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| Chair: | Kirsten Parker, Board Chair | |
| Elected Directors: | Jake Arnold, Director Shawn Binns, Director Michael Gleason, Director Robert Hall, 1 st Vice Chair | Harry Hughes, Director Douglas Jure, Director Barbara Love, Director Michael O'Keefe, 2 nd Vice Chair |
| Ex-Officio Directors: | Treva McCumber, VP & CNE Dr. Sandy McDonald, President, Medical Staff Dr. Kerstin Mossman, VP, Medical Staff | Janice Skot, President and CEO Dr. Paul Voorheis, Interim Chief of Staff |
| Staff Resources: | Nicola Charity, Sr Admin Assistant, Recorder Lindsey Crawford, VP, Patient Programs Eric Dean, CEO, RVH Foundation Suzanne Legue, VP, Strategy, Communications & Stakeholder Relations | Ben Petersen, VP, Corporate Services & CFO Wendy Sallows, Governance & Partnership Liaison Nancy Savage, EVP, Patient & Family Experience Dr. Chris Tebbutt, VP, Medical Affairs & Quality |
| Regrets: | Doug Frost, Director Jeff Scott, Director Charlotte Wallis, Director Janice Williams, President, RVH Auxiliary | |
| Guests:* | Staff / Physician / Volunteer Recognition Ray Frank, Co-Chair, Patient Family Advisory Council Ed Harper, Member, Patient Family Advisory Council David McCullough, Chair RVH Foundation Rebeca Truax, Director Philanthropy Jimmy Furlano, Tyger Shark Tyler Murray, Tyger Shark | |

* partial attendance

1.0 CALL TO ORDER

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

Quorum - There being four regrets, quorum was attained.

2.0 SPECIAL PRESENTATIONS – Recognition of Award Recipients

The Board Chair recognized individuals throughout RVH who have been honoured with the following awards:

- Auxiliary Provincial Life members
- Auxiliary Award of Distinction
- Quality Healthcare Workplace Award – Gold Level
- 2015 NRCC Award
- Ontario College of Family Physicians Award of Excellence
- Green Hospital Scorecard – Silver Level
- Accreditation Leading Practice – EVS Educator
- Health Quality Ontario Award – Pharmacy

The Board Chair and President & CEO congratulated all the award recipients and extended sincere thanks on behalf of the Board for their hard work and dedication.

3.0 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 and the following motion was **duly moved, seconded and carried**:

BE IT RESOLVED the Board of Directors approve the November 24, 2015 Agenda and Consent Agenda with the exception of Board Agenda Policy & Medical Advisory Committee Report which has been removed for further discussion.

4.0 QUALITY EDUCATION SESSION

Patient Family Advisory Council

The EVP Patient & Family Experience, Ray Frank, PFAC Co-Chair and Ed Harper, PFAC Advisor reported on the Patient Family Advisory Council, their function and progress to date highlighting the Family Presence Policy and the Seniors Strategy Working Group.

Hearts & Minds Update / Heart of Gold

The RVH Foundation Chair and CEO provided an update on the Hearts & Minds Campaign progress to date, source of funds, working capital readiness, 2016 goals and the role of RVH Board members in this campaign. Tyger Shark representatives joined the meeting to review an innovative online app designed to contribute to the success of the campaign.

5.0 CHAIR'S REPORT

The Chair reviewed the items in the folder.

October Board Meeting Evaluation

The Board Chair commented on the October board meeting evaluations which provided very positive feedback. Members appreciated the iPad demonstration and IT support. It was suggested that additional one on one time might be beneficial in future demonstrations. Board members indicated Board agenda items were relevant and timely from a strategic perspective.

Board Rounding

The Board Chair thanked Board members for participating in the Board Rounding of the Cancer Program and the Surgery Program providing an opportunity for members to briefly share one key *MY CARE* learning from the session. Board members commented on the state of the art equipment and how it will benefit all the patients we serve.

Chief of Staff Recruitment Update

The Board Chair reported that RVH has conducted a national search for the Chief of Staff position. A large number of internal and external candidates expressed interest and the interview process commenced in November 2015. A recommendation to the Board is planned for the spring of 2016. In the interim Dr. Paul Voorheis has agreed to continue in the Interim Chief of Staff position allowing us the flexibility to continue our recruitment and ensure oversight of medical quality of care.

Thank You and Acknowledgements

The Board Chair provided thank you's and acknowledgements to Dr. Chris Tebbutt and team for their contribution to the successful 2nd annual RVH Ignite. Thanks was also extended to Board members for attending RVH Ignite, the NSM LHIN Regional Governance Session and OHA HealthAchieve 2015. The Chair highlighted Minister Hoskin's speech at the closing ceremonies reinforcing the desire for transformational structural change to healthcare in Ontario. The Chair extended thanks to Board member, Charlotte Wallis and RBC for their generous donation on her behalf for her volunteerism as a board member. In conclusion the Board Chair thanked the President & CEO for sharing the RVH story in Boston on November 4th at the Kaplan

and Norton Conference on the *Human Element of Strategy*. The conference included executives and thought leaders from many business sectors and around the world. The President & CEO expressed thanks to the RVH Communications Team who developed a very dynamic and powerful presentation to complement her keynote speech.

6.0 CEO REPORT

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

MY CARE

The President & CEO read a letter received recently from a family member commending the excellent, attentive care received by her father and family members on recent hospital admissions. Another excellent example of RVH health care professionals going above and beyond and indicative of the *MY CARE* initiatives.

Future Site Selection Update

The President & CEO and Chair Site Selection Committee reported that following a hiatus, the Site Selection Committee reconvened November 20, 2015. It is the mandate of the committee to assess, monitor, evaluate, advise and make recommendations to the Board with respect to long-range property planning including existing and potential satellite site locations in accordance with the health centre's mission and strategic vision. The St. Paul's property was sold and the committee has come together to plan for a future satellite site and oversee the development of a master plan for presentation in draft to the Board in May 2016. Recruitment is underway for two community members from Barrie and Innisfil to join the committee.

Innisdale Art

Art@RVH recently partnered with Innisdale Secondary School for an inspirational multi-disciplinary art exhibition entitled "*From the Ground Up*". The exhibit featured art, sculpture, music and dance as an acknowledgement of the patient journey from diagnosis through healing. The art and sculptures are on display through December in the health centre's corridor gallery.

MY CARE Strategic Plan Refresh

The Vice President, Strategy, Communications and Stakeholder Relations provided an update on the status of the *MY CARE* Strategic Plan refresh. This refresh provides an excellent opportunity to reenergize the health centre and align with recent organizational and environmental changes. The draft refresh will come to the Board for review in January followed by stakeholder engagement and final approval in May 2016.

Advanced Cardiac Care

The EVP, Patient & Family Experience provided an Advanced Cardiac Care update. The program is progressing with 32 projects, 18 in progress, 11 starting in the upcoming months and 3 completed. The EVP reviewed the pre-circulated program snapshot detailing the status of the 18 projects currently underway.

In response to a question, the impact of one project currently at risk (SA-PCI: Design & Construction) was clarified.

Child & Youth Mental Health

The Vice President, Patient Programs provided a Child & Youth Mental Health status update. Work is ongoing in the development of the 8 inpatient beds, day hospital and outpatient services. In the short term, an interim strategy has been implemented. The Urgent Consult Clinic opened in October, 3 days per week. To date 90% of the child and youth seen in the clinic did not require admission. The pre-capital submission has been submitted to the MoHLTC and NSM LHIN. The NSM LHIN will be reviewing this at the November 30th Board Meeting. The President & CEO and VP, Strategy, Communications and Stakeholder Relations will be advocating for the program on their upcoming visit to the MoHLTC. Recruitment of a child psychiatrist is ongoing.

In response to a question, the potential impact of the incoming Syrian refugees, government funding to assist and RVH's close relationship with Base Borden in developing a plan to support the healthcare needs of these individuals was discussed.

Kidney Care Update

The Vice President, Patient Programs provided a renal update on the status of the Comprehensive Kidney Disease (CKD) Care Program at RVH. The program snapshot indicates 39 projects, 14 in progress, 17 starting in upcoming months and 8 complete. Currently the temporary in-centre hemodialysis station is fully operational in the Cardiac Care Unit and accommodates two patients per day/6 days per week, at times running overcapacity. Inpatients who require hemodialysis no longer travel to OSMH for treatment. ORN has provided approval to plan Phase 2A, multiple stations to be located in the Medical Treatment Clinic with implementation by April 1, 2016. Phase 2B: Inpatient Peritoneal Dialysis is anticipated to launch in the spring of 2016 and Phase 3: Permanent In-Centre Hemodialysis Clinic is anticipated to launch 2018/19.

A brief discussion took place regarding the impact to the OSMH program and it was noted that RVH has a good working relationship with OSMH.

In response to a question, the VP, Patient Programs reported that peritoneal dialysis will be available in the health centre pending the completion of staff training. The anticipated implementation date is spring 2016.

The President & CEO reported that completion of the CKD program at RVH will also provide services to patients from Stevenson Memorial reducing their travel time.

RVH Research Teaching Plan - deferred

Simulation Lab

The Vice President Medical Affairs and Quality reported on the opening of the RVH Simulation Lab, a new teaching and educational tool that is becoming the gold standard in medical education. The Sim Lab uses high-fidelity patient simulators to provide education sessions with a vast collection of medical scenarios to both internal and external clinical teams.

IT Plan

The President & CEO provided a status update on the RVH IT Plan reviewing the relationship we share with Georgian Bay, Headwaters and CGMH as well as our looser affiliation with OSMH, MAHC, Grey Bruce and other hospitals considering new electronic health records. New system implementation is on hold until eHealth Ontario 2.0 makes their recommendations to the MoHLTC. RVH is not looking at a new system, but rather exploring the Meditech upgrade currently available. We are in the most ready position to move forward and will continue working closely with our partners.

Elected Officials Breakfast

The President & CEO reported the Elected Officials breakfast was a very successful event hosted by RVH November 20, 2015 and extended thanks to the Board Members in attendance.

2015/16 YTD Financial Update

The VP Corporate Services & CFO reviewed the 2015/16 financial statements as at September 30, 2015 including statement of operations, revenues, and expenses. The plan of action to balance was comprehensively reviewed at the November 17, 2015 Finance & Audit Committee meeting as follows:

- review of weighted case performance and action plans to reach PCOP target
- review of elective QBP volumes and action plans to reach targets
- FTE management (hiring) and review of programs with high sick and overtime
- review of programs with significant variances and development of action plans

The VP Corporate Services & CFO reported the October preliminary financial results are favourable.

In response to a question, the VP, Transitions, Diagnostics & CNE reported on the Rehab strategy to address ALC patients and the shift to a formalized care plan. The VP Corporate Services & CFO elaborated on the optimization plan for QBP cases, PCOP volumes and the strategies implemented to track and report data expediently in order to ensure the effectiveness of the action plans.

2016/17 Operating Budget

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.

7.0 MATTERS REQUIRING DECISION

Working Capital Plan

The VP, Corporate Services and CFO further reviewed the pre-circulated 2015/16 – 2019/20 Working Capital Plan which outlines the planned inflows and outflows of cash related to major projects, initiatives and equipment purchases over the next five years.

It was indicated that by the end of 2017/18, RVH will be operating expanded and new clinical programs that include:

- Advanced Cardiac Care
- Child & Youth Mental Health
- Kidney Care Program

Non-clinically, the plan outlines significant investment in IT and continued commitment to purchasing new equipment to maintain the health centre.

Discussion ensued.

In response to a question, the VP, Corporate Services & CFO expanded on strategic direction associated with Cardiac Cath Labs construction and provisions implemented for foreign exchange.

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

BE IT RESOLVED that the RVH Board of Directors accepts the recommendation of the Finance and Audit Committee and approves the RVH Working Capital Plan for the fiscal years 2015/16 to 2017/18.

Physician Update

The Interim Chief of Staff provided an update on the recommendations made by the Medical Advisory Committee in the matter of Dr. [REDACTED] and reviewed the recommendations of the Physician Help Program (PHP).

Discussion ensued.

In response to a question, the Interim Chief of Staff indicated that he is responsible to ensure the recommendations are met and the Chief of Surgery is monitoring Dr. [REDACTED] closely in his role as a Surgical Assist.

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

WHEREAS the Physician Health Program (PHP) Report outlined the following recommendations regarding Dr. [REDACTED]:

PHP recommendation #1: The PHP discussed with Dr. [REDACTED] that he may find benefit potential interventions such as focused therapy. The PHP would be available to offer such resources to Dr. [REDACTED].

PHP recommendation #2: Dr. [REDACTED] would benefit from regular feedback. Feedback ought to be positive in nature, supporting and reinforcing the attainment of behavioural goals. Constructive criticism/feedback, when required, must be provided in a timely manner if Dr. [REDACTED] is to receive benefit.

WHEREAS the Medical Advisory Committee accepted the motion to implement the recommendations made in the PHP report;

BE IT RESOLVED that the RVH Board of Directors accepts the recommendations of the Medical Advisory Committee to move forward with implementing the Physician Health Program report.

Physician Credentials

The Interim Chief of Staff reviewed the pre-circulated list of Physicians requiring credentialing identifying their status and reason for change of status.

Discussion ensued.

In response to a question, the Interim Chief of Staff reviewed non-physician positions that also come to MAC for 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 Physician Credentials as presented on the October 8, 2015 MAC report.

8.0 MATTERS REQUIRING DISCUSSION

Quality Improvement Plan (QIP) Semi-Annual Update

The Vice President Medical Affairs and Quality provided a 2015/16 Quality Improvement Plan (QIP) review highlighting hospital associated CDIs, medication reconciliation, ED wait times, patient satisfaction, ALC days, 30 day readmissions, and total margin.

Discussion ensued.

In response to a question, the VP Medical Affairs and Quality clarified patient readmit status.

9.0 OTHER BUSINESS

RVH Auxiliary Report - circulated for information only

RVH Foundation Report – circulated for information only

10.0 NEXT MEETING

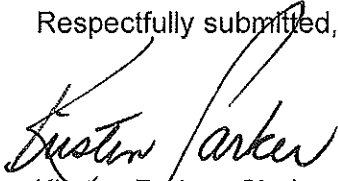
Regular Meeting of the Board of Directors
Tuesday, January 26, 2016

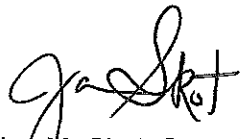
11.0 ADJOURNMENT

There being no further business the meeting was adjourned at 7:50 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