



- Chair:** Michael O’Keefe, Board Chair

- Elected Directors:**

Shawn Binns, Director	Barbara Love, Director
Linda Collins, Director	Wendy Miller, Director
Doug Frost, 2 nd Vice Chair	Jason Teal, Director
Michael Gleason, Director	Charlotte Wallis, 1 st Vice Chair
Douglas Jure, Director	

- Ex-Officio Directors:**

Dr. Emily Chan, Vice-President, Medical Staff	Janice Skot, President & CEO
Lise McCourt, President, RVH Auxiliary	Dr. Jeffrey Tyberg, Chief of Staff

- Staff Resources:**

Nicola Charity, Sr Admin Assistant, Recorder	Wendy Sallows, Governance & Partnership Liaison
Eric Dean, CEO, RVH Foundation	Nancy Savage, Executive Vice President
Suzanne Legue, VP Strategy, Communications	Darrell Sewell, VP, Chief Human Resources Officer
Ben Petersen, VP, Chief Financial Officer	Dr. Chris Tebbutt, VP, Academic & Medical Affairs

- Regrets:**
 - Dr. Rob El-Maraghi, President, Medical Staff
 - Harry Hughes, Director
 - Kimberly Matheson, Director
 - Treva McCumber, VP, Patient Programs & Chief Nursing Executive

- Guests*:**
 - Nancy Cunningham, Manager IT Services & Operations
 - Paula Istead, Operations Director, Emergency Department & Intensive Care Unit
 - Matthew Lawson, Chief Performance Officer
 - Dave McCullough, Chair Hearts & Minds Campaign

**partial attendance*

1.0 CALL TO ORDER

The Chair called the meeting to order at 4:11 pm.

Quorum - There being four regrets, quorum was attained.

The Board Chair extended a special welcome to board members and guests.

2.0 QUALITY EDUCATION SESSION – Hearts & Minds Update

The CEO, RVH Foundation provided a report highlighting Foundation activities, event highlights and goals for 2018. The Chair, Hearts & Minds Campaign reported on the progress of the campaign (total funds committed to date \$24.5M), a giving summary 2011-2017, working together on master planning and what to watch for in 2018. In addition, the Chair reviewed ways in which RVH Board members can support the Foundation.

On behalf of the Board of Directors, the Board Chair extended a sincere thank you to the RVHF Campaign Cabinet for their hours of volunteer time and commitment to the successful Hearts & Minds Campaign.

Dave McCullough was excused from the meeting at 4:35 pm.

3.0 APPROVAL OF AGENDA/CONSENT AGENDA/Declaration of Conflicts

Declaration of Conflicts – Director, Michael Gleason declared a conflict based on a temporary contractual relationship with a physician and therefore will be excused from the physician credentialing discussion.

The Board Chair reviewed the pre-circulated Agenda and Consent Agenda items and the following motion was **duly moved, seconded and carried:**

BE IT RESOLVED the Board of Directors approves the January 30, 2018 Agenda, including Consent Agenda, as presented.

4.0 APPROVAL OF IN CAMERA MINUTES

It was *duly moved, seconded and carried* to go in camera.

It was *duly moved, seconded and carried* to go out of in camera.

5.0 CHAIR'S REPORT

The Board Chair reviewed the items in the folder.

November Board Meeting Evaluation

The Board Chair reported on the November board meeting evaluations which provided very positive results. Board members were appreciative of the thorough education session relating to the board's role in physician credentialing and the well-organized meeting allowing time for appropriate discussion.

Board Rounding

The Board Chair thanked Board members for participating in Board Rounding in the Transitional Care Unit and Patient Food Services. Board members highlighted the enthusiasm of the staff who were so eager to share the great work they are doing.

2018 Board Awards of Excellence

The Board Chair reported on the 2018 Board of Directors Award of Excellence established to honour and recognize staff, leaders, physicians, volunteers and an RVH team who have made outstanding contributions to the health centre by exhibiting the RVH values. The awards will be presented in June during Staff Appreciation Week. The Board Chair thanked the Directors who have volunteered to sit on the Board Awards Selection Committee.

Board Recruitment

The Board Chair reported that the Governance Committee met January 17, 2018. Resumes were reviewed, followed by a fulsome discussion regarding governance and leadership experience required on the Board in the next few years. There is currently one opening in June 2018. The committee will continue to move forward with the next steps of the recruitment process.

Thank You and Acknowledgements

The Board Chair extended appreciation and acknowledgements to board members who participated in the Child & Youth Mental Health opening, Simcoe Muskoka Regional Heart Program opening, Regional IT Partnership Board/CEO Advisory Group, RVH Accreditation Simulated Survey introductory and debrief sessions, North Simcoe Muskoka Local Health Integration Network (NSM LHIN) Acute Care Governance Session, Community Safety and Well-Being Committee of Innisfil and the "Paramedic Nat's Evening for Mental Health".

Executive Compensation

The Board Chair reported RVH has been actively engaged with the Ministry of Health and Long Term Care (MOHLTC) representatives to finalize our Executive Compensation Program. Following MOHLTC approval and directive, the public consultation document was posted on the RVH website January 22, 2018. Upon completion of a 30 day consultation period, the health centre must incorporate any changes and deliver a summary of feedback with an explanation of changes to the MOH LTC. Pending review and approval by MOHLT, RVH will implement the Executive Compensation Program.

6.0 CEO REPORT

A detailed CEO's report was circulated with the Board package for information purposes

MY CARE

From Our Patients

The President & CEO read a letter recently received highlighting the exceptional care provided by several RVH physicians and obstetrical operating room staff.

MP2 Update

The President & CEO provided an update on the Master Planning/Master Programming (MP2) at RVH.

The Capital Planning Advisory Committee (CPAC) chaired by RVH President & CEO will oversee all stages of planning, development and financing of MP2 and South Campus location. Oversight will include current and future programs located at the North Campus as well as determination of program and service requirements and development plans for a new satellite location (South Campus). Regular progress reports from CPAC will be provided to the Board of Directors through the Capital Planning Committee (CPC).

The South Campus Site Selection Committee (SCSSC) met January 18th, chaired by RVH Board Chair. 2nd Vice-Chair and Chair, Capital Planning Committee also sits on this committee. Reporting to the CPAC, SCSSC's purpose is to oversee all stages of the determination of a future south campus site location and ensure a thorough and effective consultation process with community and key stakeholders. Regular progress reports from SCSSC will be provided to the Board of Directors through the CPC.

A Clinical Services Workshop has been scheduled for February 22, 2018 to review service delivery model options with a diverse group of stakeholders including leadership, physicians, staff and the Project Management Team.

Discussion ensued.

In response to a question, the President & CEO reviewed NSM LHIN involvement in integration coordination and the public consultation process regarding site selection.

In response to a question, the President & CEO reviewed the MOHLTC and NSM LHIN oversight role and reporting requirements in association with RVH MP2.

Accreditation Simulated Survey

The President & CEO reported RVH welcomed surveyors from Accreditation Canada January 22-24, 2018 for a simulated accreditation survey. The survey team were impressed with our well embedded *MY CARE* strategy and values-based culture. They provided valuable insight and advice on how to prepare for the 2019 Accreditation survey and overall reported a very positive simulated survey at RVH.

In response to a question, the President & CEO provided background on the accreditors.

2018/19 Strategic Focus Update

The Vice President, Strategy, Communications and Stakeholder Relations reviewed the *MY CARE* Strategic Goals; Leader Performance Measures 2018/19 developed in 2012 and refreshed in 2016. While the strategic

goals remain the same, the strategic focus and targets were reviewed and discussed for 2018/19 highlighting the updates.

Foundational Success Factors

2017/18 YTD Financial Update

The Vice President, Corporate Services & CFO reviewed the 2017/18 financial statements as at November 30, 2017 including revenues, expenses, statement of financial position. RVH is currently in a surplus position.

Matthew Lawson, Chief Performance Officer joined the meeting at 5:22 pm.

2018/19 Operation Budget

It was **duly moved, seconded and carried** to go in camera.

In camera discussion ensued.

2012 Capital Redevelopment Project follow-up

In camera discussion ensued.

It was **duly moved, seconded and carried** to go out of in camera.

The following motion was **duly moved, seconded and carried**:

WHEREAS the RVH Board of Directors remains committed to providing safe and exceptional patient-centred care through our *MY CARE* strategy and priorities; and

WHEREAS RVH, as a regional health centre, has grown significantly over the last several years in size and complexity of services offered in patient care, education and research while at the same time remaining fiscally responsible with eight consecutive balanced budgets; and

WHEREAS RVH has followed an extensive consultative budget process with internal and external stakeholders including, working with the North Simcoe Muskoka Local Health Integration Network (NSM LHIN) and Ministry of Health and Long-Term Care to identify revenue disparities which negatively impact RVH's ability to address the needs of our patients and region; and

WHEREAS a fulsome discussion took place at the RVH Finance and Audit Committee meeting on January 23, 2018 and due to continued operational and financial pressures, the committee declined approving the 2018/19 Operating Budget and directed the CEO and CFO to aggressively pursue additional operating revenue for 2018/19; and

WHEREAS RVH presented the draft 2018/19 Operating Budget to the NSM LHIN on January 25, 2018 and following discussion, the LHIN requested further time to review the financial position and all funding requests and will work with RVH on an extension of the Hospital Service Accountability Agreement;

BE IT RESOLVED that the Board of Directors received a presentation on the 2018/19 Operating Budget and, due to continued operational and financial pressures, accepts the recommendation of the Finance & Audit Committee and directs the CEO and CFO to continue aggressively pursuing additional operating revenue for the 2018/19 fiscal year with the NSM LHIN and the Ministry of Health and Long-Term Care.

IT Update

The Vice President, Corporate Services & CFO reviewed the IT Plan Update. The current 4 Meditech partners (RVH, Collingwood General & Marine Hospital (CGMH), Georgian Bay General Hospital (GBGH), and Headwaters Health Care Centre (HHCC)) continue to meet regularly to discuss the future direction of the partnership and advancing our current Meditech system to version 6.1.6.

The Regional IT Partnership CEO Committee endorsed Healthtech's development of an optimal implementation roadmap and HIS Business Case working through the Joint IT Steering Committee (JITSC). This was presented to JITSC, the Regional IT Partnership CEO Committee and the Regional IT Partnership Board/CEO Advisory Group in January 2018. The Regional Meditech IT Partnership continues to focus on the refinement of the HIS Business Case along with ongoing involvement in the Provincial Meditech Collaborative. Regular updates will be provided to the Finance & Audit Committee and the Board of Directors.

Drive Clinical Excellence

Advanced Cardiac Care

The Executive Vice President, Patient & Family Experience and Regional Vice President Cancer Care Ontario provided an update on Advanced Cardiac Care. The first angiogram was performed in RVH's new Cardiac Intervention Unit (CIU) January 9, 2018 with a successful grand opening January 17, 2018 which included Premier, Kathleen Wynne and the Dr. Eric Hoskins, Minister of Health & LTC. Next steps include post go-live support for CIU, continued work on the centralized triage system and pacemaker implants, review of completed projects and finalization of Phase 2.

Discussion ensued.

In response to a question, the EVP, Patient & Family Experience reported on the timelines for the phased ramp up to complex cardiac services.

Child & Youth Mental Health

The Executive Vice President provided an update on Child & Youth Mental Health. The official opening was December 19, 2017 with patients transferred on December 20, 2017. Construction continues on the Adult Inpatient Mental Health Unit with interprofessional practice moving into the unit at the end of January 2018. RVH has received approval from the Ministry of Education for a Section 23 License, to serve students who require their educational needs met outside of the regular school system, effective September 2018.

Kidney Care Update

The Executive Vice President provided an update on the status of the Kidney Care Program. The Ontario Renal Network (ORN) has designated RVH a Regional Renal Program Hub, effective April 1, 2018. In addition vascular access rounds for our renal patients are now scheduled monthly with our interventional radiology team and we now have a kidney care clinical educator in place.

Regional Renal Hub Status Update

The President & CEO reported RVH is currently working closely with Soldiers' Memorial Hospital (OSMH) to prepare a Service Level Agreement (SLA) that will outline the specifics of how the two renal hubs will work together. The endorsed SLA will be presented to Ontario Renal Network/Cancer Care Ontario by February 28, 2018.

The President & CEO recognized the leadership of EVP, Patient Family Experience and her team for their hard work in support of RVH's renal hub designation.

Discussion ensued.

ED Performance Indicators

The Vice President, Patient Programs & CNE provided an update on the Emergency Department Quality Improvement Program highlighting the status of the 6 quality improvement initiatives, current performance and Pay for Performance (P4R) ranking.

Discussion ensued.

In response to a question, the current over capacity challenges were discussed in addition to the impact of the ALC patients currently residing at RVH.

Paula Istead, Operations Director, ED & ICU and Nancy Cunningham, Manager, IT Services & Operations joined the meeting at 7:15 pm.

Oculys Demonstration

The Vice President, Corporate Services & CFO, Operations Director, ED & ICU and Manager, IT Services & Operations provided an overview of the Oculys system a real-time communication tool designed to broadcast ED wait times. The Oculys system will provide:

- Estimated wait-time to see a physician from triage
- Number of people waiting to be treated
- Update every 20 minutes

A RVH working group has been working for the past 6 months on the implementation of Oculys with an expected public go-live launch of March 2018.

Discussion ensued.

In response to a question, the Manager IT Services & Operations reported on the pilot project which has been running for the past two months to ensure data quality and accurate reflection of ED activity.

In response to a question, the Manager IT Services & Operations reviewed Ontario hospitals currently utilizing Oculys.

The Operations Director, ED and ICU reported on the ongoing education with ED staff encouraging conversations with patients regarding wait times and delays.

Paula Istead and Nancy Cunningham were excused from the meeting at 7:37 pm

7.0 CHIEF OF STAFF REPORT

Medical Advisory Committee Report

The Chief of Staff provided an overview of the Medical Advisory Committee report highlighting a critical incident, quality of care review, medical leadership positions, MAC education sessions and the MAC evaluation process. In addition, the Chief of Staff reported on the Physician Credentialing Process adjustments recently implemented in compliance with the RVH Professional Staff By-Laws.

Michael Gleason, Director was excused from the meeting at 7:50 pm.

Physician Credentialing/Physician Matters

It was **duly moved, seconded and carried** to go in camera.

In camera discussion ensued.

It was **duly moved, seconded and carried** to go out of in camera.

The following motion was **duly moved, seconded and carried:**

BE IT RESOLVED that the RVH Board of Directors accepts the recommendation of the Medical Advisory Committee and approves the Department Chiefs and Physician Credentials as presented in the January 30, 2018 Medical Advisory Committee Report.

Michael Gleason, Director rejoined the meeting at 8:00 pm.

8.0 QUALITY REPORT

The Chair of the Quality Committee provided the Board with a summary of the December meeting which included two quality education sessions, Q2 Performance Scorecard, patient safety culture survey results, quality and patient safety metrics, and an update on the ED focusing on wait times, P4R ranking and the EDI Quality Improvement Program. In keeping with the organization's commitment to quality, the Quality Committee report to the Board is a standing agenda item and not included in the consent agenda.

9.0 OTHER BUSINESS

RVH Auxiliary Report

The President, RVH Auxiliary highlighted the staff member letter, fundraising and events in the Auxiliary Report. In addition, the President reported on the \$400,000 cheque presentation to the Hearts & Minds Campaign at their General meeting today.

10.0 NEXT MEETING

Regular Meeting

Tuesday, March 27, 2018

11.0 ADJOURNMENT

There being no further business the meeting was adjourned at 8:12 pm.

A session of independent directors (*without management or related directors present*) was held following adjournment of the meeting of the corporation.

Respectfully submitted,



Michael O'Keefe, Chair



Janice M. Skot, Secretary