Hamilton Health Sciences Board of Directors

Minutes

DATE: February 28, 2019

TIME: 4:00 to 8:00 PM

LOCATION: 100 King Street West, 23rd Floor, Conference Rooms 23-009 / 23-010, Hamilton, ON

IN ATTENDANCE: Julia Kamula (Chair), Indy Butany-DeSouza, David Collie, Charles Criminisi, Richard Koroscil, Bill Laidlaw, Dave Lazzarato, Keith Monrose, Dr. Terry Shields, Shirley Thomas-Weir, Mary Volk, Kirsten Krull, Rob MacIsaac, Dr. Paul Miller, Dr. Dereck Hunt (partial), Anna Ventresca (General Counsel), Adrianna Bogris (Recording Secretary)

GUESTS: Michele Beals, Mark Farrow, Dr. Peter Fitzgerald, Dr. Stephen Kelly, Aaron Levo, Dave McCaig, Dr. Ralph Meyer, Sharon Pierson, Sandra Ramelli, Dr. Ted Scott, Dr. Michael Stacey, Dr. Wes Stephen

EXTERNAL GUEST: Servanne Fowlds

REGRETS: Scott Maki, Kurt Whitnell, Dr. O'Byrne

1. Opening

The Chair welcomed everyone to the open portion of the Board meeting and introduced Servanne Fowlds to the meeting.

1.1 Quorum

Quorum was established.

1.2 Declarations of Conflict of Interest

There were no conflicts of interest declared.

1.3 Adoption of the Agenda

Following the meeting, the Chair requested that the ex-officio Directors remain for the Independent Directors session to review the Governance Functioning Tool survey results that were provided in the link to the Other Materials.

It was moved by Keith Monrose and seconded by Bill Laidlaw that the Board adopt the Agenda for the open portion of the meeting as distributed.

CARRIED

1.4 Approval of the Minutes from the December 6, 2018 Meeting

It was moved by Indy Butany-DeSouza and seconded by Dave Lazzarato that the minutes from the December 6, 2018 meeting be approved as distributed.

CARRIED

2. Education Session

2.1 MAID Update – Presentation

Dr. Paul Miller and Dr. Andrea Frolic presented the Medical Assistance In Dying (MAID) Update to the Board. It was noted that the Board received a presentation on MAID three years ago. Dr. Frolic acknowledged the Board for their courage in supporting the Assistance in Dying program, noting that their courage has inspired courage to the staff and physicians involved in the program. Dr. Miller provided a recap of the regulations passed noting Bill C14 was passed and has not been changed since it was assented to on June 17, 2016. There was some discussion about the aspects left out of that bill.

Dr. Miller recognized Dr. Frolic for her expertise in developing a methodological process, which is used in the MAID program. He provided data on the volumes of death both provincially and locally noting that 2,655 cases were recorded in Ontario to date. An overview of the MAID program at HHS was provided noting that the MAID program is available at all adult acute sites, with the exception of MUMC. The program was designed around the strategy of HHS and the elements of the program were reflected upon noting that the care offered within the program could be expanded to other programs including care received in the ER, ICU and palliative care.

Dr. Frolic noted that in 2017, HHS won a \$60,000 palliative care grant to develop the program. The grant provided for the creation of focus groups and interviews with senior leaders to identify gaps and create a sustainable and integrative program. Since then, there has been an uptake in program referrals. Dr. Seeley was recognized for his support in co-housing the MAID program. It was noted that the team supporting the MAID program has seen zero turnover since its inception; staff in the program feel nourished.

The Board's role in supporting the program was recognized as courageous governance in helping the program move forward. Kirsten Krull, Dr. McLean and Dr. Miller were acknowledged for their support and encouragement. The Board thanked Dr. Frolic and Dr. Miller for their courage and leadership regarding the MAID program.

A fulsome discussion ensued on the MAID program and transferring the successes from the program to other clinical areas in the organization.

Dr. Andrea Frolic departs the meeting following the presentation.

3. Strategy

3.1 Strategy View – Presentation

Rob MacIsaac presented an update on the Strategy View noting that progress is being made on aligning the Strategy with operational excellence across all areas of the organization. Focus continues on CQI training, as well as creating and refining the visual management system, which includes the three executive views. Rob advised that Management is working on a multi-year road map toward achieving Operational Excellence. A multi-year view highlighting Systemness and capitalizing synergies at all sites will be brought to the Board in due course.

Dr. Hunt joins the meeting.

He noted that under the Dyad model, the first two care counsels are scheduled to roll out this spring. An inventory of committees has been identified (approximately 70 committees) with Director level and up being reviewed in order to determine if there are any opportunities for consolidation. The committee structures will be reviewed and assessed in order to create capacity thereby eliminating overlap and redundancy. There was discussion on the process for committees? It was noted that there are approximately 53 Directors attending at multiple committee meetings.

Rob advised that the organization is focusing on the Unified Data Architecture as its current approach to managing big data considering different sources of data and data modeling all part of the Digital Health Plan. It was noted that different vendors responded.

Rob provided an overview of the underperforming corporate strategy or 'north star' metrics and discussion ensued on work being done to address such metrics.

3.2 Operations View – Presentation

Dr. Wes Stephen presented the Operations View to the Board. He noted that the ALC rate was on target at 13 percent. Challenges were highlighted including outbreaks and surgical cancellations given the recent capacity pressures. Teams are coming up with innovative ways to maintain quality. He advised that the Executive Visual Management view continues to evolve. Selection of indicators and targets continue to be refined. The Operations view was recently vetted at ELT and the team continues to recognize current performance, month over month and year over year. There was discussion on the work being done to address the underperforming metrics.

There was discussion on funded beds versus unfunded bed. It was noted that an unfunded bed is a bed that is staffed but the bed is not covered in the budget. Discussion ensued.

3.3 Enterprise Project View – Presentation

Dr. Wes Stephen presented the Enterprise Project View to the Board highlighting projects currently in progress. He noted the tracking features of the Enterprise Project View including indicators to get a sense of bandwidth and project status. Key project were highlighted including Capital Renewal, Unified Data Architecture, the Digital Health Plan and the CQI program.

4. CEO Report

Rob MacIsaac provided highlights from his CEO Report noting that he attended the Toronto Board of Trade annual dinner. Rob participated in a podcast interview with HIROC. He noted that Code Red has been re-visited and that he participated in an interview with Steve Buist, a reporter at the Hamilton Spectator; the story will be published on March 1st.

Rob noted that he and the Chair attended the Medical Staff Association to hand out service pins to recognize physicians for their dedication to the organization.

Rob continues to have ongoing dialogue with physicians together with Dr. Stacey and Dr. Stephen.

Rob congratulated Pearl Veenema on the Foundation's sold out Annual Gala held at Liuna Station on March 2, 2019.

COMMITTEE REPORTS

5. Quality Committee Meetings – January 29, 2019 and February 11, 2019

Mary Volk provided an overview of the January 29, 2019 and February 11, 2019 Quality Committee meetings.

5.1 ED Return Visits Quality Program – 2019 01 QC-001

Mary provided an overview of the ED Return Visits Quality Program.

The following motion was moved by Mary Volk and seconded by Shirley Thomas-Weir:

THAT the Board of Directors receives for information the Emergency Department (ED) Return Visit 2018 Annual Audit as set out in Report 2019 01 QC-001.

CARRIED

5.2 2019/20 Quality Improvement Plan – 2019 02 QC-003

An overview of the 2019/20 Quality Improvement Plan (QIP) was provided to the Committee. Mary noted that the indicators will be brought to the Quality Committee in March where a mandatory target overview will take place prior to bringing a final recommendation to the Board.

The following motion was moved by Mary Volk and seconded by Terry Shields:

THAT the Board of Directors approves the proposed indicators for the 2019/20 Quality Improvement Plan (QIP) as outlined in Report 2019 02 QC-003;

AND THAT management brings to the March 2019 Quality Committee meeting the proposed indicator targets and final Quality Improvement Plan for approval.

CARRIED

5.3 Annual Review Credentials Process – 2019 02 QC-009

Mary advised that Dr. Miller presented the Annual Review Credentials Process to the Committee.

The following motion was moved by Mary Volk and seconded by Dave Lazzarato:

THAT the Board of Directors receives for information the annual professional staff credentialing process and activities update for the 2018/19 period as set out in Report 2019 02 QC-009.

CARRIED

6. Research & Innovation Committee Meeting – February 11, 2019

Richard Koroscil presented the item arising from the February 11, 2019 Research & Innovation Committee meeting.

6.1 Introduction to the Learner Programs at HHS – 2019 02 RIC-002

Richard advised that the Committee received an overview of the Introduction to the Learner Programs at HHS. He thanked Kirsten Krull for providing an informative Report to the Committee.

The following motion was moved by Richard Koroscil and seconded by Dave Lazzarato:

THAT the Board of Directors receives for information an introductory overview of academic learner programs at HHS as set out in Report 2019 02 RIC-002.

CARRIED

7. Resource Committee Meeting – February 12, 2019

7.1 FY 18/19 Operating Results, Q3 – 2019 02 RC-001

Dave Lazzarato provided an overview of the 2018/19 Operating Results for Q3 noting that HHS is essentially on plan. A \$2-4 million shortfall is currently projected, which equates to less than 0.5 percent of the budget.

The following motion was moved by Dave Lazzarato and seconded by Keith Monrose:

THAT the Board of Directors receives for information the third quarter financial report, for the period ended December 30th, 2018 as set out in Report 2019 02 RC-001.

CARRIED

7.2 FY 19/20 M-SAA – 2019 02 RC-002

Dave Lazzarato advised that the Committee received an overview of the 2019/20 Multi-Sector Service Accountability Agreement.

The following motion was moved by Dave Lazzarato and seconded by Bill Laidlaw:

THAT the Board of Directors receives the CAPS (Community Accountability Planning Submission) update which will form the foundation of the Multi-Sector Service Accountability Agreement (M-SAA) 2019/20.

AND THAT the Board authorizes the CFO and CEO to negotiate and execute the M-SAA based on the assumptions and directions set forth in this report, 2019 02 RC-002.

CARRIED

8. Governance Committee Meeting – February 14, 2019

David Collie reported on the items brought to the Governance Committee meeting held on February 14, 2019.

8.1 Chair of MAC Evaluation / Appointment Process – 2019 02 GC-004

David recognized Dr. Miller for serving six years in the role of the Chair of the MAC. Dr. Miller is scheduled to present his insights on the role at the May Board meeting.

The following motion was moved by David Collie and seconded by Richard Koroscil:

THAT the Board of Directors receives for information the Medical Advisory Committee (MAC) Chair Evaluation and Appointment Process as set out in Report 2019 02 GC-004.

AND THAT a Search Committee be struck for the purposes of recommending a Chair of the MAC for the term commencing July 1st, 2019 with the Terms of Reference for such Committee as set out in Appendix A of this Report;

AND THAT Julia Kamula, Board Chair, be appointed as Chair of the Search Committee.

AND THAT the following additional persons be appointed to the Search Committee:

- David Collie, Board Member
- Charles Criminisi, Board Member
- Rob MacIsaac, President & CEO
- Dr Michael Stacey, EVP & Chief Medical Executive

- Dr. Dereck Hunt, President, Medical Staff Association
- Dr. Barry Lumb, Physician-In-Chief
- Dr. Dick Seeley, Chief of Staff, Chief of Complex Continuing Care and Aging
- Dr. Bill Orovan, McMaster University
- Kirsten Krull, Vice President, Quality and Performance & Chief Nursing Executive

CARRIED

- 9. Medical Advisory Committee Meetings
 - 9.1 MAC Board Report December 12, 2018
 - 9.2 MAC Board Report January 8, 2019
 - 9.3 MAC Board Report February 13, 2019

Dr. Miller noted that the three MAC Board Reports were included in the package for the Board's review. He highlighted that the MAC recently received an overview of the Trillium Gift of Life program.

The MAC received for approval, refined processes and policies.

Changes to the Credentialing process were highlighted. It was noted that several unsigned records were discovered several months ago and work is being done to close the gaps.

The following motion was moved by Terry Shields and seconded by Indy Butany-DeSouza:

THAT the Board of Directors receives for information the December 12, 2018, January 8, 2019 and February 13, 2019 MAC Board Reports.

CARRIED

- **10.** Foundation Report to the Board
- 11. WLMH CAC Report to the Board
- 12. The Inner Circle Newsletter Fall 2018 HHSVA

Rob MacIsaac advised that the Foundation Report, the WLMH CAC Report and the HHSVA Inner Circle Newsletter were provided in the package for the Board's information.

The following motion was moved by Dave Lazzarato and seconded by Richard Koroscil:

THAT the Board of Directors receives for information the Foundation Report, the WLMH CAC Report and the HHSVA Inner Circle Newsletter.

CARRIED

The Chair recognized and congratulated Rob MacIsaac for his five years of service at HHS. She acknowledged Rob for his stellar leadership in leading the organization toward transformational change.

13. Adjournment

It was moved by Richard Koroscil and seconded by Bill Laidlaw that the meeting be adjourned.

The meeting adjourned at 7:50 pm.

14. Independent Directors Session and CEO

Following the adjournment, the Independent Directors met with the CEO.

15. Independent Directors Session

Following the Independent Directors Session and CEO, the Independent Directors met.

Julia Kamula Chair Anna Ventresca Corporate Secretary