

# OPEN MEETING MINUTES OF THE BOARD OF DIRECTORS

held, Monday, September 27 @ 1500 hours  
in the Victoria Hospital Board Room C3-401

## **Board Members Present:**

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

## **Healthcare Partner Representatives:**

Dr. Kernaghan, H. Rundle,

## **Board Member Regrets:**

T. Warner, S. Pandey, T. Gergely

## **Resource:**

T. Eskildsen

\*= teleconference

## **1.0 CALL TO ORDER**

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Mrs. Robinson 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.

### *1.1 Patient Experience*

A video was shared with the Board of Directors of a patient's expectation around patient centred care. Mrs. Robinson noted that the purpose of sharing patient stories is to set context at the Board table and remind the Board of Directors that the patient's experience is the most important aspect of service. The additional purpose of sharing care experiences is designed to help participants develop an understanding of Patient Centred Care by relating personally to the core philosophical concepts, identifying what it is and what it is not. It is also an effective way to share knowledge and provide a compelling surrogate experience at LHSC Orientation and team meetings. When patient stories are shared, they serve as powerful tools for bringing about change.

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

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### *2.1 Approval of Full Agenda*

**The Board of Directors APPROVED by GENERAL CONSENT the Full agenda for September 27, 2017 as written.**

### *2.2 Approval of Consent Agenda*

**The Board of Directors APPROVED by GENERAL CONSENT that the Consent Agenda for the September 27, 2017 Board meeting, consisting of the recommendations and reports found in Appendix 1 as noted below:**

**2.2 Consent Agenda**



### 2.2.1 Minutes of Regular Meeting 20170531 □

### 2.2.2 Finance and Audit Committee Recommendations □

#### 2.2.2.1 Audited MoHLTC Reports

- 2016/17 - Community Mental Health Program (CMHC), Children's Mental Health, Psychiatric
- Outpatient Medical Salaries-Programs 3003-3116
- 2016/17 - Hospital on Call Coverage (HOCC) Year End Funding Settlement
- 2016/17 - Midwifery Year End Settlement
- 2016/17 - London Regional Base Hospital Program
- 2016-17 - Health Infrastructure Renewal Fund (HIRF)
- 2016-17 - Community Infrastructure Renewal Fund (CIRF)SINESS □

### 2.2.3 Committees of the Board- Minutes □

#### 2.2.3.1 People and Culture, 20170919

#### 2.2.3.2 Finance and Audit 20170914

#### 2.2.3.3 Quality and Performance Monitoring 20170921

#### 2.2.3.4 Governance Committee 20170814, 20170918

## 3.0 EDUCATION/ORIENTATION

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### 3.1 Professional Staff Credentialing/Board of Directors Accountability Overview

Dr. Robin Walker was present to provide an overview of the credentialing processes the organization undergoes to ready recommendations for approval to the Board of Directors. Dr. Walker highlighted key challenges to the work and the initiative that the Medical Affairs Department underwent with the assistance of Internal Audit to review the current processes and subsequent continuous improvement recommendations.

## 4.0 NEW BUSINESS/RECOMMENDATIONS/FOR INFORMATION

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### 4.1 Chair's Remarks

Mrs. Robinson welcomed the Board of Directors to the new Board term and requested the Chairs of the respective committees to spend a little time to provide insights or point to the Board anything that is important to note from their past meeting:

- Mr. Larry McBride highlighted that the patient video that was shown today at the Board was also shown at the quality committee. This should point to the board that quality in healthcare cannot be achieved operating in isolation. It was noted that phase III orientation occurred and that committee focus remain on the metrics that are not performing to plan.
- Ms. Irwin Foulon indicated that she had her first meeting as Chair, Ms. Jaekel is Vice Chair and beyond phase III orientation, the committee reset their focus to begin looking at the big dots that pull quality, culture and engagement together.
- Ms. Bird highlighted that Phase III finance orientation occurred separately late in August, but that September was a quarterly meeting with a number of approvals and information items that will be provided in both closed and open later in the meeting.
- Ms. Walby presented that Phase I Governance Orientation was a couple of weeks ago and the experience was improved upon from the previous year. The orientation modeled a workshop environment that discussed the aspects of high performing boards. The governance committee has been discussing a Board Governance retreat for the Board in 2018. It was further noted that renewal of the Board was discussed and the committee is looking to not only improve LHSC diversity, but looking at alternative approaches to recruitment.



- Ms. Haines reported on the work of LHIN Board to Board. The LHIN is in progress of the development of their value, mission and vision statements.

Mrs. Robinson further noted that a blue feedback form has been added to your place setting. Understanding that the agenda content is large and that instances may occur in future where the Board has had to move forward and were unable to address all questions. Please feel free to use that sheet to mark down your questions, where the board can do better or if you want to have a topic brought forward that is relevant to the oversight work of the Board.

#### 4.1.1 Board Priorities Work plan

It was noted that this document was updated from the previous version. With the emergence of the LHSC strategic plan, this document as well as the committee work plans will be updated. Governance Committee will be completing this work to align the templates of the work plans and temporarily have added for the current year a compliance regulatory column.

The floor was opened for comments and feedback:

- Housekeeping changes were recommended with respect to dates
- The Board was encouraged to reflect on the priorities document and forward any feedback to either T. Eskildsen or R. Robinson for consideration at the next Governance Committee meeting.

**ACTION: This item referred to Governance Committee for their review and an addition to their future work plan to review all work plans in alignment with the strategic plan once approved and implemented.**

#### 4.2 CEO Report

Mr. Glendining submitted his report into record and highlighted the following items:

- Access has been a challenge over the summer, however the organization is not alone in this as this issue has recently been identified by the Ministry of Health that this is a provincial issue.
- LHSC is participating in a code orange exercise early in October. Recognizing that LHSC's high census is part of the new normal, this has not deterred the organization from participating in this work to test the assumptions from the paper exercises. Mr. Glendining further mentioned the work that Dr. Schemitsch at the provincial level in creating mass casualty planning. There will be a debriefing session following the exercise to review opportunities to learn and improve.
- Mr. Glendining highlighted that there is a request for proposal in the market to provide some renovations to create a crisis area within the emergency department.

In response to a question on the meeting with the city of London on Mental Health issues, it was noted that this was a consultation meeting and there will be information that follows later in the fall.

#### 4.2.1 CEO Goals Q1 Reports

Mr. Glendining identified that the quarterly report was submitted into record. The items that are not performing to plan are predominately focused in the area of strategic planning and the organization has not moved as far as they should have at this stage. A number of initiatives have been initiated to address this and improvements should be visible at the next quarter report.

There were no questions or comments noted by the Board of Directors.



#### 4.2.2 Strategic Plan Update

Since the last Board and Leadership Retreat on June 17, 2017, several work groups have carried forward the work of the development of a recommended strategic plan.

The mission work stream used a survey and feedback methodology to provide input to the wording and content of the mission statement. The President and CEO convened a small group of medical and administrative leaders to develop the final version of the vision statement that will serve as the future goal for LHSC as well as to receive the feedback on the mission statement. A values work group was also convened to take work done to date and develop a draft of values and associated behavioural statements. Moving forward, focus groups will be providing feedback on these values until the end of October.

The Strategic Planning Committee, which is overseeing the process of the plan development has received and reviewed the work done in relation to the Mission, Vision and Values through the end of August.

Lastly, two work groups have been formed to develop specific strategic directions that will help the organization achieve its vision. These directional statements will be broad ranging and will be supported by specific strategic initiatives that will also be tabled. It is anticipated that these components of the plan will be presented and discussed at the retreat in October.

Mr. Campbell highlighted that he felt that the mission and vision are wrapped up and the organization has a clear them of it is trying to be accomplished. Mr. Campbell reviewed the mission selection process as there was a three way tie vote on the options of the written mission. At this point in the work, the next retreat is where the consultants feel that the board takes more ownership in the work moving forward. The goal is still tracking to plan to have a November 2017 approval.

**ACTION: Kimberlee Haines to connect with Neil Johnson with respect to the Mission/Vision and values planning messaging required at the Board to Board LHIN meeting to assist in their specific development work.**

#### 4.2 LHSC Balanced Scorecard Quarter 1

Mrs. Robinson highlighted that the Board will take a slightly different approach to discuss the Balanced Scorecard quarterly report to look collectively to see if the committees are intersecting and to ensure that the Board committees, Board and Senior leadership are moving in the same direction together.

The committee members engaged in discussion with respect to committee outcomes and the following points were noted:

- The big dot roll up is a helpful document to ground the view of the Board.
- That the reduced indicator review is great accomplishment and allows the focus to remain on quality improvement and current progress to plan.
- Ms. Bird requested that the Finance report be added to the next quarter reporting at the finance and audit committee.
- Dr. Lum reported that the MAC also received a similar report for the first time last month and will seek to add to the Board metrics to bring in the lens of the quality of medical care work.
- Discussion was held on how metrics move from yellow status to red and the diligence of the leadership to develop and institute initiatives that will lead the organization to improvement.

#### 4.3 Lawson Health Research Institute Report

Mr. Ross submitted the Lawson Health Research Report into recorded and highlighted:



Hosted by Lawson, the Café Scientifique is a free community event that provides an informal opportunity to get involved with science. Through an open-forum discussion in a casual setting, we address health-related issues of popular interest to the general public.

Each Café Scientifique highlights a particular theme of importance in health research and includes a panel of experts discussing latest practices and findings. At the next café scientific there will be three topics

- Computer-assisted gastrointestinal surgery with Dr. Christopher Schlachta
- Transplant organ preservation: The best option may be "Stinky" with Dr. Alp Sener
- Hand surgery: How small advances turn into complex surgical achievements, with Dr. Bing Siang Gan

Dr. Hill highlighted the continuing work for federal advocacy in Health research funding. Dr. Hill also highlighted the recent appointment of the Canadian Chief Science Advisor, Dr. Mona Nemer. As the new Chief Science Advisor, Dr. Nemer will help promote science and its real benefits for Canadians—new knowledge, novel technologies, and advanced skills for future jobs. These breakthroughs and new opportunities form an essential part of the Government's strategy to secure a better future for Canadian families.

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

Dr. Rundle highlighted that St. Joseph's has completed their work for the Executive Compensation regulations and have submitted to the Ministry of Health as required. St. Joseph's is also beginning the work of strategic planning refresh.

Dr. Kernaghan highlighted that St. Joseph's has the pleasure of hosting former Lt. Gen. Roméo Dallaire, one of Canada's most distinguished and decorated soldiers, who will share his journey with Post Traumatic Stress Disorder (PTSD) at the 2017 St. Joseph's Tribute Dinner.

Dr. Kernaghan further noted the ongoing housing challenge for mental health clients and the transfer of outreach geriatric nurses across the LHIN to St. Joseph's to create a more established program to continue to improve an integrated framework.

#### 4.6 Medical Advisory Committee Recommendations

Dr. Lum provided a brief overview of the contents of each report and indicated that she did not have any concerns about the material presented to the Board for approval.

- 4.6.1 New Appointments to Professional Staff
- 4.6.2 Changes to Professional Staff Appointments
- 4.6.3 Clinical Fellow Appointments

**The Board of Directors APPROVED by GENERAL CONSENT the new appointment, changes to appointments and clinical fellow appointments in the following reports.**

**2.8.1 New Appointments to Professional Staff – September**

**2.8.2 Changes to Professional Staff Appointments – September**

**2.8.3 Clinical Fellow Appointments**

#### 4.6.4 Chief of Paediatrics

Dr. Rieder was appointed as interim a year ago and requested that his 5 year term include the interim appointment. Western University did not support that request and therefore Dr. Rieder's appointment is back before the Board for amendment.

**The Board of Directors APPROVED by GENERAL CONSENT that the Recommendation supported by the Executive Committee on behalf of the Board of Directors on July 17, 2017 with respect to the**



**appointment of Dr. Michael Rieder be rescinded for the purposes of amending the term of the agreement.**

**The Board of Directors APPROVED by GENERAL CONSENT that upon receipt of a signed letter of offer that Dr. Michael Rieder be appointed as the city-wide Chief of Paediatrics, effective August 1, 2017 To July 31, 2022.**

4.6.5 Chair/Vice Chair –MAC Goal Report Update Q3

Dr. Lum submitted the quarterly report of the MAC Goals into record and highlighted the aspects of the journey that Dr. Fawaz Siddiqi and Dr. Lum are currently on. The work has been paused as a new CEO is in process, Strategic Planning underway and any further work in this direction will need to be in consultation with the new CEO and the Board of Directors.

**ACTION: 4<sup>th</sup> quarter report and a review of 2017/18 goals will be forward to the Executive Committee of the Board for review.**

4.7 Finance and Audit Committee Recommendations

4.7.1 Q1 Financial Statement Review

Ms. Bird highlighted that the Q1 report came forward in September as the committee does not traditionally meet over the summer and indicated that the organization is pretty close to budget with a favourable balance sheet.

**The Board of Directors APPROVED by GENERAL CONSENT that the financial results for the quarter ending June 30, 2017 be submitted into record.**

## **5.0 ADJOURNMENT/NEXT MEETING**

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**The open Board of Directors meeting was ADJOURNED by GENERAL CONSENT.**

NEXT MEETING(s) –October 25, 2017

Recorded by:  
Tammy L. Eskildsen

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Ramona Robinson, Chair