

Chair:	Kirsten Parker, Board Chair	
Elected Directors:	Jake Arnold, Director Shawn Binns, Director Doug Frost, Director Michael Gleason, Director Harry Hughes, Director	Douglas Jure, Director Barbara Love, Director Michael O'Keefe, 2 nd Vice Chair Jeff Scott, Director Charlotte Wallis, Director
Ex-Officio Directors:	Dr. Kerstin Mossman, VP, Medical Staff Janice Skot, President and CEO	Dr. Paul Voorheis, Interim Chief of Staff Janice Williams, President, RVH Auxiliary
Staff Resources:	Nicola Charity, Sr Admin Assistant, Recorder Lindsey Crawford, VP Patient Programs Suzanne Legue, Chief Communications Officer Ben Petersen, VP, Chief Financial Officer	Wendy Sallows, Governance & Partnership Liaison Nancy Savage, Executive Vice President Val Smith, Chief Transformation Officer Dr. Chris Tebbutt, VP, Academic & Medical Affairs
Regrets:	Eric Dean, CEO, RVH Foundation Robert Hall, 1 st Vice Chair Trevia McCumber, VP, Transitions, Diagnostics & CNE Dr. Sandy McDonald, President, Medical Staff	
Guests:	<u>Staff / Physician / Volunteer Recognition*</u> Nancy Corcoran, Geriatrics Nurse Practitioner Iris Laycock, RVH Health & Wellness Coordinator Dana Naylor, Operations Director, Medicine Program Jonathan Wiersma, Direction Decision Support	
	<u>RVH IT*</u> Scott Filman & Aaron LeBlanc, Systems Administrators	

* *partial attendance*

1.0 CALL TO ORDER

The Chair called the meeting to order at 4:05 pm.

Quorum - There being three 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:

- EXTRA Fellowship
- United Way Spirit Award
- Studer Fire Starter Award

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 approves the October 6, 2015 Agenda, including Consent Agenda, as presented.

4.0 QUALITY EDUCATION SESSION

The Governance & Partnership Liaison and System Administrators, Scott Filman and Aaron LeBlanc rolled out the new Board of Directors' iPads and provided a brief demonstration on their use.

5.0 BUSINESS ARISING from MINUTES

No business arising.

6.0 CHAIR'S REPORT

The Chair reviewed the items in the folder.

May Board Meeting Evaluation

The Board Chair commented on the May board meeting evaluations which provided very positive feedback. The information presented during the tour of Human Resources and the education session was very informative, comprehensive, and interesting. The Chair reemphasized the value of Board comments and suggestions for use throughout the year to make improvements.

Board Annual Signing Documents

The Chair noted that in keeping with best practice, the Roles and Responsibilities, Annual Director Declaration and Consent, Privacy Policy and the Code of Conduct, which was read aloud by all Directors in attendance, require annual signature.

Confidentiality

Confidentiality was reviewed along with good governance practices for in camera minutes. These minutes are confidential, recorded separately, signed by the Chair and Board Secretary and stored in a sealed envelope in the Board minute book. Board members were reminded that all matters discussed at a board committee meeting are confidential unless determined not to be confidential by the Committee Chair. The only spokespersons for the health centre are the Chair of the Board and the President and CEO. The Chair stated that in deciding what can be communicated by Board members outside of a Board meeting, it is important to balance transparency while protecting the best interests of the organization and board members were encouraged to ask if they are unsure. It was also noted that best practice for Directors of the Board is to forward any questions directly to the Chair of the Board or to the President & CEO. Patient complaints communicated to Board members should be redirected to the patient representative office.

2015/16 Peer Evaluations

The Chair asked the Directors to review the peer evaluation templates provided to them in sealed envelopes noting that each Director is responsible for submitting to the Chair an evaluation at the March 2016 meeting, of 4-5 of their peers.

Board of Directors Award of Excellence

The Board Chair requested that at least three Board members volunteer to sit on the 2015 Board Awards of Excellence Selection Committee which will involve one meeting in December/January. Volunteers were asked to contact the Governance & Partnership Liaison if they would like to participate.

Board Rounding

The Board Chair thanked Board members for participating in the Board Rounding of the Lab and provided an opportunity for members to briefly share one key *MY CARE* learning from the session. Board members

commented on the state of the art technology which supports increased volumes while maintaining current staffing levels.

Board Orientation

The Board Chair thanked everyone who participated in the Board orientation. A great deal of valuable information was provided to assist Board members in fulfilling their oversight responsibilities.

Chief of Staff Recruitment Update

The Board Chair reported that the Chief of Staff recruitment is ongoing with the assistance of Promeus, a Toronto based executive search firm. A large number of internal and external candidates have expressed interest. A two-step interview process will take place in November with recommendations coming to the November Board meeting.

Thank You and Acknowledgements

The Board Chair provided thank you's and acknowledgements to Board members for participating in the OHA Healthcare Governance Forum, OHA Governance continuing education opportunities, NSM LHIN Acute Care Summit and the RVH Quarter Century Dinner.

7.0 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 patient commending the excellent, attentive care received in the Surgery Program which is an example of RVH health care professionals going above and beyond and indicative of the *MY CARE* initiatives.

Stroke Distinction Plaque

RVH was recognized at the Canadian Stroke Congress in Toronto by Accreditation Canada for achieving Stroke Distinction for Acute and Rehabilitation Services. The President & CEO shared with the Board the commemorative plaque that was received by RVH in recognition.

Studer Australian Delegation

RVH hosted a *MY CARE* tour for a delegation of health care professionals from Australia and hospitals from across Ontario. The group toured various departments to see our *MY CARE* strategy in action. The President & CEO expressed thanks to all who shared in the success of the tour.

Art @ RVH

Thanks to Frances Thomas, art consultant and the members of ART@RVH committee, stunning pieces of art can be seen throughout the health centre. The President & CEO expressed appreciation for the recent donation of a painting from visual artist Christi Belcourt, shortlisted for the 2nd time for the Premier's Awards. This and many other works of art hang in the RVH hallways for all to appreciate.

Baby Chimes

The Chief Communications Officer introduced the Baby Chimes initiative recently implemented in the health centre. This suggestion was brought forward by a staff member and provides an opportunity to celebrate the miracle of birth happening each day at RVH.

Strategic Plan Implementation Status

The President & CEO provided the first quarter report on the execution of the *MY CARE* strategy through analysis of the balanced scorecard. Areas of key focus throughout the organization include:

- improve the patient experience – would you recommend (yes definitely)
- conservable days
- ED wait times

- **ALC**

Implementation status was reviewed under the strategic direction of Focus on *MY CARE*, Drive Clinical Excellence, Value People and Accelerate Teaching & Research.

Discussion ensued.

In response to a question, the VP, Academic & Medical Affairs and VP, Patient Programs provided a status update on staff recruitment for the Cardiac program.

The President & CEO recognized the Senior Leadership Team for their exceptional work moving the strategic plan forward.

Organizational Chart Update

The President & CEO reviewed the changes to the pre-circulated organizational chart.

Election Policy

The Chief Communications Officer reviewed the RVH election policy which prohibits staff, physicians and volunteers who identify themselves as working, practicing or volunteering with the health centre from publicly endorsing any particular candidate.

Renal Update

The Vice President, Patient Programs provided a renal update on the status of a Comprehensive Kidney Disease (CKD) Care Program at RVH a key deliverable in the Regional Clinical Services Plan. This program will provide patient centred care with a full range of services closer to home including:

- CKD clinics and satellite (out-patient) hemodialysis services
- in-centre and in-patient hemodialysis
- in-patient care of peritoneal dialysis patients at RVH

The program vision foresees RVH as a recognized Ontario Renal Network (ORN) CKD and second regional hub providing a full continuum of renal services partnering with OSMH to develop a network of high quality care.

Discussion ensued.

In response to a question, the VP Patient Programs reviewed single versus double hub models.

In response to a question, a new approach to regional funding and implications to RVH and partnering hospitals were discussed.

The Chair of the Board commended the VP Patient Programs and all who participated for the tremendous amount of work that has been done in such a short period of time to move this initiative forward.

Child & Youth Mental Health

The EVP, Patient & Family Experience, VP, Patient Programs and VP, Corporate Services & CFO provided a Child & Youth Mental Health status update. Work is ongoing in the development of the 8 inpatient beds, day hospital and outpatient services. Short term an interim strategy has been implemented. With our community partners a Child & Youth Mental Health Urgent Care Clinic (UCC) opened October 5th in our Emergency Department. This is staffed by an emergency RN, social worker and psychiatrist. Child psychiatrist recruitment is ongoing. The official roll out to the region is scheduled for early December.

Discussion ensued.

In response to a question, children seen in the UCC requiring admission will be admitted to one of four separate designated child and youth beds within the health centre.

In response to a question, the VP, Corporate Services & CFO provided an update on the status of the pre-capital submissions and operating funding.

Advanced Cardiac Care

The EVP, Patient & Family Experience and VP, Corporate Services & CFO provided an Advanced Cardiac Care status update. The President & CEO spoke to the excitement we shared with Premier Wynne's visit officially endorsing the project. The EVP reviewed the pre-circulated RVH / Southlake Advanced Cardiac Care Governance Scorecard. This is a high level scorecard established to track the progress of both organizations and is shared with the NSM and Central LHIN Boards quarterly. The Advanced Cardiac Care Project working groups currently have 32 projects underway.

The Vice President Corporate Services & CFO reported that the pre-capital submission is complete and we are diligently working with the MoH LTC to accelerate the process. A funding update was also provided.

Lindsey Crawford, VP Patient Programs was excused from the meeting at 6:44 pm.

Employee & Physician Engagement

The Chief Transformation Officer reported on employee engagement reviewing the 2015 employee experience survey response rates, engagement scores, top drivers for engagement, what we do well, opportunities and the SLT action plan. The survey is completed every 18 months and the 2015 response rate is on par with Ministry standards. Based on the engagement scores, the CTO reported that senior leaders will be focusing their rounding on areas with decreased scores. Initiatives linked to Studer tactics will be further promoted as successful implementation generates increased engagement and higher quality of care.

The Vice President, Academic & Medical Affairs provided an overview of Physician/Professional Staff Engagement Survey 2015 highlighting survey response rates, physician engagement, and physician action plans. While the RVH response rates were slightly higher than the peer group, the Physician Engagement Committee continues to meet quarterly to review feedback and develop innovative strategies to enhance engagement and monitor the implementation and completion of action plan items.

Discussion ensued.

In response to a question, correlation between the employee and physician engagement results was discussed.

Dear Team RVH

The Chief Communications Officer shared a very powerful video of patients and family thanking RVH for all they do.

Power of Team

The Chief Communications Officer introduced a new initiative valuing people and working together. The President & CEO will be our roving reporter speaking with staff, physicians and volunteers throughout the health centre.

8.0 MATTERS REQUIRING DISCUSSION

Quality Committee Summary Report

The Quality Committee Chair provided an update from the September 29, 2015 Quality Committee meeting highlighting presentations from the Medicine Program, Cardiovascular Program and Infection Prevention & Control (IPAC) as well as updates on the Q1 Performance Scorecard, comprehensive review of the employee and physician engagement survey and patient safety metrics.

9.0 OTHER BUSINESS

RVH Auxiliary Report

The Auxiliary President reported on the Auxiliary's Donor Event in September, the award of distinction honouring volunteer Jean McGinley, the upcoming presentation of \$300,000 to the RVH Foundation as part of their pledge commitment and recognition of five provincial life members at the upcoming OHA HealthAchieve in November.

RVH Foundation Report – circulated for information only

10.0 IN CAMERA DISCUSSION

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

2015/16 Budget Update

In camera discussion ensued.

Legal Update

In camera discussion ensued.

Physician Update

In camera discussion ensued.

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

11.0 MATTERS REQUIRING DECISION

Physician Credentialing

The Interim Chief of Staff presented the following credentialing motions to the Board of Directors.

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

WHEREAS the Medical Advisory Committee recommends to the RVH Board of Directors that Dr. [REDACTED] application for reappointment to the Professional Staff of RVH be granted on condition that she undergo an assessment by the Physician Help Program (PHP); and

WHEREAS the PHP assessment will be initiated and completed in a reasonable timeframe as defined by the Chief of Staff, and

WHEREAS the Medical Advisory Committee recommends to the RVH Board of Directors that the PHP shall provide the report of its Assessment to the RVH Chief of Staff; and

WHEREAS the Medical Advisory Committee recommends to the RVH Board of Directors that Dr. [REDACTED] be required to undertake any remediation(s) recommended by the PHP Assessment. In the event that Dr. [REDACTED] feels any specific recommendation is 'unreasonable' she may have it considered by a committee comprising the Chief of Staff, the Chief of her Department and the President of the Medical Staff which has the sole and absolute discretion to relieve against or enforce such specific recommendation;

BE IT RESOLVED that the RVH Board of Directors accepts the recommendations of the Medical Advisory Committee regarding the conditional appointment of Dr. [REDACTED].

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

WHEREAS the Medical Advisory Committee recommended that Dr. [REDACTED] 2015 reappointment in the Department of Anesthesia be held in abeyance; and

WHEREAS on March 31, 2016, the Board of Directors acknowledged the recommendation of the Medical Advisory Committee and approved term privileges in the Department of Surgery as Surgical Assist for Dr. [REDACTED]; and

WHEREAS Dr. [REDACTED] has resigned his appointment to the Department of Anesthesia;

BE IT RESOLVED that the Board of Directors accepts the recommendation of the Medical Advisory Committee and accepts Dr. [REDACTED] resignation of his reappointment to the Department of Anesthesia.

12.0 NEXT MEETING

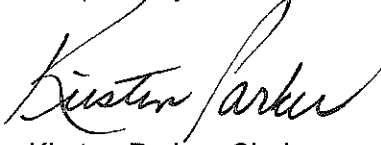
Regular Meeting of the Board of Directors
Tuesday, November 24, 2015

13.0 ADJOURNMENT

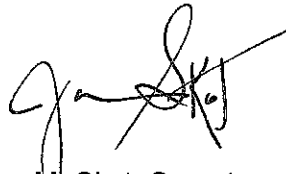
There being no further business the meeting was adjourned at 8:05 pm.

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