

**GRAND RIVER HOSPITAL
MINUTES OF A PUBLIC MEETING
OF THE BOARD OF DIRECTORS
HELD ON JANUARY 26, 2016
IN THE FREEPORT BOARDROOM**

PRESENT:

Bellew, G.
Collingwood, B.
Deganis, J.
Freeman, D.
Graham, D.
Hendrikse, P.
Hoediono, H.
Janecki, Z.

Maki, P.
Maxwell, M.
Olson, K.
Potts, P.
Sarkaria, G.
Schlegel, J.
Wakeling, H.
Wells, R.

REGRETS:

Elop, T.
Rice, K.
Urbanovic, B.

STAFF:

Bailey, T.
Cheal, B.

Higgs, G.
Julius, L.
Karjaluo, M.

GUEST:

Boadi, J.

Recording Secretary: K. Taylor

1.0 CALL TO ORDER

The meeting was called to order at 4:00 p.m. by Chair, G. Bellew.

1.1 ACCEPTANCE OF AGENDA

The agenda was accepted as circulated in the meeting package.

MOTION:

**IT WAS MOVED BY D. FREEMAN AND SECONDED BY P. MAKI THAT THE PUBLIC AGENDA FOR THE JANUARY 26, 2016 BOARD OF DIRECTORS MEETING BE ACCEPTED AS PRESENTED.
CARRIED.**

1.2 DECLARATION OF CONFLICT OF INTEREST

None.

2.0 BOARD CHAIR AND CEO REPORT

2.1 PRESIDENT AND CHIEF EXECUTIVE OFFICER

The President and Chief Executive Officer's report was included in the Board package. Additionally, a verbal update on the common clinical information system, clinical governance request for proposal, and the 2015-2016 and 2016-2017 operating budgets was provided.

Grand River Hospital (GRH) made its submission to the Hospital Information System Advisory Panel in mid-January. This Panel will review the submission and make a recommendation to the E-Health Sustainment Board. A response back to GRH is anticipated by the third week in February.

The request for proposal for the clinical governance consultation was issued in early January. It is expected that when the process is complete the summary report will comment on clinical governance alignment should the health system become more integrated in the future, provide examples of organizational approaches and models used elsewhere, and relay information from consultation with medical leaders from Cambridge Memorial Hospital (CMH), St. Mary's General Hospital (SMGH), and GRH.

An update on the current year's \$350m operating budget was provided. In response to several funding related enquiries made during the past two years to the Waterloo Wellington Local Health Integration Network (WWLHIN) and the Ministry of health and Long-Term Care (MOHLTC), it was explained that the recent \$1.9m notice of funding was in response to addressing a past enquiry. While GRH had hoped to receive \$5.8m to reconcile funding questions, notice of \$1.9m was conveyed. In anticipation of the funding challenges in 2016-2017, GRH has prepared an operating budget which responds to achievement of Hospital Sector Accountability Agreement (H-SAA) targets, maintains patient services and quality of care, though with less staff than in previous years.

2.2 BOARD CHAIR

Prior to delivering his verbal report, Board Chair, G. Bellew, thanked J. Schlegel for his services and provided him with a token acknowledging his 5 years as a Director with GRH. The Board was updated on the December 15 Class I event, on the January 19 follow-up visit between Directors and members from The Working Centre, and the January 22 celebration of the 5th year of specialized mental health at GRH. Directors were encouraged to complete the Board surveys and to indicate their availability to participate in the March 7 Board education session.

Directors were encouraged to review the document in the items for information which details the dashboard update and status of the WWLHIN's annual business plan.

3.0 QUALITY

3.1 REPORT BY THE CHAIR OF THE QUALITY AND PATIENT SAFETY COMMITTEE

A verbal update on the January 13 Quality and Patient Safety (QPS) Committee meeting was provided and highlights included a report from the complex and continuing care team, the stroke program and rehabilitation including the Physical Medicine and Rehabilitation clinic.

3.1.1 FREEPORT DESIGNATED SMOKING AREA

As of January 1, 2016 regulations under the *Smoke-Free Ontario Act* and the *Electronic Cigarette Act* ban smoking on the grounds of Ontario public hospitals unless the Governors of those hospitals designate a smoking area. Provisions within the regulations cite that any designated smoking area can be operational only to January 1, 2018. The KW campus of GRH is smoke-free and in response to a recommendation from the

Mental Health program, to meet the complex needs of patients, Directors were asked to approve a designated smoking area for patients at the Freeport campus.

MOTION:

IT WAS MOVED BY J. DEGANIS AND SECONDED BY H. WAKELING THAT THE BOARD OF DIRECTORS PROVIDE FOR THE DESIGNATED SMOKE AREA, LOCATED AT THE FREEPORT CAMPUS, UNTIL JANUARY 1, 2018. CARRIED.

4.0 RESOURCES

4.1 REPORT BY CHAIR OF THE RESOURCES COMMITTEE

A verbal report by Chair, P. Hendrikse provided an update from the January 12 Resources Committee meeting that included financial performance results compared with the budget and an overview of employee engagement survey results.

5.0 AUDIT

5.1 AUDIT COMMITTEE REPORT

On behalf of K. Rice, Chair of the Audit Committee, G. Bellew reported that during its January meeting, the Committee was advised that K. Rice had met with the external auditors to finalize their work plan. It was also reported that: GRH will pay greater attention to coding to ensure accuracy; the semi annual report from the internal auditor outlined the status of projects; and, work associated with the clinical information system (CIS) will be undertaken. Risks associated with the CIS project will be responded to by the most appropriate Vice President and reported to the appropriate Committee of the Board.

6.0 GOVERNANCE AND COMMUNITY ENGAGEMENT

6.1 REPORT BY CHAIR OF THE GOVERNANCE AND COMMUNITY ENGAGEMENT COMMITTEE

Committee Chair, H. Hoediono, noted that the Committee had not met since November and invited Directors to attend the February 2 meeting, which B. Collingwood will be chairing on his behalf. Directors were notified that if they wish to read a full copy of the report from Ontario's Auditor General on the LHIN review, it can be found on the Board intranet. As well, an update informed that during the debrief following the 2016 nominations process, the Nominating Committee will review process and examine how other Ontario hospitals accommodate recommendations for individuals suitable as new Directors.

6.1.1 QPS MEMBERSHIP

The members of the Quality and Patient Safety (QPS) Committee and Governance and Community Engagement considered a recommendation to fill a mandated vacancy on QPS. The reference to the mandated

position within the *Excellent Care for All Act* cites, “one person who works in the hospital and who is not a physician or a nurse. This individual can be either a manager or an individual who provides direct care” It was recommended, and supported by both Committees, that this position be taken on by A. Johnson, Director of Information Technology.

MOTION:

**IT WAS MOVED BY H. HOEDIONO AND SECONDED BY B. COLLINGWOOD THAT THE BOARD OF DIRECTORS APPROVE ADRIAN JOHNSON AS A MEMBER OF THE QUALITY AND PATIENT SAFETY COMMITTEE TO JUNE 28, 2016.
CARRIED.**

7.0 OTHER

7.1 Q2 BOARD SCORECARD

A copy of the Board scorecard as at December 31, 2015 was included in the package. Overall, with regards to Emergency Department metrics, there is an improving trend and at the operational level there are initiatives to address further improvement and how to sustain it.

8.0 EXECUTIVE HIGHLIGHTS

8.1 CHIEF OF STAFF REPORT

The public report from the Chief of Staff reported on plans for a September physician leadership event.

8.2 CHIEF NURSING EXECUTIVE REPORT

There were no questions on the report from the Chief Nursing Executive which appeared in the package.

8.3 FOUNDATION REPORT

In addition to the Foundation report included in the Board package, T. Bailey provided a verbal update that informed of an estate gift. Dr. Hoediono was thanked for his role in introducing the Foundation to representatives of a community group who provided toys to the Children's' Unit and intends to make gifts to GRH throughout the year. GRH staff were commended for their efforts in including the GRH Foundation in a Guelph Lake Sled Dog fundraising event.

9.0 ITEM FOR CONSENT

The item for consent included:

9.1 BOARD MINUTES OF NOVEMBER 24, 2015

MOTION:

**IT WAS MOVED BY H. HOEDIONO AND SECONDED BY H. WAKELING THAT THE ITEMS FOR CONSENT BE APPROVED.
CARRIED.**

10.0 ITEMS FOR INFORMATION

10.1 COMMITTEE ITEMS

10.1.1 MEDICAL ADVISORY COMMITTEE MINUTES

The Medical Advisory Committee minutes from the January public meeting were in the package.

10.1.2 QUALITY AND PATIENT SAFETY COMMITTEE

The items for information from the QPS Committee included:

10.1.2.1 MINUTES

10.1.2.2 SCORECARD

10.1.2.3 PUBLICLY REPORTED METRICS PERFORMANCE

10.1.3 RESOURCES COMMITTEE

Included as an item for information from the Resources Committee:

10.1.3.1 MINUTES

10.1.3.2 FINANCIALS

10.1.5 AUDIT COMMITTEE MINUTES

The minutes from the November Audit Committee meeting were included in the package.

10.1.4 GOVERNANCE AND COMMUNITY ENGAGEMENT COMMITTEE

Included in the package:

10.1.4.1 MINUTES

10.1.4.2 SUMMARY OF THE AUDITOR GENERAL REPORT

10.2 BOARD WORK PLAN

The package contained the Board of Directors work plan.

10.3 BOARD EDUCATION OPPORTUNITIES

The updated listing of Board education opportunities was included in the package.

10.4 FEBRUARY CALENDARS OF BOARD EVENTS

The calendar of Board and Board Committee events for February 2016 appeared in the Board package.

10.5 GRH BOARD 2015/16 MEETING SCHEDULE

The schedule of 2015/16 Board meetings was included in the package.

10.6 WWLHIN ANNUAL BUSINESS PLAN AND DASHBOARD UPDATE

The WWLHIN's annual business plan and dashboard update as of December 10, 2015 was included.

11.0 ADJOURNMENT

**THERE BEING NO FURTHER BUSINESS, IT WAS MOVED BY Z. JANECKI AND
SECONDED BY D. GRAHAM THAT THE PUBLIC MEETING BE ADJOURNED.
CARRIED.**

The public meeting adjourned at 5:30 p.m.

Malcolm Maxwell,
Secretary

Geoff Bellew,
Chair