

OPEN MINUTES OF MEETING BOARD OF DIRECTORS

Held, Wednesday, June 27, 2016
at 1600 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, M. MacLeod, T. Gergely, S. Caplan, L. McBride, R. Sifton, A. Hopper, S. Carlyle

Board Member Regrets:

S. Irwin-Foulon

Guests:

G. Kernaghan=R, M. Kellow, H. Rundle

Resource:

T. Eskildsen

1.0 CALL TO ORDER/REVIEW OF AGENDA/CONSENT AGENDA

Mr. Gergely called the meeting to order and reminded the Board Directors 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 25 were APPROVED by UNANIMOUS CONSENT:

- 1.1 [*Minutes of Regular Meeting 2014/06/01*](#)
- 1.2 [*Committee Minutes*](#)
 - 1.2.1 [*Human Resources 20160608*](#)
 - 1.2.2 [*Governance Committee 20160613*](#)
 - 1.2.3 [*Quality and Performance Monitoring 20160616*](#)

2.0 NEW BUSINESS/INFORMATION/APPROVALS

2.1 Chair's Remarks

Mr. Gergely and Board Directors reviewed work ongoing in the past month, upcoming events and events attended on behalf of the Board. The following items were highlighted:

- Mr. Gergely provided a brief overview of the purpose and process for LHSC Board in its use of a consent agenda for the Elected Director nominees.
- Mr. Gergely expressed appreciation to the current Board for their service to the organization and reflected on the work of the past Board term.

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:

- Bill 210 Patient's First Act has been introduced into legislature. This Bill is representative of the Ministry of Health's Action Plan to consolidate the Community Care Access Centres into the Local Health Integration Networks. Other aspects of the bill include proposed amendments to legislation to give the ombudsman oversight to patient complaints resulting from services

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provided by the LHINS. As well, proposed amendments to Local Health Service Integration Act to permit LHINS to identify and plan for the health service needs of the local health system, including needs regarding physician resources, aligned with provincial plans and priorities and to make recommendations to the Minister about that system, including capital funding needs for it.

A potential impact for hospitals includes proposed amendments to the Private Hospitals Act and the Public Hospitals Act by adding several instances that empower the Minister to issue binding operational or policy directives to private and public hospitals.

2.3 Lawson Health Research Institute Report

Dr. Rundle submitted the May report into record, highlighted Lawson's funding successes and indicated that he would be pleased to answer any questions. There were no questions noted.

2.4 St. Joseph's Health Care London Update

Dr. Kellow noted that St. Joseph's will not be offering the service of Medical Assistance in Dying. St. Joseph's continues to work through the legal obligations and professional expectations for physicians with respect to federal legislation, provincial legislation, and relevant College policies. The St. Joseph's Board of Directors endorsed the Vulnerable Persons Standard and a commitment to ensuring that patients receive quality end of life care.

2.5 Medical Advisory Committee Recommendations

2.5.1 New Appointments to Professional Staff

2.5.2 Changes to Professional Staff Appointments

2.5.3 Clinical Fellow Appointments

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 GENERAL CONSENT the following recommendations as submitted by the Medical Advisory Committee:

2.5.1 New Appointments to Professional Staff June

2.5.2 Changes to Professional Staff Appointments June

2.5.3 Appointments to the Clinical Fellows June

2.5.4 Chief of Otolaryngology

The Board Of Directors APPROVED BY GENERAL CONSENT, upon receipt of a signed letter of offer, the continuation of the appointment of Dr. John Yoo as the City-Wide Chief Of Otolaryngology – Head And Neck Surgery, Effective July 1, 2016 To June 30, 2018, or until such time as a permanent Chief is appointed, whichever comes first.

2.5.5 Chief of Paediatrics

The Board Of Directors APPROVE BY GENERAL CONSENT, the appointment of Dr. Michael Rieder as the interim city-wide Chief of Paediatrics effective October 1, 2016 to September 30, 2018, or until such time as a permanent chief is appointed, whichever comes first.

2.5.6 Chair and Vice Chair Medical Advisory Committee Extensions

The Board of Directors APPROVED BY GENERAL CONSENT the extension of Dr. Mark Macleod in the role of Chair, Medical Advisory Committee until September 30, 2016 and;

The Board of Directors APPROVED BY GENERAL CONSENT the extension of Dr. Guido Filler in the role of Vice Chair, Medical Advisory Committee to September 30, 2016.

2.6 Governance Committee Recommendation

2.6.1 Policy Amendments

The Board of Directors APPROVED by GENERAL CONSENT the following Board policy amendments:

- Code of Conduct amended to reflect the dress code minimum requirements
- Board Meeting Policy amended to reflect electronic device usage during meetings, consistency of practice in reference to notice requirements and the institution of mid-meeting breaks.

2.6.2 *Chair/Vice Chair of Committees Recommendation*

Ms. Conyngham reported that the Governance committee membership reviewed and recommended the appointment of the following individuals for Chair and Vice Chair of Board Committees for 2016/17.

The Board of Directors RECOMMENDED by GENERAL CONSENT that the following nominees be APPOINTED the position of Chair

and Vice Chair of a Committee of the Board for the term 2016/17:

Brenda Bird Chair --Finance and Audit

Mike Hodgson Vice Chair --Finance and Audit

Ramona Robinson Chair --Governance

Amy Walby Vice Chair --Governance

Phyllis Retty Chair --Human Resources

Sharon Irwin-Foulon Vice Chair --Human Resources

Mark MacLeod Chair --Medical Advisory Committee (LHSC)*

Guido Filler Vice Chair --Medical Advisory Committee (LHSC)*

Larry McBride Chair --Quality and Performance Monitoring

Adam Hopper Vice Chair --Quality and Performance Monitoring

Tom Gergely Chair --Executive

Ramona Robinson Vice Chair --Executive

2.7 Quality and Performance Monitoring Recommendations

2.8.1 *Quality Improvement Plan Recommendation*

The Board of Directors for APPROVED BY GENERAL CONSENT the 2015/16 Quality Improvement Plan Priority 1 Indicator Report of March 31, 2016 of which the following three targets aligned with the corresponding performance compensation for the CEO and executive leaders who report directly to the CEO achieved a total of 54% of targets as follows:

• Medication Reconciliation at Admission (%) with a target of 85% and a final performance of 81.1% (achieved 0%/33.3%)

• ED Wait Times: 90th%ile ED LOS for Admitted Patients with a target of 25.0 hours and a final performance of 27.6 (achieved 20.65%/33.3%)

• Inpatient Satisfaction - Percent Positive (Excellent, Very Good and Good) with a target of 96% and a final performance of 96.1 (achieved 33.3%/33.3%)

and;

the Board of Directors APPROVED BY GENERAL CONSENT the Quality Improvement Plan Priority 2 Indicator Report of March 31, 2016 of which the following four targets not aligned with executive compensation achieved the final performance targets noted as follows:

• 30 Day /readmission rate with a target of 18.0 and a final performance of 17.62 (target achieved)

• % ALC Days with a target of 7.70% and a final performance of 9.1% (target not achieved)

• CDI with a target of 0.40 and a final performance of 0.33 (target achieved)

• Total Margin with a target of 0 and a final performance of -1.59% (target not achieved)

2.8.2 *Accreditation Update*

Mr. Larry McBride noted that as part of London Health Sciences Centre opportunities to improve, an extension was granted to confirm compliance with the remaining Leadership ROP – “The organization has a plan in place to address identified client safety issues”. The deadline to be submitted to Accreditation Canada October 2016, but the organization currently plans to submit the appropriate evidence of completion by August 2016.

3.0 ADJOURNMENT

The Board of Directors **ADJOURNED** the **MEETING** by **UNANIMOUS CONSENT**. The next meeting of the Board of Directors is currently scheduled for September 28, 2016

Recorded by:
Tammy L. Eskildsen

Tom Gergely, Chair
Board of Directors