Grand River Hospital Draft Minutes of a Public Meeting of the Board of Directors Held on June 26, 2018 Freeport Boardroom

Present: G. Bellew* B. Collingwood D. Graham S. Hanmer B. Hanna P. Hendrikse	J. Linton M. Maxwell J McMurray P. Potts S. Spracklin* H. Wakeling	Regrets: D. Bennett J. Deganis D. Freeman H. Hoediono J. Schlegel B. Vrbanovic
L. Kotseff	3	K. Wetteskind

Staff:Guest:T. BaileyK. LavoieNone

C. Easton Y. Lee
R. Fernando T. Mah
C. Heal J. O'Brien

M. Karjaluoto

Recorder: C. Heal

1.0 Call To Order

The meeting was called to order at 3:03 p.m. by S. Hanmer.

1.1 Acceptance of Agenda

Appreciation of the retiring directors will be done during the annual meeting.

MOTION:	That the public agenda for the June 26, 2018 Board of Directors meeting	
	be accepted, as amended.	
MOVED BY:	D. Graham	
SECONDED BY:	B. Collingwood	
CARRIED	-	

S. Hanmer expressed condolences from the Board to L. Kotseff on the passing of his wife, Glenna Kotseff.

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

None

^{*}Participated via teleconference

2.0 Quality

2.1 Report on Behalf of the Chair of the Quality and Patient Safety Committee

H Wakeling reported that the committee met on June 13th. Guest speaker, Dr. Jeremy Theal, CMIO, North York General, gave an informative presentation on North York's experience in the ways through which its health information system improved quality, and shared some lessons learned.

2.2 QPS Year End Summary FY2017/18

The QPS Year End Summary was included in the package. No question was raised.

3.0 Resources

3.1 Report by the Chair of the Resources Committee

The revised Operating Budget was included in the budget and it would be discussed in the In-Camera Session.

3.2 Motion: Revised 2018/19 Operating Budget

The following motion was approved subsequent to an in-camera discussion.

MOTION:	That the Board of Directors approve the Revised 2018/19 GRH Balanced	
	Operating Budget.	
MOVED BY:	D. Graham	
SECONDED BY:	J. McMurray	
CARRIED		

4.0 Audit

4.1 Report on Behalf of the Chair of the Audit Committee Report

There was no report as there had been no meeting since the last board meeting.

5.0 Governance and Community Engagement

5.1 Report by the Chair of the Governance and Community Engagement Committee

A number of the GCEC items will be addressed under the Consent Section of the agenda.

5.2 Mentorship of New Directors

A few Directors have agreed to mentor the Directors to be appointed this year. S Hanmer thanked them for taking on this task.

5.3 2018-19 Board Meeting Schedule

A draft board meeting schedule was included in the meeting package. An additional regular board meeting is planned for August 9th.

6.0 Health Information System Renewal

6.1 Report on Behalf of the Chair of the Health Information System Renewal Committee

Y. Lee provided a report on PRISM and shared that resolution of the CPRM matter would be delayed due to the change of provincial government.

7.0 Executive Committee

7.1 Report by the Chair of the Executive Committee

None

8.0 Executive Highlights

8.1 Board Chair Report

None

8.2 President and Chief Executive Officer Report

The CEO Report was distributed prior to the meeting. D Shilton will retire at the end of June, but he will continue to act as a consultant to SMGH's Board.

M Maxwell commended the volunteer that has been using the garage for a practice space for bagpiping while waiting for patients who need rides.

8.2.1 Q4 Operating Plan Update

The constraints on home care continue to negatively impact the hospital. GRH continues to operate with elevated levels of alternate level of care patients.

Page 4 of the report contains a summary on the status of the 16 priorities. H. Wakeling thanked staff for the clear report and found the graphics helpful.

8.2.2 Operating Plan Year End Report, 2017-18

Management recommended the following motion:

MOTION:	That the Board of Directors accept the discontinuation of the activity outlined below which was not achieved in the 2017/18 Operating Plan without carrying this item forward into the 2018/19 Operating Plan. • Priority # 6 – Milestone 1 – RFP issued and awarded to prime construction company and construction started on the therapeutic pool.
	And that the Board of Directors accept the deferral of the activity outlined below which was not achieved in the 2017/18 Operating Plan without carrying this item forward into the 2018/19 Operating Plan. The Board further directs management to bring this item forward for review during the preparation of the 2019/20 Operating Plan. • Priority # 10 – Milestone 3 – Assess, procure and implement automated tools (SIEM – Security Information and Event Management).
MOVED BY:	D. Graham
SECONDED BY:	H. Wakeling
CARRIED	

8.3 Chief Nursing Executive Report

The CNE Report was included in the package. It has been an unusually busy June, including the Emergency Department, occupying more medicine beds.

8.4 Foundation Report

The Foundation Report was included in the package. T Bailey further highlighted that the campaign will continue during the summer. Proposals for funding will go out to donors shortly.

Two very successful "Insider Talks" have been held to engage community members and donors. Thanks again to Hospital and Foundation board members for acting as hosts. Mark Bingeman from the Foundation board will be one of the two hosts of the September event (September 8th Breakfast at Bingemans). A host from the GRH Board is needed. The topic will be "Smart Hospital" and Y Lee will be the speaker. S Hanmer further explained the purpose of the events and the role of the board hosts. J McMurray volunteered to be the next GRH Board host.

9.0 Items for Consent

MOTION:	That the Board of Directors approve the following consent items as
	circulated.
MOVED BY:	P Hendrikse
SECONDED BY:	B Collingwood
CARRIED	

9.1 Board Minutes of May 29, 2018

MOTION:	That the Board of Directors accept the minutes for the public meeting
	held May 29, 2018 as circulated.

9.2 Revisions to 3-B-4 Conflict of Interest and Retirement of 3-B-5

MOTION:	That the Board of Directors approve Policy 3-B-4, General Principles
	Regarding Conflict of Interest, and 3-B-5, Conflict of Interest Policy, to be
	updated, combined and re-titled, 3-B-4, Conflict of Interest, as indicated
	in the distributed package; and that 3-B-5 be retired.

9.3 Review of Committee Terms of Reference

MOTION:	That the Board of Directors accept the review results of no change to the
	Terms of Reference of the Audit, Pension, Resources, and QPS
Committee, and one change to the Terms of Reference of the Execution	
	Committee, as indicated in the distributed package.

9.4 Legislative Compliance Review, 2018

MOTION:	That the Board of Directors accept the 2018 Legislative Compliance	1
	Review Results that all but one requirement are met.	

9.5 Collaborative QIP, 2018-19

MOTION:	That the Board of Directors accept the recommendation by the QPS
	Committee to approve the 2018-19 cQIP and authorize the Board Chair,
	Vice Chair and CEO to sign it.

9.6 BPSAA Attestation

MOTION:

That the Board of Directors accept the recommendation from the Resources Committee, to authorizes the CEO and Board Chair to sign the BPSAA Attestation that declares to the Board that the hospital attests to:

- the completion and accuracy of reports required of the Hospital pursuant to section 6 of the BPSAA on the use of consultants;
- the Hospital's compliance with the prohibition in section 4 of the BPSAA on engaging lobbyist services using public funds;
- the Hospital's compliance with any applicable expense claims directives issued under section 10 of the BPSAA by the Management Board of Cabinet;
- the Hospital's compliance with any applicable perquisite directives issued under section 11.1 of the BPSAA by the Management Board of Cabinet; and
- the Hospital's compliance with any applicable procurement directives issued under section 12 of the BPSAA by the Management Board of Cabinet.
- the Hospital's compliance with any applicable reporting directives issued under section 13 of the BPSAA by the Management Board of Cabinet, during the Applicable Period.

Any known exceptions to the above are documented in Schedule A and will be submitted with the attestation.

9.7 MSAA Attestation

MOTION:

That the Board of Directors authorize the Board Chair, or designate, to sign Schedule G, Form of Compliance Declaration that declares to the Board as follows:

After making inquiries of the appropriate officers of the Health Service Provider (HSP) and subject to any exceptions identified on Schedule G, to the best of the Board's knowledge and belief, the HSP has fulfilled its obligations under the service accountability agreement (the M-SAA) in effect during the Applicable period (April 1, 2017 to March 31, 2018).

Without limiting the generality of the foregoing, the HSP has complied with:

- i) Article 4.8 of the M-SAA concerning applicable procurement practices;
- ii) The Local Health System Integration Act, 2006; and
- iii) The Public Sector Compensation Restraint to Protect Public Services Act, 2010.

10.0 Items for Information

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

10.1 Committee Items

- **10.1.1 ORE-RF Funding Announcement**
- 10.1.2 Medical Advisory Committee Public Minutes
 - 10.1.2.1 Draft June Public MAC Minutes
- 10.1.3 QPS Committee
 - 10.1.3.1 QPS Scorecard
- 10.1.4 GCEC
 - 10.1.4.1 Draft June GCEC Public Minutes
- 10.1.5 Executive Committee
 - 10.1.5.1 Draft June Public Executive Committee Minutes
- 10.2 Calendar of Board and Board Committee Meetings
- 10.3 Board Educational Opportunities
- 10.4 Board Scorecard

11.0 Adjournment

MOTION:	That the meeting be adjourned at 3:27 p.m.
MOVED BY:	B. Collingwood
SECONDED BY:	P. Hendrikse
CARRIED	

M. Maxwell,	J. Deganis,
Secretary	Chair