

**A Regular Meeting of the
Orillia Soldiers' Memorial Hospital Board of Directors
Was held on Tuesday, March 27th 2018
6:30 p.m. in the Dr. Brian McGugan Education Room**

- OPEN SESSION -

Present:

Dan Germain (Chair)
Al Scott
Leigh Popov
Mario Benedetto
Karen Barrer
Maggie Martin
Steve Clarke

John Mattinson
Dr. Rose Zacharias (President of the Medical Staff Association)
Dr. Dave Evans (VP of the Medical Staff Association)
Pat Campbell (President & CEO)
Dr. Nancy Merrow (Chief of Staff & VP Medical Affairs)
Kari Simpson-Adams (CNE & Senior Director Local Patient Programs)

Via Teleconference: Krista McKenzie, Brian Sirbovan, Paulette Wilson

Regrets: Michael McMurter, Chuck Penny

Staff Support: Cheryl Harrison (VP Regional Patient Programs) via teleconference
Doug Murray (Exec VP Corporate Services & CFO)
Chis Cecchini (Senior Director, HR)
Terry Dyni (Director, Community Relations)

Nicky Marchant, EA to the CEO and Board Liaison was present to record the minutes.

1. Education Session – 2018 to 2020 HSAA

The Board reviewed the OHA Webcast providing an overview of the 2018 to 2020 HSAA.

Following the webcast Pat Campbell advised the Board that the LHIN's did approve the new template.

Governance Committee has oversight over the implementation of the new template for the OSMH Board of Directors and administration are in the process of developing a document that identifies what we have in place in order to meet the requirements of the template.

Discussion ensued with respect to the potential change in political parties at the provincial level following the election in June 2018 and the potential impact to the 2018 to 2020 HSAA. It was confirmed that it was felt that the HSAA will remain in implementation pending any legislative changes that may be made.

2. Call to Order & Opening Remarks from the Board Chair

The meeting was called to order at 6:25 p.m.

Dan Germain reviewed a letter he had received from the NSM LHIN asking the OSMH Board of Directors to commend OSMH's staff for the compassionate care that they have continued to demonstrate throughout the past winter months and the surge conditions that we have been experiencing in health care. The letter also commends the OSMH Board of Directors for 'staying the course' and keeping patient experience at the centre of our planning and decision making. The letter will be circulated to the OSMH Board of Directors.

3. Agenda

Moved by Steve Clarke

Seconded by Mario Benedetto

THAT OSMH Board of Directors acknowledges that they have received, reviewed and approve the Board agenda package for the March 27th 2018 Board meeting.

CARRIED

4. Declaration of Conflict of interest

None.

5. Consent Agenda

6. Motion to Approve Consent Agenda

Moved by Karen Barrer

Seconded by Leigh Popov

THAT the consent agenda be approved. The consent agenda included the following:

- APPROVAL of Minutes of January 30th 2018 OSMH Board of Directors meeting
- APPROVAL of Open and In-Camera Sessions of the OSMH Board of Directors policy – Governance Committee meeting minutes – February 21st 2018
- APPROVAL of location of the 2018 Annual meeting at the Royal Canadian Legion – Governance Committee meeting minutes – February 21st 2018
- ACCEPTANCE of the financial statements to December 31st 2017 – Resources Committee meeting minutes - February 15th 2018

CARRIED

7. Business Arising

8. Governance Committee

Hospital Service Accountability Agreement

As identified in the education session we will have a new accountability agreement for 2018 to 2020. The template agreement was provided to Governance Committee for their information at the February 2018 meeting. Administration are in the process of reviewing and identifying the requirements for reporting under the HSAA and how we will comply and this will be coming back to the April Governance Committee meeting for review.

9. Quality & Safety Committee

8.1 Quality Improvement Plan

Krista McKenzie reviewed the 2018/19 Quality Improvement Plan for the OSMH Board of Directors. The plan has come to the Quality & Safety Committee a couple of times providing opportunity for the Board to see the progress of the development of the plan and provide feedback and comment. The plan is now coming to the Board for approval.

Discussion ensued with respect to Medication Reconciliation and the Board was advised that this is the process to try and get the best possible understanding of the medication history every time a patient's care is transferred from one setting to another. For example when a patient comes into the Emergency Department their medication is reviewed and when they are then transferred up to an inpatient unit the medication is reconciled again as there could have been a change made to the medication while they were in the Emergency Department. It was highlighted that medication reconciliation is a complex process and the OSMH Board requested that an education session on the process be provided to them. Dr. Dave Evans volunteered to support this education session.

The OSMH Board of Directors discussed the targets that have been set in the QIP. Some are based on provincial standards and expectations and others are customized by OSMH, such as workplace violence.

The OSMH Board of Directors was reminded that the priority indicators are ones that Health Quality Ontario have identified as ones that they are recommending organizations select however we are not required to do this but must identify why if we do not include them. The mandatory indicators from Health Quality Ontario such as workplace violence must be on the QIP with a work plan for improvement.

Moved by Leigh Popov

Seconded by Mario Benedetto

THAT the OSMH Board of Directors approve the 2018/19 Quality Improvement Plan.

CARRIED

Quality & Safety Committee meeting report received by the Board.

10. Resources Committee

10.1 Financial Statements to January 2018

Leigh Popov advised the OSMH Board of Directors that the forecast being presented for acceptance by the Resources Committee has 2 scenarios identified based on the potential outcome of the negotiations for the creation of a second regional Kidney Care Hub at RVH and the dispute regarding funding for 17/18. For the purpose of the motion Scenario A reflects the most likely outcome of January's forecast. Leigh Popov reviewed the potential adjustments that have not been included in the forecast.

The OSMH Board of Directors was advised that there are some larger variances based on the 17/18 forecast and the 17/18 budget. Undistributed and miscellaneous revenue reflects about \$1M less than budgeted. This relates to about \$600,000 lower than budgeted accruals for the Future Hospital Project as well as variances for MRI, the OR and Maternal Child.

We are significantly higher in revenue for one time MOHLTC payments as we received over \$1.1M from the Ministry for surge bed funding.

10.2 Increase in Credit Facilities

Adjustments to the hospital's credit arrangements with the bank are being proposed. This will provide \$4M for a dedicated facility to finance the hospital's co-generation project and increase the term line of credit from \$10M to \$12.7M. This will allow the hospital to proceed with financing of approved investments in co-generation as well as allowing additional flexibility to respond to investment opportunities in the 18/19 capital budget.

Discussion ensued with respect to the co-generators and it was confirmed for the OSMH Board of Directors that these co-generators were purchased as part of the Community Tower redevelopment project but have never been commissioned. The cost of the project to get the co-generators up and running is to retrofit them so we can now get them operational.

10.3 Motions

Moved by John Mattinson

Seconded by Karen Barrer

THAT the OSMH Board of Directors accepts the financial statements to January 31st 2018.

CARRIED

Moved by Al Scott

Seconded by Maggie Martin

THAT the OSMH Board of Directors authorize management to enter into a revised credit arrangement to increase the hospital's term line of credit from \$10M to \$12.7M; and a dedicated term facility of \$4M to support the completion of the hospital's co-generation project.

CARRIED

11. New Business

11.1 CEO Report

In addition to the CEO Report circulated Pat Campbell advised the OSMH Board of Directors that there was a presentation today by the Simcoe County Hospital Alliance to the County of Simcoe to bring them up to date on the impact of their investment within Simcoe County for Hospitals. The Simcoe County Hospital alliance is made up of OSMH, GBGH, CGMH, SMH, RVH and Southlake. The County of Simcoe has made a new 15 year commitment for \$3M each year. Discussion ensued with respect to the Future Hospital project and whether we saw competition among the hospitals for the dollars from the County of Simcoe. The OSMH Board was advised that CGMH and Stevenson Memorial Hospital both have significant capital projects that are designated to receive \$30M of the \$45M committed by the County in the next 15 years.

Doug Murray and Terry Dyni provided a presentation to Rama First Nation Chief and Council today on the Future Hospital Project and specifically engaged them in discussion around the healing circle at OSMH advising that we want to maintain this but it might be disrupted by the future hospital project. The discussion was greatly appreciated.

Doug Murray, Terry Dyni and Dr. Nancy Merrow also attended the Ministry of Health to present our Part A and Part B Submission on the Future Hospital Project to the Ministry on March 21st 2018.

The Executive Compensation framework is posted on the website for public consultation until April 4th 2018.

Pat Campbell acknowledged the support of the District of Muskoka and advised that we have just received their latest cheque which is providing assistance to the costs for the renovation of our NICU.

With respect to the Hospital Information System (HIS) Renewal this was in the report to keep the Board up to date on the continuing focus of government in this area. We have one of our IT staff that is involved in this process at the NSM LHIN so we are involved on an ongoing basis.

Patient Story

Nicky Marchant shared a story of a family who were grieving their loss their husband, father and grandfather. They went Cultural Affairs to ask for a spiritual service for the family in our worship centre and after discussion identified that the gentleman had done a lot of work in Northern Canada and had adopted a lot of the First Nations beliefs and customs. One of our Cultural Affairs staff was able to arrange a smudging ceremony for them to acknowledge their loved one and the family were extremely appreciative and donated some smudging supplies to Cultural Affairs.

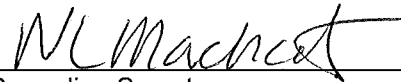
12. Adjournment to Closed Session

**Moved Steve Clarke
Meeting moved to closed session.**

CARRIED



Chair



Recording Secretary