

**Grand River Hospital
Minutes of the Open Meeting
of the Board Of Directors
Held on November 26, 2019
in Village Centre 2 Boardroom, Freeport Campus**

Present:

Ron Gagnon	Gary Pooley
David Graham	Peter Potts
Rob Hall	Ken Seiling
Sandra Hanmer	Xavier Vallverdu
Robinne Hauck	Rita Westbrook
Harry Hoediono	Karen Wetteskind
Larry Kotseff	

Regrets:

Janice Deganis
Jim Erb
Christine Michaud
Jen Vasic

Staff:

Bonnie Camm	Doug Murray
Cassandra Easton	Jennifer O'Brien
Catherine Heal	Stephen Swatridge
Young Lee	Aubrey Walters
Tina Mah	Denise Wren
Jane Martin	

Guests:

Ruthe Anne Conyngham

Recorder: Cassandra Easton

1.0 Call to Order

Board Chair Harry Hoediono called the open meeting to order at 4:03 p.m. beginning with an overview of the agenda.

1.1. Acceptance of Agenda

Motion:	That the open agenda for the November 26, 2019 Grand River Hospital Board of Directors Meeting be accepted.
Moved By:	Karen Wetteskind
Seconded By:	Rob Hall
Carried.	

1.2 Executive Summary

An Executive Summary of the meeting was included in the meeting package.

1.3 Declaration of Conflict of Interest

None

1.4 Application of Decision Making and Ethics Framework

The Decision Making and Ethics Framework are available on the Board Portal and linked through the agenda.

1.5 Assignment of Meeting Evaluator

Rob Hall volunteered to be the Meeting Evaluator.

2.0 Items for Discussion

2.1 Debrief on Quality and Patient Safety Education and Identification of the Board's QPS Priorities

A briefing note was included in the meeting package that provided a summary of the results of the survey following the October education session on quality and patient safety. A total of 15 surveys were filled out, including staff, with items that might warrant attention highlighted.

Directors were reminded that surveys to meetings and other evaluations do need to be completed to help identify what needs to be improved.

Some of the key items going forward include the provision of patient stories and patient feedback. Staff are looking at ways to engage patients and families across the hospital.

Feedback and discussion included:

- Need to look at prioritizing the top areas because we don't have enough resources to accomplish all the goals at once. GCEC was tasked to look at establishing priorities and bring that back for recommendation.
- The Board should be more cognizant of situations when matters are related to quality and patient safety but are not necessarily explicitly titled on the agenda as such. It was concluded that quality and patient safety considerations should be inherently imbedded in all discussions and briefing notes, though not listed as a separate heading in briefing notes.
- Skills matrix – When recruiting for the Board, emphasis should be placed on knowledge of quality and patient safety.

2.2 Integrated Plan Quarterly Results, Q2

2.2.1 Balanced Scorecard

2.2.2 Report on Financial Performance

2.2.3 Operating Priorities with ERMA Update

2.2.4 HSAA / MSAA Update

The meeting package includes hospital reporting results for review and discussion. Ron Gagnon led the discussion, highlighting the data in the balanced scorecard. Overall it was reported that the hospital is doing well, but some areas need on-going attention, including ED wait times and ALC numbers. There is work being done to address both of these items, including seeking input from Toyota on streamlining process, collaborating with community partners, and reviewing our current procedures to ensure that they are being followed properly. With regard to MI wait times, what would help is additional capacity, in addition to replacement of the existing equipment.

There are some delays and discrepancies in reporting data due to the transition to Prism, and these are being dealt with.

Feedback and discussion included:

- Implementing new ideas
 - Our staff are seeking to learn from the best performers. Ideas suggested by front-line staff are being investigated.
 - The Board should pay attention to these items and prioritize them to ensure we move from ideas and research to action.
 - Throughput is important but the priority needs to be quality care.
- Results
 - Retirements – The year-end forecast for retirements is anomaly high due to staff previously deferring retirement to wait for the then planned pension transfer recently proceeding with retirement.
 - The Board found the year-end forecasts helpful, and suggested adding peer comparisons and trends.
 - Clarifications were provided by management on the determination of amortization rates and the capitalization practice of expenses associated with Prism. It was requested that clearer information be provided for budgeting purposes. The Resources Committee will follow-up on this request.

2.3 Quality Framework Refresh

The draft Quality Framework was included in the meeting package for review and discussion. GRH has been working to critically reflect on and refresh our Quality Framework in order to create clear and standard approaches to quality improvement. A draft of the updated Quality Framework and implementation plan was presented to the Quality and Patient Safety Committee for review and feedback on November 14. Following feedback from the Board and re-engagement with the Patient and Family Advisory Council, an updated report will go to the QPS committee in January, 2020.

Feedback and discussion included:

- Whether to adopt SMGH's framework – GRH is already collaborating with SMGH in many areas. Engaging staff in the development process is just as important in cultivating a sense of ownership for our own framework, which would help sustain the cultural shift. However, we will continue to work with SMGH and learn from them.
- The Framework is about our culture as a whole, not only the methodology through which we provide quality care.
- A discussion ensued on whether to adopt LEAN. Management pointed out that GRH is applying LEAN method although initiatives might not be explicitly communicated as such..

Overall, more work is required before the QPS Committee reviews this item again. The Board clarified that management, as opposed to the Board, should determine the choice of practices. The keys are to continue to solidify our quality focused culture, and to be consistent and committal in our choice of organizational practices.

3.0 Reports

3.1 Board Chair

None.

3.2 President and CEO

The President and CEO's report was included in the meeting package. The following points were discussed:

- Approved Ontario Health Teams being announced gradually.
- Hospital funding – the OHA has developed information that will be used for advocacy purposes during the provincial government budget process.

3.3 Chief of Staff

None.

3.4 Chief Nursing Executive

The Chief Nursing Executive's report was included in the meeting package.

3.5 Governance and Community Engagement Committee

A report from the Governance and Community Engagement Committee (GCEC) was included in the meeting package. Larry Kotseff provided an overview of the report. The redesigned board work plan and the recommendation to appoint a new Community Committee Member to the Resources Committee are included in the consent agenda.

3.6 Quality and Patient Safety Committee

A report from the Quality and Patient Safety (QPS) Committee was included in the meeting package.

3.7 Audit Committee

A report from the Audit Committee was included in the meeting package. Rob Hall added that the Committee will be continuing to review their terms of reference and work plan to ensure alignment and that proper responsibility is assigned.

Cyber security is an ongoing issue and is currently handled by internal staff at GRH. A presentation on cyber security will be given by KPMG at an upcoming Audit Committee meeting. This presentation is being organized and it will be open to all Board members to attend.

4.0 Items for Consent

Motion:	The Grand River Hospital Board of Directors approves the following consent items as circulated.
Moved By:	Larry Kotseff
Seconded By:	Rita Westbrook
Carried.	

4.1 Open Board Minutes of October 22, 2019

Motion:	The Grand River Hospital Board of Directors approves the minutes for the Open Board meeting held on October 22, 2019.
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4.2 KW Pension Plan Statements of Investment Policies and Procedures (SIP&P), effective November 26, 2019

Motion:	Upon recommendation the Resources Committee, the Board of Directors approves the adoption of the proposed Statement of Investment Policies and Procedures effective November 26, 2019.
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4.3 Redesigned Board Work Plan, 2019-20

Motion:	Upon recommendation the Governance and Community Engagement Committee, the Board of Directors approves the Board Work Plan, 2019-20.
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4.4 Appointment of Committee Community Member to Resources Committee

Motion:	Upon nomination by the Governance and Community Engagement Committee, the Board appoints Ms. Elaine Leung as a Committee Community Member of the Resources Committee.
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5.0 Items for Information

The following items were included in the meeting package for information.

5.1 Board Reporting Principles

5.2 Board and Committee Calendar

6.0 Adjournment

Motion:	That the Open Board of Directors meeting on November 26, 2019 be adjourned at 5:20 p.m.
Moved By:	Karen Wetteskind
Seconded By:	Sandra Hanmer
Carried.	

R. Gagnon,
Secretary

H. Hoediono,
Chair