

**Hamilton Health Sciences
Board of Directors**

Minutes

DATE: October 1, 2015

TIME: 4:00 to 7:00 PM

LOCATION: Room 2E51, McMaster University Medical Centre

IN ATTENDANCE: Norm Col (Chair), Rob MacIsaac, Julia Kamula (Vice Chair), Bruce Barch (*by phone*), Chantel Broten, Glenn Gibson, Richard Koroscil, Kirsten Krull, Mary Catherine Lindberg, Scott Maki, Dr. Paul Miller, Dr. Chris Ricci, Dr. Terry Shields, Anna Ventresca, Mary Volk, Kurt Whitnell, Fran Agnew (Recording Secretary)

REGRETS: Charles Criminisi, Dr. John Kelton, Mark Rizzo

GUESTS: Adrianna Bogris, Kelly Campbell, Renato Discenza, Andrew Doppler, Mark Farrow, Peter Fitzgerald, Aaron Levo, Dave McCaig, Dick McLean, Frank Naus, Sharon Pierson, Teresa Smith, Pearl Veenema

1. Education Session: Physician Credential Process

Dr. Paul Miller presented the physician credential process providing an overview of the new and re-appointments process for medical staff. Dr. Miller advised that a business case is being prepared relating to e-credentials and would be rolled out to all locations of HHS.

2. Opening

Anna Ventresca was introduced and welcomed to her first board meeting as a director and Bruce Barch joined the meeting by phone. Adrianna Bogris, a new member of the General Counsel's Office, who will assist in supporting the Board of Directors, was introduced and welcomed to her first board meeting. Adrianna starts her new position on Tuesday, October 13, 2015.

3. 3.1 Quorum

The recording secretary advised that quorum was present

3.2 Declarations of Conflict of Interest

No conflicts of interest were declared

3.3 Adoption of the Agenda

It was moved by Julia Kamula and seconded by Scott Maki that the agenda be adopted as distributed.

CARRIED

4. 4.1 Approval of the Minutes of June 25, 2015

It was moved by Richard Koroscil and seconded by Mary Volk that the minutes of the June 25, 2015 meeting be approved as circulated.

CARRIED

5. 5.1 Consent Agenda

It was moved by Terry Shields and seconded by Anna Ventresca that the Credentials Report for the Month of September be approved as circulated.

CARRIED

Committee Reports

6. 6.1 Performance Monitoring Committee – September 8, 2015

Chantel Broten presented the Performance Monitoring Committee (PMC) report to the Board advising that the following four consent agenda items are presented for the Board's approval:

6.1 Consent Items

- i. Performance Monitoring Dashboard Q1
- ii. HITS FY 2015/16 Q1 Report
- iii. Performance Monitoring 2015/16 Work Plan
- iv. Performance Committee Terms of Reference

It was moved by Norm Col and seconded by Richard Koroscil that the items on the PMC consent agenda be adopted as distributed.

CARRIED

6.1 Decision Items

Chantel Broten outlined the three items which the PMC is seeking Board approval.

v) Strategic Plan Objectives Q1 Report

The PMC recommended an amendment to the structure of the Strategic Plan. In consideration of the work that is being carried out regarding Our Healthy Future and that the future of the Urgent Care Centre (UCC) is a significant element of clinical services, it is recommended to include the UCC initiative as part of the Clinical Visioning initiative.

The following motion was moved by C. Broten and seconded by Terry Shields:

THAT the Board of Directors receives for information the Strategic Objectives Update for Q1);

AND THAT the Board of Directors approves merging the initiative, Sustainable Business Model for the Urgent Care Centre, to be included as part of the Clinical Services Visioning initiative.

CARRIED

vi) Our Healthy Future – Stakeholder Engagement and Clinical Visioning Update

C. Broten informed the Board that the PMC has received a comprehensive update from staff on the progress and learnings of Our Healthy Future and requested that the Board have a similar opportunity to hear the presentation. She called on Kelly Campbell to provide an introduction to the presentation, which was circulated in the Board package.

K. Campbell introduced the leads of the Patient Centre Working Groups and provided a brief outline of the circulated materials.

Aaron Levo handed out the booklet, *Community Conversations – Progress Report*, advising that it has been distributed to those individuals who participated in the public consultations, our participating partners and the general public.

C. Broten moved the following resolution, which was seconded by Anna Ventresca, highlighting that the staff recommendation was *amended* to include a request that this initiative be included as a topic at the October 30, 2015 Board retreat.

THAT the Performance Monitoring Committee receives for information an update on the stakeholder engagement and clinical visions for the Our Healthy Future initiative;

AND THAT staff be directed to provide a fulsome update to the Board of Directors at the October 1 Board meeting;

AND THAT Our Healthy Future be considered by the Board of Directors as a topic for the October 30, 2015 Board Retreat;

AND THAT staff be directed to provide a follow-up report at the November Performance Monitoring Committee meeting.

The Board discussion centred on opportunities to identify HHS' strength and weaknesses and the ability to bench mark the findings to date. K. Campbell and the Working Group leads confirmed the iterative process included consideration of what is currently being done well, how technology might change, and what the gaps and solutions could be over the long term. K. Campbell indicated the

themes are consistent with national and international organizations. However, at this stage of reviewing the outcomes of recommendations, bench marking is not possible.

CARRIED

vii Supplementary Report: Our Healthy Future.

It was moved by C. Broten and seconded by Julia Kamula that the following motion be approved:

THAT the Board of Directors receives for information an update on stakeholder engagement and clinical visioning for the Our Healthy Future initiative;

AND THAT staff be directed to bring back a follow up report in February 2016.

Moved by Norm Col and seconded by Julia Kamula that the Supplementary Report: Our Healthy Future be adopted as distributed.

CARRIED

viii HITS Strategic Directions

C. Broten reported that the committee had received an extensive report on staff's preliminary thinking on the strategic directions for technology services at HHS, including a common IT platform that could stretch across LHIN. The PMC requested the Board's support for staff to work with St. Joseph's Hospital in the development of a common technology platform between HHS and St. Joe's.

The report outlined a first step toward establishing a governance process that will set the foundation for the strategic directions and responds to an urgent requirement on behalf of St. Joe's.

The following motion was moved by C. Broten and seconded by Terry Shields:

THAT the Board of Directors receives for information the Health Information Technology Services (HITS) Strategic Directions Presentation;

AND THAT HHS management staff be directed to seek to establish a common Health Information System (HIS) platform with St. Joseph's Healthcare Hamilton and the HNHB LHIN consistent with the strategic directions presented in Appendix A;

AND THAT staff be directed to develop a governance structure with St. Joseph's Healthcare Hamilton and the HNHB LHIN that would allow for effective and collaborative decision-making in the creation of a common HIS platform;

AND THAT staff be directed to engage with St. Joseph's Healthcare Hamilton, on a nonbinding basis to engage in a Request For Proposal or similar process, as appropriate to comply with the Broader Public Sector Accountability Act (BPSAA), to scope and assess the requirements to achieve a common HIS platform;

AND THAT staff be directed to report back on proposed commitments, including a roadmap.

The subsequent discussion included opportunities for revenue generation if HHS was to take a lead in developing the system. Staff emphasized that although the proposed collaboration provides opportunities for cost and revenue sharing amongst the partners and scalability prospects, it would not be well received by the partners and the LHIN, if HHS was benefitting beyond that.

CARRIED

ix) HITS Dashboard

C. Broten presented the final decision item from the PMC as a request to approve a new format for the quarterly update on IT projects.

It was moved by C. Broten and seconded by Glenn Gibson to approve the following motion

THAT the Board of Directors approves a quarterly Health Information Technology Services project dashboard report.

CARRIED

6.2 Finance Committee – September 10, 2015

Scott Maki presented the Finance Committee report to the Board including an update on enterprise risk management progress and advised that the Finance Committee is engaged in discussions with PwC. He confirmed that the Management Team and PwC are discussing a broader framework and that the draft risk policy is progressing well. He noted that the next steps would be to bring the draft risk policy before the Audit Committee meeting scheduled in November.

6.2 Consent Items

S. Maki commented that the Committee had an extensive agenda with good carry-over from last year and continued improvement in the nature and quality of reports. He also advised that the following nine consent agenda items are presented to the Board for approval, noting that the Committee's Terms of Reference reflect an update and the workplan has been designed to be more strategic.

- i. Q1 Quarterly Operating Report
- ii. Indebtedness Update
- iii. Finance Committee Terms of Reference
- iv. Finance Committee 2015-16 Work Plan
- v. Procurement Review
- vi. Banking Services
- vii. Investment Policy Review

- viii. Investment and Compliance Reports
- ix. Trust Account Update

It was moved by Scott Maki and seconded by Julia Kamula that the items on the Finance Committee consent agenda be adopted as distributed.

CARRIED

6.2. C Decision Items

x) Contract – Equipment Replacement for Heart Investigation Unit

Scott Maki advised that the Finance Committee is seeking the Board's approval to purchase and install equipment for the Cardiac Catheterization Lab. He noted that this equipment was included in the 2015-16 Capital/Cash flow plan, pending Board approval and confirmed that an additional three unit will be acquired.

The following motion was moved by Scott Maki and seconded by Richard Koroscil:

THAT the Board of Directors approves Hamilton Health Sciences to enter into a contract with Phillips Healthcare for the purchase and installation of capital equipment for the Cardiac Catheterization Lab Suites #1-4 in the Heart Investigation Unit, Hamilton General Hospital, at a total estimated value of \$5.8M.

CARRIED

xi) Authority Schedule Review and Supplementary Report: Approval Authority Schedule Review

Scott Maki provided an update on the Finance Committee discussions on the Approval Authority Schedule, highlighting the Committee's request to staff for broader context in the overall control environment and other internal controls over and above the approval limits.

The following motion was moved by S. Maki and seconded by T. Shields:

THAT the Board of Directors approves the revisions to the Approval Authority Schedule (AAS) as highlighted in Appendix A.

THAT the Board receives for information this briefing note in support of the Finance Committee's recommendation for approval of revisions to the Approval Authority Schedule.

CARRIED

6.3 Quality Committee – September 17, 2015

Richard Koroscil presented the Quality Committee report to the Board including the Committee's educational session on the challenges of preventing falls in a complex hospital system. He also advised that Board members will be invited to participate in the Patient Safety Leadership Walkarounds and that a Board information sheet will be provided for those interested in participating.

6.3 Consent Items

R. Koroscil advised that the following seven consent agenda items are presented to the Board for approval:

- i. Education Session – Falls
- ii. QIP Q1 Update
- iii. Response to Legal Claims and Critical Incident Inquiry
- iv. Patient Safety Leadership Walkarounds – Board Information Sheet
- v. Patient Safety Leadership Walkarounds Annual Report
- vi. Quality Committee Terms of Reference
- vii. Quality Committee 2015-16 Work Plan

It was moved by R. Koroscil and seconded by C. Broten that the items on the Quality Committee consent agenda be adopted as distributed.

CARRIED

6.3 C Decision Items

vii) Review of Quality Indicators for Q1 2015

R. Koroscil advised that the Quality Committee is seeking the Board's approval on the annual update of the Quality Indicators Quarterly Dashboard. He outlined that there are four metrics to be retired, three to be replaced and revisions to nine targets.

The following motion was moved by R. Koroscil and seconded by Kurt Whitnell:

THAT the Board of Directors approves the changes to the Quality Indicators Quarterly Dashboard as outlined in Appendix C: Target Setting Overview;

AND THAT the Board receive for information the Q1 Quarterly Indicators at a Glance Scorecard.

CARRIED

6.4 Report of the Medical Advisory Committee (MAC) – September 9, 2015

The report outlines the discussion at the September 9th meeting of the MAC. The following four items were approved by the Committee:

- i. The June and August Common Credentials Reports
- ii. The appointments of Dr. Smieja to the Discipline Director of Microbiology of the Regional Lab Medicine Program
- iii. The appointment of Dr. Azzam as Acting Site Chief of Medicine at the HGH
- iv. MAC consent agenda items

It was moved by Paul Miller and seconded by A. Ventresca that the MAC report be accepted as distributed.

CARRIED

7.1 Chief Executive Officer's Report

Rob MacIsaac presented the report of the President and CEO. Highlights included:

- An update of the metric results for seven of the strategic objectives which represent the beginning of a visual management system that will provide line of site from the front line to the Board of Directors. He emphasized although management is positive about the roll-out of this process, it is still a work in progress. At this point, not all data is available at the speed and regularity originally anticipated.
- An update on the Accreditation process for 2015.
- Visits to HHS by both Health Minister Hoskins and Deputy Minister Bell.
- Successful HHSRI retreat
- CBC profiled HHS in a three part documentary titled *Keeping Canada Alive* which is currently airing
- HHS recognition from Cancer Care Ontario
- HHS awarded a gold Green Hospital Scorecard medal from OHA. The medal will be presented at the HealthAchieve conference in November.
- The grand opening of the Ron Joyce Children's Health Centre has been scheduled for November 17.

7.2 HHS Foundation Update

R. MacIsaac highlighted the update on the HHS Foundation advising of its new strategic plan which is aligned with HHS. He noted the upcoming donor event taking place at the new Ron Joyce Children's Health Centre on November 1st. He also congratulated Julia Kamula on her appointment to the Board of HHS Foundation.

8. Matters for Consideration and Generative Discussion

8.1 HHS in Five Years

R. MacIsaac reviewed the process for the development of the HHS strategic plan, highlighting the eight indicators for achievement. The Board considered and discussed the major forces disrupting healthcare delivery.

1. Aging Society
2. Rise of complex chronic disease
3. Impact of Big Data
4. Advances of Technology
5. Patient Expectations

A discussion on broad collaborative partnerships was perceived as an enabler moving forward in dealing with these challenges.

9. In Camera Session

It was moved by Glenn Gibson and seconded by Richard Koroscil that the meeting move in camera.

CARRIED

10. Other Business

There was no other business.

11. **Adjournment** – The meeting adjourned at 7:00 pm.

Norm Col
Chair

Scott Maki
Secretary / Treasurer