GRAND RIVER HOSPITAL MINUTES OF A PUBLIC MEETING OF THE BOARD OF DIRECTORS HELD ON FEBRUARY 24, 2015 IN THE FREEPORT BOARDROOM

PRESENT:

Bellew, G. Bleaney, T. Collingwood, B. Deganis, J. Elop, T. Hoediono, H. Maki, P. Maxwell, M. Olson, K. Paun, B. Rice, K. Schlegel, J. Sharma, A. Wells, R. **REGRETS:** Delamere, D. Freeman, D. Hendrikse, P. Vrbanovic, B.

STAFF:

Karjaluoto, M. Lillepold, A. Linton, J. Mah, T. Wren, D. GUEST:

Enns, J.

Recording Secretary: Karen Taylor

1.0 CALL TO ORDER

The meeting was called to order by Chair, T. Elop at 4:12 p.m.

1.1 ACCEPTANCE OF AGENDA

The February public agenda was accepted with the addition of agenda item 4.2: MOTION – HSAA Amending Agreement.

1.2 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 which appeared in the Board package an update on the upcoming construction for the light rapid transit project informed that from mid to late March to the end of summer, King Street between Wellington and Union will be open to one lane of traffic. On-going meetings with GRH and Grandling staff continue to discuss timing and communications.

2.2 BOARD CHAIR

A verbal report from the Chair reported on the presentation made by GRH at the Chamber of Commerce's Business Excellence Awards on February 19 and invited Board members to attend the March 20, 9:30 a.m. event at GRH to celebrate the research partnership between GRH and the University of Waterloo.

Board member one-on-one meetings will soon get underway with the Board Chair and during those meetings results of the recent Board surveys will be discussed.

3.0 QUALITY

3.1 REPORT BY CHAIR OF THE QUALITY AND PATIENT SAFETY COMMITTEE Highlights from the February 11 meeting of the Quality and Patient Safety (QPS) Committee were provided. An update on falls was provided by K. Olson, noting that the Falls Steering Committee will oversee implementation and monitoring strategies aimed at reducing the incidence and severity of falls. QPS will receive a falls report semi-annually.

The 2015-2016 draft Quality Improvement Plan (QIP) was reviewed. When establishing the QIP factors taken into consideration include: external mandated reporting including the Excellent Care for All Act; GRH's position relative to its peer hospitals at the 25th percentile; best practice and performance; alignment with GRH's H-SAA; and, using a public lens to view the indicators and targets. While there is some alignment with WWLHIN scorecard metrics, not all WWLHIN metrics match with GRH's quality plan. The final version of the QIP will be confirmed by QPS and brought to the March meeting of the Board of Directors for approval.

4.0 RESOURCES

4.1 REPORT BY CHAIR OF THE RESOURCES COMMITTEE

An overview of topics discussed at the February 10 meeting of the Resources Committee included GRH's financial position and capital summary based on current projects.

4.2 HOSPITAL SERVICES ACCOUNTABILITY AMENDING AGREEMENT

In mid February GRH's Finance Department received notice from the WWLHIN that GRH would receive an amending agreement to extend the current Hospital Services Accountability Agreement (H-SAA) to March 31, 2016. The WWLHIN is unable to make funding transfers in the absence of a H-SAA and the current agreement expires on March 31, 2015. The amending agreement would provide the legal mechanism to authorize continuation of payments to the hospital at the same level as was previously established in 2014/15.

MOTION:

IT WAS MOVED BY J. DEGANIS AND SECONDED BY T. BLEANEY THAT THE BOARD OF DIRECTORS AUTHORIZE THE CHAIR AND THE CHIEF EXECUTIVE OFFICER TO SIGN AN AMENDING AGREEMENT TO THE 2008-15 HOSPITAL SERVICES ACCOUNTABILITY AGREEMENT (H-SAA). CARRIED.

5.0 GOVERNANCE AND OTHER COMMITTEES

5.1 REPORT BY CHAIR OF THE GOVERNANCE COMMITTEE

The minutes from the February 4 meeting of the Governance Committee were included in the package as an item for information. On behalf of Governance

Committee Chair, R. Wells noted the discussion held at the meeting regarding the upcoming accreditation survey, the results of the Board surveys, the work of the Nominating Committee and in addition, advised that arrangements for a spring Board education session continue to be discussed.

5.1.1 NOMINATING COMMITTEE MEMBERSHIP

At their February meeting the Governance Committee discussed the formation of the Nominating Committee and following the meeting the Governance Chair and CEO worked to finalize recruitment of members.

MOTION:

IT WAS MOVED BY R. WELLS AND SECONDED BY H. HOEDIONO THAT THE BOARD OF DIRECTORS APPROVE THE FOLLOWING MEMBERS OF THE 2015 NOMINATING COMMITTEE:

GRH BOARD DIRECTOR – TED BLEANEY GRH BOARD DIRECTOR – D'ARCY DELAMERE GRH BOARD DIRECTOR – DIANE FREEMAN GRH BOARD DIRECTOR – PAMELA MAKI

IN ADDITION OTHER VOTING MEMBERS WILL INCLUDE ONE MEMBER OF THE MEDICAL STAFF, DR. D. DIVARIS, WHO IS NOT A DIRECTOR OF THE CORPORATION, APPOINTED BY THE MEDICAL ADVISORY COMMITTEE (VOTING), ONE MEMBER OF A COMMUNITY HEALTH CARE AGENCY, NAME TO BE CONFIRMED, WHO IS NOT A DIRECTOR OF THE CORPORATION, APPOINTED BY THE BOARD (VOTING), ONE DIRECTOR OF THE GRAND RIVER HOSPITAL FOUNDATION, H. FRIEDMAN, WHO IS NOT A DIRECTOR OF THE CORPORATION, APPOINTED BY THE GRAND RIVER HOSPITAL FOUNDATION (VOTING), AND THE CEO (EX-OFFICIO, VOTING). CARRIED.

5.1.2 CHAIR OF THE NOMINATING COMMITTEE

MOTION:

IT WAS MOVED BY R. WELLS AND SECONDED BY B. COLLINGWOOD THAT THE GRAND RIVER HOSPITAL BOARD OF DIRECTORS APPOINT DIANE FREEMAN AS CHAIR OF THE 2015 NOMINATING COMMITTEE. CARRIED.

5.2 COMMUNITY ENGAGEMENT COMMITTEE

An overview of the February 3 meeting advised that the Community Engagement Committee was reviewing its terms of reference, particularly with a focus to defining a mandate for Community Advisory Committees.

5.3 AUDIT COMMITTEE

No report.

6.0 OTHER

6.1 Q3 OPERATING PLAN AND ERMA UPDATE

The Q3 Operating Plan and ERMA Update Report was discussed and the work associated with the medication safety plan was commended. The approach to longer term master facility planning with Cambridge Memorial and St. Mary's General Hospitals will be determined once discussions regarding Waterloo Wellington's future healthcare environment have advanced.

6.2 NATIONAL SURGICAL QUALITY IMPROVEMENT PROGRAM: GRH PILOT

Dr. B. Paun advised that GRH was selected as one of a few Ontario Hospitals to participate in the National Surgical Quality Improvement Program – Ontario (NSQIP). Discussion informed that NSQIP is an international program that measures the quality of surgical care. Results of surgeries are tracked for quality, not research, purposes. This project will enable GRH to find areas of improvement. The benefits for patients, surgeons, hospitals, and for Ontario's healthcare environment were identified.

7.0 EXECUTIVE HIGHLIGHTS

7.1 VICE PRESIDENT CLINICAL SERVICES & CHIEF NURSING EXECUTIVE REPORT

In addition to the report included in the Board package the Board discussed the potential for GRH to be reimbursed for the increase in volumes.

7.2 FOUNDATION REPORT

The Foundation report was included in the Board package.

8.0 ITEMS FOR CONSENT

8.1 BOARD MINUTES OF JANUARY 27, 2015

Public meeting minutes from January 27, 2015 were provided as an item for consent.

8.2 BOARD MANUAL UPDATES

The following Board manual policies were included as items for consent.

8.2.1 GENERAL PRINCIPLES REGARDING CONFLICT OF INTEREST POLICY

- 8.2.2 CONFLICT OF INTEREST POLICY
- 8.2.3 GUIDELINES FOR DIRECTOR SELECTION POLICY
- 8.2.4 APPLICATION FOR DIRECTOR
- 8.2.5 BOARD CONTINUING EDUCATION POLICY

MOTION: IT WAS MOVED BY T. BLEANEY AND SECONDED BY P. MAKI 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 public minutes were included in the package.

9.1.2 EXECUTIVE COMMITTEE MINUTES

Minutes from the February 4 public meeting of the Executive Committee appeared in the Board package.

9.1.3 GOVERNANCE COMMITTEE

Information items from the Governance Committee:

9.1.3.1 MINUTES

9.1.3.2 ACCREDITATION UPDATE.

9.1.4 COMMUNITY ENGAGEMENT COMMITTEE MINUTES

Public minutes from Community Engagement Committee meeting were included in the Board package.

9.1.5 RESOURCES COMMITTEE

Items for information from the Resources Committee included:

- 9.1.5.1 MINUTES
- 9.1.5.2 SCORECARD
- 9.1.5.3 FINANCIALS

9.1.5.4 MAJOR CAPITAL SUMMARY REPORT.

9.1.6 QUALITY AND PATIENT SAFETY COMMITTEE

Items for information from the Quality and Patient Safety Committee:

9.1.6.1 MINUTES

9.1.6.2 SCORECARD.

9.2 BOARD WORK PLAN

The Board work plan was included in the package.

9.3 BOARD EDUCATION OPPORTUNITIES

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

9.4 MARCH BOARD CALENDAR OF EVENTS

The March calendar of events was included in the Board package.

9.5 GRH BOARD 2014/15 MEETING SCHEDULE

The schedule of 2014/15 GRH Board meetings was included in the package.

9.6 WWLHIN HEALTH SYSTEM Q3 PERFORMANCE PROGRESS

A document detailing WWLHIN Q3 progress towards objectives outlined in their annual business plan was included in the Board package.

10.0 ADJOURNMENT

THERE BEING NO FURTHER BUSINESS, IT WAS MOVED BY G. BELLEW AND SECONDED BY T. BLEANEY THAT THE PUBLIC MEETING BE ADJOURNED. CARRIED.

The public meeting adjourned at 5:45 p.m.

Malcolm Maxwell, Secretary Tracy Elop, Chair