

Committee Member	ATTENDANCE REGISTER										# of Mtgs.
	Sept. 24/19	Oct. 29/19	Nov. 26/19	Jan. 28/20	Feb. 25/20	Mar. 24/20	April 28/20	May 26/20	June 16/20 <small>*special*</small>	June 16/20	
Lori Ker, Chair	P	P	P								3
Sandy Kang-Gill, Vice Chair	P	P	P								3
Krista Collinson	P	P	P								3
Janice Cockburn	P	P	P								3
Louise Kindree	P	P	P								3
Warren Maycock	P	A	P								2
Hugh O’Brodivich	P	P	P								3
Janice Peters	P	P	t/c								3
Tim Peters (F)	P	P	P								3
Greg Pope	P	P	P								3
Dave Straughan	R	P	R								1
Ken Topping	P	P	P								3
Carolyn Young	P	R	P								2
Kim Delahunt	P	P	P								3
Dr. Peter Cino	P	P	P								3
Peter Varga	P	P	P								3
Dr. Jeff McKinnon	R	P	P								2
Dr. Mercedes Rodriguez	P	P	P								3

Staff Present: Monique Porlier and Bonnie Kulba **Guest:** Sandy Critchley, Mike Carter

1.1 CALL TO ORDER

The Chair called the meeting to order at 5:30 pm.

1.2 DISCLOSURE OF CONFLICT OF INTEREST

As noted last Board meeting all received Statements of Interest are a standard part of the package. No additional disclosures were noted.

1.3 APPROVAL OF AGENDA

MOTION: Moved by Greg Pope, seconded by Hugh O’Brodivich, “That the Agenda as presented be approved.” **CARRIED**

1.4 CHAIR’S REMARKS

The Chair welcomed the Board and advised of two guests attending and presenting: Sandy Critchley, Director of Quality, Planning and Performance and Mike Carter, Interim President of the Hospital Auxiliary.

1.5 BOARD ACTION LOG

The Board Action Log was reviewed, and one item was added: Presentation to come to Board in January “Operational Impacts and Risks of the Clinical Transformation – Meditech project” and would be a joint update from the Vice President of Corporate Services and the Vice President of Patient Care and Chief Nursing Executive.

2.1 ACCREDITATION

Lori Ker, Board Chair, welcomed Sandy Critchley, Director of Quality, Planning and Performance who provided an update on Accreditation and the Patient Family Advisor Partnership.

Sandy provided the Board with an update about the Accreditation process, timelines, the Board's role and the decisions before the Senior Management Committee related to postponement.

Accreditation Canada surveyors will be on site October 26-30, 2020. Concerns were raised whether staff have capacity to proceed given two significant initiatives happening simultaneously in 2020: Hills of Headwaters Ontario Health Team and Clinical Transformation – Meditech project. Reasons to consider Application for postponement or pursue on-site survey as scheduled were discussed by the Board and the decision was made to proceed as scheduled.

Next steps include:

- A Governance Lead will be selected as soon as possible to work with Sandy and her team
- Patient Family Advisor to have representation on the Board/Quality Committee
- Monthly educational packages to Board commencing Spring 2020
- Mock tracer events commencing Spring/Summer 2020
- Establish internal status reporting structure January 2020
- Initiate survey planning and logistics Spring/Summer 2020

2.2 PATIENT FAMILY ADVISOR PARTNERSHIP (PFAP)

Sandy provided the Board with information about the Patient Family Advisor Partnership at Headwaters. Currently the partnership is comprised of 15 members who meet quarterly to discuss areas of priority within the Hospital. She noted that the Members are an important group who inform decisions made to enhance the patient experience at the hospital.

The Board showed great interest in the partnership and acknowledged their value. The Board asked that PFAP provide an update to the Board twice annually and that Minutes be shared after each meeting. The Board acknowledged that the voice of the patient and patient family members is critical to the hospital's success.

2.3 AUXILIARY UPDATE

Mike Carter, Interim Auxiliary President, provided an update to the Board on the Auxiliary. Mike shared the following with the Board:

- The Auxiliary is celebrating their 65th year
- Updated Bylaws coming in the New Year along with their Policies being incorporated into Hospitals
- Auxiliary will be providing an overview at new staff orientations going forward
- Working with Emergency Department Manager: collect ideas to assist with wait times
- 1M in sales milestone

The Board Chair, echoed by several Members, thanked Mike and all the volunteers for their tireless work and for helping make the hospital run more efficiently. The Board asked that Mike attend Board meetings 2-3 times per year to provide Auxiliary updates.

3.2 FOUNDATION REPORT

Tim Peters, Chair of the Foundation provided the Board with an update on staffing, events, marketing and fundraising initiatives. In addition to the Foundation Chair's report, he advised the Board of his attendance at a recent healthcare seminar hosted by Longwoods. Tim Peters will share a copy of the presentation with the Board.

3.3 FINANCE & AUDIT REPORT

Greg Pope, Chair of Finance & Audit Committee (F&AC) provided an update on several items of interest which the Finance & Audit Committee reviewed on November 13, 2019. In addition, the Chair of F&AC requested approval from the Board of Directors on the following items.

Internal Financial Reports for the Six Months Ended September 30, 2019 (Q2)

Revenues are \$1.4M (4%) above year to date budget and expenses are \$1.2M above year to date budget, resulting in a deficit of \$661,000 compared to a budgeted year to date deficit of \$866,000.

MOTION: Moved by Greg Pope, seconded by Warren Maycock, "That the Board of Directors approve the internal Financial Statements for the six months ended September 30, 2019, as presented." CARRIED

Annual Audit Plan

The Audit Service Plan includes an overview of the audit process; outlines the auditor and management responsibilities; identifies the preliminary determination of materiality and assessment of risk areas and the audit approach to address these areas. The F&AC supported the plan and the fees which are in line with the Board-approved proposal submitted by Deloitte in response to the Request for Proposal for audit services in March 2016. The Chair of F&AC noted that we are in year 4 of 5 contractually with Deloitte.

MOTION: Moved by Greg Pope, seconded by Sandy Kang-Gill, "That the Board of Directors approve the Deloitte Audit Service Plan for the year ending March 31, 2020." CARRIED

Greg Pope, Chair of F&AC provided an update on funding adjustments for 2019/20 and the potential impact going forward, based on information available at that time. The Committee reviewed and supported the approach to prioritizing use of one-time Medium-Size Hospital Funding and achieving a balanced 2019/20 HAPS. Due to limited time to plan for one-time initiatives given the recent notification of the \$2.742M in one-time funding, the details of the allocation of this funding were not available for the F&AC meeting however were included in the package for the Board meeting. Management is seeking Board approval of the 2019/20 HAPS for submission to the LHIN before November 28th.

MOTION: Moved by Greg Pope, seconded by Warren Maycock, "That the Board of the Directors approve the 2019/20 HAPS for submission to the Central West LHIN, as presented." CARRIED

3.4 GOVERNANCE REPORT

Ken Topping, Chair of Governance Committee provided the Board with information and highlights from the November 6, 2019 Governance Committee meeting and requested Board approval for the following items.

The Finance & Audit Committee and Quality Committee Terms of Reference and Annual Work Plans were brought forward for Board approval. There were amendments to both Terms of Reference and they are as follows:

- Finance & Audit Committee Terms of Reference – Under "Voting and Decision Making" change "Governance" Committee to "Finance & Audit" Committee and under "Operating and Capital Budgets" item number 2(a) change the word "Infection" to "Integration".
- Quality Committee Terms of Reference - Under the "Quality Committee Shall" item #2, last bullet point, add (including Clinical Transformation projects) after guide to clinical care and under Quorum change "Governance" to "Quality".

MOTION: Moved by Ken Topping, seconded by Greg Pope, "That the Board of Directors approve the Finance & Audit Committee Terms of Reference as amended and Work Plan." CARRIED

MOTION: Moved by Ken Topping, seconded by Krista Collinson, "That the Board of Directors approve the Quality Committee Terms of Reference as amended and Annual Workplan." CARRIED

3.5 QUALITY REPORT

Sandy Kang-Gill, Chair of the Quality Committee provided the Board with several items of interest which the Quality Committee reviewed and discussed at the November 15, 2019 meeting.

The updated Corporate Quality of Care Terms of Reference was presented at the November 15, 2019 Quality Committee meeting and the Motion was "CARRIED" by Members.

The Quarterly Quality and Patient Safety Report reflected a sharp decline in patient satisfaction over the summer in areas Diagnostic Imaging, Emergency Department and Patient Satisfaction. It was noted that the challenges in these areas was related to change/loss in human resources, specifically nursing staff. The Headwaters Human Resources department will be assisting in the recruitment of staff and presenting staff metrics: open positions, time to fill, turnover and pressures, to the Quality Committee in January 2020. New scheduling software implemented in Diagnostic Imaging will assist with staffing pressures.

The Board was pleased that measures are being put in place to assist with current pressures to assist staff.

3.6 CEO Q2 REPORT

Kim Delahunt, Interim President and CEO spoke to her Q2 CEO report. Kim noted that some changes have been made to the format of the quarterly report and that it would evolve over time. She advised the Board of her meeting with the Honorable Sylvia Jones on December 16, 2019 and her commitment to advocate for Medium Sized Hospitals. The two high risk items on the Risk Registry was reviewed, to which the Board felt comfortable with how management was monitoring and mitigating.

4.1 HILLS OF HEADWATERS COLLABORATIVE – ONTARIO HEALTH TEAM (OHT)

Kim Delahunt, Interim President and CEO provided a background summary which included a high-level overview of the full application and key highlights. It also included the risks and mitigation strategies. In October 2019, a summary of the key deliverables along with next steps over the next 12 months was presented to the Board. She noted that updates will be brought forward to every Board meeting.

Kim advised that the Governors Working Group is meeting December 10, 2019 to advance their relationship charter and single accountability agreement.

4.2 CLINICAL TRANSFORMATION/MEDITECH PROJECT

Monique Porlier, Vice President of Corporate Services provided an update that included governance, key dates, training, staffing, branding, future reporting and areas of focus next month. An update on key milestones, accomplishments and risks will be provided to the Board monthly. She noted that the project name announcement is delayed until January 2020 and that 200 people, project wide, need to be recruited for by February 2020.

5.0 No items under "Other Business".

6.1 CONSENT AGENDA

MOTION: Moved by Warren Maycock, seconded by Greg Pope, "That the Board of Directors approve the Consent Agenda." CARRIED

7.1 INFORMATION

Upcoming meetings and events were reviewed.

8.0 ADJOURNMENT

With there being no further business, the meeting was adjourned at 7:55 pm. Moved to In Camera meeting.



Lori Ker, Board Chair



Kim Delahunt, Secretary