

OPEN MEETING MINUTES OF THE BOARD OF DIRECTORS

held, Wednesday, February 22, 2017 @ 1715 hours
in the Victoria Hospital Board Room C3-401

Board Members Present:

K. Haines, L. McBride, R. Robinson, P. Retty, K. Ross, M. Glendining (xo-NV), S. Jaekel, A. Hopper, M. Hodgson, J. Wright, M. Wilson, A. Walby, T. Gergely (Chair), S. Caplan, K. Church, D. Steven, T. Warner, D. Woodward, C. Young-Ritchie, S. Irwin-Foulon

Board Member Regrets:

M. Strong, B. Bird, A. Lum

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 107 were APPROVED by UNANIMOUS CONSENT:

1.1 Minutes of Regular Meeting 2017/01/25

1.2 Committees of the Board- Minutes

1.2.1 People and Culture 20170201

1.2.2 Medical Advisory Committee 20170209

1.2.3 Quality and Performance Monitoring 20170119

1.2.4 Finance and Audit Committee 20170209, 20170201

1.2.5 Joint Collaboration Committee 20170123

1.2.6 Governance Committee 20170119

2.0 NEW BUSINESS/INFORMATION/RECOMMENDATIONS

2.1 Chair's Remarks

Mr. Gergely highlighted some of the work of the past month and upcoming events. The following points were noted:

- In the last month executive compensation committee was developed and a group of elected directors with the assistance of Murray Glendining and Susan Nickle have been moving through the requirements of the legislation. This will be a highly visible process in the province as all hospitals move forward.
- The Board is in the preparatory stages to address future CEO succession.

- The organization is invested in the strategic planning process as it begins to unfold and the Board is pleased to be part of the process moving forward.
- LHSF – Tastings Event May 4, 2017 and Donor of Distinction -- May 25, 2017

2.2 CEO Report

Mr. Glendining submitted his report into record, invited questions and highlighted the following updates:

- There have been recent media interviews with a plan to focus on mental health. The content is unknown at this point beyond that it will be a televised two part segment.
- Received a one-time capital grant of up to \$3.3 million for Diagnostic Imaging Interim Renovation project.
- Additional one time grant received for feeder cable replacement up to \$ 1,167,500
- Chair/Chief Selection committee for Medical Imaging completed, recommendation will come forward through due process to March meeting.
- Strategic Planning Steering Committee met for the first time and will be co chaired by Murray Glendining, Andrea Lum and a Patient Advisor. The process for consideration is under development and will be brought before the Board in March 2017.

2.3 Lawson Health Research Update

Mr. Ross updated that the Board meet on February 10, 2017. A presentation was received on the topics including; the business of research from the ground floor up, the challenges research faces in an increased regulatory oversight and constant funding pressures. Mr. Ross highlighted the work ongoing to search for community members for the Finance Committee.

2.4 St. Joseph's Health Care, London Update

Dr. Kernaghan and Dr. Kellow provided updates from St. Joseph's and the following points were highlighted:

- New stroke guidelines have been released, specialized virtual unit
- Medical Assistance in Dying, under development is a community support service for the province.
- Ministry of Veteran Affairs announced expanded access to Parkwood institute for veterans beyond WWII and Korean War veterans.

2.5. Quality and Performance Monitoring Committee

2.5.1 Quality Indicators Q3 Report

Mr. McBride provided a brief overview of the deep dive topics of the Committee which focused on Cancer Surgery Waittimes and a review of the progress of the current Quality Improvement Plan. The 2017/18 QIP was discussed in closed session for feedback, but noted that it would be returning to the open Board meeting in March for approval.

2.6. 1 Recommendation to Rescind December/January Clinical Fellow Report

It was noted that there was a clerical error in combining the reports. This error caused names of clinical fellows with appropriate credentials and certification numbers to be misaligned. Once the error was discovered all clinical fellows had been provided enough temporary credentials to carry them to February meeting where appointment could be corrected.

It was moved by K. Haines that the Board of Director RESCIND the motion of January 25, 2017 to endorse the New Clinical Fellow Appointments to LHSC for December and January.

CARRIED

2.62 Clinical Fellow Appointments December/January Amended

It was MOVED by K. Ross that the Board of Directors APPROVE the amended December and January appointments of the Clinical Fellows to London Health Sciences Centre.

CARRIED

Dr. Fawaz Siddiqi Vice Chair of the Medical Advisory Committee identified that there were no contentious issues either brought to his attention or discussed at MAC in reference to the regular credentialing recommendations within the package and asked to bring the three recommendations together as one.

2.6.3 New Appointments to Professional Staff – Feb

2.6.4 Changes to Professional Staff Appointments – Feb

2.6.5 Clinical Fellow Appointments – Feb

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

The Board of Directors APPROVED by GENERAL CONSENT the following recommendations as submitted by the Medical Advisory Committee:

2.6.3 New Appointments to Professional Staff Feb

2.6.4 Changes to Professional Staff Appointments Feb

2.6.5 Appointments to the Clinical Fellows Feb

2.7 People and Culture Committee

2.7.1 People and Culture Q3 Indicator Report.

Ms. Retty noted that the third quarter report was in the package and highlighted those indicators not performing to expectation. However, it was noted that Q3 was a trigger quarter, whereby if your indicators were yellow for two quarters then it moved to red for initiatives that were not moving the metric in a positive fashion quickly enough.

The staff survey closed at the end of January with a 63% participation rate. It is expected that the survey results will be shared with the People and Culture Committee in April and will subsequently be brought before the Board of Directors for information.

2.8 Finance and Audit Committee

In absence of the Chair and Vice chair of the committee, Suzanne Jaekel provided a brief update on the content of the last meeting and indicated that Mr. Gilhuly was present to answer any financial statement questions that the Board may have.

2.8.1 Financial Quarter ending Q3

The Board of Directors APPROVED by GENERAL CONSENT the Financial Results for the quarter ending December 31, 2016.

2.8.2 HSAA update

Mr. Gilhuly noted that on December 13, 2016, the SWLHIN Board moved to amend the Hospital Service Accountability (H-SAA) Amending Agreement as of April 1, 2017. The 2008/17 H-SAA will be amended by extending its term to March 31, 2018. The 2016/17 schedules will be replaced with 2017/18 Schedules. On January 17, 2017 the SWLHIN Board moved to amend the Multi-Sector Service Accountability (M-SAA) Amending Agreement as of April 1, 2017. The 2014/17 M-SAA will be amended by extending its term to March 31, 2018.

LHSC has been asked to approve and sign the one year extensions. This update was to notify the Board that these two recommendations will be before the Board in March 2017.

3 ADJOURNMENT

The meeting was **ADJOURNED** by **GENERAL CONSENT**

Recorded by
Tammy Eskildsen

Tom Gergely, Chair
Board of Directors