

## 1.0 CALL TO ORDER (5 MIN)

**Any conflict of interest must be declared at the time the meeting is called to order or at such time as one arises in the meeting. Please see Consent Agenda Guidelines on page 3.**

### 1.1 Patient Experience Video

## 2.0 REVIEW/ OF CONSENT AND FULL AGENDA (5 MINUTES)

### 2.1 Approval of Full Agenda

It is recommended that the Full Agenda for the June 27, 2018 Board meeting be approved as written.

### 2.2 Approval of Consent Agenda

It is recommended that the Consent Agenda for the June 27, 2018 Board meeting, consisting of the recommendations and reports found in Appendix 1 **beginning on page 279 be approved.**

## 3.0 ACCREDITATION EDUCATION (20 min)

### 3.1 Patient and Family Centred Care Integration into standards

## 4.0 NEW BUSINESS/RECOMMENDATIONS/FOR INFORMATION (95 MINUTES)

### 4.1 Chair's Remarks (10 min)

R. Robinson

#### 4.1.1 Committee Chair Roundtable

### 4.2 CEO Report (40 min)

P. Woods

#### 4.2.1 Strategic Plan Initiatives and Destination Metrics Recommendation

### 4.3 Lawson Health Research Institute Report (5 min)

K. Ross

### 4.4 St. Joseph's Health Care London Update (5 min)

H. Rundle

### 4.5 Quality and Performance Monitoring Committee (5 min)

L. McBride

#### 4.5.1 2017/18 Quality Improvement Plan Recommendation

### 4.6 Finance and Audit Committee (15 min)

B. Bird

#### 4.6.1 2014-2018 Multi-Sector Service Accountability Agreement – Schedule G (Form of Compliance Agreement)

#### 4.6.2 HMMS 02527 and HMMS02526 Contracts Over \$5Million

#### 4.6.3 Assessment of External Audit Services in Accordance with the Retention and Selection of Professional Services Policy

### 4.7 Medical Advisory Committee Recommendations (10 min)

A. Lum

#### 4.7.1 New Appointments to Professional Staff

#### 4.7.2 Changes to Professional Staff Appointments

#### 4.7.3 New Clinical Fellows Appointments

#### 4.7.4 2018 PS Reappointment Report

#### 4.7.5 2018 PS Departure Report

#### 4.7.6 2018 PS Deferral Report

#### 4.7.7 Recommendation – Interim Chief Obstetrics and Gynaecology

<p><b>4.8 Governance Committee</b> 📎 (5 min)  4.8.1 <i>London Hospital Linen Appointments</i></p>	
<p><b>4.0 ADJOURNMENT/ NEXT MEETING</b></p>	
<p><b>NEXT MEETING(s) –Regular Meeting September 26, 2018</b></p>	
<p><b>APPENDIX I</b></p>	
<p><b>2.2 Consent Agenda</b></p> <p>2.2.1 <u>Minutes of Regular Meeting 20180530</u>📎</p> <p>2.2.2 <u>Finance and Audit Committee</u>  2.2.2.1 2017/18 GFT Professor, GFT Secretary Salaries &amp; Benefits Annual Funding  2.2.2.2 2017/18 Ministry of Children &amp; Youth Services (MCYS) Annual Reconciliation</p> <p>2.2.3 <u>Committees of the Board- Minutes</u>  2.2.3.1 Governance Committee 20180416, 20180618  2.2.3.2 People and Culture 20180612  2.2.3.3 Quality and Performance Monitoring 20180621  2.2.3.4 Finance and Audit 20180614 <b>-deferred</b></p> <p>2.2.4 <u>Committee Completed Workplans for information</u></p>	<p>R. Robinson</p>

**Board Membership:**

**Chair:** Ramona Robinson

**Elected Directors:**

Brenda Bird	Sandi Caplan	Tom Gergely	Kimberlee Haines	Mike Hodgson
Adam Hopper	Suzanne Jaekel	Sharon Irwin-Foulon	Larry McBride	Phyllis Retty
Kevin Ross	Amy Walby	Matthew Wilson	Jeff Wright	

**Ex-Officio:**

Trevor Delaire	Andrea Lum	David Steven	Michael Strong	Sachin Pandey
Tod Warner	Paul Woods	Carol Young-Ritchie		

**Healthcare Partner Representatives**

Howard Rundle, Liaison (SJ) Gillian Kernaghan, President and CEO (SJ)

**Resource:**

Tammy Eskildsen

**Quorum**

8

**Symbols:**

**R=** Regrets

📎= attachments

**T/C** = Teleconference

## Value Based Decision making

	Requirement	Questions
<b>V</b>	<u>V</u> oice your concerns	<input type="checkbox"/> <a href="#">Is it an ethical issue?</a> <input type="checkbox"/> What is the ethical question? (be open to having the question evolve as you work through the problem) <input type="checkbox"/> Whose responsibility is it to answer the question? (do you have the authority to answer it?) <input type="checkbox"/> If there are concerns about raising the issue, consider an ethics consult
<b>A</b>	<u>A</u> ccess Resources	<input type="checkbox"/> Have you spoken with a colleague or leader? <input type="checkbox"/> Have you reviewed the <a href="#">Ethics Intranet Page</a> ? <input type="checkbox"/> Are you using either the <a href="#">ChELO checklist</a> or the <a href="#">Ethical Process Checklist</a> ? <input type="checkbox"/> Have you considered an <a href="#">ethics consult</a> ?
<b>L</b>	<u>L</u> earn	<input type="checkbox"/> How did you come to know about the issue? <input type="checkbox"/> What are the relevant policies, laws, professional statements? <input type="checkbox"/> What information do you need to make a judgement about the situation? <input type="checkbox"/> Has this issue been dealt with previously?
<b>U</b>	<u>U</u> nderstand	<input type="checkbox"/> Who are the stakeholders? <input type="checkbox"/> How/Where should stakeholders be involved in decision-making? <input type="checkbox"/> Which <a href="#">values</a> are relevant? <input type="checkbox"/> What are the differing viewpoints/perspectives on the issue?
<b>E</b>	<u>E</u> valuate	<input type="checkbox"/> What are the options? <input type="checkbox"/> How would each option reflect our commitment to <a href="#">organizational</a> or other important values? <input type="checkbox"/> Build the best argument for each <input type="checkbox"/> Make a reasoned decision
<b>S</b>	<u>S</u> ustain	<input type="checkbox"/> Consider how to address personal needs of those impacted by the decision <input type="checkbox"/> Set short and long term targets to review your decision <input type="checkbox"/> Is there new information that would change the way approach the situation if it were to happen again? <input type="checkbox"/> What is being done to build organizational memory? (e.g. published case report, new policy, education,)

## CONSENT AGENDA GUIDELINES

The board's parliamentary authority—American Institute of Parliamentarians Standard Code of Parliamentary Procedure—explains the Consent Agenda. Organizations having a large number of routine matters to approve often save time by use of consent agenda. This is a portion of the printed agenda listing matters that are expected to be non-controversial and on which there are likely to be no questions.

Before taking the vote, the presiding officer (chair) allows time for the members to read the list to determine if it includes any matters on which they may have a question, or which they would like to discuss or to oppose. Any member has a right to remove any item from the consent agenda, in which case it is transferred to the regular agenda so that it may be considered and voted on separately. A member may ask a question to clarify a consent agenda item without removing it from the consent agenda, but if this proves to be more than a clarification, the presiding officer can insist that it be removed and placed on the regular agenda. The remaining items are then unanimously approved en bloc without discussion, saving the time that would be required for individual votes.

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### Resource:

Tammy Eskildsen

### Quorum

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### Symbols:

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= attachments

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## BRIEFING NOTE

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**DATE:** 27 June 2018  
**FROM:** J. Schleifer Taylor Chief Quality & Patient Safety Officer  
**DEVELOPED BY:** E. Williams, Director, LHSC Accreditation  
**TOPIC:** **Accreditation: Patient and Family Integration into Standards**

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### PURPOSE:

The purpose of this briefing note is to provide information regarding the integration of patient and family-centred care and engagement into Accreditation Canada Standards.

### PRESENTATION OVERVIEW:

Patient and family<sup>1</sup> engagement is healthcare providers working with patients and families to understand their needs, and respond to them. It is the work of bringing patient and family voices to decisions about care, to healthcare organizational design, and to public policy. Patients and families are essential collaborators for quality and safety – not only in direct care interactions, but also in quality improvement, safety initiatives, education of health professionals, research, facility design, and policy development. Patient and family engagement improves decision making processes, health outcomes, patient and family experiences, financial management, and safety.

In January 2016, Accreditation Canada Standards were updated to reflect the adoption of patient and family-centred care and engagement as a primary focus. Accreditation Canada defines patient and family-centred care as “an approach that fosters respectful, compassionate, culturally appropriate, and competent care that is responsive to the needs, values, beliefs, and preferences of patients and their family members. It supports mutually beneficial partnerships between patients, families, and healthcare service providers.” Prior to 2016, Patient and family-centred care and engagement language was represented in one Accreditation Canada Required Organizational Practice (ROP). The significant revisions undertaken have embedded the requirements in every set of Standards, emphasizing the need for multiple levels of engagement and collaboration. LHSC is striving to obtain Exemplary Standing with Accreditation Canada, requiring 100% of the Required Organizational Practices (ROPs) and **95% of the Standards** to be met.

Accreditation Canada highlights two main over-arching opportunities where health care organizations can meaningfully engage patients and families: Direct Care, and Organizational Design and Governance.<sup>2</sup> Patient engagement can be characterized by how much information flows between patient and provider, how active a role the patient has in care decisions, and how involved the patient or family becomes in health organization decisions and in policy making.

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<sup>1</sup> Family includes a person or persons who are related to the patient in any way (biologically, legally, or emotionally), including immediate relatives and other individuals in the patients’ support network. Family may include a patient’s extended family, partners, friends, advocates, guardians, and other individuals; as defined by the patient.

<sup>2</sup> Adapted from [OHA Guidance Document: Understanding Patient and Family Engagement Requirements for Accreditation](#) (Retrieved online February 2018)