

**Hamilton Health Sciences  
Board of Directors**

**Minutes**

**DATE:** February 25, 2016

**TIME:** 4:00 to 8:00 PM

**LOCATION:** Boardroom 2E51 – McMaster University Medical Centre, 1200 Main Street West, Hamilton, Ontario

**IN ATTENDANCE:** Norm Col (Chair), Rob MacIsaac, Chantel Broten (*departed prior to item 9*), Charles Criminisi (*departed prior to item 6.2.2*), Glenn Gibson, Julia Kamula, Richard Koroscil, Kirsten Krull, Mary Catherine Lindberg, Scott Maki, Dr. Paul Miller, Dr. Chris Ricci, Dr. Terry Shields, Anna Ventresca, Mary Volk, Kurt Whitnell, Adrianna Bogris (Recording Secretary)

**REGRETS:** Bruce Barch, Dr. John Kelton, Mark Rizzo

**GUESTS:** Fran Agnew, Michele Beals, Kelly Campbell, Roger Campbell, Tim Dietrich (*partial*), Renato Discenza, Andrew Doppler, Mark Farrow, Dr. Peter Fitzgerald, Brenda Flaherty, Aaron Levo, Dave McCaig, Dr. Ralph Meyer, Sharon Pierson, Rebecca Repa, Deborah Redwood, Pearl Veenema

**OPEN PORTION ONLY:** Areeba Amer, Daniel Mount, Sarah Saliba, Tanishq Suryavanshi, Thilini Delungahawatta, Dave Nidumolu – (Students)

**1. Opening**

The Chair welcomed six students from the fourth year McMaster Health Forum Practicum class to attend the open portion of the Board meeting.

**1.1 Quorum**

The Chair advised that quorum was present.

**1.2 Declarations of Conflict of Interest**

No conflicts of interest were declared

**1.3 Adoption of the Agenda**

Norm Col stated that agenda item 9.3 MAC Report No. 2016 02 MAC 002, which was the MAC Board Report for February 10, 2016 should be moved to the in-camera portion of the meeting as item 4.2. He also noted that Rob MacIsaac has requested time during the in-camera portion to update the Board on two items.

It was moved by Kurt Whitnell and seconded by Terry Shields that the agenda be adopted as amended.

**CARRIED**

2. **Minutes**

2.1 Approval of the Minutes of November 26, 2015

The minutes were approved for the November 26, 2015 Board meeting.

It was moved by Glenn Gibson and seconded by Mary Volk that the minutes of the November 26, 2015 meeting be approved as circulated.

**CARRIED**

3. **Patients First Report**

Donna Cripps, CEO of the HNH B LHIN, was welcomed to the meeting by the Chair.

Ms. Cripps made a high-level overview presentation and invited questions from Board members as to the Ministry's "Patients First Report: A Proposal to Strengthen Patient-Centred Health Care in Ontario", which had been released on December 17, 2015.

Ms. Cripps outlined the four components of the Ministry's proposal for health system transformation: Enhanced LHIN Accountability, Primary Care, Home & Community Care, and Population & Public Health Planning.

In response to questions, Ms. Cripps advised that LHINs will be accountable for all health service planning and performance and linkages between LHINs and public health units would be formalized, thereby creating a streamlined approach based on data that is timely, accurate and relevant.

Discussions centred on LHIN responsibilities versus LHIN accountabilities, level of engagement between LHINs and Health Care partners and sub region reporting accountabilities.

Ms. Cripps noted that the Ministry is requesting the feedback on Patients First by February 29, 2016.

Renato Discenza enters the meeting.

The Chair thanked Ms. Cripps for coming to the meeting and for her presentation.

*Following her presentation Donna Cripps departed the meeting.*

The Chair advised that time had been set aside later under Item 13 for the Board members to discuss the Patients First report and asked for a motion to receive the Report dealing with the HHS Response to the Ministry.

The following motion was moved by Terry Shields and seconded by Glenn Gibson:

**THAT the Board of Directors receives for information Report 2106 02 BD 001  
Patients First Report – Response to the Ministry**

**CARRIED**

### **Committee Reports**

#### 4. Compensation Committee – January 12, 2016

Norm Col presented the Compensation Committee report to the Board outlining the following two decision items being presented for Board approval:

##### 4.1 Decision Items

##### 4.1.1 Review Terms of Reference

Norm advised that the Compensation Committee's Terms of Reference were reviewed at its January 12, 2016 meeting and advised that at this time there are no recommended changes to the Committee's Terms of Reference (which were included as Appendix A to the Review of Terms of Reference report submitted to the Compensation Committee).

The following motion was moved by Anna Ventresca and seconded by Julia Kamula:

**THAT the Board of Directors approves the Compensation Committee Terms of Reference as attached in Appendix A.**

**CARRIED**

##### 4.1.2 Approval of Work Plan

Norm advised that the Committee has approved a Work Plan for recommendation to the Board. He explained that the Compensation Committee will be adding an additional meeting this March to initially review the 2016/17 CEO's goals which are to be finalized at the April 2016 meeting (which amendment is reflected in the Committee's amended recommendation) and that an Executive Committee meeting has been scheduled to proceed with the formal evaluation process of the Chair, Medical Advisory Committee.

The following *amended* motion was moved by Anna Ventresca and seconded by Mary Volk:

**THAT the Board of Directors approves the Compensation Committee 2016 Work Plan attached as Appendix A;**

*AND THAT an additional Compensation Committee meeting be scheduled in March to review the 2016/17 CEO's goals for finalizing at the April 2016 meeting;*

*AND THAT an Executive Committee meeting be scheduled in April to deal with the formal evaluation process of the Chair, Medical Advisory Committee.*

**CARRIED**

5 Quality Committee – January 21, 2016

5.1 Quality Committee Minutes – January 21, 2016

Richard Koroscil presented the Quality Committee report advising the Board that the Quality Committee had a full agenda at its last meeting.

5.2 Consent Items

Richard noted that the following eight consent agenda items are being presented for the Board's approval:

- 5.2.1 Education Session - Hospital Standardized Mortality Ratio
- 5.2.2 Quality Monitor – FY 15/16 Q2
- 5.2.3 Quality Improvement Plan Update Q2 2015/16
- 5.2.4 Annual Review – Credentials Process
- 5.2.5 Critical Incident Reports
- 5.2.6 Critical Incident Aggregate Q1 & 2
- 5.2.7 Hospital Harm Indicator (Verbal Update)
- 5.2.8 CQI Article – Dr. John Toussaint (Carried over from November 2015 meeting)

**It was moved by Richard Koroscil and seconded by Julia Kamula that the items on the Quality Committee consent agenda be adopted as distributed.**

**CARRIED**

5.3 Decision Items

Richard Koroscil outlined the two decision items being presented for Board approval.

5.3.1 2016/17 Quality Improvement Planning Update

Richard advised that the first item provides the Board with the proposed indicators of focus and targets for the 2016-17 Quality Improvement Plan (QIP). He noted that the final QIP will be presented to the Board at its March meeting and that the report outlines the seven core indicators for next year's QIP, including baseline performance and proposed targets.

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

**THAT the Board of Directors approves the proposed indicators and targets for the 2016-17 Quality Improvement Plan (QIP) as outlined in this report.**

**AND THAT staff be directed to provide the final Quality Improvement Plan, including an action plan, for approval at the March Board of Directors meeting.**

**CARRIED**

### 5.3.2 HHS Acute ALC Reduction Plan - Presentation

Richard Koroscil invited Sharon Pierson and Tim Dietrich to provide a presentation to the Board on the HHS Acute ALC Reduction Plan Report.

The Report responds to the Board's direction that a plan be developed that would lead to a 50% reduction in ALC rates at the General and Juravinski sites.

As the Report describes, ALC is a complex problem. It is one of the greatest challenges for Ontario's health system and is one of the top priorities for the Ministry, the LHIN and HHS. Existing initiatives to reduce the ALC rate at HHS have driven a 25.6% decrease in the acute ALC rates at HHS since 2009. A target to reduce the rate by another 50% is aggressive and challenging and will require an investment of human and financial resources. The costing and business case for this investment remain to be completed.

The Report presents 46 recommendations. Additional analysis and planning will be required to develop a detailed operational plan based on these recommendations, which will include an estimate of the one-time and ongoing annual costs to support the targeted reduction in the ALC rate. While not all recommendations will require new funding, there will be financial implications for many. As such, operational plans for the recommendations must be incorporated into the 2016/17 budget planning and decision making process.

Discussions centred on whether the Ministry's Patients First proposal for transformation will present opportunities for reduction of ALC rates via alignment with CCAC and allocation of resources to reducing ALC rates.

Richard thanked Brenda Flaherty, Sharon Pierson and the entire ALC Team for providing a comprehensive and informative report.

The following motion was moved by Richard Koroscil and seconded by Charles Criminisi:

**THAT the Board of Directors receives the report titled Hamilton Health Sciences Acute ALC Reduction Plan 2015;**

**AND THAT the Board of Directors directs management to conduct a business case analysis of the strategies contained in this report together with an operational plan;**

**AND THAT staff report back to the Board with proposed targets for F16/17 and F17/18 at the March Board meeting.**

**CARRIED**

*Following the ALC presentation, Tim Dietrich departed the meeting.*

6 Performance Monitoring Committee – February 9, 2016

Performance Monitoring Committee Minutes – February 9, 2016

On behalf of Chantel Broten, Norm Col (who had acted as Chair at the February 9, 2016 meeting of the Performance Monitoring Committee) presented the Performance Monitoring Committee (PMC) report to the Board, advising that the following six consent agenda items are presented for the Board's approval:

6.1 Consent Items

- 6.1.1 Q3 Corporate Dashboard Review
- 6.1.2 Our Healthy Future – Q3 Stakeholder Relations Update
- 6.1.3 Health Information Technology Services Strategic Direction
- 6.1.4 Physician Engagement Update
- 6.1.5 Strategic Plan Objectives Q3 Report
- 6.1.6 HITS Dashboard

**It was moved by Terry Shields and seconded by Richard Koroscil that the items on the Performance Monitoring Committee consent agenda be adopted as distributed.**

**CARRIED**

6.2 Decision Items

Norm Col outlined the two decision items being presented for Board approval, noting the importance of both reports in the Our Healthy Future initiative.

6.2.1 Our Healthy Future – Clinical Vision Statement - Presentation

The Clinical Vision Statement and the KPMG Clinical Vision Report represent the first draft of the Master Program which will be submitted to the LHIN and the Ministry in June 2016. Norm invited Kelly Campbell and Aaron Levo to provide an update on the Our Healthy Future initiative and community engagement.

Aaron and Kelly provided an overview of the work completed to date on Our Healthy Future, the emerging vision for WLMH, stakeholder engagement and timelines relating to delivery of the final Master Program. Aaron advised that it is intended that the next version of the Master Program will be brought to the Board at its March meeting.

The Board discussion focused on timelines relating to work on the Our Healthy Future Initiative and the coordination of Board participation. The consensus of the Board members was that the April Board retreat would provide a forum for the Board to discuss the Master Program. A review of the final report will be brought to the Board through the Performance Monitoring Committee at its May meeting. In response to a question raised regarding delivery timing of the Master Program to the LHIN, it was noted that the LHIN does not meet over the summer months and therefore the Master Program would be set for submission to the LHIN and the Ministry in the fall of 2016.

The following motion was moved by Anna Ventresca and seconded by Julia Kamula:

**THAT the Board of Directors accepts for information the Clinical Vision Statement (Appendix A) and the KPMG Clinical Vision Report (Appendix B) as the first draft of the Master Program;**

**AND THAT these documents be used for further consultation and refinement leading to a final Master Program.**

**CARRIED**

*Charles Criminisi departed the meeting.*

#### 6.2.2 Our Healthy Future – Emerging Clinical Services for WLMH

This report is intended to provide Board members with current thinking on the clinical services to be provided in West Niagara in preparation for submission on the HHS Master Program.

Norm Col recognized the important contributions made by Kurt Whitnell and Mary Volk in engaging community stakeholders.

The following motion was moved by Mary Volk and seconded by Chantel Broten:

**THAT the Board of Directors receives for information the report entitled Emerging Clinical Services Directions for West Lincoln Memorial Hospital;**

**AND THAT the Emerging Clinical Services Directions for West Lincoln Memorial Hospital be used for further consultation and refinement leading to a final Master Program**

**CARRIED**

#### 7 Finance Committee – February 11, 2016

Finance Committee Minutes – February 11, 2016

Scott Maki presented the Finance Committee report to the Board.

## 7.1 Consent Items

Scott Maki advised that there are six consent agenda items being presented for Board approval.

- 7.1.1 Procurement Policy and Contract Review Q3
- 7.1.2 Contracts for Approval
  - i. Asbestos Abatement Contract
  - ii. Hamilton General Fire Alarm Upgrade Contract
- 7.1.3 Investment and Compliance Report
- 7.1.4 FY 16/17 M-SAA
- 7.1.5 Quarterly Operating Results, Q3
- 7.1.6 Healthcare of Ontario Pension Plan (HOOPP) and Post-Retirement Benefits Liability Overview

**It was moved by Scott Maki and seconded by Kurt Whitnell that the consent agenda items be approved.**

### **CARRIED**

## 7.2 Decision Items

Scott Maki outlined the two decision items being presented for Board approval.

### 7.2.1 2016/17 M-SAA

Scott Maki noted that the first item authorizes the Board Chair and CEO to complete the requirements that provides HHS with funding for a suite of specialized services provided to the community.

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

**THAT the Board of Directors approves the CAPS (Community Accountability Planning Submission) and Multi-Sector Service Accountability Agreement (MSAA) 2016/17 Update;**

**AND THAT the Board authorizes the Board Chair and CEO to execute the agreement.**

### **CARRIED**

### 7.2.2 FY 2016/17 Annual Business Plan / H-SAA - Presentation

Scott Maki advised that Board approval is being sought for the 2016-17 Business Plan, including the Operating Budget.

Scott called on Dave McCaig to provide a presentation to the Board. Dave began his presentation by thanking the leadership team for their input regarding the budget. He also spoke of the challenges faced in reducing costs and gave credit for the creative ways which have been found to



reduce costs. He confirmed that the Provincial Budget has been reviewed and he then outlined the priorities for the 2016/17 year highlighting the strategies, including potential risks. He proceeded to provide an update on working capital advising that the Ministry provided verbal confirmation that they will assist with contributions to working capital.

Following Dave's presentation, Scott thanked the leadership team on behalf of Finance and the Board for their efforts in pulling the budget together and for taking a very balanced approach. He commented that the quality of the materials and discussions at the Finance Committee are very helpful.

The following motion was moved by Scott Maki and seconded by Anna Ventresca:

**THAT the Board of Directors approves the final 2016/17 Hospital Accountability Planning Submission (HAPS);**

**AND THAT the Board of Directors approves the corresponding Operating Budget;**

**AND THAT the Board authorizes execution of the Hospital Service Accountability Agreement (H-SAA) for fiscal 16/17, provided the final agreement is materially consistent with expected financial and performance obligations.**

**CARRIED**

8 Governance Committee – February 17, 2016

Governance Committee Minutes – February 17, 2016

Terry Shields presented the Governance Committee report to the Board. She advised that there are four decision items and one in-camera item being presented for Board approval.

8.1 Decision Items

8.1.1 WLMH Community Advisory Committee – Review Mandate

Terry Shields outlined the four decision items being presented for Board approval. Terry noted that the first item deals with the review of the WLMH Community Advisory Committee mandate and that there are no recommended changes at this time.

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

**THAT the Board of Directors receives for information Report No. 2016 02 GC-001 West Lincoln Memorial Hospital Community Advisory Committee Mandate.**

**AND THAT no changes to the WLMH CAC Mandate are recommended by the Governance Committee prior to the completion of the redevelopment of the WLMH.**

**CARRIED**

### 8.1.2 Comprehensive review of the HHS Administrative and Professional Staff By-law

Terry Shields stated that the second item deals with the direction to Management to provide the Board with new Administrative and Professional Staff By-laws by dividing the current By-law into two separate by-laws. She outlined the process relating to the By-law amendment noting that the Board policies will be concurrently reviewed and revisions will be proposed. She noted that the report contained in the Board package outlines the process and the timelines for the approval of the split By-laws and the policies review.

The following motion was moved by Terry Shields and seconded by Richard Koroscil:

**THAT the Board of Directors directs the General Counsel (Interim) to prepare a new HHS Corporate By-law and a new HHS Professional Staff By-law generally based on provisions contained in HHS By-law 3 with non-substantive revisions necessary for clarity and consistency and for compliance with applicable legislation and the HHS corporate management structure;**

**AND THAT the Board directs that the process provided for in Article 25 of HHS By-law 3 be followed as to the proposed new HHS By-laws prior to submission of the proposed new HHS By-laws to the Board for approval.**

**CARRIED**

### 8.1.3 Director Education and Training

Terry Shields reviewed the Report on Director Education and Training noting that the report addresses the need to establish a more formal process for recognizing, tracking and sharing of learnings from training programs attended by Board members. She indicated that the information contained in the report as to actual attendance by Board members is not complete in all respects; however, it illustrates the sort of information which could be made available through tracking participation of Board members in education programs.

Terry noted that the Committee amended the resolution to specify a semi-annual reporting process for this important function. Discussions focused on tracking attendance, budget for Board education and the process for setting out plans for each director.

The following *amended* motion was moved by Terry Shields and seconded by Chantel Broten:

**THAT the Board of Directors receives for information Report No. 2016 02-GC-003 Director Education and Training.**

***AND THAT management be directed to produce a semi-annual report and develop a process to track Board member attendance at education sessions, educational topics and budget performance (process subject to Committee Chair approval);***

**AND THAT staff be directed to post educational materials received by Board Members (subject to requisite permissions) on the Board Portal for reference by other Board members.**

**CARRIED**

8.1.4 Evaluation on Directors Standing for Re-election

Terry Shields advised the Board that the third report provides an overview of the process for the evaluation of those Board members who are standing for re-election. To enhance confidentiality with the process, the Committee amended the motion to provide that the self-assessment portion of the tool be submitted to the Chair of the Governance Committee, who will provide a summary report to the Governance Committee. Terry noted that past practice involved sending responses to the Board Office.

The following amended motion was moved by Terry Shields and seconded by Richard Koroscil:

**THAT the Board of Directors receives for information Report No. 2016 02-GC-004 Evaluation on Directors Standing for Re-election;**

**AND THAT the Governance Committee initiates the self and peer assessment surveys as required pursuant to Board Policy 1.23 Nomination Process Policy;**

**AND THAT the Governance Committee approves the use of the current Board Member End of Year Performance Evaluation tool attached as Appendix A for the assessment of board members seeking re-election to the Board;**

**AND THAT Mary Catherine Lindberg, Julia Kamula and Kurt Whitnell be asked to complete the self assessment portion of the tool by April 18, 2016 and *to submit responses to the Chair of the Governance Committee;***

**AND THAT a summary report be prepared *by the Chair* for the May 18th Governance Committee meeting for consideration as part of the recommended slate of nominations for election at the annual meeting.**

**CARRIED**

*Chantel Broten departed the meeting.*

9 Reports of the Medical Advisory Committee

Dr. Paul Miller presented to the Board two reports (items 9.1 and 9.2) of the Medical Advisory Committee from its meetings on December 9, 2015 and January 13, 2016 in the open portion of the Board meeting. As noted by the Chair at the beginning of the meeting, item 9.3 – Report: 2016 02 MAC 002 – MAC Board Report for February 10, 2016 will now be dealt with during the in-camera portion of the meeting.

A motion was made by Dr. Miller and was seconded by Terry Shields:

THAT the following reports be accepted as distributed and that the Board approves the recommendations as to appointment and re-appointment of Professional Staff:

9.1 MAC Board Report – December 9, 2015

9.2 MAC Board Report – January 13, 2016.

**CARRIED**

10 Chief Executive Officer's Report

Rob MacIsaac presented the Chief Executive Officer's Report beginning with items of recognition from Accreditation Canada for distinction in Acute Stroke Services and Inpatient Stroke rehabilitation. He thanked the Accreditation team for their hard work and dedication on the successful appeal as to the falls prevention ROPs and provided an update on the re-surveys for other ROPs which are to be conducted.

Rob reported that HHS is the successful recipient of the 2016 LEADing Practice Initiative for the Hamilton Early Warning System (HEWS), a multi-factorial approach which measures a combination of vital signs to detect, report and address a patient's declining physical status.

Rob advised that CIBC Breast Assessment Model and Pathology / Radiology Correlative Rounds have won the 2015 Cancer Quality Council of Ontario Innovation Award. He acknowledged the individual that contributed to improving the care and patient's experience across the LHIN. He noted that HHS has been selected as one of three Ontario hospitals to receive an Achievement Award and Award of Excellence received from Trillium Gift of Life Network for demonstrating high performance in donation best practices.

Rob acknowledged Kelly Campbell and her team for the 2016 Smart Commute Gold Workplace Designation awarded by METROLINX. He also provided highlights on the 2015 HHS Film Festival Awards.

Rob advised the Board of his involvement in lobbying the Federal Government on promoting the status of research hospitals and pressing the need for Federal funding via participation in H10 in Ottawa on February 24. He informed the Board that H10 is a standing committee comprised of 10 of the largest research hospitals lead by the CEOs for the purpose of advancing the health and life sciences plan in Canada.

Rob announced the appointment of Dr. Paul O'Byrne as John Kelton's successor as the new Dean of McMaster's Faculty of Health Sciences. He also reported on the Members of the President's Leadership Team attendance at GE's head office in Crotonville.

Rob provided a high level overview on key metrics noting that HHS is expected to meet or beat goal. Kirsten Krull explained the QBP performance metrics and ALC rates were addressed noting that it continues to be an area of focus. It was noted that the Free Cash Flow metric is performing well.

11 HHS Foundation Update

The Board received for information the HHS Foundation Update. There were no questions.

12 WLMH CAC Report to the Board – January 2016

The Board received for information a report from the January 2016 meeting of the West Lincoln Memorial Hospital Community Advisory Committee. There were no questions.

It was moved by Kurt Whitnell and Anna Ventresca:

**THAT the reports of the HHS Foundation and the WLMH Community Advisory Committee be accepted as distributed.**

**CARRIED**

13 Matters for Consideration and Generative Discussion

The Chair advised that time has been set aside to discuss the response to the LHIN and the Ministry on the Patients First Report prior to the February 29 submission deadline.

The Board engaged in discussion of the following five questions which had been formulated by staff for consideration in the response to the Ministry:

- i. What's the most important component of the Ministry's discussion paper that deserves a response from HHS?
- ii. What aspects of our long-term Clinical Vision (Our Healthy Future) could serve to help the Ministry achieve the goals outlined in their discussion paper?
- iii. Are there aspects of our long-term Clinical Vision (Our Healthy Future) that could be complicated by the Ministry's goals?
- iv. Are there aspects of the Ministry's discussion paper where HHS should play a lead role locally or regionally?
- v. What other, near term strategic opportunities is there for HHS, given the contents of the Ministry discussion paper?

Concern was expressed that all services and decisions are being centralized and there is very little opportunity for independent decision making in the proposed Patients First model.

There was consensus that there is a need for building in good checks and balances so that the decisions being made benefit the regions, that financial effectiveness cannot be the best measure of effectiveness, and that there is a requirement for quality infrastructure and quality metrics. Discussions ensued on infrastructure and generating a Hamilton solution in taking a lead role in

developing a Population Health model and rolling out HHS' Clinical Vision, Our Healthy Future initiative.

There was discussion as to producing a model that drives the creation of values with an emphasis on West Niagara and sustained efforts on ALC. It was noted that focus on information technology (IT) would continue to be a key enabler in taking a lead role in streamlining patient care approach to align with HHS' mission and values.

14. Motion to move to In Camera Session

It was moved by Scott Maki and seconded by Terry Shields that the meeting move in camera.

**CARRIED**

*The students departed the meeting.*

15. **Adjournment** – Following the In Camera Session, the meeting adjourned at 7:55 pm.

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Norm Col  
Chair

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Scott Maki  
Secretary / Treasurer

## Action List

	<i>Agenda Item</i>	<i>MRP</i>	<i>Reporting Date</i>
June 25, 2015	Non-Union Pay Equity	Andrew Doppler	September 2016
Nov. 26, 2015	CQI process and Model Cell Approach update	Rob MacIsaac	Subsequent meeting
Nov. 26, 2015	Delivery of the Master Program	Aaron Levo and Kelly Campbell	June 2016
Nov. 26, 2015	2016/17 Financial Planning Directions – final proposed budget	Dave McCaig	March 2017 Board cycle
Nov. 26, 2015	2016/17 QIP approval and sign off	Dr. McLean	March 2016
Nov. 26, 2015	Accreditation application submitted – Stroke Services Distinction	Rob MacIsaac	February 2016