

**DRAFT**

**OPEN MEETING MINUTES  
BOARD OF DIRECTORS**

Held, Wednesday, April 27, 2016  
at 1500 hours  
in Victoria Hospital Board Room C3-401

**Board Members Present:**

B. Bird, R. Conyngham, M. Glendining, K. Haines, S. Jaekel, J. Wright, R. Robinson, A. Walby, P. Retty, K. Ross, Sharon Irwin-Foulon, M. MacLeod, T. Gergely, V. Burkoski, S. Caplan, D. Woodward, L. McBride, K. Church

**Board Member Regrets:**

R. Sifton, A. Hopper, M. Strong, S. Carlyle, V. Fantillo

**Guests:**

G. Kernaghan, M. Kellow, H. Rundle, C. Cavanagh

**Resource:**

T. Eskildsen

## **1.0 CALL TO ORDER/REVIEW OF AGENDA/CONSENT AGENDA**

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Mr. Gergely called the meeting and reminded the Board of the Ethical Decision Making Framework and Conflict of Interest Policy that the Board adheres to and encouraged those members who may feel they have conflict or perceive someone else's conflict to bring it forward, either now or at the time of the item.

**After seeking concerns or objections to the items within the consent agenda, the items listed in Appendix 1 and as noted below and starting on page 113 were APPROVED by UNANIMOUS CONSENT:**

***1.1 Minutes of Regular Meeting 2014/03/30***

***1.2 Committee Minutes***

***1.2.1 Finance and Audit Committee 20160414***

***1.2.2 Governance Committee 20160321***

***1.2.3 Human Resources Committee 20160405***

***1.2.4 Medical Advisory Committee 20160413***

## **2.0 NEW BUSINESS/INFORMATION/APPROVALS**

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### **2.1 Chair's Remarks**

Mr. Gergely and Board Directors reviewed work ongoing in the past month, upcoming events and highlighted the following items:

- An upcoming event to not miss is 'Tastings' hosted by London Health Sciences Foundation on May 5, 2016.
- Ms. Haines noted that she attended the LHSC Staff Memorial on April 26, 2016. Ms. Haines, noted that the annual Staff Memorial is an opportunity for healing, a time when we can be together in community to honour and remember colleagues who have died in the previous year.

### **2.2 CEO Report**

Mr. Glendining submitted his report into record and indicated he would be pleased to answer questions. The following items were highlighted:

- Financially the fiscal year 2016 has resulted in a small surplus, which was representative of a revenue solution. LHSC leaders and physicians continue to work to reduce unit costs throughout the organization.
- Stem cell media coverage was discussed. The Minister of Health has asked all stem cell transplant centres to work together to find a solution to expand capacity.
- Budget 2016 took action to reinvigorate Canada's research and science base by investing in infrastructure at post-secondary institutions and federal laboratories, fostering research excellence, and accelerating the diffusion and commercialization of knowledge into applications that benefit industry and society as a whole. Originally it was identified that hospital research institutions could participate through affiliated universities to submit applications for this funding. Through a recent meeting with Western University, it was identified that LHSC will not be able to participate in this application process.
- Legislation amendments are under development to allow primary care to be integrated with the Local Health Integrated Networks with a proposed time line of spring 2017. Within the Ministry of Health, there are plans to develop advisory panels to assist LHIN Presidents and CEOs through each phase of this process. The first phase of work is estimated to take six months and following this the first advisory group would disband and the next advisory committee would take its place to focus on the next phase of the work. This is to ensure that the flow of primary care work is carefully integrated to successful transition and outcomes for the patient populations. Otherwise, LHSC could experience issues in the form of delayed discharges and increased length of stay.
- Earlier this year the Ontario government made changes to the *Smoke-Free Ontario Act* which limited the number of Designated Smoking Areas (DSA) at hospitals to one per hospital site until Jan. 1, 2018 at which time all hospitals must be completely smoke-free. Given the size and scope of LHSC's hospital sites it would be extremely difficult to limit smoking to one DSA, so LHSC has made the decision to become a completely smoke-free facility as of June 30, 2016.
- On April 1, 2016, the University Hospital and Victoria Hospital Inpatient Medicine teams launched six (6) month pilot for the Seven Day Health Disciplines Model to address an identified gap in the discharge planning process through the Admission and Discharge System Design (ADSD) project. This pilot is funded through Pay for Results with the aim to enhance assessments and treatments over the weekend and decrease length of stay with consistent support from all health disciplines, including Clinical Nutrition, Occupational Therapy, Physiotherapy and Social Work.

## **2.3 Quality and Performance Monitoring Recommendation and Update**

### **2.3.1 Prostate Resource Transfer**

Mr. McBride provided an overview of the discussions at the QPMC meeting highlighting that this resource transfer has been a work in progress for several years. The Quality and Performance Monitoring Committee received a thorough presentation from Brenda Fleming regional director, London Regional Cancer Program which highlighted that:

- this is an improved patient care mechanism by consolidating the diagnostic imaging to one place and reduce variability and elevate the standard of care to align with best practice.
- there are no clinical or financial vulnerabilities created through this transfer
- St. Joseph's has sufficient capacity to take this work on

**The Board of Directors APPROVED BY UNANIMOUS CONSENT the consolidation of all Prostate Cancer Diagnostic Assessment services at the St Joseph's site of St Joseph's Health Care London, through a voluntary integration application with the South West LHIN. This will afford the citizens of London Middlesex:**

- **A single point of access for prostate cancer assessment designed according to Cancer Care Ontario best practice guidelines for men facing a suspicion of prostate cancer.**
- **Streamlined scheduling and coordination of diagnostic tests and consultations using a model consistent with best practice and designed by the clinicians and patients.**
- **The consolidation of diagnostic prostate biopsy procedures to St. Joseph's.**

- Patient navigation will be instituted to ensure relevant and timely information and support for the patients throughout the assessment process to treatment options including hospital based treatments of surgery, radiation and systemic therapy.
- Continued access to specialist services in surgery, radiation therapy and chemotherapy in existing locations within the London Health Sciences Centre

## 2.4 Lawson Health Research Institute Report

Dr. Rundle submitted the April report into record and highlighted Lawson's funding successes for April. It was further noted that a special award was presented to Mrs. Ruthe Anne Conyngham as an Honorary Scientist, an award only previously presented two previous times over Lawson's entire history.

## 2.5 St. Joseph's Health Care London Update

Ms. Kellow indicated that there was nothing new to report for St. Joseph's.

## 2.6 Medical Advisory Committee Recommendations

2.6.1 New Appointments to Professional Staff Apr

2.6.2 Changes to Professional Staff Appointments Apr

2.6.3 Appointments to the Clinical Fellows Apr

Mr. Gergely sought objection to laying the first three recommendations as one approval before the Board. No objection was noted.

**The Board of Directors APPROVED by UNANIMOUS CONSENT the following recommendation as submitted by the Medical Advisory Committee:**

**3.6.1 New Appointments to Professional Staff Apr**

**3.6.2 Changes to Professional Staff Appointments Apr**

**3.6.3 Appointments to the Clinical Fellows Apr**

## 2.7 Finance and Audit Committee Recommendations

2.7.1 Multi Service Accountability Agreement Schedule G

Ms. Bird noted that as part of the reporting requirements, a declaration of compliance is required. It was noted that as the Board of Directors begin to plan next year's orientation, that Governance Committee consider providing a deep dive into the agreements that LHSC sign.

**After making inquiries of the President and CEO, Murray Glendining and other appropriate officers of the hospital, and subject to any exceptions identified on Schedule G, the Board of Directors REVIEWED and APPROVED by UNANIMOUS CONSENT the execution by the Chair of the Board "Schedule G", Declaration of Compliance wherein the hospital has fulfilled its obligations under the service accountability agreement (the "M-SAA") in effect during April 1, 2015 to March 31, 2016.**

**Without limiting the generality of the foregoing, the hospital has complied with:**

- (i) Article 4.8 of the M-SAA concerning applicable procurement practices;**
- (ii) the Local Health System Integration Act, 2006; and**
- (iii) the Public Sector Compensation Restraint to Protect Public Services Act, 2010.**

## 2.8 Governance Committee Recommendations

2.8.1 Joint Collaboration Agreement

Mrs. Conyngham provided a brief overview of the history of the Joint Collaboration agreement and the work of the Joint Collaboration Committee to review and amend this agreement every five years.

**The Board of Directors APPROVED by UNANIMOUS CONSENT the amendments proposed to the Joint Collaboration Agreement.**

### 2.8.2 General Updates

Mrs. Conyngham addressed with the Board that there have been questions raised during the last interview process by the candidates around LHSC Board's Code of Conduct and board decorum with the respect of the use of electronic devices at meetings and dress code. It was noted that amendments to the Code of Conduct and Business Meeting policies to address these items will be considered by Governance and recommendations will be forwarded for the June 27, 2016 meeting. In reference to the use of electronic devices, it was further discussed by the Board Directors that putting formal breaks into the meetings to address business issues would alleviate the need to be on email during the meeting content.

### **2.9 Board Evaluation Focus Group**

Carol Cavanagh, consultant engaged the Board into a focus group.

## **3.0 ADJOURNMENT**

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**The Board of Directors ADJOURNED the MEETING by UNANIMOUS CONSENT. The next meeting of the Board of Directors is currently scheduled for June 1, 2016**

Recorded by:  
Tammy L. Eskildsen

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Tom Gergely, Chair  
Board of Directors