



The (**OPEN**) meeting of the **Board of Governors** of the Ross Memorial Hospital was held on **Thursday, October 24, 2019**, in the Boardroom of the Ross Memorial Hospital.

Present: Ms. V. Harris, (Chair), Dr. B. Chawla, Mrs. P. Clarke, Mr. J. Griepsma, Mrs. B. Kennedy, Mr. D. Kimmerly, Mrs. C. Norris, Mrs. A. Overhoff, Ms. W. Percival, Mrs. N. Rooney (via teleconference), Ms. M. Saunders (via teleconference), Mrs. K. Ward, Ms. V. Nelson

Regrets: Mr. R. Ashmore, Mr. L. Hope, Dr. A. Knox, Mr. W. Levine, Dr. J. McNabb, Mr. B. Nielson

By Invitation: Mrs. E. Coons, Mr. B. Winder

The Chair asked that it be noted that prior to the meeting, retired Board member Mr. Ivan Reynolds was recognized for his service on the Hospital's Board of Governors from 2010-2019.

1. CALL TO ORDER

Ms. V. Harris, Chair, called the (Open) meeting to order at 5:58 pm.

1.1 Quorum – A quorum was confirmed.

1.2 Approval of Agenda – The agenda was reviewed. Thereafter, was a **MOTION: That the agenda be approved as presented.**

Mrs. P. Clarke/Mr. D. Kimmerly, **CARRIED**

1.3 Declarations of Conflict of Interest – None declared.

1.4 Acknowledgement of the Hospital's Vision/Mission/Values – Acknowledged.

2. UNANIMOUS CONSENT – Items identified as part of the consent agenda were provided on a motion sheet in the unanimous consent portion of the meeting package and presented as follows:

- 1. MOTION: That the minutes of the (Open) Board of Governors meeting of September 26, 2019 be approved as circulated.**
- 2. MOTION: That the Board of Governors receives the minutes of the (Open) Quality/Governance & Planning Committee meeting of October 15, 2019.**
- 3. MOTION: That the Board of Governors approves the Strategic Planning policy as presented, as recommended by the Quality/Governance & Planning Committee.**
- 4. MOTION: That the Board of Governors approves the Board of Governors, Attendance Requirements policy as presented, as recommended by the Quality/Governance & Planning Committee.**
- 5. MOTION: That the Board of Governors approves the Board of Governors, Community Representatives on Board Committees policy as presented, as recommended by the Quality/Governance & Planning Committee.**

6. **MOTION**: That the Board of Governors approves the Board of Governors, Mentorship Program policy as presented, as recommended by the Quality/Governance & Planning Committee.
7. **MOTION**: That the Board of Governors approves the Board of Governors, Orientation policy as presented, as recommended by the Quality/Governance & Planning Committee.
8. **MOTION**: That the Board of Governors approves the Board of Governors, Education policy as presented, as recommended by the Quality/Governance & Planning Committee.
9. **MOTION**: That the Board of Governors receives the minutes of the (Open) Resources Committee meeting of October 17, 2019.

Thereafter, there was a

MOTION: *That the Board of Governors approves motions 1 through 9 on the (Open) Unanimous Consent for October 24, 2019 as presented.*

Ms. W. Percival/Mrs. C. Norris, **CARRIED**

3. **BOARD BUSINESS – EXECUTIVE COMMITTEE**

No meeting held to report.

4. **BOARD BUSINESS – QUALITY / GOVERNANCE & PLANNING COMMITTEE**

4.1 2019/20 Corporate Goals Q2 Status – Copies of the 2019/20 Corporate Goals Q2 Status Update, and related minutes of the Quality/Governance & Planning Committee meeting of October 15, 2019 were previously provided (copy attached). Interim President & CEO, Ms. V. Nelson highlighted progress on the goals related to:

- (1) The Hospital's People Plan – The final People Plan will be presented to the Board via the Resources Committee in November. Five Managers and one Supervisor successfully completed the first cohort of the Leadership and Management Essentials Certificate hosted in partnership with Ontario Tech University, and four additional leaders are enrolled in the current cohort.
- (2) Advancing Engagement, Teamwork and Support – A new orientation process has been developed to support onboarding of new physicians.
- (3) Accreditation – The Hospital successfully completed its corporate Accreditation survey in September and was recently advised that it was awarded its third straight Accreditation with Exemplary Standing.
- (4) Connecting and Coordinating Care – The City of Kawartha Lakes Ontario Health Team, co-led by Ross Memorial Hospital, was awarded 'In Development' status. Next steps included working with the Ministry of Health to understand the data package required to complete the Full Application, as well as implementing a communications and engagement strategy.
- (5) Enhanced Financial Resources – Advocacy to the MPP, Ministry of Health and the Central East LHIN is ongoing.

4.2 Board of Governors, Board Meetings – Copies of the Board of Governors, Board Meeting policy, and related minutes of the Quality/Governance & Planning Committee meeting of October 15, 2019 were previously provided (copy attached). Interim President & CEO, Ms. V. Nelson noted the policy was submitted with revisions as part of its three-year review cycle with revisions. Ms. Nelson highlighted that in an effort to enhance transparency, it is recommended that Board meeting dates, Open meeting agendas and Open minutes be posted on the Hospital's website.

There was a

MOTION: That the Board of Governors approves the Board of Governors, Board Meetings policy as presented.

Mrs. B. Kennedy/Mrs. P. Clarke, **CARRIED**

4.3 Kawartha Lakes Health Coalition Letter – Copies of a letter from the Ontario/Kawartha Lakes Health Coalition, and related minutes of the Quality/Governance & Planning Committee meeting of October 15, 2019 were previously provided (copy attached). Interim President & CEO, Ms. V. Nelson noted that the letter will form part of the Special Act application submitted to the provincial legislature. Ms. Nelson noted that the concerns outlined in the Health Coalition's letter were the same as those she had verbally reported to the Board at its Closed meeting in May, and it was at that meeting that the Board reaffirmed its approval to move forward with the Special Act as originally approved by the Board in January 2019.

Copies of a draft letter of response from the Board were tabled for consideration.

Through discussion it was noted that should the Special Act require review by the Standing Committee on Regulations and Private Bills, it is anticipated that representatives from the Ontario Health Coalition and the local Kawartha Lakes Health Coalition branch would attend to present their position. In addition, the Hospital CEO and BLG legal counsel would attend and present the Hospital's position. Based on what is presented to them, the Standing Committee has the ability to revise the Special Act or to send it back for further consultation.

It was acknowledged that the Board would move forward with the Special Act in whatever form the Standing Committee recommends.

A Member requested further evidence supporting closed corporate membership as governance best practice. It was agreed that information would be forwarded following the meeting.

Members noted their support for the draft letter of response as presented.

5. **BOARD BUSINESS – RESOURCES COMMITTEE**

5.1 Clinical Information System Report – Copies of a status report on Clinical Information System (CIS) planning and implementation were previously provided (copy attached). Interim President & CEO, Ms. V. Nelson noted that future CIS project status

update reports will come from the projects' Senior Executive Forum (SEF) and will align with specific project milestones. As there has not been a SEF meeting since June, there is little new information to share, however various regional CIS committees and working groups have been struck and are quickly generating a lot of work. Front line professional and clinical staff are heavily involved in decision-making.

Ms. Nelson then provided a high level overview of the CIS project noting the project background, guiding principles, regional project governance and financial monitoring. Of highlight:

- As part of their Guiding Principles the seven partner hospitals committed to "Make the Regional CIS implementation our top transformational initiative at each hospital and limit new initiatives. This will enable clinicians and staff to focus on a successful system design and readiness, and limit burnout."
- Ross Memorial Hospital is responsible for 5.124% of the total regional costs.
- Project funding will likely include cash and borrowing. The breakdown of funding sources has yet to be confirmed. The Hospital has two options available for lending; either through its Financial Institution as an unsecured loan and/or through the Ontario Financing Authority (OFA). The OFA is a crown corporation that has the statutory authority to make loans to public bodies pursuant to the *Capital Investment Plan Act (CIPA)*.

The Hospital was recently advised that the Ontario Health Board has confirmed support for the implementation of the Central East Hospital Cluster Regional Clinical Information System. In their motion, Ontario Health also directed that case costing be implemented as part of the project, approved that Campbellford Memorial Hospital could sign the CIS contract, and directed management from the LHIN to monitor and report back to the Board twice annually on the financial and operating implications of the implementation of the CIS.

There was a

MOTION: That the Board of Governors identifies the Regional Clinical Information System implementation as the Hospital's top transformational initiative, enabling clinicians and staff to focus on a successful system design and readiness, and limit burnout.

Mr. D. Kimmerly/Ms. W. Percival, **CARRIED**

6. BOARD BUSINESS – AUDIT COMMITTEE

No meeting held to report.

7. REPORTS:

7.1 Report of the Chief of Staff – Copies of the Report of the Chief of Staff dated October 2019 were previously provided (copy attached). Chief of Staff, Dr. B. Chawla, presented a high level overview of items referenced in the report. Of note, the Hospital has recruited three new potential hospitalists into the 7-day model, equating to 1.5 full-

time hospitalists. Despite these efforts, the hospitalist program continues to recruit to fill vacancies.

There was a

MOTION: That the October 2019 Report of the Chief of Staff be received.

Mrs. C. Norris/Mrs. K. Ward, **CARRIED**

7.2 Report of the Hospital Foundation – Copies of the Foundation CEO's Report to the Board of Governors dated October 2019 were tabled (copy attached). Foundation CEO, Mrs. E. Coons provided a high level overview of items referenced in the report. Of note, copies of the Association of Fundraising Professional's Code of Ethical Standards and Donor Bill of Rights were appended to the report.

There was a

MOTION: That the October 2019 Foundation Report to the Board of Governors be received.

Mr. J. Griepsma/Mrs. P. Clarke, **CARRIED**

7.3 Report of the Hospital Auxiliary – No report submitted.

7.4 Report of the Interim President & CEO – Copies of the Interim President & CEO's Report to the Board of Governors dated October 24, 2019 were previously provided (copy attached). Interim President & CEO, Ms. V. Nelson provided a high level overview of items referenced in the report. Of note were a number of articles regarding Ontario hospitals in various stages of capital redevelopment projects. Ms. Nelson also noted that an Executive Summary from Benchmark Intelligence Group (BIG) Healthcare's clinical service analysis will be presented to the Board via the Resources Committee in November. In addition, Ms. Nelson noted that she has been asked to present at the November meeting of the local Family Health Organization regarding expectations of primary care in Ontario Health Teams.

There was a

MOTION: That the President & CEO's Report to the Board of Governors dated October 24, 2019 be received.

Mrs. C. Norris/Mrs. P. Clarke, **CARRIED**

8. **CLOSED MEETING:** The Closed meeting of the Board of Governors commenced at 6:57 pm and is recorded separately.

9. **OTHER BUSINESS:**

9.1 Annual Governor Declaration & Consent Sign Off – Copies of the Annual Governor Declaration & Consent form were previously provided (copy attached). Members were asked to sign and return the form to Board Executive Assistant, T. Fierheller.

9.2 Annual Acceptable Use of Information and Communications Technology Policy / Confidentiality Policy Sign Off – Copies of the Acceptable Use of Information and Communications Technology policy and the Confidentiality policy were previously provided (copies attached). Members were asked to sign and return the forms to Board Executive Assistant, T. Fierheller.

9.3 Monday Reports – Provided for information.

9.4 MEETING DATES TO REMEMBER

Quality/Governance & Planning Committee – November 19, 2019, 8:00 am

Resources Committee – November 21, 2019, 8:00 am

Board of Governors – Thursday, November 28, 2019, 5:30 pm

10. MOTION FOR ADJOURNMENT:

There being no further business, the OPEN meeting adjourned at 7:22 pm on a motion of Mrs. K. Ward.



Chair



Secretary

November 28, 2019

Date