

<b>Chair:</b>	Michael O’Keefe, Board Chair	
<b>Elected Directors:</b>	Linda Collins, Director Doug Frost, 2 <sup>nd</sup> Vice Chair Jim Gerhart, Director Michael Gleason, Director Douglas Jure, Director	Barbara Love, Director Kimberly Matheson, Director Wendy Miller, Director Jason Teal, Director Charlotte Wallis, 1 <sup>st</sup> Vice Chair
<b>Ex-Officio Directors:</b>	Dr. Dave Boushy, Vice President, Medical Staff Nancy Savage, EVP, RVP CCO & Interim CNE	Janice Skot, President & CEO Dr. Jeffrey Tyberg, Chief of Staff
<b>Regrets:</b>	Dr. Emily Chan, President, Medical Staff	Lise McCourt, President, RVH Auxiliary
<b>Staff Resources:</b>	Nicola Charity, Sr Admin Assistant, Recorder Eric Dean, CEO, RVH Foundation Suzanne Legue, VP Strategy, Communications Ben Petersen, VP, Chief Financial Officer	Wendy Sallows, Governance & Partnership Darrell Sewell, VP, Facilities & CHRO Dr. Chris Tebbutt, VP, AMA
<b>Guests:</b>	Greg Colucci, Diamond Schmitt Architects*	Natasha Procenko, MHA Student <i>*partial attendance</i>

**1.0 CALL TO ORDER**

The Chair called the meeting to order at 4:00 pm.

**Quorum** - There being two regrets, quorum was attained.

The Board Chair extended a welcome to board members.

**2.0 APPROVAL OF AGENDA/CONSENT AGENDA/Declaration of Conflicts**

**Declaration of Conflicts** – No conflicts of interest were noted.

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

- Minutes of Board Meeting (Mar 26 19) - *to be approved*
- Special Board Meeting Minutes (May 10 19) - *to be approved*
- Capital Planning Committee Summary Report (Apr 12 19) - *to be received*
- Executive Committee Summary Report (Apr 18 19) - *to be received*
- Finance & Audit Committee Summary Report (Mar 20 19) - *to be received*
  - 2018/19 Audited Financial Statements

**BE IT RESOLVED** that the RVH Board of Directors accepts the recommendation of the Finance and Audit Committee and approves the audited financial statements of the Royal Victoria Regional Health Centre for the year ended March 31, 2019.

- Annual Appointment of Auditors 2019/20

**BE IT RESOLVED** that the Board of Directors accepts the recommendation of the Finance & Audit Committee to appoint Deloitte as the auditors of record for the Royal Victoria Regional Health Centre for 2019/20.

- Compliance Attestations

**WHEREAS** the Finance and Audit Committee received documentation confirming RVH's compliance with the *Broader Public Sector Accountability Act* and associated Acts;

**BE IT RESOLVED** that the Board of Directors accepts the recommendation of the Finance and Audit Committee for approval to delegate the authority to the Board Chair and President & CEO to attest to RVH compliance with the *Broader Public Sector Accountability Act* and associated Acts.

- Governance Committee Summary Report (Apr 17 19 & May 7 19) – *to be received*

- 2019/20 Board and Committee Work Plans

**BE IT RESOLVED** that the Board of Directors accepts the recommendation of the Governance Committee and approves the 2019/20 Board and Committee Annual Work Plans.

- 2019/20 Board and Committee Terms of Reference

**BE IT RESOLVED** that the Board of Directors accepts the recommendation of the Governance Committee and approves the Committee Terms of Reference.

- Board & Corporate Policies

**BE IT RESOLVED** that the Board of Directors accepts the recommendation of the Finance & Audit and Governance Committees and approves the Travel & Hospitality Expense Policy, Roles & Responsibilities of the Board Policy and Position Descriptions.

- Joint Conference Committee Summary Report (Apr 11 19) - *to be received*
- RVH Auxiliary Report - *to be received*
- RVH Foundation Report - *to be received*
- MY CARE Annual Update
- Communication / Engagement Annual Update

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

**BE IT RESOLVED** the Board of Directors approves the May 28, 2019 Agenda, including Consent Agenda, as presented.

### 3.0 ITEMS FOR DECISION

#### **Master Planning – Endorsement of Preferred Options**

The President & CEO, Vice President, Corporate Services & CFO and Greg Colucci, Diamond Schmitt Architects provided a Master Planning update.

The President & CEO reported that during the Board Advance on May 10, 2019, Master Plan Options for the North Campus were reviewed in detail followed by further engagement with clinical user groups and the Capital Planning Advisory Committee (CPAC). Based on this feedback, the CPAC Committee has provided a recommendation for the Board's approval.

Greg Colucci reviewed the benefits and risks of the preferred options in detail, followed by next steps including detailed evaluation, phasing plans, engineering evaluation, user feedback and refined costing. The detailed evaluation and single preferred option approved by the Board will inform the pre-capital submissions to the Ministry of Health and Long Term Care.

Discussion ensued.

In response to a question, Greg Colucci reviewed the options in relation to fire emergencies, service and public elevators, comparator organizations and options best suited for future planning/expansion. In addition, the President & CEO reported on the opportunity to incorporate shelled space for future programs.

In response to a question, Greg Colucci provided a high level review of the pre-capital submission process to the Ministry of Health and Long Term Care and additional Ministries affiliated with the process as we progress.

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

**WHEREAS** based on stakeholder feedback, Option 3 will be revised to co-locate Day Surgery with the main Surgical Program;

**BE IT RESOLVED** that the RVH Board of Directors approves Options 3, 4, and 6 as the preferred North Campus Options.

*Greg Colucci, Diamond Schmitt Architects was excused from the meeting at 4:40 pm.*

### **Election of Directors**

The Chair, Governance Committee reported that a comprehensive recruitment process took place with the following recommendation:

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

**WHEREAS** the Governance Committee acting in the nominating capacity recommends the appointment of Karen Hansen to fill an unexpired term with an end date of June 2020;

**BE IT RESOLVED** that the Board of Directors accepts the recommendation of the Governance Committee and approves the appointment of Karen Hansen.

### **Returning Directors**

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

**WHEREAS** the Governance Committee acting in the nominating capacity recommends the election of Jason Teal for a first term, Doug Jure for a second term, Doug Frost and Michael Gleason for a third term with an end date of June 2022;

**BE IT RESOLVED** that the Board of Directors accepts the recommendation of the Governance Committee and approves the election of Jason Teal, Doug Jure, Doug Frost and Michael Gleason for a three year term.

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

In Camera discussions ensued regarding approval of the **Board of Directors March 26, 2019 In Camera Minutes, Professional Staff Credentialing and 2019/20 Operating Budget.**

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

### **2019/20 Operating Budget**

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

**WHEREAS** the Finance & Audit Committee recommended approval of a balanced 2019/20 Operating Budget with a summary report to be presented at the May 28, 2019 Board meeting;

**BE IT RESOLVED** that the Board of Directors approves the 2019/20 Operating Budget.

### **Professional Staff Credentialing**

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 Professional Staff Credentials as presented in the May 28, 2019 Medical Advisory Committee Report.

## **4.0 UPDATE REPORTS**

### **CHAIRS REMARKS**

The Board Chair reviewed the items in the folder.

### **Board Rounding**

The Board Chair thanked Board members for participating in Board Rounding in the Facilities and Building Operations Program. Board members commented on the outstanding cleanliness of maintenance rooms as well as staff's enthusiasm, ingenuity and ideas.

### **March Board Evaluation**

The Board Chair reported Board members indicated that agenda items were very clear and discussion was appropriate and helpful.

### **Quality Committee Summary Report**

The Quality Committee Chair provided an overview of the May Quality Committee meeting including two quality committee education sessions, an excellent annual Teaching & Research Activity Report, 2018/19 Q4 Performance Scorecard, positive Patient Survey Experience results, Emergency Department update, Quality Safety Metrics and Best Practice Spotlight Organization designation for the 13<sup>th</sup> year. In addition the Chair reported on the Regional Cancer Plan annual update highlighting success on various goals on the Cancer Care Ontario scorecard and RVH's 4/14 provincial standing in Q3.

### **CEO REPORT**

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

### **From Our Patients**

The President & CEO read two letters recently received expressing appreciation for the exceptional care, compassion and kindness received in the Emergency Department.

### ***Ontario Health Team Update***

The President & CEO and Vice President, Strategy, Communications & Stakeholder Relations reported that since the Ontario Health Team (OHT) presentation at the May 10, 2019 Board Advance, a readiness assessment has been submitted for consideration to form a Barrie-area OHT with a total of 14 signatories including RVH. 150 organizations/communities across the province have submitted readiness assessments to the Ministry of Health and Long Term Care. The existing Barrie Sub-region Planning Table, members of the "Formal Alliance", continue to meet to develop a shared vision and priorities for Year 1. Next steps include notification by the Ministry to communities/organizations invited to submit a formal submission in June and announcement of the first cohort of OHT's in the Fall 2019.

Discussion ensued.

In response to a question, the VP, Strategy, Communications & Stakeholder Relations reported signatories go beyond healthcare to include municipalities, school boards, etc., with a broad goal of improving health in the community. In addition, there was discussion regarding the LHINs participation in OHT's, current oversight of Home and Community Care and the Ministry's future plans for the LHINs.

### ***Regional IT – Meditech Expanses***

The President & CEO and Vice President, Corporate Services & CFO provided a brief Meditech Expanses update. The Regional IT Partnership (Collingwood General & Marine Hospital, Georgian Bay General Hospital, Headwaters Healthcare Centre and RVH) are continuing to progress in their re-evaluation of the Total Cost of Ownership (TCO) model approved by the Board in May 2018. Meditech provided the Partnership with an extension to June 28, 2019.

Next steps include a special Finance & Audit Committee meeting June 11, 2019 with a recommendation to the Board on June 18, 2019. Our partner organizations are also seeking Committee/Board approval by June 28, 2019.

The President & CEO acknowledged the commitment of our Board representatives on the Regional IT Partnership Board/CEO Advisory Group, VP, Corporate Services & CFO, VP, Facilities & CHRO and their teams. The Partnership continues to work together cohesively and is committed to the success of this project.

### ***Regional Clinical Service Plan***

The President & CEO and Executive Vice President, Patient & Family Experience, Regional Vice President, Cancer Care Ontario and Interim Chief Nursing Executive provided a high level update of the Regional Clinical Service Plan approved by the Board of Directors in March 2014. This plan mirrors our *MY CARE* strategic plan and will conclude in 2020. Annually the Senior Leadership Team reviews the progress of the plan, makes updates as required and reports to the Board of Directors.

## ***CHIEF OF STAFF REPORT***

### ***Professional Staff Matters***

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.

### ***Medical Advisory Committee Report***

The Chief of Staff provided an overview of the Medical Advisory Committee (MAC) report highlighting quality education sessions, quality and patient safety, sub-committees of MAC, and professional staff policy development.

**7.0 NEXT MEETING**

**Special Board Meeting & Annual General Meeting**

Tuesday, June 18, 2019

**Regular Meeting**

Tuesday, September 24, 2019

**8.0 ADJOURNMENT**

There being no further business the meeting was adjourned at 6:12 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