Information from the February 2 meeting of GCEC reported on: the motion appearing in the items for consent regarding approval of a non-voting staff member on the Resources Committee; the Board manual updates; highlights from the February 23 joint Hospital and Foundation Board session with Marnie Spears; and, the report from the Chief Privacy Officer on Freedom of Information and Protection of Privacy Act hospital activity.

## **6.0 Health Information System Renewal**

### **6.1 Report By the Chair Of the Health Information System Renewal Committee**

Chair of the Committee, J. Deganis, reported that Health Information System (HIS) Renewal members, along with guests from St. Mary's General Hospital, met on February 24. GRH's HIS goals were confirmed as: seeking to replace the McKesson clinical system; seeking a common HIS for the community; and,

seeking to use funds carefully to ensure good value out of the HIS renewal.

## **7.0 Other**

### **7.1 Q2 Board Scorecard**

The Board package contained the Board scorecard at September 30, 2016. Directors were apprised that Q3 metrics will reflect GRH's high occupancy rate. In Q4, GRH continues to experience a large volume of patients presenting to the Emergency Department and a high number of beds occupied by alternate level of care (ALC) patients.

### **7.2 Q3 ERMA and Operating Plan Update**

A copy of the Q3 operating plan update, including report on enterprise risk management assessment for 2016-2017, was included in the public package. Directors were advised that the timeline for accomplishment of the Emergency Department Information System goal was revised to Q1 of 2017/2018. As well, a process for revision and development of management job descriptions will be established in Q4, not in Q3 as originally projected.

The report was revised to include mention of emerging risks with capacity for community care cited as one such risk. GRH is reliant on home care services to manage flow and to assist with reduction of beds occupied by ALC patients.

## **8.0 Executive Highlights**

### **8.1 Board Chair Report**

The Chair's verbal update informed of provincial and Ontario Hospital Association (OHA) activities associated with executive compensation regulations, work that is being overseen by the Compensation and Executive Resources Committee. A February 3, 2017 letter from the Treasury Board served as a reminder of due process, part of which is to determine GRH's peer group and to ensure the framework is available for public feedback.

Educational events were reviewed and it was confirmed that two Directors were participating in the March 23 and 24 Quality of Care Information Protection Act regional OHA session in London. Information on the upcoming meeting with the WWLHIN Board Chair; March 1 Business Awards of Excellence hosted by the Chamber of Commerce; March 2 CT celebration; and, April 21 and 22 Board strategic retreat was provided.

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

In addition to the report from the President and CEO which was included in the Board public package, M. Maxwell elaborated on the WWLHIN dashboard which appeared as an item for information. To respond to CT wait times, GRH is performing 50% more hours of CT service than funded. Discussions are underway with the province regarding the metric tracking P4 wait times for MRI as it is felt that this metric, and its evidence base, are open for improvement. Work continues to address hip and knee surgery wait times and GRH is committed to addressing this issue.

Recent meetings held by the Region of Waterloo have informed that the Freeport campus will not be on the light rail transit path. Given the patient population and geography of the site, Freeport would be better served by bus service that would bring individuals closer to the Freeport campus doors.

### **8.3 Chief Nursing Executive Report**

The Board package included a report from the Chief Nursing Executive and a verbal update informed of the benefit associated with reduced length of stay for hip and knee surgical patients which results in GRH's ability to accommodate additional hip and knee surgeries.

### **8.4 Foundation Report**

The Foundation report was included in the public package. Fundraising results from the recent Guelph Sled Dog Race have exceeded expectations. Further to information conveyed by Marnie Spears, President and CEO of Ketchum Canada Inc., at the February 23 Joint Board session, the Foundation is working to develop strategies to attract donors.

## **9.0 Items for Consent**

The items for consent included:

### **9.1 Board Minutes of January 24, 2017**

### **9.2. Board Manual Updates**

#### **9.2.1 Procedure for Public Members Addressing the Board**

#### **9.2.2 Reimbursement of Director Expenses**

#### **9.2.3 Board Evaluation**

#### **9.2.4 Evaluation of Individual Directors and Community Members**

#### **9.2.5 Waterloo Hospitals Collaborative Committee Terms of Reference**

### **9.3 Resources Committee Membership**

#### **Motion:**

It was moved by H. Wakeling and seconded by H. Hoediono that the items for consent be approved.

Carried.

## **10.0 Items for Information**

### **10.1 Committee Items**

#### **10.1.1 Medical Advisory Committee Minutes**

Medical Advisory Committee public minutes were included in the package.

#### **10.1.2 Quality And Patient Safety Committee**

QPS items included in the package:

- 10.1.2.1 QPS Scorecard**
- 10.1.2.2 WWLHIN Dashboard**

**10.1.3 Resources Committee**

Included as items for information from the Resources Committee:

- 10.1.3.1 Minutes**
- 10.1.3.2 Scorecard**
- 10.1.3.3 Financials**

**10.1.4 Governance and Community Engagement Committee**

Items for information included:

- 10.1.4.1 Minutes**
- 10.1.4.2 Update on the Community and External Health Care Environment**
- 10.1.4.3 Minutes from the January 19, 2017 Joint Brand and Community Engagement Working Group Meeting**

**10.2 Board Work Plan**

The package contained the work plan for the Board of Directors.

**10.3 Board Education Opportunities**

A current listing of Board education opportunities was included in the package.

**10.4 March Calendar Of Board Events**

The Board package contained a calendar of events for March.

**10.5 GRH Board 2016/17 Meeting Schedule**

The revised 2016/17 GRH Board meeting schedule appeared in the package.

**11.0 Adjournment**

**There being no further business, it was moved by P. Hendrikse and seconded by J. Deganis that the public meeting be adjourned.  
Carried.**

The public meeting adjourned at 5:00 p.m.

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Malcolm Maxwell,  
Secretary

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Geoff Bellew,  
Chair