

**MIDDLESEX HOSPITAL ALLIANCE
BOARD OF DIRECTORS MEETING
Wednesday, January 28, 2015
FCHS Boardroom
1730 hours**

Present: K. Williams (Chair)
D. Butler
R. Coe
V. Dalal (t/c)
N. MacLean (t/c)
R. McRae
B. Montgomery
B. Twyford
N. VanderGulik
C. Waters
Ex-Officio
P. Long
N. Maltby
G. Perkin
T. Stepanuik

Regrets: J. Barnett
J. Dreyer
Guests: L. Campbell
T. Hamilton

C. Swan, Recorder

1. CALL TO ORDER

The Chair called the meeting to order 1730 hours.

2. APPROVAL OF AGENDA

**MOTION
BG: 43/14**

A motion was made and seconded BE IT RESOLVED THAT:
The agenda be accepted as presented.

Carried

3. DECLARATION OF INTEREST

The Chair stated that each board member must declare a conflict of interest at the appropriate time on any item within the agenda if a member may have a vested interest.

4. PRESENTATIONS:

5.1 FCHS FOUNDATION – T. Hamilton

T. Hamilton, Events Chairperson for the FCHS Foundation provided an update to the Board of Directors.

- The Foundation is launching a fundraising campaign for a new digital x-ray suite at FCHS. It is estimated that the suite will cost approximately \$700,000. The Foundation already has raised \$250,000 towards this gift.
- Paula Downs, the Chair of the FCHS Foundation and Todd Stepanuik have started to reach out to municipalities in the area to request financial support. Last week a presentation was made to SW Middlesex asking for approximately \$96,000, which is consistent with previous gifts from the municipality. Similar presentations will be made to the surrounding municipalities within the next few months to request financial support for the new suite.
- Plans are also underway for the annual curling bonspiel. Further details will be provided when available.

On behalf of the Board, the Chair thanked T. Hamilton and the FCHS Foundation for their ongoing commitment and dedication to FCHS and the people we serve.

5.2 Health System Funding Reform (HSFR) – Quality Based Procedures (QbP) and Wait Time Funding – L. Campbell

L. Campbell provided an informative presentation on Quality Based Procedures (QbP). QbPs were implemented in 2012/13 with hip and knee joint replacement and cataracts, all elective procedures. COPD, CHF, Endoscopy and Stroke, all non-elective procedures were added in 2013/14. Hip fracture, pneumonia, tonsillectomy and neonatal jaundice were added in 2014/15 and knee arthroscopy, coronary artery disease, cancer surgery and colposcopy will be added to QbP funding at SMGH in 2016/17. Revenue is brought in for these procedures as it is earned.

Risks were discussed related to funded volumes and exceeding or not meeting these volumes. MHA is able to manage the volumes for elected procedures however it is more difficult to control volumes for non-elective procedures. In the past the LHIN has supported the reallocation of funds to procedures exceeding volumes from those not meeting volumes.

A chart was presented showing the transition through mitigated HSFR. In 2012/13, QbP funded volumes totaled \$1.5 million or 6% of total budget and in 2014/15, QbP funded volumes total \$6.7M or 24% of total budget. Global funding has been reduced from 60% in 2012/13 to 45% in 2014-15.

Going forward, there is variability risk with QbP elective and non elective volumes. Costs are increasing, the hospital remains efficient but the HBAM funding model is affected by all hospital activity and constant total funding bucket.

Wait time funding is additional funding that the hospital can earn once the base funding volumes have been completed. Hip and knee revisions, CT hours and some general surgery procedures are included with wait time funding. Revenue is not realized until it is earned. Wait time funding has been decreasing; in 2012/13, it was 1.1% of total revenue and has decreased to .7% and .6% of total revenue respectively in 2013/14 and 2014/15.

The Board Chair thanked L. Campbell for the detailed explanation of Health System Funding Reform, and QbP and wait time funding.

5. OPENING REMARKS – K. Williams

K. Williams expressed thanks to the Board members who attended the Strategic Planning retreat on Saturday, January 24, 2015 and subsequently completed the survey providing feedback. The information is very valuable for planning future events.

The CEO and Board Chair were welcome guests at the SHHA Board meeting on January 22, 2015. An invitation will be extended to the Chair and Vice Chair of SHHA to attend an MHA Board meeting in either February or March. The Board Chair recommended that the Board members from each board have an opportunity to meet and suggested that a barbecue over the summer would provide this opportunity. More information will be provided when plans are finalized.

6. STORY TELLING – N. MacLean

N. MacLean requested N. Maltby to be the storyteller. The following stories were shared: The daughter of an elderly couple wrote a letter to thank the hospital and particularly nurse Rose, who was instrumental in making arrangements to have her parents' appointment times adjusted so they didn't need to spend a lengthy time at the hospital. She acknowledged the fantastic team of nurses and doctors on staff at the hospital and stated that the hospital experience went beyond their expectations.

She also mentioned that her Father's appointment was for an orthopaedic consult for hip surgery. Although they were extremely happy with the care received and wished to continue receiving care at SMGH, they may have to look to another hospital for a more timely solution to accommodate the needs of her Father sooner since her father is the

primary caregiver for her Mother who has Alzheimers and SMGH has the longest wait times in the province.

The writer wanted to ensure that all those involved with her parents care were acknowledged for the outstanding care her parents received.

Two posts were found on “Strathroy Praise” commending the SMGH Hospital physicians and staff for their care and compassion. “What an awesome group to deal with,” stated one person.

7. CONSENT AGENDA

Items listed under the Consent Agenda were included with the Board package.

Clarification was provided on the roles of the Executive and the Governance Committee in the Terms of Reference presented for approval.

MOTION

BG: 44/14

A motion was made and seconded, BE IT RESOLVED THAT:

All Consent Agenda items, motions and recommendations be accepted as presented.

Carried

8. CEO REPORT – T. Stepanuik

The following items were highlighted from the CEO Report:

- Paul Long, CFO, has announced his retirement in June of this year. Paul has been a phenomenal ambassador for FCHS and MHA for 28 years and he will be greatly missed.
- An active search is underway for a new CFO. MHA has been inundated with quality applications which will be shortlisted to 5 or 6 candidates who will undergo the interview process. It is hoped that an announcement of the successful candidate can be made by the end of the month. Paul Long has graciously agreed to orient the incumbent to the position.
- CCAC bargaining with ONA has stalled. A vote is scheduled for tomorrow evening and it should be known by Friday whether staff represented by ONA at the CCAC will strike. CCAC has a contingency plan in place should this happen.

MOTION

BG: 45/14

A motion was made and seconded, BE IT RESOLVED THAT:

The Report of the President and Chief Executive Officer be accepted as presented.

Carried

9. STRATEGIC ISSUES

9.1 Community Accountability Planning Submission (CAPS) – B. Montgomery/P. Long

The 2014-17 M-SAA CAPS for the FCHS Villa and Adult Day Program budgets were completed and submitted to the SW LHIN on January 9, 2015. There has been one adjustment to funding for the personal support workers (PSW) year one salary increase of \$1.50/hour. The CAPS 2015-17 Planning Submission is balanced.

MOTION

BG: 46/14

A motion was made and seconded, BE IT RESOLVED THAT:

The Board of Directors approves the 2015-16 and 2016-17 Community Accountability Planning Submission as presented.

Carried

9.2 Banking Services RFP – B. Montgomery/P. Long

An invitation to submit a proposal was issued via a procurement web site to the seven financial institutions with branches in Strathroy who could provide local deposit facilities. Six financial institutions (banks/credit unions) responded to the RFP. Three proposals were shortlisted and evaluated. CIBC was ranked first by all evaluation team members.

As CIBC is the current financial institution for the two MHA hospitals and the SMGH Foundation, a follow up meeting on December 16th occurred to verify the evaluation committees understanding of the CIBC products, service levels and pricing. Everything was found to be in order. The SMGH Foundation will see some improvements in functionality and costs. It is more of a status quo for the hospitals who have enjoyed acceptable service levels.

The Banking Services Request for Proposal results requires the same endorsement and recommendation for approval from the Hospital and Foundation Boards. The RFP results remain confidential until both Boards approve the CIBC recommendation.

MOTION

BG: 47/14

A motion was made and seconded, BE IT RESOLVED THAT:

The Board of Directors approves and endorses the recommendations of the Finance Committee and the Banking Services RFP Evaluation team to contract banking services with CIBC for five years with the option of two, one year extensions.

Carried

9.3 BAP Capital Equipment Purchase – Stereotactic Equipment – B. Montgomery

As previously reported, the BAP trial was extended and continues until CCO OBSP assessment approval is received. The hospital was advised on December 11, 2014 that the SMGH BAP assessment application was not approved as there is a new requirement that all hospital sites applying to be CCO breast assessment centres perform both Ultrasound and Stereotactic biopsies.

The business plan presented and approved by the MHA Board of Directors included the equipment to complete ultrasound guided biopsies now and a future capital budget amount for stereotactic biopsies. New requirements for CCO have moved this purchase forward. In order for SMGH to receive approval as a CCO assessment centre, a stereotactic add-on must be purchased and proof of one procedure provided. A new application must be submitted however CCO implies approvals would be forthcoming once these requirements are met.

The SMGH Foundation has committed to fundraise to purchase a stereotactic addition but has requested six months to accomplish. As announced at the Busting Out event, SMGH Foundation received a cash donation to purchase a third ultrasound machine immediately, moving it forward from the 2015/16 capital plan.

The following motions were presented to the Board of Directors to approve due to the change in CCO requirements and the current purchase of a third ultrasound machine for the BAP.

MOTION

BG: 48/14

A motion was made and seconded, BE IT RESOLVED THAT:

The Board of Directors approves the recommendation of the Finance Committee that the hospital purchase the stereotactic addition to the mammography unit in the amount of \$54,000. Stereotactic biopsies capability is a requirement for Cancer Care Ontario to approve the SMGH BAP application. This hardware/procedure was identified in the original Board approved business plan but was scheduled for in the future.

The SMGH Foundation will provide funding for the unit by June 30, 2015.

Carried

MOTION

BG: 49/14

A motion was made and seconded, BE IT RESOLVED THAT:

The Board of Directors approves the purchase of a third Ultrasound machine at the SMGH site in 2014/15, rather than 2015/16 as the SMGH Foundation has received a cash donation of \$120,000 for this purchase.

Carried

9.4 2015/16 Operating Plan Update – P. Long

P. Long provided an overview of the 2015/16 operating plan process. Meetings have been held with managers to review and finalize submissions. The 2015/16 operating plan does not reflect any reduction in services, however is based on a 3-week OR slowdown and changes in Nutrition and Food Services. Opportunities for the addition of RT hours as well as additional hours in ED Green Zone are under consideration. A formal budget will be presented to the Finance Committee in February and subsequently brought forth to the Board of Directors for approval. Small hospitals are not included in the funding reform at the present time. The assumption is that FCHS will receive a 1% small hospital increase. The HAPS submissions for SMGH and FCHS were submitted to the SW LHIN on January 16, 2015, both hospitals reflecting a balanced budget.

9.5 CGE Board Survey – C. Waters

A link to the CGE Board Survey will be sent out via email in February. The Board will have two weeks to complete the survey. The Governance check list will also be sent with the survey for the Board to use as a reference. Results of the survey will be tabulated by the OHA and compared to results from other OHA member boards.

9.6 Board Recruitment – C. Waters

MHA currently has one vacant board position. In June, Ralph Coe will have completed his 9-year term on the board, leaving a second vacancy. Candidates have expressed interest in joining the MHA Board of Directors. The Chair of Governance will contact these individuals to set up an appointment to discuss the director position(s). To maintain a well-rounded knowledge based board, the Governance Committee is looking for a candidate with municipal experience. Further information will be provided as available.

9.7 MHA Strategic Planning – T. Stepanuik

Board members were thanked for their contributions to the Strategic Planning retreat on Saturday, January 24, 2014, and for completing the short survey that was sent out following the retreat. The results of the survey were presented by C. Swan. There was a

75% response rate to the survey. The facilities, room temperature and food were rated good to excellent. Responses for learning objectives and consultants were varied. T. Stepanuik and J. Whaley will discuss next steps and the survey results.

A joint session with the Medical Advisory Committee and the Board of Directors may be a viable option to continue the strategic planning process.

Dr. Dalal left the meeting at 1900 hours.

9.8 Patient Safety & Hospital Dashboard Report - N. MacLean/N. Maltby

N. MacLean, Chair of the Board Quality Committee, introduced the Patient Safety & Hospital Dashboard Presentation. He stated that the Board valued the information captured in the Patient Safety and Hospital Dashboard reports however agreed that the information would be even more valuable if presented from an analytic perspective. What does the metric mean? What are the reason(s) these metric(s) are not meeting target? What action plan will be taken to achieve the target?

The Chair of Quality thanked N. Maltby and M. Robertson for their dedication and time to prepare this evening's presentation and report.

N. Maltby presented the following information:

Patient Safety: The top 5 reported incidents at MHA are: falls, medication/fluid error, safety/security/conduct, lab test/POC and treatment/diagnosis/care. Details were provided about these incidents by site and level of severity.

Compliments/Complaints: A table showing the total number of compliments and complaints over the last five years was discussed. The numbers for complaints and compliments have increased significantly over the past five years. This increase is associated with the implementation of RL Solutions, an online incident reporting tool. Forty-six percent (46%) of the total complaints result from emergency room visits, with the greatest number of complaints about wait times.

Dashboards: A detailed explanation and action plan were provided for the FCHS and SMGH indicators below target.

FCHS indicators below target include: medication reconciliation on admission, patient satisfaction in the ED and unnecessary time in the acute care.

SMGH indicators below target include: medication reconciliation on admission, Cdiff (clostridium difficile), ED LOS for admitted patients, ED non-admitted high acuity, ED non-admitted low acuity, overall patient satisfaction (trending within 3% of target), SMGH Unplanned Readmission within 30 days, SMGH unnecessary time in acute care – alternate level of care (ALC).

Reasons for the gaps and action plans for each were discussed.

The Board Chair thanked N. Maltby for a very informative presentation. The information provided is very helpful for the Board to understand how the quality indicators are measured.

Following discussion, it was agreed that moving forward one indicator below target would be chosen quarterly for a detailed presentation to the Board. The problem, reasons and action plan to reach target would be provided.

9.9 SHHA Update – K. Williams

Please see Board Chair Opening Remarks.

10. Business Arising

There was no business arising.

11. New Business

11.1 SW LHIN HSAA Variance Report December 2014 – T. Stepanuik

Correspondence was sent on December 10, 2014 to Mark Brintnell, Senior Director, Performance and Accountability at the SW LHIN to address performance indicators for SMGH which fall outside of H-SAA corridor(s). The response discussed the reasons for the variances and the action plan to address these variances.

11.2 HATS OFF – Board Award – C. Waters

The Hats Off program is a way to acknowledge the efforts put forth by individuals that exemplify our values and ensure quality for our patients. The Board of Directors award is given to acknowledge contributions toward the advancement of institutional care in health and recognize the individual(s) whose exemplary behaviour(s) and/or achievement(s) has resulted in improvements to the health services offered by either site of the MHA.

K. Williams, Board Chair and C. Waters, Governance Chair have nominated Ineke Haan for the Board of Directors award. Ineke served on the Board as a Director for 9 years, serving as chair on all board committees as well as Chair of the Board in 2008/09. When her 9-year term as director was fulfilled, she returned to the board as a community committee member for an additional year.

Ineke was a devoted board member and through her expertise, played a role in developing and strengthening the knowledge-based Board of Directors of the Middlesex Hospital Alliance.

MOTION

BG: 50/14

A motion was made and seconded, BE IT RESOLVED THAT:

The Board of Directors endorses the nomination of Ineke Haan for the Board of Directors Hats Off Award.

Carried

11.3 SHHA Representatives Invite to Board Meeting – K. Williams

John McNeilly Board Chair and Conor O’Keefe, Vice Chair of SHHA will be invited guests at an upcoming MHA Board meeting.

12. CORRESPONDENCE AND ANNOUNCEMENTS

12.1 Staff “Thank You” Notes to the Board

12.2 SW LHIN Organizational Assessment Tool

12.3 OHA Board of Director’s Chair Report

13. IN CAMERA

MOTION

BG: 51/14

A motion was made and seconded, BE IT RESOLVED THAT:

The Board convenes to an incamera session to discuss physician credentials.

Carried

MOTION

BG: 52/14

A motion was made and seconded, BE IT RESOLVED THAT:

The Board rise out of camera and report.

Carried

The Chief of Staff on behalf of the Medical Advisory Committee recommended that the physician credentials presented in camera be accepted.

MOTION

BG: 53/14

A motion was made and seconded, BE IT RESOLVED THAT:

Upon the recommendation of the Chief of Staff on behalf of the Medical Advisory Committee, Applications for Privileges for Strathroy Middlesex General Hospital and Four Counties Health Services provided in camera be accepted as presented.

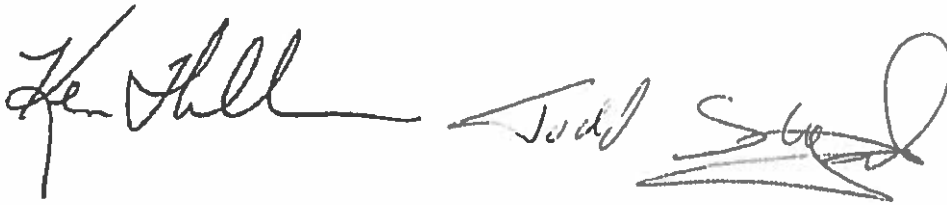
Carried

14. ADJOURNMENT

The meeting adjourned at 2005 hours.

15. INDEPENDENT DIRECTOR SESSION

The elected Directors convened to an independent director session.

The image shows three handwritten signatures in black ink. The first signature on the left is for Kenneth Williams, the middle one is for Todd Stepanuik, and the one on the right is for Cathy Swan. Each signature is written in a cursive, flowing style.

Kenneth Williams
Chair

Todd Stepanuik
CEO & Secretary

Cathy Swan
Recording Secretary

**MIDDLESEX HOSPITAL ALLIANCE
BOARD OF DIRECTORS MEETING
Wednesday, February 25, 2015
SMGH Boardroom
1730 hours**

Present: K. Williams (Chair)
J. Barnett
D. Butler
R. Coe
R. McRae
B. Montgomery
B. Twyford
N. VanderGulik
C. Waters
Ex-Officio
V. Dalal
J. Dreyer
P. Long
N. Maltby
G. Perkin
T. Stepanuik

Regrets: N. MacLean
Guests: S. Ouellet
Dr. S. Soliman

C. Swan, Recorder

1. WELCOME AND INTRODUCTIONS – Dr. Samy Soliman & Steph Ouellet

Dr. G. Perkin, Chief of Staff of MHA, introduced Dr. Samy Soliman, a General Internist, who joined MHA in December. Dr. Soliman's focus is cardiology with a special interest in congestive heart failure and chest pain. He has opened a practice on 3rd floor and will also provide consultations at SMGH and FCHS to both inpatients and outpatients.

Dr. Soliman responded that he is very happy to have joined MHA and looks forward to serving the patients in the area.

T. Stepanuik introduced Steph Ouellet, Vice President Strategic Partnerships/FCHS Site Director. Steph is an experienced leader with over 20 years of experience in both healthcare and the private sector with a reputation of delivering results and building trust.

On behalf of the Board, the Chair welcomed Dr. Soliman and Steph Ouellet to MHA.

2. CALL TO ORDER

The Chair called the meeting to order 1730 hours.

3. APPROVAL OF AGENDA

**MOTION
BG: 54/14**

A motion was made and seconded BE IT RESOLVED THAT:
The agenda be accepted as presented.

Carried

4. DECLARATION OF INTEREST

The Chair stated that each board member must declare a conflict of interest at the appropriate time on any item within the agenda if a member may have a vested interest.

5. OPENING REMARKS – K. Williams, Board Chair

MHA Executive Members and the CEO met with the SMGH Foundation Executive and Executive Director on Monday, February 23, 2015, to discuss the management and disbursement of estate funds as well as opportunities to streamline the process between the hospital and the Foundation for disbursement of funds.

All Board members are encouraged to complete the CGE Board Survey which was distributed to the Board via email.

The Board is scheduled to meet at SMGH on Saturday, February 28, 2015 to continue the strategic planning process.

Hats Off, a celebration of accomplishments of individuals, teams, staff, physicians and volunteers, is scheduled for Wednesday, March 4, 2015 at Caradoc Sands. Board members are encouraged to attend.

6. STORY TELLING – N. Maltby

At the January Board meeting, a story about an elderly couple who had appointments at SMGH on the same day but at different times was shared with the Board. As you will recall, the gentleman was his wife's caregiver and was in need of a total hip replacement, however was informed he would have to be put on the waiting list for his replacement. Since that time, the surgeon reassessed the patient and booked his total hip replacement surgery this past week. The surgery was a great success and the patient was discharged home today.

A thank you letter was received from a patient praising the staff in the CT department for their kindness and reassurances to her during and after a procedure. She also was very appreciative of the Auxiliary Volunteer who provided her with a cup of tea following the procedure.

A letter was received on October 17, 2014, via email from a patient addressed to the Board of Directors conveying thanks for the outstanding care provided by the Emergency Department staff and physicians.

7. CONSENT AGENDA

Items listed under the Consent Agenda were included with the Board package.

MOTION

BG: 55/14

A motion was made and seconded, BE IT RESOLVED THAT:

All Consent Agenda items, motions and recommendations be accepted as presented.

Carried

8. CEO REPORT – T. Stepanuik

The following items were highlighted from the CEO Report:

- Implications for MHA following the Supreme Court of Canada decision on physician assisted suicide were discussed. End of life policies and procedures will need to be established together with education for staff and physicians as well as strategies to deal with this going forward. Information will be shared as received. Dr. Perkin added that the initiative is not straight forward – there will be many things to be considered.
- The FCHS Palliative Care Suite should be finished in mid March. An official opening ceremony will be planned to open the suite. Special training has been offered to nurses to teach appropriate care to provide to palliative care patients.
- Work continues on moving the Professional Services Building forward. Several meetings have taken place with physicians and Western to discuss plans and opportunities. Recently, consideration has been given to the 4th floor as an option to consider for the relocation of the physician group. Further information will be provided as available.
- The first three weeks at SHHA have included meetings with leaders and the medical community and a meet and greet with staff. Things are going well. One of the first projects underway, as requested by the Board is a review of management team

structure. A great deal of pride is shown by the staff and community. SHHA is financially stable and is a very cohesive group. They possess similarities to MHA but also have different challenges. SHHA partners with a multitude of providers in the area.

- John McNeilly, Board Chair, SHHA, will be a guest at the March board meeting.
- SHHA has rescheduled the roll out of their new Strategic Plan celebration to March 5.
- Integrated funding models for care delivery and reimbursement were discussed. The premise of these models is that the funding will follow the patient.

MOTION

BG: 56/14

A motion was made and seconded, BE IT RESOLVED THAT:

The Report of the President and Chief Executive Officer be accepted as presented.

Carried

9. STRATEGIC ISSUES

9.1 2015/16 Operating Plan – P. Long

The 2015-16 Operating Plan was presented to the Board at the January Board meeting. Both hospitals submitted a balanced total margin to the SW LHIN on January 16, 2015 and now await the proposed Hospital Services Accountability Agreement (H-SAA) with financial and clinical performance targets. Several key assumptions have remained.

SMGH and FCHS should have a balanced total margin (LHIN financial performance target) as of March 31, 2016, based on the additional corporate assumptions and department managers' submissions including potential human resources investments, human resources realignment, medical remuneration investment, in year (2014/15) initiatives, continuing partnership opportunities, new corporate directions, similar volumes to 2014/15 and potential OR slowdown over Christmas and one-week during the summer.

The top three risks for SMGH pertain to the HBAM funding formula, the breast assessment program approval and hospitalist coverage. FCHS also has a focus on hospitalist coverage. Offsetting financial strategies for these risks are known vacancies, competitive contract negotiations, SHHA CEO net recovery, 1 room OR days and management control for new HR investments.

Consultations and presentations have been made to the Board of Directors, Managers, the Senior Leadership Council and the Fiscal Advisory Committees. A presentation is scheduled for the SMGH Perioperative Governance Committee and Department of Surgery in March.

Following the presentation, a recommendation was made to the Board of Directors to approve the 2015/16 Operating Plans as presented for Four Counties Health Services and Strathroy Middlesex General Hospital.

MOTION

BG: 57/14

A motion was made and seconded, BE IT RESOLVED THAT:

The Middlesex Hospital Alliance Board of Directors approves the 2015-16 Operating Plans for Four Counties Health Services and Strathroy Middlesex General Hospital. Both hospitals are reflecting a balanced total margin. The MHA Finance Committee and Board of Directors have reviewed the corporate assumptions, major clinical investments and risks.

The presentation of the SMGH 2015-16 Operating Plan to Perioperative Governance and Department of Surgery is scheduled for March. Comments and feedback following these meetings will be provided to the Board.

Carried

There was a lengthy discussion about capital equipment requirements and the significant challenges to ensure sufficient funding for capital resources if available.

9.2 Board Recruitment – C. Waters

One potential Board candidate has been interviewed for the Board of Directors. The skill set would be a welcome addition to the board however this candidate declined a board appointment due to a scheduling conflict with the Board of Directors meetings. Several attempts have been made to contact another potential candidate to sit on the Board however, to date have not been able to speak with the candidate. There is also a FCHS LAC member who is being considered as a board candidate. The Board will be notified of any updates about board recruitment.

9.3 Strategic Plan Update – T. Stepanuik

At the Strategic Planning session scheduled for Saturday, the Board will solidify the pillars and strategic statements associated with each pillar. It is hoped that time will allow the Board to embark upon goals and objectives for each pillar as well.

9.4 SHHA – K. Williams

SHHA Update was discussed under Agenda Item 8, CEO Report.

10. Business Arising

There was no business arising.

11. New Business

There was no new business.

12. CORRESPONDENCE AND ANNOUNCEMENTS

12.1 FCHS Foundation Presentation to SW Middlesex Council – Transcript Coverage

13. ADJOURNMENT

The meeting adjourned at 1845 hours.

14. INDEPENDENT DIRECTOR SESSION

The elected Directors convened to an independent director session.



Kenneth Williams
Chair



Todd Stepanuik
CEO & Secretary

Cathy Swan
Recording Secretary

**MIDDLESEX HOSPITAL ALLIANCE
BOARD OF DIRECTORS MEETING
Wednesday, March 25, 2015
Amy's
1730 hours**

Present: K. Williams (Chair)
J. Barnett
R. Coe
N. MacLean
R. McRae
B. Montgomery
B. Twyford
N. VanderGulik
C. Waters
Ex-Officio
V. Dalal
J. Dreyer
P. Long
N. Maltby
G. Perkin
T. Stepanuik

Regrets: D. Butler
Guests: J. McNeilly

C. Swan, Recorder

1. WELCOME AND INTRODUCTION – John McNeilly, SHHA Board Chair

K. Williams, MHA Board Chair, introduced John McNeilly, Board Chair, SHHA. The Board Chair provided an overview of the events that have transpired since April 2014 when the MHA Board Chair was initially contacted by SHHA to discuss opportunities including purchasing the services of the MHA President & CEO.

J. McNeilly thanked the MHA Board of Directors for the opportunity to attend the Board meeting. He expressed his gratitude to K. Williams and the MHA Board for embracing the opportunity to work together. He looks forward to further collaboration with MHA as we work together to explore opportunities for further integration and provide a stronger voice for the communities we serve.

2. CALL TO ORDER

The Chair called the meeting to order 1730 hours.

3. APPROVAL OF AGENDA

The following was added to the Agenda:

Business Arising:

10.1 2015/16 Operating Plan Update – T. Stepanuik/P. Long

MOTION
BG: 01/15

A motion was made and seconded BE IT RESOLVED THAT:
The agenda be accepted as amended.

Carried

4. DECLARATION OF INTEREST

The Chair stated that each board member must declare a conflict of interest at the appropriate time on any item within the agenda if a member may have a vested interest.

5. **OPENING REMARKS – K. Williams, Board Chair**
MHA celebrated the Hats Off Awards on March 4, 2015. Ineke Haan, a former board member, was presented with the Board of Directors award.
The celebration of MHA Service awards was held March 24, 2015. Staff and physicians were recognized for service from 5 years up to and including 45 years.
Our thanks to Dr. Gary Perkin who has agreed to extend his tenure as MHA Chief of Staff for another year.
Paul Long, CFO, has announced his retirement from MHA effective April 6, 2015. The Board of Directors wished Paul a happy retirement and presented him with a small token of their appreciation and gratitude for 28 years of dedicated service.
P. Long, in turn, provided the Board with an overview of his 28 years at MHA. He thanked the Board for their support and wished MHA continued success.
6. **STORY TELLING – N. Maltby**
N. Maltby shared two patient stories. The first was just received today via email from a patient who had surgery earlier today as an outpatient. She was very happy with the care she received and wanted to express her thanks to everyone at SMGH for the exceptional care she received. The second was from a patient who had received heart surgery in London and was repatriated to the ICU at SMGH to recover. The patient expressed thanks to all.
7. **CONSENT AGENDA**
Items listed under the Consent Agenda were included with the Board package.

MOTION

BG: 02/15

A motion was made and seconded, BE IT RESOLVED THAT:
All Consent Agenda items, motions and recommendations be accepted as presented.

Carried

8. **CEO REPORT – T. Stepanuik**
The following items were highlighted from the CEO Report:
- SW LHIN Clinical Services Planning Update
 - The transition to providing CEO services at SHHA is progressing well. Staff and leadership are very engaged. The Agreement between MHA and SHHA will provide many opportunities for both corporations.
 - Congratulations was extended to Paul Long on his retirement. Paul has been a pleasure to work with and a great ambassador for MHA.

MOTION

BG: 03/15

A motion was made and seconded, BE IT RESOLVED THAT:
The Report of the President and Chief Executive Officer be accepted as presented.

Carried

9. **STRATEGIC ISSUES**
9.1 Strategic Plan Update – T. Stepanuik
The Planning Committee reviewed the preliminary Strategic Planning Document at the meeting held on March 23, 2015. A new vision, renewed mission and five strategic pillars – people, quality care, relationships, resources and innovation (in no specific order), goals for each pillar and measurable objectives to support the strategic goals were reviewed with feedback provided by the Committee. The Leadership team will also review the preliminary document at their next meeting and provide feedback as well.

Comments will be reviewed by J. Whaley and T. Stepanuik and changes made to the preliminary plan. The updated document will be forwarded to the Planning Committee for further review. It is hoped that the updated Strategic Plan, agreed upon by the Planning Committee, will be presented to the Board of Directors at the April Board meeting.

9.2 CGE Board Survey Results – B. Twyford

Results of the MHA Board Survey were included in the Board package for members to review. Overall, the MHA Board results when benchmarked to other boards were very good. The Governance Committee has developed an action plan, as outlined in the Briefing Note to the Board of Directors to address the areas of the evaluation where MHA could improve.

9.3 Quality Improvement Plan (QIP) 2015/16 – N. Maltby/ N. MacLean

The 2015/16 QIP was included with the Board package for members to review. The required priority indicators for the QIP 2015-16 remain the same as the current year. The Quality Committee of the Board reviewed the plan in detail, including revisions to targets, existing change plans and new plans. Additional recommendations from the Board Quality Committee have been added to the final version.

The Quality Committee recommends to the MHA Board of Directors, approval of the 2015/16 QIP as presented. The QIP will be publicly posted to comply with legislation.

MOTION

BG: 04/15

A motion was made and seconded, BE IT RESOLVED THAT:

The Middlesex Hospital Alliance Board of Directors approves the recommendation of the Quality Committee to approve the Quality Improvement Plans for 2015-16 for Strathroy Middlesex General Hospital and Four Counties Health Services as presented.

Carried

9.4 Medication Reconciliation – N. Maltby

N. Maltby provided a detailed presentation of Medication Reconciliation explaining the following:

- What it is?
- Why we do it?
- When we do it?
- What is the process?
- What is the risk?
- Results for both FCHS and SMGH and strategies implemented to improve the results.

A link to a video explaining Medication Reconciliation was forwarded to the Board to review as well.

On behalf of the Board of Directors, the Chair thanked N. Maltby for the informative presentation which provided the Board with a better understanding about Medication Reconciliation.

9.5 H-SAA Amending Agreements – P. Long

The financial and performance indicators have been reviewed and appear to agree to the HAPS submission, original 14/15 QbP and wait time volumes and negotiated performance targets. The hip and knee priority III targets have been clarified with the SW LHIN. The ALC target is acceptable. The 2008-2016 H-SAA Amending Agreements for Four Counties Health Services and Strathroy Middlesex General Hospital require Board approval to be submitted to the SW LHIN for final approval by the LHIN Board.

MOTION

BG: 05/15

A motion was made and seconded, BE IT RESOLVED THAT:

The Middlesex Hospital Alliance Board of Directors endorses the Board Chair and President & Chief Executive officer to execute Four Counties Health Services and Strathroy Middlesex General Hospital 2008/16 H-SAA Amending Agreements with the South West Local Health Integration Network.

Carried

9.6 M-SAA Amending Agreement – P. Long

The amended 2014/17 M-SAA Agreement for 2015/16 which funds the Adult Day Program and Supportive Housing has been reviewed and approved by the SW LHIN. The 2015/16 and 2016/17 Community Accountability Planning Submission (CAPS) was previously approved.

MOTION

BG: 06/15

A motion was made and seconded, BE IT RESOLVED THAT:

The Middlesex Hospital Alliance Board of Directors hereby endorses the Board Chair and President & CEO to execute the 2014/17 Four Counties Health Services and South West Local Health Integration Network's Multi-Sector Accountability Agreement Amendments for 2015/16.

Carried

10. Business Arising

10.1 2015/16 Operating Plan Approval – T. Stepanuik/P. Long

At the February Board of Directors meeting, the 2015/16 Operating Plan was approved by the Board. The plan was scheduled to be presented at the March meetings to Perioperative and Department of Surgery for comment and feedback. The major assumptions including Christmas slowdown, one room OR days, no 2015 summer slowdown or closure and potential reallocation of one room OR days in Q4 were presented. Both Committees expressed no concern with the proposed assumptions.

11. New Business

11.1 COS Evaluation – K. Williams

As previously mentioned, Dr. Gary Perkin has agreed to extend his tenure as Chief of Staff. The Executive will meet with Dr. Perkin to complete the COS annual evaluation.

12. CORRESPONDENCE AND ANNOUNCEMENTS

12.1 SMGH Foundation Upcoming Events

12.2 Thank You – Ineke Haan

13. ADJOURNMENT

The meeting adjourned at 1840 hours.

14. INDEPENDENT DIRECTOR SESSION

The elected Directors convened to an independent director session.



Kenneth Williams
Chair



Todd Stepanuk
CEO & Secretary

Cathy Swan
Recording Secretary

**MIDDLESEX HOSPITAL ALLIANCE
BOARD OF DIRECTORS MEETING
Wednesday, April 29, 2015
FCHS Boardroom
1730 hours**

Present: D. Butler (Vice Chair)
N. MacLean
B. Twyford
C. Waters

Ex-Officio

A. Smith
J. Dreyer
G. Perkin
T. Stepanuik

C. Swan, Recorder

Regrets: J. Barnett
R. Coe
V. Dalal
N. Maltby
R. McRae
B. Montgomery
N. VanderGulik
K. Williams

Guests: S. Ouellet
J. Whaley

FCHS SITE TOUR: S. Ouellet, VP Strategic Partnerships/FCHS Site Director, provided a tour of the FCHS site to the Board of Directors.

1. CALL TO ORDER

The Vice Chair called the meeting to order at 1745 hours.

Due to unforeseen circumstances, there is not a quorum for this evening's Board meeting. Motions 10/15 and 11/15 will be confirmed by the Board through electronic vote following the meeting. All other motions will be brought forth for approval at the May Board of Directors meeting.

2. APPROVAL OF AGENDA

Strategic Plan Update, Agenda Item 9.1 will be moved to Item 4, Presentations. The update will be provided by Jim Whaley, Whaley & Company.

MOTION
BG: 07/15

A motion was made and seconded BE IT RESOLVED THAT:
The agenda be accepted as amended.

3. DECLARATION OF INTEREST

The Chair stated that each board member must declare a conflict of interest at the appropriate time on any item within the agenda if a member may have a vested interest.

4. PRESENTATIONS:

4.1 Strategic Plan Update – J. Whaley

J. Whaley provided an update on the Strategic Planning Process.

- Renewed Mission – To provide the healthcare we would expect for our own families
- New Vision – Exceptional Care by Exceptional People
- 5 Pillars – People, Quality Care, Relationships, Resources, Innovation
- Strategic Enablers – Technology & Communications
- Strategic Goals and Objectives

Stakeholder consultations are scheduled for the next 4 days. The following questions will be posed to the audience:

- What do you think of the new Vision and corporate goals? Is there any language you are unsure about?
- Do you think there are any key strategic issues missing?
- What are some key accomplishments you are hoping to see in the next 18-24 months?

Next Steps

- Further consultation with staff, physicians and stakeholders
- Finalizing strategic goals, objectives and performance measures
- Board approval of Corporate Strategic Plan – May 2015
- Development of Clinical Services Blueprint for both sites – Fall 2015

Strategic Plan Document

The contents of the Strategic Plan will include:

- Introduction – Who We Are
- Context for the Plan
- Highlights of Environmental Scan
- Ministry/LHIN Priorities and other Health Trends
- Recent Accomplishments/Successes
- Process for new plan development
- What our stakeholders said
- New strategic pillars, goals, objectives
- How will we define success
- Next steps

Following discussion, it was agreed that an Executive Summary would also be a valuable tool to include in to the document.

The Vice Chair thanked J. Whaley for the informative update. The Board of Directors looks forward to the presentation of the final plan at the May Board meeting.

The slide deck included with the presentation will be forwarded to the Board of Directors for review and reference.

4.2 FCCHS Visioning – S. Ouellet

S. Ouellet, VP Strategic Partnerships and FCCHS Site Director provided an overview of his first 90/86 days at MHA, including general onboarding and priority setting with the MHA leadership team, building key relationships, understanding FCCHS operations and culture, establishing quick wins and articulating the vision. Staff were surveyed and requested to rank the recommendations in the FCCHS Visioning document by order of importance as well as articulate what, if any, challenges would prevent the implementation of the recommendations. Staff was also asked what they would envision as a hub model for FCCHS. The results of the staff rankings revealed five common themes: primary care services, mental health, HUB synergies/“Village”, seniors services and wellness.

Successes to Date

- Palliative Care Suite opened April 7, 2015
- Cultivating two new physicians for FCCHS who could potentially set up practice in July and October respectively.
- FCCHS memory clinic launching in June 2015. The team will include members of the FC Medical Clinic, the hospital, geriatrician and Alzheimer support. It is estimated that by 2041, nearly ¼ of the Canadian population will be 65+ and ¼ of these people will have a memory disorder (mild cognitive impairment or dementia). Initially the clinic will operate one day/month.
- Researching health “hub” best practices
- Currently looking at day surgery and diagnostic services and what could be performed at FCCHS as opposed to SMGH.

- DI Suite fundraising campaign currently under way.

Next Steps

- A preliminary work plan outlining the goals for the short, medium and long-term was shared.
- In the short term, the Memory Clinic, Palliative Care model of Care and Health Village “site visits” will be finalized and completed.
- Programs and services such as the Nurse Practitioner availability at the Quest Centre, rehab with Beattie Haven, Alzheimer’s and CMHA will be reviewed and augmented as well.

The Board will be provided regular updates on the progress of programs and initiatives at FCHS.

The Vice Chair, on behalf of the Board, thanked S. Ouellet for a very informative presentation.

5. **OPENING REMARKS – D. Butler, Vice Chair**

- A reminder to everyone to complete the online President & CEO Performance Evaluation before the May 8, 2015 deadline.
- Volunteer Appreciation Evenings at SMGH and FCHS were held on April 15 and 16 respectively. The commitment and dedication of our volunteers is truly remarkable. The longest serving volunteer at SMGH received recognition for 35 years. The most senior volunteer at FCHS has 31 years of service.

6. **STORY TELLING – N. MacLean**

Correspondence was received by the President & CEO from a patient who had surgery as an outpatient on September 3, 2014, and then returned for many subsequent visits for dressing changes. The patient conveyed her sincere appreciation and thanks to Dr. Blokker and all staff for the positive experience she had during her visits from reception to registration to post op and follow up. Staff went above and beyond the standard of care and made the hospital experience much easier because of their compassion.

7. **CONSENT AGENDA**

Items listed under the Consent Agenda were included with the Board package.

MOTION

BG: 08/15

A motion was made and seconded, BE IT RESOLVED THAT:

All Consent Agenda items, motions and recommendations be accepted as presented.

8. **CEO REPORT – T. Stepanuik**

The CEO report was included in the board package. The following additional items were discussed:

- Year-end Statistical Report for the Information and Privacy Commissioner
- HUGO Update (Briefing Note in package) to answer questions posed by the Board of Directors discussion at the March meeting. Since the introduction of the HUGO computer physician order entry system in February of 2014, it has been recognized that there are a number of inefficiencies within the system. In spite of improvements in the system, it remains a time consuming and often frustrating system for physicians managing inpatient care. To that end, the longstanding “physicians order sheet” was reintroduced with plans to discontinue the paper orders as at March 31, 2015. Following the recommendation from the March 2015 MAC meeting, the Senior Leadership Team and HUGO Steering Committee reviewed whether or not to continue with written orders or cease the practice. It was agreed that paper orders may be continued for difficult orders. Statistically, since the summer of 2014, written paper orders have accounted for approximately 1.6% of total orders. Dr. G. Perkin reiterated that a great deal of time is required for routine HUGO orders. If the orders are not common, the length of time required to input the orders is greatly

increased. The opportunity to utilize paper orders for difficult orders has been well received by the physicians.

- Alasdair Smith provided an overview of the recent provincial budget as it relates specifically to health. The budget includes a total spend of \$50.8B on health, an increase of \$600M or 1.2% from the previous budget. Healthcare represents 42% of the entire provincial government. It will be necessary to continue to look at opportunities for collaboration and continue to address pressures. SMGH and FCHS are well positioned to address the ongoing changes in funding.

MOTION

BG: 09/15

A motion was made and seconded, BE IT RESOLVED THAT:

The Report of the President and Chief Executive Officer be accepted as presented.

9. STRATEGIC ISSUES

9.1 Strategic Plan Update – T. Stepanuik

See Agenda Item 4.1.

9.2 QIP 2014/15 – Achievement of 2014/15 Performance Goals - N. MacLean

For the 2014/15 QIP, performance-based compensation (also referred to as pay at risk) equated to 2%. Two percent (2%) of the base salaries for the President/CEO, CFO, COO (the SLC) were withheld and were considered “at risk” and linked to the MHA 2014/15 QIP. The QIP 2014/15 stated that payout of the 2% was contingent on the achievement of 80% of the quality dimensions being achieved. The SLC has been successful in achieving 92.5% of the performance goals linked to compensation for 2014/15. The Finance and Quality Committees have recommended payout to the SLC based on achievement of these performance goals.

MOTION

BG: 10/15

A motion was made and seconded, BE IT RESOLVED THAT:

The Middlesex Hospital Alliance Board of Directors approves the recommendation of the Finance and Quality Committees to pay the 2% clawback to the President & CEO, COO and CFO withheld in accordance with the 2014/15 Quality Improvement Plan (QIP) as the targets were achieved for the related quality dimensions.

9.3 HUGO Update – T. Stepanuik/G. Perkin

Report provided under CEO report.

9.4 M-SAA Declaration of Compliance – R. Coe

In addition to the annual signed M-SAA Agreement (previously every six months), MHA must submit a Declaration of Compliance to the SW LHIN, acknowledging compliance of its obligations under the service accountability agreement for the applicable period. The Finance Committee has declared that Four Counties Health Services has complied with the items identified on the Multi-Sector Service Accountability Agreement Declaration of Compliance and recommends execution of the declaration.

MOTION

BG: 11/15

A motion was made and seconded, BE IT RESOLVED THAT:

The Middlesex Hospital Alliance Board of Directors approves the recommendation of the Finance Committee that the MHA Board Chair execute the FCHS Multi-Sector

Accountability Agreement Declaration of Compliance for the period April 1, 2014 to March 31, 2015, as all obligations have been met.

9.5 OB/GYN Recruitment – T. Stepanuik/G. Perkin

An OB/GYN who will graduate in June of this year has approached Dr. Perkin about opportunities at MHA. This individual has visited and toured the SMGH site and met with Dr. Perkin. Dr. Perkin has spoken with the family physicians who offer obstetrics and all are supportive of recruitment of an OB/GYN. Dr. Perkin stated that he would like direction from the board as to whether to actively recruit this individual to MHA.

T. Stepanuik stated that at the September 2013 Board meeting, the following motion was passed by the Board of Directors:

The Board of Directors support having a functional obstetrical program going forward and for MHA to take the necessary steps to achieve such including the stabilization of c-section coverage, working with out partners such as London to keep the program open when no c-section coverage is available and to recruit an obstetrician as an option to stabilize and expand the program.

At that time, the Board requested a business case for the recommendation outlining the costs to enhance the program. A costing template outlining costs was reviewed by the Finance and Planning Committees.

Following discussion, the Vice Chair, on behalf of the Board of Directors, confirmed the support of the Board for Dr. Perkin to pursue this OB/GYN for MHA. The Vice Chair further requested that the business case presented in 2013 be updated. The Board needs to understand the impact growing the program would have on beds, OR time, operating costs, etc.

The business case will be updated for discussion at the May meeting.

10. Business Arising

10.1 COS Evaluation – T. Stepanuik

The Chief of Staff, CEO and Board Chair will meet to discuss the annual COS evaluation. A summary of the evaluation will be provided to the Board when completed.

11. New Business

11.1 SW LHIN Clinical Services – Stroke Strategy – T. Stepanuik

As the Board is aware, the SW LHIN identified, and has been working on several clinical services planning streams, including Stroke. A Briefing Note was provided about the SW LHIN and Southwestern Ontario Stroke Network Capacity Assessment and Best Practice Implementation Project.

The Senior Leadership Team had a presentation about the stroke network. The recommendation would impact MHA, like other hospitals. In terms of what would change in patient access and care for the hospitals in the MHA, patients who call ED with stroke-like symptoms would be transported directly to LHSC and/or patients presenting to MHA would be transported to LHSC following triage unless patient requested to remain at MHA. Clinical leadership is supportive of the regional approach as it will result in better care for the patient, however, the unintended consequence may be financial for SMGH due to QBP funding.

Further updates will be provided to the Board as available.

- 12. CORRESPONDENCE AND ANNOUNCEMENTS**
12.1 Thank You Cards – Paul Long, Kathy Lee
12.1 Leamington – “A Ward Worth Saving” Article
12.3 MHA United Way Campaign Middlesex County Congratulations
12.4 Volunteer Appreciation Media Release
12.5 SW LHIN Community Bulletin
- 13. ADJOURNMENT**
The meeting adjourned at 1930 hours.
- 14. INDEPENDENT DIRECTOR SESSION**
The elected Directors convened to an independent director session.



Dawn Butler
Vice Chair



Todd Stepanuk
CEO & Secretary

Cathy Swan
Recording Secretary

**MIDDLESEX HOSPITAL ALLIANCE
BOARD OF DIRECTORS MEETING
Wednesday, May 27, 2015
SMGH Boardroom
1730 hours**

Present: K. Williams (Board Chair)
D. Butler (Vice Chair)
J. Barnett
R. Coe
N. MacLean
R. McRae
B. Montgomery
B. Twyford
N. Vander Gulik
C. Waters

Regrets:

Ex-Officio

N. Maltby
A. Smith
V. Dalal
J. Dreyer
G. Perkin
T. Stepanuik
C. Swan, Recorder

Guests: M. Robertson
S. Ouellet

1. CALL TO ORDER

The Chair called the meeting to order at 1740 hours.

2. APPROVAL OF AGENDA

MOTION
BG: 12/15

A motion was made and seconded BE IT RESOLVED THAT:
The agenda be accepted as presented.

CARRIED

3. DECLARATION OF INTEREST

The Chair stated that each board member must declare a conflict of interest at the appropriate time on any item within the agenda if a member may have a vested interest.

4. PRESENTATIONS:

4.1 MHA DASHBOARD – M. Robertson & N. Maltby

The Q4 results for 2014/15 for SMGH and FCHS were presented and compared to previous quarters and the target indicators.

An explanation was provided on the following indicators and trends associated with each:

- Medication Reconciliation for SMGH and FCHS
- C Diff – Clostridium Difficile at SMGH
- Total ED Length of Stay for Admitted Patients – SMGH
- ED Non admitted high acuity – SMGH
- Patient Wait Times by Priority – SMGH
- Patient Satisfaction – Overall Care – SMGH and FCHS
- Unnecessary Time in Acute Care/Alternate Level of Care (ALC) – SMGH and FCHS

The Board Chair thanked M. Robertson and N. Maltby for a very informative presentation.

5. OPENING REMARKS – K. Williams, Chair

- The Chair of SHHA, John McNeilly and the MHA Board Chair met with T. Stepanuik to review his first three months as President & CEO of both MHA and SHHA. From all accounts, this partnership is a win-win for both organizations and many opportunities have been identified for further integration. J. McNeilly will remain chair at SHHA for another year. To ensure continuity with SHHA, the Executive Committee asked K. Williams to remain as the MHA liaison with SHHA.
- A social is scheduled for the Boards of MHA and SHHA to meet on June 23, 2015 at the home of Dawn and Errol Butler. Special thanks to the Butlers for opening up their home to host this event. Invitations will be forthcoming.
- Thank you to Dr. Vikram Dalal, who has sat on the Board for the past year in his capacity as President of the Medical Staff.
- Thank you to Ralph Coe who has been on the MHA Board for 9 years. Ralph has been a stellar board member and has made many valuable contributions to the board over the years, having served on all committees as well as leading the Board as Chair.
- The Board Chair stated this was his last meeting as Chair. He expressed his thanks and gratitude to the Directors as well as the Senior Team - Todd, Paul and now Alasdair, Nancy and Steph, Drs. Perkin and Dreyer. Special thank you was also extended to Cathy for her ongoing support and organization.

6. STORY TELLING – N. MacLean/N. Maltby

Several comments from the 4th Quarter 2014/15 NRC Picker Survey results were shared with the Board. The comments for both Four Counties Health Services and Strathroy Middlesex General Hospital were very complimentary. Patients are very grateful to be able to receive their medical care close to home by excellent and dedicated staff and physicians.

7. CONSENT AGENDA

Items listed under the Consent Agenda were included with the Board package.

MOTION

BG: 13/15

A motion was made and seconded, BE IT RESOLVED THAT:

All Consent Agenda items, motions and recommendations be accepted as presented.

CARRIED

8. CEO REPORT – T. Stepanuik

The CEO report was included in the board package. The following additional items were discussed:

- FCHS Foundation Capital Campaign is going very well, with a considerable portion of the funds raised. The \$700,000 campaign which begun in January of this year has to date (as of April 30, 2015) raised \$540,000 including cash and pledges. The Campaign involves the purchase of a new portable x-ray unit as well as a new digital DI unit and renovations to the DI department. I understand the timeline is to have the new units on site and fully operational by December 31, 2015. I have been most impressed by the efforts of the Foundation.
- Meetings have recently taken place with North Lambton CHC following a query to MHA about an opportunity to provide DI services to the Centre.
- Preliminary discussions have also taken place with LHSC about potential opportunities to occupy the 4th floor at SMGH.
- Thank you to Dr. Vikram Dalal, outgoing President of the Medical Staff.
- The CEO thanked and acknowledged the Senior Leadership Committee – Alasdair, Nancy and Steph. Together the SLC is a dynamic, high energy, cohesive team.

MOTION

BG: 14/15

A motion was made and seconded, BE IT RESOLVED THAT:
The Report of the President and Chief Executive Officer be accepted as presented.

CARRIED

9. STRATEGIC ISSUES

9.1 Strategic Plan Update – T. Stepanuik

Version 2 of the MHA Strategic Plan was forwarded to all Board members for review. The Planning Committee agreed that the board be given the opportunity to review the document in its entirety and provide feedback, if any, to the Chair of Planning and/or the CEO prior to the AGM. A query was raised about the population of Middlesex Centre in MHA's referral area; it was suggested that only a portion of the population should be reflected, not the entire population.

A final version of the Strategic Plan will be brought forward by the Planning Committee with a recommendation for Board endorsement at the June Special Board meeting following the AGM.

9.2 Recruitment of Board Members and Reappointments – C. Waters

- The Governance Committee reviewed the Succession Plan for the Board of Directors. The Chair of Governance contacted the directors whose terms were up for renewal and also spoke with some of the Community Committee members about their experiences on the Committees and whether they would be interested in extending their membership for another year.
- Applications were received by two potential board members and one committee member. Interviews were conducted by C. Waters and B. Twyford. The applicants for Directors are as follows:

Major Roland Shea: Major Shea is the Chair of the SMGH Pastoral Care Committee and brings over 38 years of spiritual experience to the Board. In his current position, he has strong ties with volunteer organizations including VON and SEARCH.

Sandy Whittall: Sandy has recently retired following a lengthy career in healthcare at St. Joseph's Health Care and LHSC. She has extensive leadership experience and has led such initiatives as mental health for the past 12 years as well as other programs during her career. Sandy looks forward to serving on the MHA Board of Directors and contributing to the Board with her medical expertise as well as learning more about the community hospitals.

Following discussion by the Governance Committee, it was agreed to bring forth a recommendation for the 2014/15 Board of Directors.

MOTION

BG: 15/15

A motion was made and seconded, BE IT RESOLVED THAT:
The Middlesex Hospital Alliance Board of Directors approves the recommendation of the Governance Committee as follows:

New Director Appointments

Major Roland Shea – 3 years

Sandy Whittall – 2 years of a 3 year term

Director Reappointments

Ken Williams – 3 years

Neil MacLean – 3 years

Community Representative Reappointments
Ms. Jen Pasichnyk
Ms. Lisa Milligan (TBC)
Ms. Tracey Prince

All LAC reappointments are subject to confirmation.

The Board Chair will bring forth the Executive Committee for 2015/16 under closed session.

All appointments and reappointments will be confirmed at the Annual General Meeting of the corporations scheduled for Tuesday, June 16, 2015.

CARRIED

9.3 2014/15 Draft Audited Financial Statements – Bill Montgomery/A. Smith

The Chair of Finance requested A. Smith, CFO/VP Finance to provide an overview of the 2014/15 Draft Audited Statements to the Board.

Both SMGH and FCHS had clean audits. The Finance Committee queries “other votes” on the statements. Mr. Smith explained that this is a term used in healthcare. The final statements will provide an explanation as a footnote.

A meeting was held with TRANE earlier today. The final report and details should be released by the end of June. The Committee questioned whether the TRANE initiative should be added to the statements outlining the initiative and the potential liability with this initiative. BDO Canada LLP reviewed the regulations about the inclusion of this initiative. Following discussion, it was agreed that both FCHS and SMGH would add a statement about the probability of entering into a major capital undertaking with Trane in 2015/16 fiscal year.

MOTION

BG: 16/15

A motion was made and seconded, BE IT RESOLVED THAT:

The Middlesex Hospital Alliance Board of Directors approves the recommendation of the Finance & Audit Committee to accept the 2014/15 audited financial statements of Strathroy Middlesex General Hospital and Four Counties Health Services as prepared and presented by BDO Canada LLP.

The statements will be presented to the membership of the corporations for final approval at the MHA AGM scheduled for June 16, 2015.

CARRIED

On behalf of the Board, thank you was extended to A. Smith, L. Campbell, Finance Manager and the Finance staff for their hard work in preparing for the audit.

9.4 MHA Capital Plan 2015/16 – B. Montgomery/A. Smith

MHA has introduced a three-year capital planning process to address capital needs and prioritize the capital purchases based on safety, mission critical, obsolete equipment as well as other factors. The planning process started in mid September 2014 and through to December 2014, the Senior Leadership Council (SLC) heard presentations from the hospital departments for capital equipment and priority needs based on the above criteria.

The hospitals currently rely solely on the SMGH and FCHS Foundations to fund capital equipment needs. Both Foundations are currently involved in campaigns; SMGH for the Breast Assessment Program and FCHS for the Diagnostic Imaging Suite, therefore funds for other capital purchases are very limited. Several options were discussed by the SLC during the planning process, including alternate funding sources and other considerations including the SW LHIN Rural and Northern Transformation Funding (SRN), reserves from FCHS, vendor financing, etc.

Once all departmental priority capital items were prioritized, the proposed capital plan for 2015/16 for FCHS and SMGH were finalized and presented to the Finance Committee.

FCHS Capital Plan totals \$955,585, \$700,000 for the Diagnostic Imaging Campaign and \$255,585 from hospital reserves and hopefully SRN funding.

SMGH Capital Plan totals \$821,462 however the proposed IV pump purchase of \$180,000 may be deferred to the 2016/17 capital budget if capital funds are not available. It is hoped that some funding will be received through the SRN funding. The maximum potential contingency funds remaining total \$462,896, if all options available are utilized.

Following review of the Capital Plan 2015/16, the Finance Committee recommended the plan be presented to the Board of Directors for final approval.

MOTION

BG: 17/15

A motion was made and seconded, BE IT RESOLVED THAT:

The Middlesex Hospital Alliance Board of Directors endorses the recommendation of the Finance Committee to approve the MHA Capital Plan 2015/16 for Four Counties Health Services Capital Plan totaling \$955,585. The Capital Plan consists of \$700,000 for the Diagnostic Imaging Capital campaign led by the FCHS Foundation and \$255,585 from hospital reserves and hopefully SRN funding.

The Middlesex Hospital Alliance Board of Directors also endorses the recommendation of the Finance Committee to approve the MHA Capital Plan for 2015/16 for Strathroy Middlesex General Hospital in the amount of \$821,462. If the total capital funds are not available, the IV Pump purchase totaling \$180,000 will be deferred to the 2016/17 Capital Budget. It is hoped that some relief will be received through SRN funding. The maximum potential contingency funds remaining total \$462,896, if all options available are utilized.

CARRIED

9.5 SW LHIN Stroke Strategy – T. Stepanuik

With regard to stroke care the SWLHIN, like some other LHIN's, has been working toward a regional approach. The direction is to centralize the management of stroke care so as to achieve better outcomes. Currently, 28 hospitals in the SWLHIN offer stroke care (the most of any LHIN).

The goal of the regional strategy would be to consolidate stroke services and treat all stroke patients at a designated stroke centre. Also, as I understand it there would be no repatriation in the future state back to any of the undesignated stroke centres for stroke patients' rehab. It is our understanding that in the future (probably in 2016/17) if a patient walks into ED, SMGH/FCHS will conduct a preliminary triage, possible CT, medical or nursing assessment and if they are presenting with stroke-like symptoms, we would

arrange for the patient to be transported to LHSC. It is our belief that there very well may instances when a patient will not be eligible to go the designated stroke centre despite the intent.

Correspondence from Dr. G. Perkin, COS, A. Smith, CFO/VP Finance and T. Stepanuik, President & CEO, expressing concerns and posing questions about the SW LHIN Stroke Strategy was shared with the Board.

Updates on this initiative will be shared as received.

9.6 Four Counties Medical Clinic Update – T. Stepanuik

T. Stepanuik reviewed the Briefing Note included with the Board package about the FC Medical Clinic request for additional space from the hospital to expand to accommodate the FHT and FHO. The medical clinic has been planning this expansion since 2011. The hospital had agreed in principle to the expansion however there were conditions that the hospital required the clinic to meet. To date, the clinic has not met the conditions outlined by the hospital.

During a meeting earlier this month with representatives from the FHT and FHO, the hospital learned that the MOHLTC had approved the renovation and would provide the funding for the project. The Clinic was informed that the Hospital would have to sign off on the renovations before any work could begin. To date, the plans have not been provided to the hospital for review and approval nor have the conditions outlined by the hospital been met. Representatives of the FHT and FHO were also informed that the size of their proposed expansion could be scaled back by the Hospital, depending upon the results of the FCHS Space Planning initiative currently underway at FCHS.

Further updates will be provided as available.

10. Business Arising

There was no business arising.

11. New Business

11.1 Obstetrician Recruitment – Dr. G. Perkin

Dr. Perkin has met with a potential OB/GYN candidate on two separate occasions. This physician has completed her training and is awaiting the results of her exams. She is also being pursued by St. Thomas Elgin General Hospital. T. Stepanuik attended the second meeting whereby the opportunity was presented to the OB/GYN to build the current program. Further updates will be provided as available; however the OB/GYN did not appear to be interested in further developing and growing the program.

11.2 Chief of Surgery Appointment – Dr. G. Perkin

Subject to the annual confirmation of the Board, the appointment of a Chief of Department shall be for a term of three (3) years with two (2) being the maximum number of terms. Dr. Marc Raymond, who is the current Chief of Surgery, has completed his two terms (6 years) as Chief.

Dr. Mike Rogelstad, an Ophthalmologist at MHA, expressed interest in assuming the position of Chief of Surgery for MHA. Dr. Rogelstad has been an active member of the SMGH medical staff for many years and would serve well in this position. Following review of the application, the Selection Committee recommends to the MHA Board of

Directors that Dr. Mike Rogelstad be appointed as Chief of Surgery of the MHA for a term of three (3) years, such appointment to be confirmed annually.

MOTION

BG: 18/15

A motion was made and seconded, BE IT RESOLVED THAT:

The Middlesex Hospital Alliance Board of Directors approves the recommendation of the Selection Committee to appoint Dr. Mike Rogelstad Chief of Surgery of the MHA for a term of three (3) years, such appointment to be confirmed annually.

CARRIED

11.3 Turnkey Primary Care Development – D. Butler/T. Stepanuik

T. Stepanuik reviewed the Briefing Note provided to the Board around business development at MHA. Updates were provided on the SMGH and University of Western Ontario discussions around expanding the residency program and relocating the Thames Valley Family Health Team (Drs. Vandewalle, Marcou, Puente and Marshall) to a larger space on hospital property. Both 4th floor and new construction on hospital property have been considered. Details of the proposal were discussed in detail. Following discussion, the Chair of Planning Committee brought forth a motion for Board consideration.

MOTION

BG: 19/15

A motion was made and seconded, BE IT RESOLVED THAT:

The Middlesex Hospital Alliance Board of Directors approves the recommendation of the Planning Committee to authorize the President & CEO to finalize a term sheet with Western, and draft and issue a Request for Information/Qualifications or RFP. It is understood that there is to be no capital injection from MHA or any ongoing support of the operating costs for the Medical Arts building.

CARRIED

S. Ouellet left the meeting at 1940 hours.

12.

IN CAMERA

MOTION

BG: 20/15

A motion was made and seconded, BE IT RESOLVED THAT:

The Board Convene to an incamera session to discuss physician credentials and other personnel matters.

CARRIED

MOTION

BG: 21/15

A motion was made and seconded, BE IT RESOLVED THAT:

The Board rise out of camera and report.

CARRIED

MOTION

BG: 22/15

A motion was made and seconded, BE IT RESOLVED THAT:

Upon the recommendation of Dr. Gary Perkin, Chief of Staff on behalf of the Medical Advisory Committee, the Application for Temporary Privileges for Strathroy Middlesex General Hospital provided in camera be accepted as presented.

CARRIED

MOTION

BG: 23/15

A motion was made and seconded, BE IT RESOLVED THAT:

Upon the recommendation of Dr. Gary Perkin, Chief of Staff on behalf of the Medical Advisory Committee, the Annual Reapplications for Privileges for SMGH Department of

Medicine, SMGH Department of Surgery and FCHS Physicians be accepted as presented. All requirements for reapplications have been satisfied.

CARRIED

MOTION

BG: 24/15

A motion was made and seconded, BE IT RESOLVED THAT:
The MHA Board of Directors accepts the Annual Evaluation of the MHA Chief of Staff as presented.

CARRIED

MOTION

BG: 25/15

A motion was made and seconded, BE IT RESOLVED THAT:
The MHA Board of Directors accepts the Annual Evaluation of the MHA President & CEO as presented.

CARRIED

MOTION

BG: 26/15

A motion was made and seconded, BE IT RESOLVED THAT:
The MHA Board of Directors confirms the recommendation of the Executive Committee to amend the Employment Agreement of the President & CEO as presented.

CARRIED

MOTION

BG: 27/15

A motion was made and seconded, BE IT RESOLVED THAT:
The MHA Board of Directors accepts the recommendation of the Executive Committee for 2015/16 as follows:

Past Chair: Mr. Ken Williams
Chair: Ms. Dawn Butler
Vice Chair: Mr. Neil MacLean
Director at Large: Ms. Bonnie Twyford
Chief of Staff: Dr. Gary Perkin
Deputy Chief of Staff: Dr. Jonathan Dreyer
President & CEO: Mr. Todd Stepanuik

All appointments and reappointments will be confirmed at the Annual General Meeting of the corporations scheduled for Tuesday, June 16, 2015.

CARRIED

13. CORRESPONDENCE AND ANNOUNCEMENTS

13.1 Notice of MHA AGM

13.2 Volunteer Appreciation

13.3 MHA IT Announcement

13.4 SMGH Foundation Upcoming Events

13.5 FCHS Foundation Golf Tournament July 17/15 – Wardsville Golf & Country Club

14. COMING EVENTS

14.1 MHA/SHHA Board Social – June 23, 2015

15.

16. ADJOURNMENT

The meeting adjourned at 2015 hours.

17. INDEPENDENT DIRECTOR SESSION
There was no independent director session.



Ken Williams
Chair



Todd Stepanuik
CEO & Secretary

Cathy Swan
Recording Secretary

**MIDDLESEX HOSPITAL ALLIANCE
BOARD OF DIRECTORS MEETING
Tuesday, June 16, 2015
SMGH Auditorium
1800 hours**

Present: K. Williams
D. Butler
J. Barnett
B. Montgomery
R. Shea
B. Twyford
N. Vander Gulik
C. Waters

Regrets: V. Dalal
N. MacLean
R. McRae
N. Maltby

Ex-Officio
N. Maltby
A. Smith
J. Dreyer
G. Perkin
T. Stepanuik
C. Swan, Recorder

Guests: S. Ouellet

1. CALL TO ORDER

The Board Chair called the meeting to order at 1825 hours. Mr. Williams stated that this was his last formal duty as Board Chair of the MHA. He extended his sincere appreciation to the Board of Directors for their support and assistance over the past two years.

The Chair then welcomed the incoming Chair Dawn Butler, and turned over the gavel. D. Butler, on behalf of the Board, thanked K. Williams for his strong leadership over the past two years. She stated that the Board is fortunate that the past Chair will continue on the Board as a Director.

2. APPROVAL OF AGENDA

MOTION
BG: 12/15

A motion was made and seconded BE IT RESOLVED THAT:
The agenda be accepted as presented.

CARRIED

3. DECLARATION OF INTEREST

The Chair stated that each board member must declare a conflict of interest at the appropriate time on any item within the agenda if a member may have a vested interest.

4. New Business

4.1 Election of Officers 2015/16 – D. Butler

D. Butler presented the slate of executive for 2015/16.

MOTION
BG:29/15

A motion was made and seconded, BE IT RESOLVED THAT:
The MHA Board of Directors approves the Election of Officers for 2015/16 as follows:
Past Chair: Mr. Ken Williams
Chair: Ms. Dawn Butler
Vice Chair: Mr. Neil MacLean

Director at Large: Ms. Bonnie Twyford
Chief of Staff: Dr. Gary Perkin
Deputy Chief of Staff: Dr. Jonathan Dreyer

4.2 Appointment of Board Committees – D. Butler

The Committee Terms of Reference for the Board Committees will be reviewed over the summer months to ensure that there is value for each committee to continue status quo or whether MHA should consider merging some of the Committees. Once the review has been completed and a decision made, a survey for committee interest will be forwarded to the Board prior to the membership being finalized.

4.3 Executive Committee To Deal with Issues over the Summer – D. Butler

MOTION

BG: 30/15

A motion was made and seconded, BE IT RESOLVED THAT:

In accordance with the MHA Bylaws and the Executive Committee Terms of Reference, the Board of Directors agrees that the Executive Committee handle any issues that may arise over the summer months.

CARRIED

4.4 Strategic Plan 2015-18 Approval – D. Butler

Minor tweaks and improvements for the MHA 2015-18 Strategic Plan continue. The finalized version will be completed within the next couple of weeks and forwarded to the Board of Directors for final approval. The operational plan for the Strategic Plan 2015-18 will be rolled out to the Board in September.

4.5 BPSAA Attestation – D. Butler

The Broader Public Sector Accountability Act (BPSAA) is designed to improve accountability and transparency in hospitals as well as the broader public sector. In accordance with the directives outlined in the BPSAA, the President & CEO has confirmed compliance by MHA and respectfully requests the Board to approve the attestation.

MOTION

BG: 31/15

A motion was made and seconded, BE IT RESOLVED THAT:

The Middlesex Hospital Alliance Board of Directors authorizes the Board Chair to execute the 2014/15 Attestation relating to the use of consultants, engaging lobbyist services, and applicable expense claims, perquisite and procurement directives.

CARRIED

5. IN CAMERA

MOTION

BG: 32/15

A motion was made and seconded, BE IT RESOLVED THAT:

The Board Convene to an incamera session to discuss physician credentials.

CARRIED

MOTION

BG: 33/15

A motion was made and seconded, BE IT RESOLVED THAT:

The Board rise out of camera and report.

CARRIED

MOTION

BG:34/15

A motion was made and seconded, BE IT RESOLVED THAT:

Upon the recommendation of Dr. Gary Perkin, Chief of Staff on behalf of the Medical Advisory Committee, the Applications for Temporary and Courtesy Privileges for Strathroy Middlesex General Hospital, Consultant Privileges for Four Counties Health Services and Military Physician Assistant privileges for Strathroy Middlesex General Hospital provided in camera be accepted as presented.

CARRIED

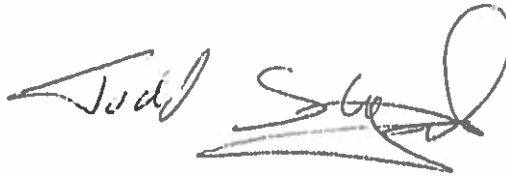
Dr. Gary Perkin also provided an update to the Board on the status of the OB/GYN recruitment.

6. ADJOURNMENT

The meeting adjourned at 1845 hours.



Dawn Butler
Chair



Todd Stepanuk
CEO & Secretary

Cathy Swan
Recording Secretary

MIDDLESEX HOSPITAL ALLIANCE
BOARD OF DIRECTORS MEETING
Wednesday, September 30, 2015
SMGH Boardroom
1730 hours

Present: D. Butler (Board Chair)
N. MacLean (Vice Chair)
J. Barnett
R. McRae
B. Montgomery
R. Shea
B. Twyford
N. Vander Gulik
C. Waters
K. Williams

Regrets: S. Whittall

Ex-Officio

N. Maltby
A. Smith
J. Dreyer
G. Perkin
V. Rajgopal
T. Stepanuik
C. Swan, Recorder

Guests: S. Ouellet

1. CALL TO ORDER

The Chair called the meeting to order at 1735 hours. A warm welcome was extended to everyone. Special welcome was extended to Roland Shea, the newest member of the MHA Board.

2. APPROVAL OF AGENDA

The Agenda was amended as follows:

Consent Agenda:

- Add: Executive Committee Minutes dated July 29, 2015
- Strategic Issues
- COO Report – ED Length of Stay, Item 6.5
 - OB/GYN Recruitment

MOTION
BG: 35/15

A motion was made and seconded BE IT RESOLVED THAT:

The agenda be accepted as amended.

CARRIED

3. DECLARATION OF INTEREST

The Chair stated that each board member must declare a conflict of interest at the appropriate time on any item within the agenda if a member may have a vested interest.

4. OPENING REMARKS – D. Butler, Chair

The Board Chair commented on the following:

- Administration continued working on several projects, including the 2015-19 MHA Strategic Plan over the summer months.
- The Board Social with SHHA held on June 23 provided a great opportunity for the members of each board to meet one another.

- The Board Chair attended the SHHA AGM. It is evident that SHHA has great community support.
- The Executive Committee met in July. The minutes of the meeting are included in the Consent Agenda for members to review.
- Members of the MHA Executive will each attend a LAC meeting as the Board representative. The Board Chair attended the September meeting. This Committee is very engaged and there is a great deal of valuable information shared.
- The FCHS Foundation is in the midst of a huge fundraising campaign for a new DI suite and has raised the majority of funds for the new suite. The Grand Opening is scheduled for December. Currently a mobile unit is in place.
- The SMGH Foundation held another very successful “Busting Out” Gala on September 17.
- K. Williams will sit on the SMGH Foundation Board and Bill Montgomery will sit on the FCHS Foundation Board as MHA representatives.
- The Board Education Session with SHHA is scheduled for Friday, November 21, 2015 at West Haven Golf & Country Club and the MHA Board Retreat to discuss part 2 of the Strategic Planning Process, Clinical Services Planning is tentatively scheduled for Saturday, November 21, 2015 at SMGH in the Boardroom.
- A supply of binders, paper and Guide to Good Governance Reference Manuals are available for board members.

5. STORY TELLING – N. MacLean/N. Maltby

N. MacLean shared stories from three patients that spoke about the quality experiences they had at MHA. A thank you and congratulations was extended to the MHA Family on behalf of the Board of Directors.

6. CONSENT AGENDA

Items listed under the Consent Agenda were included with the Board package.

MOTION
BG: 36/15

All Consent Agenda items, motions and recommendations be accepted as presented.

CARRIED

7. CEO REPORT – T. Stepanuik

The CEO report was included in the board package. The following topics were discussed:

- RT Services – MHA continues to make tangible investment in patient care. Following a review of the current services, it was determined that MHA dedicated resources would be put in place with the intent of offering this service five days per week.
- The FC Capital Campaign project is by far the largest undertaken by the FCHS Foundation. The Foundation Staff and Board have done a phenomenal job in leading this campaign and have reached the fundraising goal to fund the new DI suite. They continue to keep the momentum going to raise funds for other projects. A letter of congratulations will be sent to the FCHS Foundation and Board from MHA.
- The SW LHIN continues to move forward with the LHIN based Stroke Initiative and have made a formal submission to the MoHLTC. At a recent CEO meeting, MHA was the only hospital to vote against the initiative without further consultation and review because of the potential financial impact for SMGH. Following further consultations with the SW LHIN, MHA was able to advocate the potential funding impact at SMGH to ½ of 1%.

- MHA continues to have discussions with a viable tenant for 4th Floor. A meeting has been scheduled for October 19 to further discuss these opportunities.
- On October 24, the Strathroy Rotary Club will be loading a trailer with equipment from 4th floor to send to South Africa.
- The SW LHIN has initiated discussions with the healthcare facilities in the LHIN to determine access for surgeries and other treatments for patients over the holiday season is available when needed.

The remainder of the CEO Report is included in the board package.

MOTION

BG: 37/15

A motion was made and seconded, BE IT RESOLVED THAT:

The Report of the President and Chief Executive Officer be accepted as presented.

CARRIED

8. STRATEGIC ISSUES

8.1 Confidentiality – B. Twyford

A briefing note was included in the Board package outlining the fiduciary duties of board members and community committee members of a non-profit corporation to act honestly and in good faith with respect to the corporation. This duty has many components including a duty to maintain confidentiality of board matters, avoid conflicts of interest and a duty to avoid abusing the position to gain personal benefit.

For these reasons, the Governance Committee has recommended that all Directors and Community Committee members sign a Declaration of Understanding of Confidentiality and Conflict of Interest annually at the September meeting. An email will be forwarded from the corporate office to all Board members with a copy of the Declaration and applicable policies for review. Declarations from Board members will be signed and collected at the October meeting.

MOTION

BG: 38/15

A motion was made and seconded, BE IT RESOLVED THAT:

The MHA Board of Directors and Community Committee members sign a Declaration of Understanding of Confidentiality and Conflict of Interest annually.

CARRIED

8.2 Strategic Plan – D. Butler/T. Stepanuik

Over the summer, work has been completed on finalizing the MHA Strategic Plan 2015-19. The Corporate Office engaged a marketing company, TMD to develop a high level presentation of the Strategic Plan for our external stakeholders. I am pleased to share with you the finalized document.

MOTION

BG: 39/15

A motion was made and seconded, BE IT RESOLVED THAT:

The Middlesex Hospital Alliance Board of Directors approves the MHA Strategic Plan 2015-19 as presented.

CARRIED

8.3 Clinical Services Plan – D. Butler/ T. Stepanuik

The Board of Directors previously discussed development of a Clinical Services Plan for MHA to follow Phase 1 of MHA's Strategic Planning Process which has resulted in a refreshed Mission, Vision and Values and Strategic Plan 2015-19. The Clinical Services Plan provides an opportunity for MHA to ensure that our health service remains patient focused, innovative, accessible, safe, effective and sustainable. It was proposed to the Executive Committee that another tender process to embark upon Phase 2 of the Strategic Planning Process was unnecessary as the public sector procurement directives allow MHA to simply extend the scope of engagement for Whaley and Co.

The intent is for the Clinical Services Plan to be co-developed by clinical leaders based on current evidence and future directions. Anticipated costs for Phase 2 of the Plan are projected to be approximately \$43,400. The costs for Phase 2 of the Strategic Plan were not taken into account in the 2015/16 fiscal year budget. The goal, assuming planning is underway in early October, would be to present a draft Report to the Board in January 2016.

MOTION

BG: 40/15

A motion was made and seconded, BE IT RESOLVED THAT:

The Middlesex Hospital Alliance Board of Directors endorse the recommendation of the Executive Committee to proceed with the ongoing engagement of Whaley & Associates for the purpose of conducting Phase 2 of the strategic planning process (Clinical Services Plan) at a cost (fees, travel, data analysis) to not exceed \$43,400 + HST.

CARRIED

8.4 Strategic Plan Roll Out – T. Stepanuik

The Board of Directors has officially endorsed the MHA Strategic Plan. The Board Chair and CEO have discussed the rollout strategy for the plan and have developed a communication plan which will be used as a roadmap to guide MHA in broadcasting the Plan and the Strategic Pillars. Following review of the plan, the Board was asked to endorse the proposed roll out.

MOTION

BG: 41/15

A motion was made and seconded, BE IT RESOLVED THAT:

The Middlesex Hospital Alliance Board of Directors endorses the strategy proposed for the roll out of the MHA Strategic Plan 2015-19.

CARRIED

8.5 PSW Funding – A. Smith

A. Smith provided a detailed report on the MoHLTC directive for PSW wage increases for the Four Counties Supportive Housing staff for fiscal 2014/15. No similar initiative was offered for PSWs in the Adult Day Program. In 2015/16, the MoHLTC introduced a ceiling of \$19/hour for PSW wages, therefore MHA did not offer a wage increase to PSWs in Supportive Housing for Year 2 of the initiative as current wages exceeded the pay ceiling. The MoHLTC then expanded the wage enhancement retroactively to include Day Service Programs. To introduce an increase in the Adult Day Program to this level would cause hardship with the program due to irregularity of wages (compression with supervisory salaries) as well as comparable bargaining unit employees not covered by this enhancement.

For these reasons, MHA will not be in compliance with the Day Service initiative due to the conflicts it generates, notwithstanding these individuals already are paid above the \$19/hour ceiling.

Discussions continue to address these anomalies so that MHA can be in full compliance with the MoHLTC directives without causing internal hardships for the organization.

8.6 Stroke Strategy Update – T. Stepanuik

See Agenda Item 7, CEO Report.

8.7 Professional Services Building Update – T. Stepanuik

Dr. V. Rajgopal declared a conflict of interest and left the meeting prior to any discussion.

T. Stepanuik provided an update to the planning underway to prepare for building a Professional Services Building on vacant land at SMGH in collaboration with the UWO. A term sheet has been signed between MHA and UWO relating to the development, construction and operation of a medical clinic on Hospital land. The main tenant for the building will be the TVFHT (Dr. Vandewalle et al). Other tenants may include other allied health professionals as well as retail tenants or even decanting hospital-based services to such a building.

Funds available from the UWO will not accomplish the entire build hence there is a need to find a private developer who may have resources to subsidize physician rent with other health-care related tenants and perhaps their own resources in anticipation of a return on investment. Eleven (11) developers with experience in building similar projects have been identified. An invitational RFI/RFP document is currently being finalized with the hope that it can be issued by the end of September. As this project is in essence a land lease, there is no requirement for a public tender.

Potential risks to MHA including public perception, for undertaking such a project were discussed. This initiative in collaboration with UWO and the TVFHT is part of the requirements to accommodate medical residents.

Dr. Rajgopal rejoined the meeting.

8.8 Credit Facilities – SMGH & FCHS – R. MacRae

SMGH and FCHS each have a revolving line of credit in place and available in the event that the cash available is not adequate to cover current costs. Details of the revolving line or credit or bankers' acceptances were discussed with the recommendation from the Resources Committee to accept the credit facilities as presented.

MOTION

BG: 42/15

A motion was made and seconded, BE IT RESOLVED THAT:

The Middlesex Hospital Alliance Board of Directors endorses the recommendation of the Resources Committee to accept the Credit Facilities for SMGH and FCHS as presented.

CARRIED

8.9 FCHS/FHT/FHO Expansion – S. Ouellet

S. Ouellet provided a comprehensive timeline of events that have transpired since the planning process began for the expansion of the Four Counties Medical Clinic. The MHA Board had previously approved the plan pending the following conditions being met:

- Formal lease agreement in place;
- FHT to assume the cost of relocating offices, and other rooms currently occupying space for the proposed expansion;
- Final approval by MHA for all renovations, construction or structural changes planned for the area.

All parties continue to work together to fulfill the conditions outlined above. MHA continues to exercise due diligence to ensure that the possible expansion does not compromise the future development of FCHS particularly as it relates to the recent renewed vision.

Based on all conditions being met for the proposed expansion and agreed to in writing by the Four Counties Family Health Team, it is recommended that the Board of Directors support the proposed FHT expansion at FCHS.

MOTION

BG: 43/15

A motion was made and seconded, BE IT RESOLVED THAT:

The Middlesex Hospital Alliance Board of Directors continues to support the proposed FHT expansion conditional on any and all caveats being met and agreed to in writing by the Four Counties FHT.

CARRIED

8.10 ED Length of Stay – N. Maltby

In addition to the recent introduction and implementation of the Bed Management Algorithm, daily bed huddles are held with the Nurse Managers and Charge Nurses at SMGH from 1South, 2South, ICU, ED and OR to review and monitor metrics for patient admission times. This information is disseminated to all staff in order to increase awareness and perceptions of staff with the ongoing efforts, expectations, challenges and successes. Results over the last quarter show a great improvement in these times and sustainability of the improvements.

8.11 OB/GYN Recruitment – Dr. G. Perkin

The Chief of Staff has met with an OB/GYN who is very interested in setting up practice at SMGH. This would be an integral part of the plan to promote and grow the current OB program at SMGH. This physician had hoped to be available in the Fall, however, has had a setback with complications following elective surgery. Further updates will be provided as available.

9. Business Arising

There was no business arising.

10. New Business

10.1 Pink Glove Dance – T. Stepanuik

The SMGH Foundation entered the 2015 Pink Glove Dance competition for SMGH staff and area businesses to participate in with the hope of winning \$10,000 US to be donated to the Breast Assessment Program.

The winners in each division will be announced soon.

10.2 CCAC News Release/Auditor General News Release – Community Care – T. Stepaniuk

On September 23, 2015, the Auditor General of Ontario published a 65 page Special Report on Community Care Access Centres (CCACs), recommending that the way in which CCACs operate and deliver services be revisited.

On the financial side, the report suggests savings may be found if changes to the current structure of CCACs (including relationships with LHINs) and possibilities for streamlining are considered. On the service delivery side, patients' health outcomes may improve if inconsistencies in how the 14 CCACs deliver services are addressed.

This information is provided to the Board for information purposes only.

10.3 MHA Bylaw Amendment & Committee Changes – D. Butler/B. Twyford

Recently the Board Executive completed a fulsome review of the current MHA Board Committees, the membership of each and the related scope of responsibilities. Following this review it was agreed that there was some overlap of committee duties. To facilitate more effective planning and a better use of time for Board members and staff, the Executive Committee agreed to dissolve the Planning Committee, change the name of the Finance Committee to the Resources Committee and the Quality Committee to Quality, Utilization & Risk, and expand the terms of reference of these committees to facilitate dissolution of the Planning Committee.

The proposed changes were discussed at the Governance Committee in September. As a result of these changes, the Governance Committee recommended changes to the MHA Bylaws to reflect these changes.

MOTION

BG: 44/15

A motion was made and seconded, BE IT RESOLVED THAT:

The Middlesex Hospital Alliance Board of Directors approves the following changes to the MHA Bylaws to reflect changes made to the Board Committees and Membership:

i) MHA Committees of the Board – Section 7.01

The following changes have been made:

- Finance and Property Committee – changed to Resources Committee
- Quality Committee – changed to Quality, Utilization and Risk Committee
- Medical Advisory Committees (one for each Hospital) – changed to Medical Advisory Committee.

ii) Executive Committee Membership– Section 7.06

- Addition of the immediate Past Chair of the Board.

CARRIED

With the Committee changes, Board members will sit on one Committee and the Board as a whole, with the exception of K. Williams and B. Montgomery, who represent the MHA at the SMGH and FCHS Foundations.

The above changes to the MHA Bylaws will be ratified by the corporate membership at the 2016 Annual General Meeting of the Corporation.

10.4 Board of Director Reappointment – B. Twyford

B. Montgomery has completed his first term on the MHA Board of Directors however reappointment to a second three-year term was overlooked at the 2015 Annual General Meeting of the Corporation. The Governance Committee recommends approval of this reappointment.

MOTION

BG: 45/15

A motion was made and seconded, BE IT RESOLVED THAT:

The Middlesex Hospital Alliance Board of Directors approves the reappointment of Bill Montgomery as a Director on the MHA Board of Directors for a second term.

CARRIED

10.4.1 New Community Committee Member Appointment – B. Twyford

The MHA Board Committees typically have Community Committee Member appointments as part of the succession planning for potential directors.

Michael Clarke and Kerry Maloney have been interviewed by members of the Governance Committee. The Governance Committee agreed that both candidates possess the skills and knowledge that would be beneficial to the Board Quality, Utilization and Risk Committee and the Resources Committee respectively.

MOTION

BG: 46/15

A motion was made and seconded, BE IT RESOLVED THAT:

The Middlesex Hospital Alliance Board of Directors approves the recommendation of the Governance Committee to appoint Michael Clarke to the MHA Quality, Utilization and Risk Committee and Kerry Maloney to the MHA Resources Committee as Community Committee members effective immediately.

CARRIED

10.5 Speakers/Education at Board Meetings – D. Butler

Following review of the annual Board Evaluation in March, a common theme from the survey results was the reintroduction of Board Educational Sessions at the beginning of each Board meeting. Starting in October, a 15 minute educational session will be provided beginning at 5:30 pm, prior to the formal business meeting.

11. IN CAMERA

MOTION

BG: 47/15

A motion was made and seconded, BE IT RESOLVED THAT:

The Board Convene to an incamera session to discuss physician credentials.

CARRIED

MOTION

BG: 48/15

A motion was made and seconded, BE IT RESOLVED THAT:
The Board rise out of camera and report.

CARRIED

MOTION

BG: 49/15

A motion was made and seconded, BE IT RESOLVED THAT:

Upon the recommendation of Dr. Gary Perkin, Chief of Staff on behalf of the Medical Advisory Committee, the physician applications for Courtesy without Admitting Privileges and Associate Privileges at SMGH and the physician applications for ED Locum and Consultant Privileges at Four Counties Health Services provided in camera be accepted as presented.

CARRIED

12. CORRESPONDENCE AND ANNOUNCEMENTS

12.1 SW LHIN Small Hospital Base Increase

12.2 FCHS Foundation Golf Letter Thank You

12.3 President & CEO Thank You to the Board

12.4 SHHA Board Thank You

12.5 Home Care Workers Wages

12.6 No Place Like Home

12.7 SW LHIN Priorities for Investment Plan 2015-16 Communique

12.8 SMGH Foundation Busting Out Thank You

12.9 SMGH & FCHS SAA Quarter 4 Analysis

13. COMING EVENTS

13.1 MHA/SHHA Board Education Session – West Haven, Friday, November 20, 2015

13.2 MHA Board of Director Planning Session – SMGH, Saturday, November 21, 2015

14. ADJOURNMENT

The meeting adjourned at 1950 hours. Ex-officio board members and staff left the meeting prior to the Independent Director Session.

15. INDEPENDENT DIRECTOR SESSION

The elected Directors held a 15-minute independent director session.



Dawn Butler
Chair



Todd Stepanuik
CEO & Secretary



Cathy Swan
Recording Secretary

MIDDLESEX HOSPITAL ALLIANCE
BOARD OF DIRECTORS MEETING
Wednesday, October 28, 2015
FCHS Boardroom
1730 hours

Present: D. Butler (Board Chair)
J. Barnett
R. McRae
B. Montgomery
R. Shea
B. Twyford
N. Vander Gulik
C. Waters
S. Whittall
K. Williams

Regrets: N. MacLean
N. Maltby
G. Perkin

Ex-Officio

A. Smith
J. Dreyer
V. Rajgopal
T. Stepanuik
C. Swan, Recorder

Guests: A. King
S. Ouellet
M. Wortner

Prior to the meeting, a tour of the FCHS Site was conducted for members of the Board by Steph Ouellet.

1. CALL TO ORDER

The Chair called the meeting to order at 1730 hours. Martha Wortner, FCFS Foundation, Andrew King, MHA Safety Officer and Steph Ouellet, MHA Director Strategic Partnerships/FCFS Site Director were all welcomed to the meeting.

2. APPROVAL OF AGENDA

MOTION
BG: 50/15

A motion was made and seconded BE IT RESOLVED THAT:
The agenda be accepted as presented.

CARRIED

3. DECLARATION OF INTEREST

The Chair stated that each board member must declare a conflict of interest at the appropriate time on any item within the agenda if a member may have a vested interest.

4. PRESENTATIONS

4.1 FCFS FOUNDATION UPDATE – M. Wortner

The FCFS Foundation has almost reached their fundraising goal of \$700,000 for the new Diagnostic Imaging Suite and Equipment, which is six months ahead of schedule. It is anticipated that there will be a surplus of approximately \$145,000, which will be used to purchase other capital equipment at FCFS.

December 22, 2015, staff and volunteers will have an opportunity to view the new DI Suite. The Grand Opening for the public has been tentatively scheduled for January 13, 2016.

Once again, the Foundation will be conducting its annual Fall Appeal to donors. The people in the Four Counties catchment are very passionate about the hospital. They are happy to donate in order to provide equipment such as the new DI suite and other equipment that allows tests and treatment closer to home.

The Foundation welcomes inquiries from anyone who may be interested in serving as a board member on the Foundation.

T. Stepanuik congratulated the FCHS Foundation Chair, Paula Downs, the FCHS Foundation Board members and M. Wortner, Foundation Administrative Assistant for running such a successful DI Fundraising Campaign. The length of time that was required to raise these funds far exceeded the expectations of all.

D. Butler, on behalf of the Board of Directors, also congratulated the FCHS Foundation, Board of Directors and Volunteers on the tremendous success of the DI Campaign.

M. Wortner was thanked for her informative presentation to the Board.

4.2 BOARD OF DIRECTORS HEALTH & SAFETY RESPONSIBILITIES – A. King

A. King provided an informative presentation to the Board outlining the responsibilities of the Board of Directors to ensure compliance with the Occupational Health & Safety Act Legislation and Regulations and the possible consequences if the board is non-compliant.

Statistics show that full acceptance of OHS in the management structure benefits an organization through increased productivity, reduced insurance premiums, less sickness-related absences and training costs and increased staff retention and morale.

Following discussion, the Board of Directors agreed that Safety Awareness be added to the Quality, Utilization and Risk Management Committee Agenda for reporting and monitoring.

The Board Chair, on behalf of the Board of Directors, thanked A. King for presenting the Board of Directors with an overview of their responsibilities relating to Health & Safety.

5. OPENING REMARKS – D. Butler, Chair

The Board Chair stated that October has been a busy month!

- FCHS has been notified it will receive \$41,000 for the purchase of video equipment. This equipment has been ordered.
- Dr. Perkin and the Board Chair presented the rollout of the new Strategic Plan to the Medical Staff. Dr. Perkin provided an overview of Part 2 of the Strategic Planning Process, the Clinical Services Plan. The Strategic Plan and the planning process for the Clinical Services Planning were well received.
- The Strategic Plan was presented to the Departmental Leaders on October 20.
- October 20 was the kick-off meeting of the Clinical Services Planning Steering Committee. Jim Whaley, Whaley & Associates and Nan Brooks provided a planning framework for the development of the Clinical Services Plan. The Chiefs of Medicine and Surgery were invited to the meeting to provide their input to the process. Dr. Rogelstad attended and provided valuable contributions to the discussion. Unfortunately, Dr. Marcou was not available to attend.
- A joint education session is planned for the MHA Board of Directors with the SHHA Board of Directors on Friday, November 20, 2015 at West Haven Golf & Country Club.
- The MHA Board Fall Retreat is scheduled for Saturday, November 21, 2015 from 9 am – 3 pm at SMGH.
- The fiduciary duties of board members and community committee members of a non-profit corporation were discussed at the September Board meeting. It was recommended that the Board of Directors be provided via email with a copy of all applicable policies associated with the Declaration of Understanding of Confidentiality & Conflict of Interest for review prior to signing the Annual Declaration. Copies of the Declaration were distributed to the Board members to sign and submit to the corporate office.

6. **STORY TELLING**

MHA Patient Stories received over the summer were displayed on a story board for members of the board to review.

7. **CONSENT AGENDA**

Items listed under the Consent Agenda were included with the Board package.

MOTION

BG: 51/15

A motion was made and seconded, BE IT RESOLVED THAT:

All Consent Agenda items, motions and recommendations be accepted as presented.

CARRIED

8. **CEO REPORT – T. Stepanuik**

The CEO report was included in the board package. The following information was also shared:

- On October 30, there is a SW LHIN Retreat scheduled for CEOs, CNEs and Chiefs of Staff in the SW LHIN. The day will focus on 6 areas: COPD, CHF, DI Wait times, hospice and palliative care, mental health and readmission rates/wait times for certain procedures.
- The SW LHIN has advised the hospital sector that the 2016/17 HAPS submissions are due November 23. Board approval is not required for submission as the HAPS is not a legally binding agreement but rather a projection based on reasonable assumptions. Changes can be made to the document as we continue to plan. Final sign off by the Board is required by the end of January 2016.
- Business development – I am happy to announce that we believe we have found an appropriate tenant to occupy 4th floor. Details will be provided as the business model unfolds. We anticipate that we will be able to share the final plan at the January Board meeting.

MOTION

BG: 52/15

A motion was made and seconded, BE IT RESOLVED THAT:

The Report of the President and Chief Executive Officer be accepted as presented.

CARRIED

9. **STRATEGIC ISSUES**

9.1 Clinical Services Committee Terms of Reference – D. Butler

The Clinical Services Steering Committee was discussed in the Board Chair's opening remarks.

The Terms of Reference for the Clinical Services Steering Committee were reviewed. Following discussion, it was agreed that the membership be amended to include the President & CEO.

MOTION

BG: 53/15

A motion was made and seconded, BE IT RESOLVED THAT:

The MHA Board of Directors approves the Clinical Services Committee Terms of Reference as amended.

CARRIED

There will be two panels– surgery and medicine – and possibly three that will report to the Clinical Services Committee. These panels will take a deep dive into the data provided by Jim Whaley and team. The panels will be lead by the Chiefs of the

Department of Medicine and Department of Surgery and will likely meet 3-4x. Board representation is also required for these panels. Board Members were requested to contact the Board Chair and/or Corporate office if they are interested in sitting on a panel.

The Panels will be lead by the consultants and will conduct their reviews in December and January with a report to the board in February. It is proposed that the Board of Directors schedule a retreat for either February 6 or 20 to review the data and recommendations for the provision of Clinical Services.

There will be ample opportunities for clinicians and others to provide input; the panels are not the only means to participate in the process.

It was stressed that the Clinical Services Plan is a tool to assist with providing the “right” kind of clinical services for MHA based on the data provided. Since it is a “plan”, it is not the expectation that all recommendations will be implemented immediately.

9.2 Board Education/ Retreat

Friday, November 20, 2015 – Joint board Education Session with SHHA – West Haven Golf & Country Club, 5:30 pm Social, 6:00 pm dinner followed by speaker.

Saturday, November 21, 2015 – Board Retreat, SMGH Boardroom, 9 am – 3pm

10. Business Arising

There was no business arising.

11. New Business

There was no new business.

S. Ouellet left the meeting prior to the Board convening to the In Camera session.

12. IN CAMERA

MOTION

BG: 54/15

A motion was made and seconded, BE IT RESOLVED THAT:

The Board Convene to an incamera session to discuss physician credentials.

CARRIED

MOTION

BG: 55/15

A motion was made and seconded, BE IT RESOLVED THAT:

The Board rise out of camera and report.

CARRIED

MOTION

BG: 56/15

A motion was made and seconded, BE IT RESOLVED THAT:

Upon the recommendation of Dr. Jonathan Dreyer, Deputy Chief of Staff on behalf of the Medical Advisory Committee, the physician applications for Courtesy without Admitting Privileges, Associate Privileges, and ED Locum privileges at SMGH provided in camera be accepted as presented.

CARRIED

MOTION

BG: 57/15

A motion was made and seconded, BE IT RESOLVED THAT:

Upon the recommendation of Dr. Jonathan Dreyer, Deputy Chief of Staff on behalf of the Medical Advisory Committee, the physician applications for Consultant Privileges at FCHS provided in camera be accepted as presented.

CARRIED

13. CORRESPONDENCE AND ANNOUNCEMENTS

13.1 Memo to Hospital CEOs & CNEs re AGO Report on CCAC SW CCAC Facts

13.2OHA Correspondence October 5, 2015 – MHA has been awarded a Quality Healthcare Workplace Award – Silver Level – for 2015, a noteworthy achievement.

14. COMING EVENTS

14.1 Influenza Clinic at FCHS October 28/15 - Board Members welcome

14.2 FCHS DI “Sneak Peek” for Staff and Volunteers December 22/15 (tentative)

14.3 FCHS DI Grand Opening – January 13, 2016 (to be confirmed)

14.4 Volunteer appreciation Evening – SMGH April 13, 2016 and FCHS April 14, 2016

15. ADJOURNMENT

The meeting adjourned at 1850 hours. Ex-officio board members and staff left the meeting prior to the Independent Director Session.

16. INDEPENDENT DIRECTOR SESSION

The elected Directors held a 15-minute independent director session.



Dawn Butler
Chair



Todd Stepanuik
CEO & Secretary



Cathy Swan
Recording Secretary

**MIDDLESEX HOSPITAL ALLIANCE
BOARD OF DIRECTORS MEETING
Wednesday, November 25, 2015
SMGH Boardroom
1730 hours**

Present: D. Butler (Board Chair)
J. Barnett
R. Shea
B. Twyford
N. Vander Gulik
C. Waters
K. Williams

Ex-Officio

N. Maltby
A. Smith
J. Dreyer
G. Perkin
V. Rajgopal
T. Stepanuik
C. Swan, Recorder

Regrets: R. McRae
B. Montgomery
N. MacLean
S. Whittall

Guests: S. Ouellet
S. McLean
R. Tyler
E. Wheatley

1. CALL TO ORDER

The Chair called the meeting to order at 1735 hours. Guests Sue McLean, Ron Tyler and Ed Wheatley, SMGH Foundation and Steph Ouellet, MHA Director Strategic Partnerships/FCHS Site Director were all welcomed to the meeting.

2. APPROVAL OF AGENDA

MOTION
BG: 58/15

A motion was made and seconded BE IT RESOLVED THAT:
The agenda be accepted as presented.

CARRIED

3. DECLARATION OF INTEREST

The Chair stated that each board member must declare a conflict of interest at the appropriate time on any item within the agenda if a member may have a vested interest.

4. PRESENTATIONS

4.1 SMGH FOUNDATION UPDATE – S. McLean, E. Wheatley and R. Tyler

The SMGH Foundation provided an informative update on the events held over the past year and the funds realized from these events. Fundraising goals and future opportunities were also shared.

The Board Chair, on behalf of the Board of Directors, thanked the SMGH Foundation for the informative presentation.

5. OPENING REMARKS – D. Butler, Chair

November has been a very busy month. An overview of the following events was shared:

- Health Achieve November 2 – 4, 2015.

- Strategic Plan Update: Roll out has taken place internally to Physicians, Foundations, Staff, and LAC. A media release announcing the new plan will be forwarded to the public. Meetings will be scheduled with external stakeholders to present details of the new plan.
 - T. Stepanuik and N. MacLean attended an OHA Session on November 12, 2015 about contributing toward a high performing health care system.
 - On November 17, 2015, T. Stepanuik, B. Twyford and D. Butler attended the SW LHIN Networking Event at Blue Water Rest Home in Zurich-Hensall. There were also members from the SHHA board in attendance.
 - MHA and SHHA Boards enjoyed a joint education session on Friday, November 20, 2015. Anna Greenberg, VP Health System Performance, Health Quality Ontario provided a very interesting presentation on quality.
 - The SMGH Auxiliary held its Annual General Meeting and potluck dinner on November 24. The Auxiliary presented the SMGH Foundation with a cheque for \$45,000.
 - The Board gathered for a retreat on November 21 to begin Phase 2 of the Strategic Plan - Clinical Services Planning.
 - To honour and acknowledge our physicians for all they do, a tree has been planted at FCHS and SMGH for the annual Physician Appreciation Day.
6. **STORY TELLING – N. Maltby**
A thank you note from a patient who had day surgery on November 24, 2015, at SMGH was shared with the Board. This patient had nothing but praise for everyone involved with his care from the time of admission to discharge.
7. **CONSENT AGENDA**
Items listed under the Consent Agenda were included with the Board package.

MOTION
BG: 59/15

A motion was made and seconded, BE IT RESOLVED THAT:
All Consent Agenda items, motions and recommendations be accepted as presented.

CARRIED

8. **CEO REPORT – T. Stepanuik**
The CEO report was included in the board package. The following information was also shared:
- The appendices attached to the CEO report were received at the OHA Session November 12, 2015. These papers discuss contributing to a high performing health system.
 - Dr. Dreyer, N. Maltby and T. Stepanuik attended the LHIN CEO/CNE/CEO Retreat on November 27. From discussions at the meeting, future opportunities for MHA could include hospice/palliative care and DI. Reviews will be completed by MHA to determine if MHA has capacity to accommodate any of these potential opportunities.
 - MHA received a Silver OHA Workplace Award which was accepted by T. Stepanuik at Health Achieve.
 - CT Scanner Policy has been drafted which outlines the mechanism for FCHS and SHHA to send patients to SMGH for CT Scans. The referring physician remains the most responsible physician which provides for quicker access from outside agencies.
 - Optimization of ePractice will be ongoing forever. The Board had a lengthy discussion as to how to improve the process and the advantages and disadvantages of Cerner.

MOTION

BG: 60/15

A motion was made and seconded, BE IT RESOLVED THAT:

The Report of the President and Chief Executive Officer be accepted as presented.

CARRIED

9. STRATEGIC ISSUES

9.1 MHA Strategic Plan Rollout Update – T. Stepanuik

A detailed Briefing Note included in the Board package, outlining the roll out strategy for the MHA Strategic Plan was presented.

9.2 Clinical Services Plan Update – D. Butler

The Board's Retreat on Saturday, November 21, 2015, was the initial planning session for Phase 2 of the Strategic Plan – Clinical Services Planning. Three board members, N. Vander Gulik, B. Twyford and K. Williams have volunteered to be part of the small steering committees which will focus on specific areas. D. Butler, R. McRae and N. MacLean are part of the Clinical Services Planning Committee. The Board will plan to hold another retreat in March. A monkey survey will be sent to the Board with suggested dates to meet for the retreat.

9.3 Trane – A. Smith

A. Smith provided an overview of the Trane Energy Performance program. MHA identified the need to pursue energy conservation measures aimed at reducing costs, reducing emissions and improving the hospital environment for staff, patients and families. The intent was to develop a "self funded" program whereby new technology and infrastructure would be paid by guaranteed savings and operational efficiencies. Details of Phase 1 and 2 were discussed as reported in the Briefing Note. The Base Year Savings analysis (April 2014 – March 2015) for SMGH were calculated at 118% and FCHS at 112%. The investments in energy consumption savings and infrastructure will be delivered to both sites over the next 16 months.

In addition to the core Trane project, there will be a separate project with the MHA's utilities company, Entegrus, to develop two, unique power feeds from distinct substations for the SMGH campus to ensure the redundancy of power flow. A new switchgear will be installed as the current equipment has been identified as "obsolete" and "at risk of imminent failure". This is the single point of electricity to the Hospital. Should it fail, the Hospital would be out of electricity for a period of months and require separate diesel generators to run continuously. The cost of the switchgear replacement is estimated at \$2.5 million and will be embedded into the Scotiabank financial instrument. The switchgear is eligible for HIRF funding therefore the 2016/17 allocation will be directed towards this equipment.

Investment costs for SMGH and FCHS were also discussed together with the key benefits for each site.

The Resources Committee recommended that the Board endorse MHA to move forward with the "Performance Agreement for Comfort by Trane" (PACT) contract and finalize the Scotiabank financing required to proceed with the project at the Committee meeting held November 18, 2015.

MOTION

BG: 60/15

A motion was made and seconded, BE IT RESOLVED THAT:

The Middlesex Hospital Alliance Board of Directors authorizes the signing of the PACT Contract with Trane and charge administration to finalize the Scotiabank financing for the Project.

CARRIED

L9.4 IHSP - T. Stepanuik

T. Stepanuik shared the SW LHIN Integrated Health Service Plan (2016-2019). The LHINs are legislated to submit an IHSP however the plan has not yet been approved. With anticipated changes to CCAC, more than likely there will be changes to the plan around home and community care

9.5 Board Member Resignation – B. Twyford

B. Montgomery submitted a Letter of Resignation to the Chair of the Board of Directors effective March 1, 2016, as he and his wife are relocating out of the area. Bill has made many contributions to the Board and is currently a member of the Resources Committee and the FCHS Foundation. Bill has offered to step down before March should a suitable candidate be found to fill this position. We wish Bill all the best and thank him for his contributions to the Board.

The Governance Committee is hoping to recruit potential board members with an educational or aboriginal background as well as candidates residing in the four counties area. Board members were invited to submit names for potential candidates.

9.6 CGE 2016 Education Listing – B. Twyford

The CGE Education offered for 2016 for Board members has been listed on a spreadsheet included in the package. The list includes: broadcasts/conferences/courses/in-person and live webcasts together with a course description. This spreadsheet will be distributed to Board members for reference.

10. Business Arising

There was no business arising.

11. New Business

11.1 Impacting System Improvement through SAA's: Shaping the South West's Future Direction" – T. Stepanuik

A memo from the SW LHIN following a number of engagement sessions held in September and October was included in the package. The focus of the engagements sessions was to modernize how the LHIN uses SAAs to advance shared accountability for improved outcomes, however during these sessions' participants identified a number of related or contextual issues that require follow-up. The feedback received from the SAA Engagement Session participants will help the LHIN to better shape future sessions and ensure alignment of intent, audience and material covered.

S. Ouellet left the meeting prior to the Board convening to the In Camera session.

12. IN CAMERA

MOTION

BG: 61/15

A motion was made and seconded, BE IT RESOLVED THAT:

The Board Convene to an incamera session to discuss physician credentials.

CARRIED

MOTION

BG: 62/15

A motion was made and seconded, BE IT RESOLVED THAT:
The Board rise out of camera and report.

CARRIED

MOTION

BG: 63/15

A motion was made and seconded, BE IT RESOLVED THAT:
Upon the recommendation of Dr. Gary Perkin, Chief of Staff on behalf of the Medical Advisory Committee, the physician applications for Courtesy without Admitting Privileges and Courtesy with Admitting privileges at SMGH provided in camera be accepted as presented.

CARRIED

MOTION

BG: 64/15

A motion was made and seconded, BE IT RESOLVED THAT:
Upon the recommendation of Dr. Gary Perkin, Chief of Staff on behalf of the Medical Advisory Committee, the physician application for Consultant Privileges at FCHS provided in camera be accepted as presented.

CARRIED

13. **CORRESPONDENCE AND ANNOUNCEMENTS**
 - 13.1 CGE Boards November 2015 Edition
 - 13.2 Minister Hoskins Remarks at Health Achieve
 - 13.3 Coleman Response to Minister Hoskins Remarks
 - 13.4 Attributes of High Performance
14. **COMING EVENTS**
 - 14.1 SMGH Foundation and MHA Christmas Social – December 10, 2015 – details to follow
15. **ADJOURNMENT**

The meeting adjourned at 1930 hours. All staff and ex-officio board members left the meeting.
16. **INDEPENDENT DIRECTOR SESSION**

The elected Directors held a 15-minute independent director session.



Dawn Butler
Chair



Todd Stepanuik
CEO & Secretary

Cathy Swan
Recording Secretary