

Chair: Kirsten Parker, Board Chair

Elected

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| Directors: | Shawn Binns, Director Doug Frost, Director Robert Hall, 1 st Vice Chair Rick Horst, Past Chair | Harry Hughes, Director Michael O'Keefe, Director Jeff Scott, Director Charlotte Wallis, Director |
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| Ex-Officio Directors | Dr. Don DuVall, President, Medical Staff Dr. Jaco Scheeres, VP, Medical Staff Dr. Jim Shaver, Chief of Staff | Treva McCumber, VP, Transition, Diagnostics & CNE Janice Skot, President and CEO Janice Williams, President, RVH Auxiliary* |
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| Staff Resources: | Nicola Charity, Sr. Admin Assistant, Recorder Lindsey Crawford, VP, Patient Programs Eric Dean, CEO, RVH Foundation* Matthew Lawson, Interim CFO Suzanne Legue, Chief Communications Officer | Peter Osgood, Director Planning & Capital Redevelopment Wendy Sallows, Governance & Partnership Liaison Nancy Savage, Executive Vice President Dr. Chris Tebbutt, VP, Academic & Medical Affairs Jeff Weeks, Chief Information Officer* |
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Regrets: Jake Arnold, Director
Michael Gleason, Director
Barbara Love, Director

***Guests:** Board Award of Excellence Recipients*
Stacey Carty
Wayne Hubbard

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| Rachel Kean | Tom Scharf |
| Dr. Stephen Onlock | MDRD Team |

Staff / Physician / Volunteer Recognition*
Accreditation – RVH, Lab & Stroke

Advanced Cardiac Care*
Dr. Jim Swan, Cardiologist
Bob Morton, NSM LHIN Board Chair
Jill Tettmann, NSM LHIN CEO

Foundation Board of Directors*
Arlette Utton, RVH Foundation Board Chair
Dave McCullough, RVH Foundation Vice-Chair

** partial attendance*

1.0 SPECIAL PRESENTATIONS

Board Awards of Excellence

The Board Chair honoured and congratulated five inspiring individuals and one team recognized by their peers and selected for the prestigious Board Award of Excellence. These honourees embody the RVH values and were applauded by all for their invaluable contributions.

RVH, Lab & Stroke Accreditation

The Board Chair recognized several individuals who played key roles in our recent RVH, Lab and Stroke Accreditation. These individuals and their teams were commended for their exceptional work.

2.0 CALL TO ORDER

The Chair called the meeting to order at 4:20 pm.

Quorum - There being only three regrets, quorum was attained.

Declaration of Conflicts - No conflicts of interest were noted.

APPROVAL OF AGENDA/CONSENT AGENDA

The Board Chair reviewed the pre-circulated Agenda and Consent Agenda items as follows:

- Minutes of Board Meeting (Jan 27 15)* - *to be approved*
- Executive Committee Minutes (Dec 9 14)* - *to be received*
- Joint Conference Committee Minutes (Apr 15 14)* – *to be received*
- Joint Conference Committee Summary Report (Mar 4 15)* – *to be received*
- Medical Advisory Committee Report (Mar 31 15)* – *to be approved*
- Performance & Audit Committee Minutes (Jan 20 15)* – *to be received*
 - *Auditor Engagement Correspondence*
BE IT RESOLVED that the Audit Plan and Engagement Correspondence year ending March 31, 2015 be accepted by the Performance & Audit Committee.
 - *2015/16 Operating Plan*
WHEREAS the Performance & Audit Committee received a presentation on the 2015/16 Operating Plan;
BE IT RESOLVED that the Performance & Audit Committee recommends to the Board of Directors approval of the 2015/16 Operating Plan as presented and directs the CEO and CFO to begin negotiating the H-SAA with the NSM LHIN for 2015/16.
 - *Community Accountability Planning Submission (CAPS)*
BE IT RESOLVED that the Performance & Audit Committee recommends approval of the Community Accountability Planning Submission (CAPS) refresh for 2015/16 in alignment with the proposed 2015/16 Operating Plan to the Board of Directors.
- Performance & Audit Committee Summary Report (Mar 24 15)* - *to be received*
- Quality Committee Minutes (Dec 9 14)* - *to be received*
 - *Enterprise Risk Management (ERM) Plan*
WHEREAS the Quality Committee received a presentation on the Enterprise Risk Management (ERM) Plan.
BE IT RESOLVED that the Quality Committee recommends approval of the Enterprise Risk Management Plan to the Board of Directors.
 - *Patient Safety Plan*
WHEREAS the Quality Committee received a presentation on the Patient Safety Plan;
BE IT RESOLVED that the Quality Committee recommends approval of the Patient Safety Plan to the Board of Directors.

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

WHEREAS the Board of Directors reviewed the March 31, 2015 Agenda, including the Consent Agenda;

BE IT RESOLVED that the Board of Directors approve the March 31, 2015 Agenda as circulated.

3.0 BUSINESS ARISING

There was no Business Arising.

4.0 CHAIRS REPORT

The Chair reviewed the items in the folder.

Board Meeting Evaluation

The Board Chair commented briefly on the January board meeting evaluations which provided very positive feedback from Board members.

Board Surveys

The Board Chair reminded Board members to complete the recent board surveys distributed via email. These surveys provide valuable feedback used to improve the ongoing function of our board. In addition, Board members were asked to complete and return the Peer Assessments distributed at the September 2014 Board meeting.

Board Rounding

The Board Chair thanked Board members for participating in the Board Rounding of Health Information Management and provided an opportunity for members to briefly share one key *MY CARE* learning from the session. Board members reported they saw clear evidence of Health Information Management staff embracing change and living the RVH Mission and *MY CARE* values.

Upcoming Conferences

The Board Chair reported on the following upcoming conferences encouraging Board members to participate if their schedules permit:

- *Taking You and Your Organization to the Next Level* – Studer Conference May 14 & 15, 2015
- *Health Achieve* – Ontario Hospital Association November 2, 3 & 4, 2015

5.0 CEO REPORT

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

The President and CEO read a letter received recently from a patient commending the excellent, attentive care her infant received while in the Neonatal Intensive Care Unit. The letter is a prime example of RVH healthcare professionals going above and beyond and indicative of the *MY CARE* values.

MY CARE

Dialysis Update

The President & CEO reported on RVH's ongoing inability to deliver dialysis services. As a result, patients are transported to OSMH which in some cases can compromise patient safety. In recent correspondence the Ontario Renal Network (ORN) expressed their commitment to effectively organize and manage the delivery of renal services in Ontario in a consistent coordinated manner. The ORN completed a review of the North Simcoe Muskoka Regional Program and has developed an action plan. The immediate next steps in this plan are for RVH and OSMH to create a transition team whose priority will be to establish an outpatient/inpatient unit at RVH. The Vice President, Patient programs reported a timeline of approximately 8 months for renal services, followed by a capital process to implement the required physical changes.

Financial Update

The Interim Director of Finance reported on RVH's current in financial position. Post Construction Operating Plan (PCOP) revenue recognition is aligned with the 2014/15 funding letter received February 12, 2015. The President & CEO reported receipt of the favourable Health System Funding Reform (HSFR) final funding adjustments. Based on the most recent forecast it is projected that RVH will maintain a balanced position through to March 31, 2016.

IT Health System Check – Report Delivery Failure

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

An in camera discussion ensued.

Jeff Weeks, Chief Information Officer was excused from the meeting at 5:00 pm.

Advanced Cardiac Care

An in camera discussion ensued.

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

My Part for Heart

The Chief Communication Officer reported on the new social media "My Part for Heart" campaign. This online campaign includes E-Newsletters, an RVH web page, twitter, Facebook and community engagement in an effort to promote awareness and generate wide-spread community and regional support in the development of the advanced cardiac care program at RVH.

6.0 SPECIAL PRESENTATION / QUALITY EDUCATION SESSION

Support for Advanced Cardiac Care in the NSM LHIN

Dr. Jim Swan, Cardiologist and local resident spoke to the RVH Board of Directors, RVH Foundation Board Chair and Vice-Chair and the NSM LHIN Board Chair and CEO about the importance of providing advanced cardiac care close to home for the residents of North Simcoe Muskoka. Based on his experience and clinical expertise, Dr. Swan encouraged the RVH Board of Directors to stay strong in its resolve to see this program through to completion.

In response to a question, Dr. Swan indicated that in his opinion, cardiac patients require access to intervention ideally under 60 minutes rather than the current target of under 90 minutes. In North Simcoe Muskoka, weather, traffic, geography of our LHIN coupled with RVH's location clearly demonstrates the logic of having a standalone angioplasty centre at RVH.

Bob Morton, Chair NSM LHIN, reemphasized the unwavering support of the NSM LHIN to bring advanced cardiac care to our region.

The Board Chair expressed thanks to the guests for presenting, supporting and affirming the importance of moving advanced cardiac care forward at RVH.

Dr. Swan, Bob Morton and Jill Tettmann were excused from the meeting at 6:45 pm.

Foundation Annual Update

The RVH Foundation Chair, Vice-Chair and CEO provided a "Hearts and Minds" presentation highlighting goals, progress to date, events and the official launch May 5, 2015. The CEO reported the largest contribution to date comes from our own RVH Auxiliary.

In response to a question, the Foundation CEO and RVH Chief Communications Officer reported that while the "My Part for Heart" and "Hearts and Minds" campaigns are closely connected behind the scenes, they maintain their autonomy publicly to ensure clarity for donors.

Arlette Utton, David McCullough and Eric Dean were excused from the meeting at 7:25 pm.

7.0 MATTERS REQUIRING DECISION

2015/16 Quality Improvement Plan (QIP)

The VP, Academic & Medical Affairs reviewed the pre-circulated Quality Improvement Plan (QIP) for 2015/16 noting that the Excellent Care for All Act (ECFAA) requires hospitals to publicly post an annual QIP inclusive of a narrative, work plan (QIP indicators, targets and action plans) and progress report which reflects on the previous year's QIP. There are a core set of 7 priority QIP indicators for all hospitals including:

- Clostridium Difficile Infection (CDI)
- Medical Reconciliation at Admission
- Total Margin (Consolidated)
- Emergency Department Wait Times (Admitted Patients)
- Improvement of Patient Experience
- Alternative Level of Care %
- Readmissions in 30 days

The VP Academic & Medical Affairs provided a comprehensive review of individual indicator definitions and target settings.

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

WHEREAS the Executive Committee on March 24, 2015 recommended to the Board of Directors approval of the *Link to Executive Compensation Plan*; and

WHEREAS the Quality Committee on March 25, 2015 recommended to the Board of Directors approval of the *Overview of Our Hospital's Quality Improvement Plan and Our Improvement Targets and Initiatives* of the Quality Improvement Plan for RVH for 2015/16;

BE IT RESOLVED that the RVH Board of Directors accepts the recommendation of the Executive Committee and Quality Committee and approves the Quality Improvement Plan for RVH for 2015/16.

Child & Youth Mental Health Pre-Capital Submission

The VP Patient Programs and Director, Planning & Capital Redevelopment provided a comprehensive review of the pre-circulated Child and Youth Mental Health Program and Adult Inpatient Mental Health Renovations Capital Plan. The NSM LHIN is the only LHIN in the province that does not have a specialized Child and Youth Mental Health program and the Working Group of the NSM LHIN Care Connections Child and Adolescent Mental Health and Addictions Steering Committee has recommended that RVH become the site for a LHIN-wide regional program. This service has also been identified as a key clinical priority in the Board approved 2007 clinical priorities and RVH Regional Clinical Plan 2014-2020.

The pre-circulated summary of the process, project status, and proposed capital and operating budgets were reviewed and discussed in detail

Discussion ensued.

In response to a question, the VP Patient Programs reviewed opportunities RVH will be pursuing to provide additional operating funds in support of the program once it is fully operational.

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

WHEREAS the North Simcoe Muskoka Local Health Integration Network (NSM LHIN) is the only LHIN in the province that does not have a specialized child and youth mental health inpatient program; and

WHEREAS in 2011 the RVH Operational Review identified the need for an inpatient child and youth mental health program to be led by Royal Victoria Regional Health Centre (RVH); and

WHEREAS in 2011 the NSM LHIN Care Connections Child and Adolescent Project Steering Committee (CA PSC) through an Expression of Interest process recommended that RVH become the site for a LHIN-wide Regional Child and Adolescent Mental Health and Addictions program; and

WHEREAS on November 18, 2011, the RVH Board of Directors directed the CEO to work with the NSM LHIN to further explore the establishment of a child and adolescent mental health program to support the NSM Region; and

WHEREAS the Board of Directors approved the RVH Strategic Plan *MY CARE* 2013-2020 on May 28, 2013 including implementation of a regional child and youth inpatient mental health program; and

WHEREAS child and youth mental health was identified as a key clinical priority in the Board approved RVH 2007 Clinical Priorities document and the 2014 RVH Regional Clinical Plan 2014-2020; and

WHEREAS RVH remains committed to the development and implementation of a regional child and youth mental health program that has both inpatient, outpatient and day hospital capacity and will provide an inter-professional approach to assessment, stabilization and treatment for this underserved population; and

WHEREAS on March 12, 2015 the Care Connections Mental Health & Addictions Coordinating Council received a presentation on the RVH Child and Youth Mental Health program and supported the program and capital elements as proposed by RVH; and

WHEREAS the RVH Performance and Audit Committee on March 24, 2015 recommended to the Board of Directors approval of the Pre-Capital Planning Submission for the Child and Youth Mental Health Program at RVH;

BE IT RESOLVED THAT the RVH Board of Directors accepts the recommendation of the Performance and Audit Committee and approves the Pre-Capital Planning Submission for the Child and Youth Mental Health Program at RVH to be submitted to the North Simcoe Muskoka Local Health Integration Network and Ministry of Health and Long-Term Care.

Physician Update

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

An 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 acknowledges the February 17, 2015 recommendations of the Medical Advisory Committee and approves the term privileges in the Department of Surgery as Surgical Assist for Dr. Markian Sluzar.

Janice Williams was excused from the meeting at 8:25 pm.

8.0 MATTERS FOR DISCUSSION

Quality Committee

The Acting Chair reported that the March Quality Committee meeting received an excellent presentation from the Pharmacy Program. In addition the committee comprehensively reviewed the Quality Improvement Plan (QIP), 2014/15 key HR indicators, Q3 Legislative scorecard, accreditation and the committee terms of reference and annual work plan. The committee was in agreement to increase the quality education sessions to three per meeting.

Legal Update

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.

9.0 OTHER BUSINESS

RVH Auxiliary Report - deferred

RVH Foundation Report – circulated for information only.

Regular Meeting of the Board of Directors

Tuesday, May 26, 2015

10.0 ADJOURNMENT

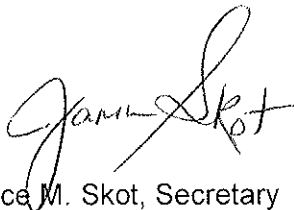
There being no further business the meeting was adjourned at 8:35 pm.

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

Respectfully submitted,



Kirsten Parker, Chair



Janice M. Skot, Secretary