

LONDON HEALTH SCIENCES CENTRE
OPEN MEETING
 OF THE
BOARD OF DIRECTORS
 Held, Wednesday, September 24, 2014 @ 1500 hours
 in the Victoria Hospital Board Room C3-401

Board Members Present:

B. Bird, V. Burkoski, S. Caplan, S. Carlyle, R. Conyngham (Chair), S. Elliott, V. Fantillo, M. Faysal, T. Gergely, M. Glendining, T. Gustafson, K. Haines, C. Hanycz, S. Hassan, M. MacLeod, L. McBride, R. Robinson, K. Ross, F. Siddiqi, I. Shewan, R. Sifton, M. Strong J. Wright(T)

Board Member Regrets:**Guests:**

G. Kernaghan, P. Griffin, H. Rundle=[r]

Resource:

T. Eskildsen

(T)= teleconference

□ = attachments

1.0 CALL TO ORDER/REVIEW OF AGENDA

Mrs. Conyngham welcomed the Board Directors, both new and veteran, leadership and special guests to the September Board of Directors meeting. The Standard Code of Parliamentary Procedure, the LHSC Board approved mechanisms of parliamentary procedure was reviewed including, consent agenda, the form of unanimous consent utilized during recommendations.

Mrs. Conyngham called the meeting to order and reminded the Board that should any discussion or questions come up to not hesitate to table them. It was identified that at time, that a member wishes to discuss any item in the Consent Agenda, to please let either the Chair or the Secretary know. Directors were invited to declare conflicts or perceive someone else's conflict of interest either now or at the time of the item.

The Board of Directors APPROVED by UNANIMOUS CONSENT, the Regular and Consent Agenda for the September 24, 2014 Board meeting, consisting of the following recommendations and reports:

1.1 Minutes of Regular Meeting 2014/06/24

1.2 Minutes of Organizational Meeting 2014/06/24

1.3 Committee Minutes

- ✦ Governance Committee 20140915
- ✦ Finance and Audit 20140911
- ✦ Human Resources Committee 20140903
- ✦ Medical Advisory Committee Minutes 20140604, 20140625, 20140716, 20140827
- ✦ Quality and Performance Monitoring 20140916

1.4 Finance and Audit Committee Routine Approvals

- ✘ *HMMS Amendment to Joint Venture Agreement*
- ✘ *Annual Reconciliations & Settlements*
- ✘ *2013/14 Clinical Education GFT Professor & Secretary*
- ✘ *2013/14 Clinical Education Budget – Residents*
- ✘ *Annual Reconciliations & Settlements*
- ✘ *2013/14 Community Mental Health Program (CMHC, Children's Mental Health, Psychiatric*
- ✘ *Outpatient Medical Salaries Program 3003-3116)*
- ✘ *2013/14 Hospital on Call Coverage (HOCC Year End Funding Settlement)*
- ✘ *2013/14 Midwifery Year End Settlement*
- ✘ *2013/14 London Regional Base Hospital Program*
- ✘ *2013/14 Ministry of Community and Youth Services (MCYS) Transfer Payment Annual Reconciliation*

2.0 CALL TO ORDER/REVIEW OF AGENDA

2.1 Chair's Remarks

An overview was provided on the following items:

Accreditation Canada

LHSC is scheduled to have an Accreditation review, November 3 to 7, 2014. This process and preparations represent a continuous effort to quality improvement, in which the survey ends and preparations for the next one begins. The Accreditation Canada survey team has asked to speak to both veteran and new Board Directors that can answer questions on the governance work of quality, ethics, culture, strategic planning, etc. This is a request that is usually representative of the members of the Executive Committee as well as one or two others.

LHSF Strategic Planning Session

On the Board's behalf, at the Foundation's invitation Mrs. Conyngham and Mr. Gergely took part in the London Health Sciences Foundation at two planning sessions.

Joint Collaboration and Integration Committee

This committee consists of members from both LHSC and St. Joseph's. This group meets to discuss items that are integrated, shared or affect both organizations.

Board Recognition Event

The Board Directors were reminded that the event was upcoming and to RSVP to Governance Office if they hadn't completed this to date.

Country Classic Auction

Those are purchasing tickets but don't have a table are encouraged to contact Ruthe Anne Conyngham to organize a table.

LHSC Board Orientation 2014/15

Mrs. Conyngham reviewed that the new approach to provide Board Directors with an appropriate amount of education prior to first Board and Committee meetings. The three phase process received positive feedback and the participants have supported that this approach continue and evolve as required.

2.2 President's Report

Mr. Glendining submitted into record his September 2014 report and updated the Board of Directors on the following items:

- Occupancy and alternate level of care levels were at unprecedented heights at points over the summer months.
- Implementation of HUGO, this has been large effort by the IT team to get this up and running. However, it is recognized that in some areas it has been a major challenge and a serious impact on our learners. The organization has been working with our clinical partners to both find and implement solutions. There is an upgrade planned in the near future that will address many of the issues already identified.
- LHSC is expecting their 2013/14 funding announcement within the next few days, already six months into the fiscal period. LHSC is currently not on budget and are slightly behind. LHSC will balance as required, but a newly created shared accountability model will factor in future work to both resolve budget issues and create plans for the future.
- Clinical Services Strategy work is ongoing and will continue with both short term and long term goals. There are a number of areas working to improve and engage staff in coming up with value streams and kaizens. This work will remain a priority for the organization and the Board will receive additional information as leadership works to bring this and other proposed priorities of the organization to Board for their support in January 2015.
- Connecting South West Ontario work continues. Every hospital in four LHINS with the exception of Windsor and Grey Bruce area are connected. There are ten physicians being selected to get them up and running, to address any issues and continue to evolve the education model to streamline both access and the use of the system.
- Ministry of Health and specifically the Deputy has started to articulate his priorities and plans including bringing a table of leaders together to discuss health system funding reform direction and if required a course-correct as the province moves into volume management.
- Ebola, as mentioned in the report. It could arrive and LHSC is ready.

2.2.1 LHSC and Western University Affiliation Agreement Extension

It was reported that work was continuing between LHSC and Western to develop the next evolution of the Affiliation Agreement. The agreement currently expires as at September 30, 2014 and an extension is required while this agreement review is being undertaken.

The Board of Directors APPROVED by UNANIMOUS CONSENT that the Affiliation Agreement be extended for a period of seven months until April 30, 2015 or until such time that the Replacement Agreement has been endorsed by the LHSC Board of Directors.

2.3 Lawson Update

Mrs. Conyngham reviewed that the current Chair of Lawson, sent his regrets and that the summer reports of work ongoing were within the material pre-read package. The Board engaged Dr. Hill in discussion about any concerns that he has currently. Dr. Hill indicated that funding and granting is very competitive creating a tight market and there will always be a concern around the future of research funding.

2.4 Medical Advisory Committee Recommendation

2.4.1 Credentialing overview

Dr. Robin Walker provided a detailed orientation around the credentialing processes required for the Medical Advisory Committee to make recommendations for physicians to practice under the auspices of LHSC.

2.4.2 New Appointments to Professional Staff June

2.4.3 Changes to Professional Staff Appointments June

2.4.4 Clinical Fellow Appointments

It was noted that Clinical Fellows are physicians who have completed their training programs and are here at LHSC for further training. Many are already licensed. In response to a question of the Board, Dr. MacLeod indicated that there are no red flags in reference to any of the candidates coming forward for appointment this month.

The Board of Directors APPROVED By UNANIMOUS CONSENT the following recommendations:

- ✘ **New Appointments to Professional Staff September**
- ✘ **Changes to Professional Staff Appointments September**
- ✘ **Clinical Fellows appointments**

2.5 Governance Committee Updates

Mr. Elliott updated the Board on two items from the Governance Committee. Through discussion at a summer Executive Committee meeting, the development of Board Priorities to keep the broad four or five items of focus top of mind. Governance will be working on this document and will be circulating to the Board for feedback soon. Four or five areas of focus include, risk management, leadership and performance, quality and patient experience.

Mr. Elliott reported that the Governance Committee agreed that there was opportunity to help the Board improve its performance through Board materials and presentation expectations. The work will result in some standard templates that will hope to strike the appropriate balance of having the required detail with standard format and content.

2.5.1 Committee Chair Role Description

This item was deferred until October 2014.

2.6 Human Resources Committee

Mrs. Robinson provided the Board an overview of the first meeting of 2014/15 Committee term indicating that the group by passed the bigger orientation for an opportunity to solidify terms of reference, workplan aligned with Board priorities. Further work will be completed to amend the Human Resources terms of reference to address the correlation between the people and quality improvement. Mrs. Robinson further shared that physician partnership and employee engagement remains top of mind, and an open invitation was extended to all Board Director Physicians to attend the meetings for these generative conversations.

A more detailed look at absenteeism will be on the agenda for October, as well as a look at initiatives ongoing in the province.

2.7 Quality and Performance Monitoring Committee

2.7.1 Q1 QPMC Indicator Results

Mr. Hassan submitted the Q1 QPMC Indicator Results into record and provided an overview of the 2014/15 Quality Improvement, indicators and targets. Mr. Hassan encouraged new Board Directors to take part in learning more on Continuous Quality Improvement councils through Gemba walks or website review of the initiatives that are currently in progress and how this quality improvement demonstrates engagement of people at the front line as a key stakeholder in improving patient experience.

2.8 Finance and Audit Committee

2.8.1 Q1 Financial Results

Ms. Bird on Ms. Faysal's behalf reported the hospital's financial position as at the end of June 30, 2014. Overall, the Hospital has a \$4.9M net deficit to June 30, 2014 and an unfavourable run rate of \$3.5M. This is comprised of \$3.6 million of favourable revenue to budget and \$7.1 million in unfavourable expenses to budget. As noted previously, LHSC's marginal operating surpluses have been supplemented by one-time PCOP funding. These allocations have now been reconciled and we are in the process of negotiating our final tranche of M2P3 PCOP funding.

The Board of Directors APPROVED by UNANIMOUS CONSENT the Q1 June Financial Results.

2.8.2 Professional Services Policy- External Audit Review

Ernst and Young's contract with LHSC concluded March 31, 2014 and according to our professional services policy, a formal review of external audit services will occur at least every five years. The review includes various considerations such as industry qualifications, access to specialized technical resources, audit plan framework, frequency and forms of ongoing communications, independence, quality control procedures, partner involvement and balanced relationship with the Hospital. An amendment was made to the original recommendation submitted into record with the Finance and Audit Committee to amend the five year extension to a one year extension.

The Board of Directors APPROVED by UNANIMOUS CONSENT, the selection of Ernst & Young as LHSC's External Auditors for a term of one year commencing April 1, 2014 and terminating March 31, 2015.

Mr. Gergely declared a Conflict of Interest for item 2.8.3 Actuarial services excused himself from the meeting room for the duration of the item.

2.8.3 Professional Services Policy – Actuarial Services

The Board of Directors APPROVED by UNANIMOUS CONSENT, an amendment to the Retention and Selection of Professional Services Policy to include Actuarial Services for London Health Sciences Centre.

Mr. Gergely was invited to return to the meeting.

3.0 ADJOURNMENT

The meeting was ADJOURNED by UNANIMOUS CONSENT.

Recorded by
Tammy L. Eskildsen

Ruthe Anne Conyngham, Chair
Board of Directors