

**GRAND RIVER HOSPITAL
MINUTES OF A PUBLIC MEETING
OF THE BOARD OF DIRECTORS
HELD ON JUNE 24, 2014
IN THE FREEPORT BOARDROOM**

PRESENT:

Bellew, G.
Bleaney, T.
Collingwood, B.
Delamere, D.
Elop, T.
Maki, P.

Maxwell, M.
Olson, K.
Rice, K.
Sharma, A.
Vrbanovic, B.
Wells, R.

REGRETS:

Deganis, J.
Freeman, D.
Hoediono, H.
Paun, B.
Schlegel, J.

STAFF:

Burns, J.
Cheal, B.
Hewat, N.
Higgs, G.

Karjaluo, M.
Mah, T.
Rajaballey, J.
Wren, D.

GUESTS:

Potts, P.
Verma, L.

Recording Secretary: Karen Taylor

1.0 CALL TO ORDER

The meeting was called to order by D. Delamere at 4:05 p.m. G. Bellew and T. Elop were not present for discussion of agenda item 1.1.

1.1 BOARD OFFICER APPOINTMENTS 2014/15

MOTION:

**IT WAS MOVED BY D. DELAMERE AND SECONDED BY T. BLEANEY THAT THE BOARD OF DIRECTORS APPROVE THE APPOINTMENT OF TRACY ELOP AS CHAIR OF THE BOARD FOR THE NEXT YEAR OR UNTIL HER RESPECTIVE SUCCESSOR IS ELECTED OR APPOINTED; THE APPOINTMENT OF GEOFF BELLEW AS VICE-CHAIR FOR THE NEXT YEAR OR UNTIL HIS RESPECTIVE SUCCESSOR IS ELECTED OR APPOINTED; AND, THE APPOINTMENT OF JANICE DEGANIS AS TREASURER OF THE CORPORATION FOR THE NEXT YEAR UNTIL HER RESPECTIVE SUCCESSOR IS ELECTED OR APPOINTED.
CARRIED.**

G. Bellew and T. Elop rejoined the meeting and were congratulated on their appointment. In turn Chair T. Elop thanked the Board for their confidence and welcomed Dr. Peter Potts, Deputy Chief of Staff, to the meeting.

1.2 ACCEPTANCE OF AGENDA

The agenda was accepted as amended to move consent item 8.3: Board Committee Membership List 2014/2015 for discussion as item 6.4.

1.3 DECLARATION OF CONFLICT OF INTEREST

None.

2.0 BOARD CHAIR AND CEO REPORT

2.1 PRESIDENT AND CHIEF EXECUTIVE OFFICER

In addition to the report in the Board package from the President and CEO a verbal update informed of the appointment of Dr. Eric Hoskins as Minister of Health and Long Term Care (MoHLTC). Hospitals have been alerted to the potential for policy development and implementation of policy initiatives over the next year.

Deputy Minister Dr. Robert Bell has been invited to speak at a joint meeting of the Boards, CEOs, COSs, Medical Advisory Leadership and Senior Leaders of Cambridge Memorial, St. Mary's and Grand River Hospitals. The date and time of the late September/October session will be confirmed once notice of Dr. Bell's schedule is received.

Discussion of GRH's capacity to accommodate periods of surge advised that each department has a defined level of surge wherein it is able to operate without requiring additional staff support.

2.2 BOARD CHAIR

Highlights from the June meetings of the Waterloo Wellington Collaborative Committee (WWCC) and Waterloo Wellington Hospital and CCAC Governors were provided. During the meeting with the Governors there was discussion about the common IT system and it was mentioned that the Guelph General (GGH) and Groves Hospitals were considering going their separate ways with their current joint system. The WW Hospitals CEOs will be asked to report back at a September meeting on the status of integrated program councils. The Chair of the Governors group has rotated to John Core, Chair of GGH. Recently GGH announced that Marianne Walker will take over as President and CEO.

3.0 QUALITY

3.1 REPORT BY CHAIR OF THE QUALITY AND PATIENT SAFETY COMMITTEE

Highlights from the June 11 meeting of the Quality and Patient Safety Committee were provided by G. Bellew and other items for information appeared in the package.

4.0 RESOURCES

4.1 REPORT BY CHAIR OF THE RESOURCES COMMITTEE

P. Hendrikse provided an overview of items from the June 10 Resources Committee meeting, advising that possibilities regarding the parking garage are being explored.

4.1.1 APPROVAL OF 2014/2015 ANNUAL CAPITAL EXPENDITURE (PHASE 2)

Phase 1 of capital expenditures was approved in March 2014 and due to the uncertainty of funding assumptions it was recommended by

management that the Board consider Phase 2 expenditures at their June meeting.

MOTION:

**IT WAS MOVED BY P. HENDRIKSE AND SECONDED BY B. COLLINGWOOD THAT THE BOARD OF DIRECTORS APPROVE THE EXPENDITURE OF \$20.7M FOR THE 2014/15 PHASE TWO CAPITAL ALLOCATION.
CARRIED.**

Reference pages 8 to 11 in the June 2014 Board package for details of the phase 2 capital items.

MOTION:

**IT WAS MOVED BY P. HENDRIKSE AND SECONDED BY B. COLLINGWOOD THAT THE MEETING MOVE TO IN-CAMERA.
CARRIED.**

5.0 GOVERNANCE AND OTHER COMMITTEES

5.1 REPORT BY CHAIR OF THE GOVERNANCE COMMITTEE

R. Wells provided the report on behalf of the Governance Committee. Terms of reference for the Committees of the Board were consistently changed to remove mention of the preparation of an annual report and to simplify wording pertaining to quorum. T. Elop is working to solicit additional Non Director members to serve on the Pension Committee.

5.2 COMMUNITY ENGAGEMENT COMMITTEE

No report.

5.3 AUDIT COMMITTEE

The report from the Audit Committee's June 19 meeting was provided by P. Hendrikse. Among their items for business, discussion at the meeting addressed the report from the internal auditor on management projects, closing out the audit and items for Board approval including an attestation and declaration of compliance.

5.3.1 M-SAA DECLARATION OF COMPLIANCE

Information pertaining to the Multi-Sector Service Accountability Agreement (M-SAA) appeared in the Board package.

MOTION:

IT WAS MOVED BY P. HENDRIKSE AND SECONDED BY G. BELLEW THAT THE GRH BOARD OF DIRECTORS AUTHORIZE TRACY ELOP TO SIGN SCHEDULE G, FORM OF COMPLIANCE DECLARATION THAT DECLARES TO THE BOARD AS FOLLOWS:

AFTER MAKING ENQUIRIES 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 (M-SAA) IN EFFECT DURING THE APPLICABLE PERIOD (OCTOBER 1, 2013 TO MARCH 31, 2014).

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 RESTRAINTS TO PROTECT PUBLIC SERVICES ACT, 2010.**
- CARRIED.**

5.3.2 BROADER PUBLIC SECTOR ACCOUNTABILITY ACT ATTESTATION

The Broader Public Sector Accountability Act requires hospitals to follow processes and to comply with directives pertaining to procurement, employee expenses, use of consultants, etc..

MOTION:

IT WAS MOVED BY P. HENDRIKSE AND SECONDED BY P. MAKI THAT THE GRH BOARD OF DIRECTORS AUTHORIZES TRACY ELOP 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,**
- ANY UNKNOWN EXCEPTIONS TO THE ABOVE ARE DOCUMENTED IN SCHEDULE A AND WILL BE SUBMITTED WITH THE ATTESTATION.**

CARRIED.

6.0 OTHER

6.1 JOINT HOSPITAL STRATEGIC PLANNING UPDATE

An update on the status of the joint hospital strategic plan with CMH and SMGH informed that GRH's report from the Hay Group has been received and is being reviewed. The CEOs from CMH, GRH and SMGH will have a common goal that ties into the strategic plans of the organizations.

6.2 Q4 BOARD SCORECARD

The Board scorecard as at Q4 appeared in the package. During the review of the scorecard results the Board was reminded about the seasonality impact of Q4. Work is underway to try to understand the impact of the Emergency Department wait time clock and to date no reduction in CTAS IV and V has been noted.

6.3 Q4 OPERATING PLAN AND ERMA UPDATE

The Q4 operating plan results appeared in the Board package. A motion to approve a revised 2014/15 operating plan along with a document that reported on the risk and progress assessment of the 2013/14 operating plan was circulated at the meeting.

MOTION:

IT WAS MOVED BY R. WELLS AND SECONDED BY B. COLLINGWOOD THAT THE 2014-2015 OPERATING PLAN APPROVED ON MARCH 25, 2014 BY THE GRAND RIVER HOSPITAL BOARD OF DIRECTORS BE AMENDED BY THE INCLUSION OF THE FOLLOWING ADDITIONAL EVALUATION CRITERIA:

In WIG 4

Develop and implement program specific tools to measure the patient experience as a means of identifying quality improvement priorities.

**The wording of the above goal's strategy changes to
*Implementation of standardized survey method to adequately capture representative feedback from patients/family members for eight clinical programs.***

The evaluation will include "patient experience survey results based upon an expanded GRH survey administration method will be reported to QPS in Q4 for a minimum of eight clinical programs."

In FIG 3

Strengthen the health, safety and wellness culture.

Evaluation will include "GRH will report to Resources Committee its relative performance with respect to average sick days using either Saratoga or MoHLTC data by Q4 with a target of achieving the 40th percentile of the peer group by 2015-2016."

Also, evaluation criteria will include "Leadership Institute Module on Attendance Management will be developed with initial delivery to occur by Q4 2014-2015."

In PIG 4

Review, update and improve emergency planning programs and Incident Management System.

Evaluation will include “Business continuity test results will be reported to Resources by Q4 together with an action plan to address any deficiencies. The Business Continuity Plan will be finalized by Q3.”

As well, in the 2013-2014 operating plan there is one goal that will continue to be monitored and this goal does not carry over to the 2014-2015 operating plan.

From the 2013-2014 operating plan PIG 2

Reduce the incidence of pre-analytic errors.

The work is on track to be completed in November 2014 and a report will be provided to QPS.

Evaluation will include “Cancellation rate reductions achieved will be reported to QPS in Q4. The 2012-2013 average monthly cancellation rate was 11,393, the 2013-2014 average monthly rate was 11,156.

CARRIED.

6.4 BOARD COMMITTEE MEMBERSHIP LIST 2014/2015

The changes proposed to the 2014/15 Board Committees were reviewed by T. Elop. At the meeting a revised Board Committee Membership list for 2014/15 was circulated; amended to reflect that the CEO and CNE were ex-officio non-voting members of the Medical Advisory Committee.

MOTION:

IT WAS MOVED BY D. DELAMERE AND SECONDED BY R. WELLS THAT THE BOARD OF DIRECTORS APPROVE THE REVISED 2014/15 BOARD COMMITTEE MEMBERSHIP LIST.

CARRIED.

7.0 EXECUTIVE HIGHLIGHTS

7.1 VICE PRESIDENT CLINICAL SERVICES & CHIEF NURSING EXECUTIVE REPORT

The report from the VP clinical services and chief nursing executive was included in the board package. Attention to hand hygiene continues to be a focus with quality councils.

7.2 FOUNDATION REPORT

The foundation report was included in the Board package. The recent Tour de Waterloo cycling event was a great success.

8.0 ITEMS FOR CONSENT

The following items were included in the Board package as items for consent.

- 8.1 BOARD MINUTES OF MAY 27, 2014**
- 8.2 BOARD NON-DIRECTOR APPOINTMENTS**
- 8.3 (item moved for discussion as agenda item 6.4 above)**
- 8.4 BOARD MEETING DATES FOR 2014/2015**
- 8.5 THREB TERMS OF REFERENCE**
- 8.6 BOARD MANUAL UPDATES**
 - 8.6.1 BOARD QUALITY POLICY**
 - 8.6.2 ENTERPRISE RISK MANAGEMENT POLICY**
 - 8.6.3 EXECUTIVE COMMITTEE TERMS OF REFERENCE (TOR)**
 - 8.6.4 QUALITY AND PATIENT SAFETY COMMITTEE TOR**
 - 8.6.5 RESOURCES COMMITTEE TOR**
 - 8.6.6 AUDIT COMMITTEE TOR**
 - 8.6.7 PENSION COMMITTEE TOR**
 - 8.6.8 COMPENSATION AND EXECUTIVE RESOURCES COMMITTEE TOR**
 - 8.6.9 GOVERNANCE COMMITTEE TOR**
 - 8.6.10 COMMUNITY ENGAGEMENT TOR**
 - 8.6.11 NOMINATING COMMITTEE TOR**

MOTION:

**IT WAS MOVED BY T. BLEANEY AND SECONDED BY B. COLLINGWOOD THAT
THE ITEMS FOR CONSENT BE APPROVED.
CARRIED.**

9.0 ITEMS FOR INFORMATION

9.1 COMMITTEE ITEMS

9.1.1 MEDICAL ADVISORY COMMITTEE MINUTES

The Medical Advisory Committee minutes were included in the package.

9.1.2 QUALITY AND PATIENT SAFETY COMMITTEE

The following QPS items appeared as items for information in the Board package.

9.1.2.1 MINUTES

9.1.2.2 SCORECARD

9.1.2.3 ED/ALC REPORT

9.1.2.4 PUBLIC REPORTING INDICATORS

9.1.2.5 QPS YEAR END REPORT

9.1.3 RESOURCES COMMITTEE

Items for information from the Resources Committee included:

9.1.3.1 MINUTES

9.1.3.2 SCORECARD

9.1.3.3 FINANCIALS

9.1.4 GOVERNANCE COMMITTEE

The Board package contained the following Governance items:

9.1.4.1 MINUTES

9.1.4.2 BOARD SURVEY RESULTS

9.1.5 COMMUNITY ENGAGEMENT COMMITTEE MINUTES

The CEC minutes appeared in the package.

9.2 BOARD WORK PLAN

The Board work plan was included in the board package.

9.3 BOARD EDUCATION OPPORTUNITIES

A list of Board education opportunities was included in the board package. Board members were encouraged to review the list and to contact K. Taylor.

9.4 JULY AND AUGUST BOARD CALENDARS OF EVENTS

The calendars of events appeared in the board package.

9.5 GRH BOARD 2014/15 MEETING SCHEDULE

The schedule of 2014/15 GRH Board meetings was included in the board package. Board members were encouraged to enter these dates into their personal calendars.

9.6 WWLHIN ITEMS

9.6.1 WWLHIN BOARD MEETING SCHEDULE

The schedule of 2014 WWLHIN board meetings was included in the Board package.

9.6.2 WWLHIN 2014/15 ANNUAL BUSINESS PLAN

The WWLHIN 2014/15 annual business plan appeared in the package.

10.0 ADJOURNMENT

L. Verma was thanked for his participation as a Youth On Board participant during several of the last meetings of the GRH Board.

THERE BEING NO FURTHER BUSINESS, IT WAS MOVED BY B. COLLINGWOOD AND SECONDED BY P. MAKI THAT THE PUBLIC MEETING BE ADJOURNED. CARRIED.

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

Malcolm Maxwell,
Secretary

Tracy Elop,
Chair