Stevenson Memorial Hospital Meeting of Board of Directors

October 5, 2017
Physical Therapy Department 5:00 p.m.

In attendance:

<u>Elected Directors:</u> Michael Martin, Board Chair; Colleen Butler; Norm Depta; Paul Edmonds; Wendy Fairley; David Knight; Robert Jurmalietis; Sheila Kaarlela; Marie-Pierre Lussier; John Murray; Jan Tweedy

Ex Officio Directors: Jody Levac, President & CEO; Carrie Jeffreys, VP, Patient Services & Chief Nursing Executive; Marg Barber, Board Chair, Foundation; Dr. Shazia Ambreen, President of Professional Staff

Staff: Paul Heck, Chief Financial & Information Officer

Guest: Sarah MacDougall, Board Liaison

Regrets: Dr. Barry Nathanson; Darlene Blendick; Diane Munro

1.0 WELCOME & CALL TO ORDER

1.1 Quorum

M. Martin welcomed the Directors to the meeting and advised there was a quorum.

1.2 Declaration of Conflict of Interest

M. Martin reminded those in attendance of their responsibilities as Board members with respect to the conflict of interest as outlined in the Corporation's Bylaws and asked if anyone present wished to declare a conflict of interest. No declarations were made.

1.3 Amendments to the Agenda

The SHINE Master Agreement was moved up to 5.1 on the agenda.

Motion: Moved by W. Fairley, seconded by P. Edmonds. "That the Board of Directors accepts the agenda as amended." All in favour. Motion passed.

2.0 CONSENT AGENDA

- 2.1 Board of Directors Minutes September 7, 2017
- 2.2 Quality Minutes September 12, 2017
- 2.3 Communication Minutes September 18, 2017
- 2.4 Finance Minutes September 21, 2017
- 2.5 Governance & Nominating Minutes September 12, 2017
- 2.6 Stevenson Redevelopment Minutes September 26, 2017

Motion: Moved by C. Butler, seconded by J. Murray.
"That the Board of Directors accepts the consent agenda as presented."
All in favour. Motion passed.

3.0 BUSINESS ARISING

There was no business arising.

4.0 REPORTS

4.1 Report of President & CEO

J. Levac provided the following update:

- Welcomed and introduced Sarah MacDougall as the new Board Liaison who will be supporting the Board and its Committees moving forward. Sharon Knisley will now be supporting Jody Levac and Carrie Jeffreys.
- Tentative date of October 23rd has been set for the Strategic Planning Session.
- Second round of User Groups meeting held last week of September for the Stage 2 submission.
- Provided an update on recent community engagement events attended this past month.
- Advised that the Ontario Renal Network (ORN) is looking to change their funding model related to dialysis.
- Meeting scheduled with the 2 final candidates for the Corporate Communication position.

4.2 Report of VP, Patient Services & Chief Nursing Executive

C. Jeffreys provided an update on the 3 proposals submitted to the CLHIN for additional one-time funding for: telemedicine (no response as of yet); mental health team (declined), and ER Surge improvement (declined). As well, the hospital submitted a proposal on restorative care and the CLHIN has deferred the decision until next year.

In response to a question, C. Jeffreys advised that the ALC rates have slowly crept up in the Hospital over time. **Action:** C. Jeffreys to provide an update to the Board on the ALC rates and an update on ED pressures.

4.3 Report of Chief of Staff

Dr. Nathanson's report was circulated with the agenda and there were no questions posed by the Board.

4.4 Report of President of Professional Staff

Dr. Ambreen referenced her written report circulated at the meeting that provided an update on the September 20, 2017 Professional Staff meeting.

4.5 Report of Auxiliary President

There was no report of Auxiliary President as she was absent from the meeting.

4.6 Report of Foundation Board Chair

M. Barber advised that the Foundation continues to focus on donor meetings and fundraising. The Foundation Board did not meet in September.

4.7 Report of Hospital Board Chair

M. Martin provided the following update:

- Held his regular monthly meeting with CEO and Chief of Staff.
- The Executive Compensation Framework was submitted to the Ministry the end of September.
- Robert Jurmalietis will be resigning at the end of calendar year as he will be moving out of the catchment area.

5.0 FINANCIAL HEALTH

5.1 Report of Chair, Finance Committee

P. Heck advised the following:

SHINE Master Agreement (SMA)

P. Heck provided an overview of the SHINE Master Agreement circulated in advance of the meeting which has been reviewed by the Finance Committee. The SMA agreement is among Stevenson, Southlake and Markham Stouffville Hospitals. This replaces the Letter of Intent originally developed. Stevenson is an equal voting member.

The Board discussed and asked questions of the Chief Financial & Information Officer about the SMA. There being no further questions, the following motion was passed:

Motion: Moved by R. Jurmalietis, seconded by J. Tweedy.

WHEREAS The Stevenson Memorial Hospital is party to a Letter of Intent (LOI) for a shared MEDITECH Hospital Information System (HIS) among Southlake Regional Health Centre, Markham Stouffville Hospital, and The Stevenson Memorial Hospital (the Hospitals);

AND WHEREAS the LOI contained a goal to create and accept a formal Partnership Agreement between the Hospitals;

AND WHEREAS the Hospitals have collaboratively considered and developed a Decision Log and Partnership Agreement (SHINE Master Agreement or SMA) contemplating IT Services beyond a shared HIS;

AND WHEREAS the principal terms of the SMA are set out in the LOI and SHINE Decision Log provided to the Hospitals;

NOW THEREFORE BE IT RESOLVED THAT the Board Directors accepts the recommendation of the Finance Committee that the Board of Directors authorize the Board Chair and CEO

of The Stevenson Memorial Hospital to execute the SHINE Master Agreement among Southlake Regional Health Centre, Markham Stouffville Hospital, and The Stevenson Memorial Hospital, provided that the SMA is on terms substantially in the form of the documents presented in the meeting and as provided in the LOI and Decision Log and to the satisfaction of The Stevenson Memorial Hospital.

All in favour. Motion carried.

Action: P. Heck was asked to provide an update on the status of the Electronic Medical Record Adoption Model (EMRAM) at an upcoming Board meeting.

Financial Statements

P. Heck provided a finance presentation which highlighted a surplus of \$71,252 for the month of August and a year-to-date surplus of \$325,338K. It was noted that although a surplus is projected at year end, there are upcoming costs that will have an impact on the bottom line, e.g., surge with flu season.

6.0 SAFE, QUALITY CARE

6.1 Patient Experience

Moving forward, patient experience stories will be shared with the Board Quality Committee and will come forward to the Board. C. Jeffreys shared a patient experience story regarding the great care a patient received in the Emergency Department.

6.2 Critical Incident Report

There were no critical incidents to report.

6.3 Report of Chair, Quality Committee

J. Tweedy advised that Julie Larouz, Manager of Diagnostic Imaging and Laboratory, is now a member of the Quality Committee. She provided a presentation at the meeting sharing the results of the Lab Accreditation, held in October 2016, and the actions that have been implemented to mitigate the deficiencies noted in the survey. As well, J. Larouz provided a presentation on the Diagnostic Imaging Department highlighting statistics, their current equipment, and goals of the department

7.0 CHAMPIONS OF CARE

7.1 Report of Chair, Human Resources Committee

C. Butler advised of the following:

- The Committee took the lead on the Executive Compensation Framework and it was finalized and submitted to the Ministry & Health & Long Term Care (MOHLTC) on September 29, 2017.
- The MOHLTC will review and provide feedback on the Framework and will advise when Hospitals are required to post their Framework for public for consultation.
- Recognition was given to Darlene Blendick who took the lead on this submission.

Approved November 2, 2017

8.0 POWER IN PARTNERSHIPS

8.1 Report of Chair, Communications Committee

W. Fairley advised the following:

- The Committee reviewed the Terms of Reference and made a recommendation to the Governance & Nominating Committee to rename the Committee to the 'Community Engagement and Communications Committee' which is more reflective of the mandate of the Committee.
- Looking to refresh the Hospital website as it will be instrumental in the engagement of the community as we continue to move forward with the redevelopment and other hospital matters.

Motion: Moved by W. Fairley, seconded by J. Murray.

"That the Board of Directors accepts the recommendation of the Communications Committee that direction be provided to the CEO to move forward with a refresh of Stevenson Memorial Hospital's website."

All in favour. Motion carried.

9. BUILDING THE BEST

9.1 Report of Chair, Stevenson Redevelopment Committee

- P. Edmonds advised the following:
- The Committee met on September 26th to provide an update from Stage 1 to current state, community and political engagement, Stage 2 process and review the gant chart.
- Tannis Chefurka, functional planner, and Paul Clarry, project manager, provided an overview of the process in the development of the Stage 2 (Draft) Functional Plan which is expected to be submitted by May 2018.

10. OTHER

10.1 Report of Chair, Governance & Nominating Committee

- J. Murray advised the following:
- Successfully filled all of the vacant Advisory Member positions on the Board Committees.
- Quality Committee revised the Ethics policy as circulated with the agenda. A new worksheet was devised so that it aligns with the current framework.

Motion: Moved by J. Murray, seconded by J. Tweedy.

"That the Board of Directors accepts the recommendation of the Governance & Nominating Committee and approves Board Policy I-5 Ethics as presented."

All in favour. Motion passed.

 At the conclusion of last year's board survey, 5 suggestions were put forward as education opportunities suggested by the Board. J. Murray reviewed again with the Board. It was agreed these would be kept in mind moving forward for Board education, as well as M. Martin and J. Levac will discuss at their monthly meetings.

- o Provincial Healthcare Funding
- o Role and Responsibilities of the LHIN
- o Healthcare Governance Best Practices
- o Provincial Healthcare Oversight
- o SMH/SRHC MSA & MOU
- Highlighted the results of the 2017 governance survey. The results showed SMH ranking comfortably "above average" in most categories, however it was noted several areas where individual Directors had indicated concerns. It was agreed that these areas of concerns should be brought to the attention of the respective Committee Chairs to address and report back to the Board at future meeting(s).

10.2 Report of Chair, Executive Committee

M. Martin advised that the Executive Committee did not meet.

Motion: Moved by W. Fairley, seconded by J. Murray. "That the Board of Directors receives all reports as presented" All in favour. Motion passed.

At this point in time, P. Heck left the meeting.

11. In Camera Session

Motion: Moved by J. Tweedy, seconded by C. Butler.

"That the Board moves to the in-camera session." All in favour. Motion passed.

Motion: Moved by C. Butler, seconded by MP Lussier.

"That the Board move back into the open session." All in favour. Motion passed.

The Board Chair advised that the following motions arose from the in-camera session:

Motion: Moved by S. Kaarlela, seconded by N. Depta, CARRIED.

"That the Board accepts the recommendation of the Medical Advisory Committee to approve:

- two (2) new applications for medical staff;
- seven (7) change in privileges for members of the medical staff; and
- two (2) renewal of temporary privileges for members of the medical staff."

All in favour. Motion passed.

12. Next Meeting Date

The next Board meeting will be held on Thursday, November 2, 2017.

There being no further business, the meeting adjourned.

Michael Martin, Board Chair

Recording Secretary: Sharon Knisley