

BOARD OF DIRECTORS - OPEN MEETING

Date: Wednesday, August 13, 2014
 Time: 16:00 – 17:30 hours
 Location: Fenwick Conference Room, Watkins 2
 Dial In: 1-866-440-8937, Conference ID: 5388961#

Start	Time	Item	Topic	Lead	Purpose	Attachment
1. CALL TO ORDER & CONFIRMATION OF QUORUM						
1600	3 min	1.1	Approval of Agenda & Chair's Remarks	Carson	Decision	Agenda
1603	2 min	1.2	Approval of Previous Minutes <ul style="list-style-type: none"> June 04, 2014 open minutes June 04, 2014 closed minutes June 04, 2014 annual general meeting minutes June 04, 2014 special meeting minutes June 17, 2014 open minutes 	Carson	Decision	Draft minutes
2. CEO REPORT						
1605	15 min	2.1	CEO Report Highlights & External Environment Update	Thompson	Discuss	Written report
3. GENERATIVE / OPEN AGENDA ITEM						
1620	30 min					
4. NEW BUSINESS						
1650	10 min	4.1	Financial Update	Janiec	Discuss	Verbal
1700	10 min	4.2	Board Auxiliary Liaison Role & Appointment	Thomson	Decision	Verbal
1710	10 min	4.3	September 8 & 9 Board Education Session	Thompson	Discuss	Verbal
1720	10 min	4.4	Honorary Medical Staff Recommendation	Zelt	Decision	Briefing note
5. DATE OF NEXT MEETING & TERMINATION						
1730		5.1	Board Education Session: Monday, September 8, 17:00 – 20:00 hours Tuesday, September 9, 08:00 – 15:30 hours Date of Next Meeting: Tuesday, September 30, 16:00	Carson	Inform	Verbal

BOARD OF DIRECTORS: OPEN MEETING OF AUGUST 13, 2014

A regular meeting of the Board of Directors of Kingston General Hospital was held in the Wednesday, August 13, 2014 in the Fenwick Conference Room, Watkins 2, of Kingston General Hospital from 16:00 to 17:15 hours. The following are the open minutes.

Elected Members Present (voting): Annette Bergeron, Scott Carson (Chair), Peng Sang Cau, Wendy Forsythe (by phone), Timo Hytonen, Donna Janiec, Diane Kelly, Susan Lounsbury (by phone), Geoff Quirt (by phone), Bill Robertson, and George Thomson.

Ex-officio Members Present (voting): Richard Reznick.

Ex-officio Members Present (non-voting): Eleanor Rivoire, Leslee Thompson and David Zelt.

Regrets: Lynn Bowering and Kishore Thain.

Administrative Staff: Rhonda Abson (Recording Secretary), Brenda Carter, Jim Flett, Chris Gillies, Shannon Graham and Troy Jones.

1.0 CALL TO ORDER & CONFIRMATION OF QUORUM

The Chair called the meeting to order, confirmed quorum, welcomed and introduced Vice Presidents Brenda Carter, Troy Jones, Shannon Graham, and Director of Medical Affairs, Chris Gillies.

1.1 Approval of Agenda & Chair's Remarks

The Chair drew attention to the pre-circulated agenda. A new agenda format has been introduced in an effort to improve meeting efficiency with future agendas focusing more on the work of committees. Board members were encouraged to provide comments to the Governance Committee Chair, George Thomson, on additional changes. The Governance Committee will bring forward an updated meeting package in September. The CEO noted that the Governance Committee will be looking at other improvements focusing on the criteria for committee and board decision items. It was noted that no 'generative' discussion item had been identified for today's meeting; this has been included to demonstrate to the Board how the new agenda format might be used to highlight specific Board committee agenda items being recommended for greater discussion at Board meetings.

Moved by Annette Bergeron, seconded by Peng-Sang Cau:

THAT the agenda be approved as amended.

CARRIED

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1.2 Approval of Previous Minutes

The open and closed June 04, 2014 draft KGH Board of Directors meeting minutes were circulated to the Board in advance of the meeting. The package also included the draft annual general and special meeting minutes and a minor amendment was noted on the AGM minutes which should read the 165th annual general meeting. The June 17, 2014 draft Board minutes were also provided in the agenda package.

Moved by Annette Bergeron, seconded by Peng-Sang Cau:

THAT the open minutes of the KGH Board of Directors meeting held on June 04, 2014 be approved as circulated.

CARRIED

Moved by Timo Hytonen, seconded by Richard Reznick:

THAT the closed minutes of the KGH Board of Directors meeting held on June 04, 2014 be approved as circulated.

CARRIED

Moved by George Thomson, seconded by Susan Lounsbury:

THAT the open minutes of the KGH annual general meeting held on June 04, 2014 be approved as amended.

CARRIED

Moved by Wendy Forsythe, seconded by Donna Janiec:

THAT the open minutes of the special KGH Board of Directors meeting held immediately following the AGM on June 04, 2014 be approved as circulated.

CARRIED

Moved by Susan Lounsbury, seconded by Timo Hytonen

THAT the open minutes of the KGH Board of Directors meeting held on June 17, 2014 be approved as circulated.

CARRIED

2. CEO REPORT

2.1 CEO Report Highlights and External Environment Update

The written CEO report was pre-circulated to Board members. Copies of KGH This Week were appended to the report along with the June update from the Chair and President's report from the Ontario Hospital Association. Another new OHA publication "CEO Connection" provides Board members with an overview of the provincial post-election landscape and OHA government relation updates.

Highlights from the report included completion of the amalgamation of the Hospital Foundations into the University Hospitals Kingston Foundation; an update was provided on the recent meeting with the KGH

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Auxiliary President and Vice President; the CEO provided an update on a recent meeting with the new Deputy Minister, Bob Bell which focused on KGH's requirements for Phase 2 redevelopment. The report also provided an overview of new legislative compliance requirements under the *Broader Public Sector Executive Compensation Act* as well as the government's recent introduction of a provincial patient ombudsman under Health Quality Ontario to assist patients in resolving complaints against public hospitals, long-term care homes and community care access centres. Board members were briefed on recent cabinet appointments and other organizational changes within the Ministry.

Leslee Thompson provided a brief overview of the impact of the new funding formula in relation to Quality Based Procedures (QBPs) which could result in a \$2 million shortfall in funding. The OHA has struck a special committee of CEOs with OHA President Anthony Dale to develop strategies and work with the Ministry in relation to health systems funding reform. Board members were also briefed on KGH's continuing discussions with The Ottawa Hospital relating to information technology requirements.

Discussion focused KGH's original submission to support Phase 2 redevelopment of the operating rooms. Jim Flett confirmed that the submission is with the Ministry, along with the Agnew Peckham report on the operating room planning requirements, may result in one additional OR for KGH and one more for Hotel Dieu Hospital. The SE LHIN is also engaged in the submission and will need to confirm the HDH role with respect to overnight stays and the additional procedures that could be completed at that site. The CEO confirmed that discussions are underway to arrange for a site tour of the KGH operating rooms with the Deputy.

David Zelt arrived at 17:15 hours.

3. GENERATIVE / OPEN AGENDA ITEM – no items identified.

4. NEW BUSINESS

4.1 Financial Update

The results for the first five months of fiscal 2015 currently reflect a negative variance of \$300K. Management is reviewing options and the team is optimistic that a balanced financial position can be achieved. Jim Flett cautioned Board members that there are still many unknowns from the Ministry in terms of funding. While there may have been a similar number of gridlocks called this summer, the duration/number of days has increased which may result in budget pressures. A more detailed analysis will be presented and discussed at the September Finance and Audit Committee meeting.

4.2 Board Auxiliary Liaison Role & Appointment

Each summer, the CEO meets with the President and Vice President of the KGH Auxiliary to review progress on important initiatives, to discuss opportunities and challenges. President Jenny Raymond and Vice President Sandra Fletcher attended a meeting with the CEO, KGH Vice Chair George Thomson, and Vice President/CHRO Shannon Graham in July. In 2009 a number of commitments were made by the Board in terms of support and communication with the KGH Auxiliary; the group reviewed and reconfirmed

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these requirements at the meeting and affirmed the stronger relationship between the Board, management and the Auxiliary. George Thomson provided Auxiliary President and Vice President with an overview of the new board structure redesign and discussion focused on the changing accountabilities of committee members in terms of their roles on the Board and in committee work, particularly as it relates to the Quality of Patient Care Committee and the Auxiliary member position. It was agreed that George Thomson would attend the upcoming Auxiliary Council meeting in September to review the changes and, in the interim, the President would be in touch with the Quality of Patient Care Committee Auxiliary members to review and discuss the upcoming changes. The Governance Committee Chair thanked Annette Bergeron for her contributions this past year in the Board's liaison position to the Auxiliary. An invitation was extended to elected Board members to consider taking on this role and Diane Kelly accepted the opportunity.

Moved by Annette Bergeron, seconded by Bill Robertson:

THAT Diane Kelly be appointed as the Board's liaison to the KGH Auxiliary and that the CEO confirm this appointment as soon as possible.

CARRIED

4.3 September 8 & 9 Board Education Session

The CEO briefed members on the upcoming September 8 and 9 board education sessions which will focus on risk. Kathy O'Brien with DDO Health Law will present at the session along with Elizabeth Martin, Vice Chair of the Healthcare Reciprocal of Canada and Audit Chair of the Sunnybrook Health Sciences Centre Board. Hospital tours focusing on privacy, facilities and clinical have also been arranged. An agenda package will be provided to members in advance of the session.

4.4 Honorary Medical Staff Recommendation

David Zelt drew attention to the recommendation of the Medical Advisory Committee regarding the appointment of physicians to the Honorary Medical Staff. As required by the By-Law, the Board is responsible for approving these appointments. Discussion focused on KGH's support of an interprofessional environment and that future amendments to the By-law should take this into consideration. David Zelt confirmed that the By-Law Committee will be looking at this provision during their upcoming review.

Board members reviewed and recognized the significant accomplishments of Dr. Brian Wherrett and Dr. Alvaro Morales. Discussion focused on how these individuals would be recognized in receiving these appointments.

Moved by David Zelt, seconded by Richard Reznick:

THAT, in keeping with the Medical Staff By-laws, the following physicians are appointed to the Honorary Medical Staff: Dr. Brian Wherrett in the Department of Pediatrics and Dr. Alvaro Morales in the Department of Urology.

CARRIED

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5. DATE OF NEXT MEETING & TERMINATION

The next regular KGH Board meeting will take place on Tuesday, September 30, starting at 16:00 hours.

The meeting terminated at 17:15 hours on motion of Bill Robertson.

Scott Carson
Chair

LESLEE THOMPSON, PRESIDENT & CEO

Submitted to: Board of Directors

Date of Issue: August 6, 2014

Period Covered: May 28 – August 6, 2014

This note provides an update on major issues and activities that CEO and management have been addressing since the Board meeting held on June 04, 2014 (regular). I will be elaborating on a few of these items at our upcoming board conference call and, as always, I am happy to take any questions on these or any other item.

1. General Update – KGH activities

Latest editions are attached! Please note that we publish KGH This Week on a summer schedule. The Strategy Management and Communications team creates a new issue when there is priority internal news to be shared. Our regular weekly schedule starts on Tuesday, August 19.

2. University Hospitals Kingston Foundation Update

The new UHKF board held its inaugural meeting on July 8th, 2014, with Ian Wilson elected as Board Chair, Dale Kenney as Vice Chair, and Colleen Lawrie as Treasurer! All four boards signed off and filed the necessary documents to support amalgamation effective July 1st, 2014. Thank you letters have been sent to all KGH Foundation board members and Bill Dalton, Foundation President, to recognize and acknowledge their contributions and support during this process. As well, the three hospital CEOs have sent a note to Chris McElvaine, Chair of the Amalgamation Task Force, thanking him for his commitment and leadership during this process. This is a significant achievement resulting in a single charitable foundation that will be key in building a strong base of community support for fundraising in our community.

On June 19, I participated in the UHKF Celebration of Giving event to thank donors for their support as well as provide a brief update on KGH. Thanks to all board members who were in attendance. This year's Ian Wilson award was presented to Sherri McCullough, Board Chair at Hotel Dieu Hospital, recognizing her volunteer efforts in fundraising. The Davies Award was presented to the CDC Run/Walk Committee this year which recognizes philanthropic leadership in our community.

3. Meeting with the KGH Auxiliary President & Vice President

On July 23, George Thomson, Shannon Graham and I met with Jenny Raymond, Auxiliary President, and Vice President Sandra Fletcher, as part of our annual cycle. Our discussion focused on the recent KGH Board structure changes and how this may impact the Auxiliary. It was agreed that an update on ways in which the Board and management interface with the Auxiliary was needed so that progress is captured as well as to identify areas where improvement is needed. A briefing will be provided at an upcoming Governance Committee meeting and that the appointment of an elected Board member to the liaison position would be completed at the August Board meeting.

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4. Meeting with Deputy Minister, Dr. Bob Bell & KGH Phase 2 Update

On July 10, I had the opportunity to spend time with the new Deputy Minister to brief him on KGH and to discuss Phase 2 redevelopment requirements. The SE LHIN has recently provided a letter of support for the operating room plan (Board members will recall that KGH and Hotel Dieu have been working with Agnew Peckham, as requested by the Ministry to develop a joint operating room planning assumption document). I will provide a verbal update to board on status of our submission at the August meeting.

5. Partner Hospitals Update

At the end of June, Cathy Szabo, CEO at Providence Care, invited me to tour the new patient mock-up room at the King West site. It was great to spend time and see, firsthand, the plans for the new hospital! Last month, Hotel Dieu Hospital announced the appointment of Dr. Michael Fitzpatrick as Chief of Medical and Academic Affairs/Chief of Staff effective September 1, 2014. Dr. Fitzpatrick has served as Chair of the KGH/HDH Ambulatory Clinics Committee and is a practicing respirologist.

6. Ontario Hospital Association “healthscape”

As a reminder, the OHA has introduced a new information exchange forum called “healthscape” offering a broad range of current news and information and helps users navigate the complex landscape of Ontario’s ever-changing health care system. I would encourage board members to join – you can register at www.healthscape.ca.

Attached to my report is the latest update from the OHA Board of Directors, President’s Report and OHA CEO Connection relating the post-election environment and OHA’s government relations. Again, these documents provide excellent insights into key system issues.

6. CIHI – Our Health System: In Depth

The Canadian Institute for Health Information (CIHI) will be expanding the Our Health System website (www.ourhealthsystem.ca) on September 18, 2014, to include new interactive hospital and regional indicator results. The goal of the enhanced website is to help senior managers and decision-makers in health regions and acute care facilities improve the quality and delivery of health services in their communities. Stakeholders will be able to access the expanded Our Health System website under embargo and David Zelt will be leading this review. The “In Depth” section of the website will allow visitors to select 38 indicators and 25 contextual measures to see how their local hospitals or regions compare with the national average.

7. Legislative Updates

On July 8, 2014, the government introduced Bill 8, *the Public Sector and MPP Accountability and Transparency Act, 2014*, in the Ontario Legislature. The bill reintroduces near-identical legislation from the previous legislative session (Bill 179) with the main difference being the inclusion of amendments to the Ambulance Act which were the subject-matter of a different bill from the previous session. To view Bill 8, [click here](#).

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The bill introduces the *Broader Public Sector Executive Compensation Act, 2014* which would authorize the creation of executive compensation frameworks in BPS organizations including hospitals. To enable this, the bill amends a number of pieces of legislation including the *Broader Public Sector Accountability Act* (BPSAA), the *Excellent Care for All Act* (ECFAA), and the *Freedom of Information and Protection of Privacy Act* (FIPPA), among others. The bill also proposes to establish a provincial patient ombudsman under Health Quality Ontario to assist patients in resolving complaints against public hospitals, long-term care homes and community care access centres.

8. South East Local Health Integration Network (SE LHIN) Activities

Sustainability: At the end of June, members of the executive team had an opportunity to meet with representatives of KPMG, the firm selected to lead the sustainability project. Working with local and regional hospitals and the CCAC, the outcomes will include further opportunities for cost-savings in anticipation of hospital funding decreases. The consultants will review individual hospital strategies for administrative efficiencies as well as current and potential joint strategies for administrative efficiencies as well as looking at opportunities for joint support services and how clinical services could be reconfigured. On August 20, SE LHIN Board Chair Donna Segal has extended an invitation to the Chair/Vice Chair as well as hospital CEOs to participate in an update on sustainability. George Thomson, Jim Flett, and I will be attending this session.

Addictions and Mental Health Redesign: On March 31, the SE LHIN Board moved forward with the launch of the Future State Planning Process to develop a regional plan. The proposed new design is targeted for fiscal 2015/16. On Wednesday, June 25, health service provider board members and CEOs were invited to a governance session and KGH Board member, Lynn Bowering, kindly agreed to participate in this session. Lynn has connected with both Eleanor and I regarding these meetings and an update will be provided the Patient Care and People Committee in the fall. The LHIN has established several operational teams (Clinical, Administration and Finance, Health Human Resources, and Operations) and KGH has representation on the Clinical team.

Governance Workshop: In November 2013, the Collaborative Governance and Community Engagement Committee of the SE LHIN held the first "Governance Excellence 2013: Building Collaboration" workshop in Kingston. Summaries of the feedback and table exercises from the session are available, including the governance framework structure that was endorsed the SE LHIN board: [\(Click Here for Link\)](#). As an update, the next session will be held on Wednesday, October 22, 2014 at the Italo Canadian Club in Kingston for two board members and the CEO. Scott Carson and George Thomson have agreed to join me at the session and an update will be provided at the October Board meeting.

9. Canadian Healthcare Engineering Society – KGH to Receive Another Award!

The Wayne McLellan Award of Excellence recognizes an organization that has had outstanding success in the completion of a major capital project, energy efficiency program, environmental stewardship program, or facility leadership program. To read KGH's submission and learn more about how we are reducing our carbon footprint, [click here!](#)

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10. Order of Canada – Dr. James Low

Earlier this summer, Dr. Jim Low, Administrative Officer of the Museum of Health Care, has been appointed to the Order of Canada. Through his tireless efforts, Jim has been recognized for his academic achievements and as a founder of the Museum. Future generations will benefit from his work to preserve the history of medical practice and artifacts of Canada's health care pioneers! A letter of congratulations has been sent on behalf of the Board and team at KGH.

11. External Presentations – CEO

I have been invited to speak at The 6th International Conference for Patient- and Family-Centred Care: Partnerships in Quality and Safety" in Vancouver, B.C. in early August. In terms of my September commitments, I have been invited back to Copenhagen on September 29 to meet with national, regional and municipal health politicians, senior executives from Danish hospitals, as well as health practitioners and scientists, and representatives from a number of Danish patient organizations. The Danish government has invited my participation to talk about patient- and family-centred leadership to inspire change and discuss the importance of patient-focused initiatives.

Please don't hesitate to contact me with any questions or concerns arising from this report.

Respectfully submitted

Leslee J. Thompson
President and Chief Executive Officer

Attachments: Update from the OHA Board of Directors / OHA President's Report / KGH This Week

Abson, Rhonda B.

Subject:

Attachments:

FW: Update from OHA's Board of Directors
image002.png; ATT00001.htm; CR President's
Report June 2014.pdf; ATT00002.htm

From: Marcia Visser <mvisser@oha.com>

Date: June 27, 2014 at 12:04:38 PM EDT

To: Undisclosed recipients;;

Subject: Update from OHA's Board of Directors

SENT ON BEHALF OF MARCIA VISSER, CHAIR and ANTHONY DALE, PRESIDENT & CEO

The following is a summary of the Board's discussions on June 10 and 11, 2014. Also, for your reference, attached is the President's Report to the Board which provides information about initiatives that were not otherwise before the Board for discussion.

HOOPP's Defined Benefit (DB) Campaign

HOOPP Senior Vice-President, Strategy and Stakeholder Relations, Victoria Hubbell presented to the Board an update on the plan and an overview of HOOPP's efforts to promote understanding of the advantages of Defined Benefit Pension Plans in providing adequate retirement income. OHA is an important partner in the HOOPP Trust as OHA is a Settlor of the Plan and appoints half the members of the HOOPP Board of Trustees.

The presentation included highlights of research undertaken by HOOPP and others on the economic impact of defined benefit pension plans in Canada. Findings included the flow of pension benefits into the economy through consumer spending by pensioners and a significantly lower dependence on government income support programs by those who receive a defined benefit pension. HOOPP is using the research in its outreach to members, government, and the public on the value of the defined benefit model of retirement savings.

More information about HOOPP's Defined Benefit Campaign is available at <http://hoopp.com/>.

OMA President, Dr. Ved Tandan

Dr. Ved Tandan has set strengthening partnerships between physicians and healthcare institutions such as hospitals as a priority for his year as OMA President. The theme of his presentation to the OHA Board was "working together to build the health care system of the future" and highlighted recent joint initiatives, including OHA and Hospital participation in the OMA's annual Pre-Council Policy Session. Traditionally, this event has only included doctors; this year's discussion focused on issues of common importance, such as delivering the best patient care, optimizing system resources, enhancing outcomes and continuing to transform the health care system through enhancing the Hospital/Physician relationship. The OMA is planning a number of similar consultations across the province in light of the success of this event.

Through discussions with Dr. Tandan, the OMA and the OHA acknowledged common goals for the health care system and considered opportunities to continue to work together in both formal and informal ways.

Dr. Tandan was joined in his presentation by Ron Sapsford, OMA's Chief Executive Officer.

Services Redistribution Framework

Dr. Charles Chan, OHA Co-Chair of the joint OMA-OHA Physician Hospital Issues Committee, joined the Board for Dr. Tandan's presentation and for the Board's consideration of "*A Framework for the Redistribution of Hospital Services*". The Board endorsed the document and made suggestions for the communications strategy.

The Board commended the joint Committee for the development of the framework and thanked Dr. Chan for his leadership on behalf of hospitals.

The joint Committee has agreed to continue to meet and is exploring opportunities for partnership between the OMA and the OHA.

HOODIP LTD Offsets

The Board received an update on the impact of the HOODIP LTD Offsets on hospitals and actions taken by OHA staff and the Benefit Plans Advisory Committee to work with hospitals on related issues. A HOODIP LTD Offsets Working Group has been established that includes HR leads from seven hospitals from across the province and from a variety of hospital types. This group will guide staff in the development of tools and resources to assist members with this issue.

Ontario General Election Preparation

The Board received a report from the Special Committee: Government Transition Preparedness on the preparations it had made for a change in government. Key messages will be provided to hospitals following the election to assist them in responding to local media enquiries.

OHA Budget and Operating Plan [July 1, 2014 – June 30, 2015]

The Board approved the OHA's Budget and Operating Plan for the next fiscal year. In preparing this year's Budget and Operating Plan: 2014-2015, the OHA has identified actions and initiatives that bridge the organization's strategic aims with the priorities of its members and of the broader health system. Insights gained from responses to the OHA's 2013 Member Satisfaction Survey on issues most important to its members, as well from recent regional consultations on health care transformation and on the OHA's role in quality, have had a direct impact on how the OHA plans for the future. So too has reporting on OHA's new strategic indicators which evaluates the progress made in key, priority areas the organization directly impacts, as well as in areas it monitors at a system-level. Supported by these reports, the OHA has endeavored to align its strategic objectives with its members' expectations by establishing new mandates in areas that offer the best opportunity for thought leadership and action.

While the Strategic Plan continues to serve as guardrails that keep the organization focused on its long-term goals, the OHA must also prioritize its many efforts towards achieving its vision of a high-performing health care system. As a result, the OHA has recognized that it is uniquely positioned over the next 12-24 months to provide high impact thought leadership and services in targeted priority areas for its members and the broader health care system. The OHA will also focus on a number of areas where it offers supports and services that are of high value to its members and that aim to improve members' satisfaction with their Association. Finally, the OHA will make key enhancements to some of its core functions that will directly enable the organization to fulfill its leadership and service objectives.

The Budget and Operating Plan: 2014-2015 has been posted on the Strategic Plan page of the OHA's website (www.oha.com).

OHA Risk Management

The Board received information about the top risks to the Association that were identified through the enterprise risk management analysis. The risks of greatest concern were all ones that were heightened by the uncertainty of the political situation (i.e., minority legislature and general election). Management's internal working group will be monitoring the risks throughout the year and assessing the potential impact of changes on the OHA.

Other Business

The Board also:

- Received the President's Report (appended);
- Received the CEO's assessment of achievement against priorities for the January to June period;
- Adopted policies to support its move to electronic distribution of Board meeting and reference materials;
- Approved remuneration for the auditors for the fiscal year ending June 30, 2014;
- Approved the Statement of Investment Policies and Procedures for the OHA portfolio;
- Admitted two associate members to the OHA:
 - Fort William Family Health Team;
 - North Simcoe Family Health Team; and
- Admitted one affiliate member to the OHA:
 - Toronto Orthopedic Services.

Next Board Meeting

The next regular meeting of the Board is scheduled for August 13, 2014. For a schedule of 2013-2014 Board meetings, please go to www.oha.com and click on "About Us" and "OHA Board of Directors".

If you have any questions or comments, please don't hesitate to contact me at mvisser@oha.com or Anthony Dale, President and CEO, OHA at adale@oha.com.

Yours truly,

President's Report

May 2014 – June 2014

I am pleased to present a brief report of key activities undertaken within the months of May 2014 through June 2014. This report is in addition to items included on the agenda for the Board meeting.

IMPLEMENTING STRATEGIC PLAN 2013-2016

ADVANCING INTEGRATED CARE

Patient Screening Tool. The development of a patient screening tool for early identification of frail seniors at-risk of functional loss or avoidable morbidity was tabled at the OHA's Complex Continuing Care and Rehabilitation Provincial Leadership Council in February 2014 with Bridgepoint named as the paymaster. Helen Angus, Interim Deputy Minister and Associate Deputy Minister, Transformation Secretariat tabled the initiative with a view of streamlining and aligning efforts around Health Link partners to help broaden the range of accessible, responsive services for high-cost, frail, at-risk seniors. A research project budget of \$250,000 for 12-months was established by the Ministry. Bridgepoint is currently awaiting funding (expected 2014-15).

This initiative was in response to a multitude of discussions and draft proposals outlining areas where CCC and rehab hospitals' capacity, resources, and expertise can help Health Links achieve better outcomes and improve care coordination. Much of the success is due to Marian Walsh with the support of Malcolm Moffat and Gaétan Tardif and with the support of Academia (Renee Lyons [Bridgepoint Collaboratory], Susan Jaglal [University of Toronto and Toronto Rehab Institute] and Walter Wodchis [HPME and ICES]).

GCE Video Series Championing Governance – The GCE is developing a series of four videos aimed at championing health care governance and encouraging individuals to join a health care board. This video series is a recruitment tool intended to help showcase the great governance work being done in Ontario's health care organizations. Interviews were conducted with several delegates from small, rural, and northern hospitals who attended the Rural and Northern Conference, as well as in Hanover and Southampton. Additional interviews will be conducted in Toronto, Ottawa and Arnprior. A total of 13 interviews with board members from hospitals, CCACs and Family Health Teams will be completed by June 30, 2014.

ER and ALC: Moving Forward Conference. (May 29, 2014) *Hybrid Program.* Chaired by Dr. Peter Nord, VP, Chief Medical Officer and Chief of Staff at Providence Healthcare and Co-Chair of the ER/ALC Expert Panel, this year's conference specifically focused on ALC "longest waiters", particularly those patients with mental health, addictions and specialized behavioural needs, and how to transition them to more appropriate settings. With regard to ER issues, the conference addressed how to improve the care transitions between police and emergency departments. Speakers included: Dr. Howard Ovens, Director, Schwartz/Reisman Emergency Centre, Mount Sinai Hospital; Stacey Daub, CEO, Toronto Central CCAC; Marianne Walker, President and CEO, St. Joseph's Health Care- Guelph; Dr. Michael Schull, President and CEO, ICES; and others. **In person and online audience*

Strengthening Foundation Governance: Current Issues, Challenges and Solutions. (May 30, 2014)

The GCE's second annual Strengthening Foundation Governance program featured expert speakers who discussed issues at the forefront of foundation governance. This workshop featured an opening session on Governance Essentials by Lynne Golding, National Director, Health Law Practice Group, Fasken Martineau, which addressed foundation director roles and duties, board accountability and oversight, and the legislative obligations of foundation boards.

Other key issues included: Hospital Board vs. Foundation Board Dynamics, Boards and Resource Development, and Strategic Elements of Fundraising. There was also a panel presentation that engaged delegates in dialogue with representatives from several foundation boards on issues of foundation succession stories, recruitment and retention leading practices.

The Community Engagement Imperative for Health Care Boards. (June 6, 2014, Ottawa)

Facilitated by Richard Delaney, President of the Canadian Institute for Public Engagement, this workshop helped participants understand and build skills in community and stakeholder engagement, risks associated with community and stakeholder engagement, engagement as a risk management tool, the role of executives in guiding engagement, and establishing or renewing organizational policy and engagement frameworks.

Short exercises and discussions highlighted how engagement regulations, guidelines and standards apply to decision-making processes and how stakeholder and community engagement adds value.

Physician Leadership Summit. (June 11, 2014) The third annual summit will feature a panel of speakers who will challenge delegates to envision a high performing health care system in Ontario and consider the contributions physicians can make to achieve it. Chaired by Dr. David Higgins, President, St. Joseph's Healthcare Hamilton, delegates will also have an opportunity to examine and reflect on the critical leadership skills that physicians will need to manage and execute the change initiatives required to move toward the health care system of the future.

REALIZING QUALITY

Patient Experience Measurement Project. OHA has begun a process that will culminate in replacing our current patient satisfaction measurement services contract. The current contract (with NRC Picker) expires at the end of March 2015. Through mid-May the OHA's Innovation and Adoption department held five focus groups attended by over 70 hospitals. These groups were used to outline the upcoming RFP process, indicate how hospitals can be engaged and to learn from hospitals both their aspirations for the future of Patient Experience Measurement and their impressions of the current offering. OHA is now in the process of striking a representative Steering Committee of hospital subject matter experts to advise on strategic matters and help shape the upcoming RFI (to be released this summer) and RFP (scheduled for release in the fall). Early strategic questions for the Steering Committee will include 1) how, as a community, we can coalesce around a common, validated, non-proprietary survey instrument, 2) realistic timelines for being ready to go to market, and 3) whether a temporary extension of the current contract is necessary to optimize sector readiness to go to market.

Stroke Quality-Based Procedure Implementation and Feedback Opportunity. (April 25, 2014) *Hybrid Program.* To support hospital and clinical leads with QBPs, the Ontario Hospital Association, in collaboration with the Ministry of Health and Long-Term Care, Health Quality Ontario, and the Ontario Stroke Network, hosted this one-day event focused on the implementation of the Stroke QBP, including the rollout of the Stroke QBP indicator baseline reports. This program was delivered

as a hybrid conference with 116 participants (54 delegates in person and 62 online connections). Note that multiple attendees are able to view the website per connection (for example, 10 participants in one room viewing the webcast).

DELIVERING VALUE

Launch of OHA Health Analytics Advisory Panel. The introduction of Health System Funding Reform (HSFR), with its continued implementation of Quality-based Procedures (QBPs) and ongoing refinement of the Health Based Allocation Model (HBAM), has created a new information and decision-making environment for hospitals. With QBPs in particular, there is a need to integrate clinical and administrative information across the hospital, and to review and interpret that information in new ways. Further, HBAM and funding restraint creates an urgency to address efficiencies. Currently, the informational and analytical requirements for hospitals managing in this new era are not fully understood.

To support hospitals, the OHA is launching a Health Analytics Advisory Panel. The panel's aim will be to provide guidance to the OHA regarding: development of new and enhanced capacity in hospitals in the area of health analytics; and defining the appropriate role for OHA leadership in this regard, with the overall goal of supporting hospital decision making in the new HSFR environment.

Small Hospital Election Messaging. During the OHA's Small, Rural and Northern Education Conference (held May 8 and 9, 2014), the OHA received a letter, addressed to conference delegates, from the Ontario Liberal Party. The letter noted the Liberals' commitment to supporting Ontario's small hospitals and the party's intention to provide small hospitals with an additional 1% base operating funding increase as part of the proposed Budget plan that triggered the current general election. Building on members' reactions to this letter, the OHA's Small Rural and Northern Provincial Leadership Council has endorsed a set of key messages that supplement the messaging surrounding the OHA's system-level health policy recommendations released recently. The SRN Council's supplementary messaging focuses on the unique needs of small hospitals and role that they play in their local health systems. The SRN Council will also be issuing a letter to the leaders of each of the three main political parties to seek out and secure, in writing, their ideas to support the hospitals and health systems in Ontario's rural and remote communities.

Workplace Safety and Insurance Board (WSIB). The OHA submitted a response to the WSIB's Benefits Policy Review, on behalf of our members. This submission was developed with the assistance of the Health & Safety Advisory Committee (HSAC) and several hospital experts in WSIB disability management. The submission was also sent to all hospital CHRO's for their review and comments before submission.

In April, a webcast explained the findings of Douglas Stanley's conceptual rate framework for the WSIB's framework modernization project and alignment of the report with OHA recommendations. Since that webcast, the WSIB has been working to develop an operational design for the framework; however, there have been delays due to unforeseen additional work necessary for the implementation of a new claims and account management system. This new system will be essential for the implementation of a new rate framework. The OHA will continue to monitor the work being done and advocate for the speedy implementation of a new, fairer rate framework.

The OHA continues to work with the WSIB's Chair and President as members of the Chair's Industrial and Manufacturing Advisory Committee. Through this committee, the OHA is able to ask

questions and provide feedback related to WSIB funding, sufficiency, claims management, and legislative and policy changes. The next meeting of the committee will be in June and the OHA will request information on the WSIB's response to a recent Workplace Safety and Insurance Act Tribunal decision on chronic mental stress claims.

The 2014 OHA Safety group will meet on June 9 in Toronto, and presentation will include the Ontario Fire Marshal's office discussing a new fire drill requirement and a discussion of OHS metrics. Validation audits of the work done by the 2013 Safety Group are still ongoing, and are expected to be completed in October 2014.

Health and Safety Advisory Committee (HSAC). The HSAC meeting in late April included a discussion with the Public Services Health and Safety Association (PSHSA) about their work within the sector and hospitals' utilization of their services. HSAC will look to contribute to two new initiatives being undertaken by the PSHSA through involvement in working groups and steering committees.

HSAC will be requesting data from the MOL on orders issued to hospitals and charges laid. This information will help hospitals understand gaps within their occupational safety programs.

Ministry Of Labour. The requirement for Worker and Supervisor Awareness training comes into effect on July 1, 2014 and the OHA has been working with the Prevention Office to better understand the requirements of the regulation and to ensure members have access to free training materials. The OHA has confirmed with the Ministry Of Labour (MOL) that although Inspectors will have the authority to write Orders for all training to be completed as of July 1, the MOL does expect Inspectors will take into account the complexity and time necessary to train all hospital personnel, provided the hospital has a training plan in place.

The OHA has also been providing feedback to the Prevention Office on the development of a MOL guidance document that discusses the definition of 'supervisor'; however, the resulting document did not provide the degree of clarity requested by the OHA. As a result, HSAC will be working on the development of a hospital-specific definition of 'supervisor' as it relates to the *Occupational Health and Safety Act*. The goal of this initiative will be to develop some alignment amongst hospitals, helping management and personnel to understand their responsibilities and liabilities.

The MOL recently released the revised requirements for Joint Health and Safety Committee (JHSC) member certification training. This training requirement details the training program and provider standards and will likely come into effect in early 2015. The OHA will continue to work with the MOL to understand the requirements and develop the Part 2 training requirements for healthcare.

Legislative consideration of Bill 146 ceased when the legislature dissolved for the election; however, given the potential impact this Bill would have had on hospitals, the OHA will continue to advocate in this area.

Executive Compensation. On May 9, 2014, OHA met with the Council of Universities to discuss the possibility of alignment with respect to advocacy on Executive Compensation and to gather further information on their action plan. The meeting was very informative and a complete overview of the guide developed for Hospital CEO's was reviewed. The COU indicated they would be discussing this issue further with their council and would contact OHA on next steps and possible strategies for future advocacy opportunities on this file.

HOOPP's Defined Benefits Advocacy Campaign. With a public debate about pensions gaining attention, HOOPP has launched a Defined Benefit (DB) Campaign to add their voice to the conversation and to speak on behalf of their members. The campaign supports DB pensions as a low-cost, well-managed approach to retirement income that can deliver security and increase senior dependence on taxpayer-funded income support programs. HOOPP members are welcomed to sign up for updates about the campaign on their website.

Communicable Disease Surveillance Protocol Committee (CDSPC). The CDSPC met in May, to review and update the Influenza, Scabies, Tuberculosis, and Varicella-Zoster protocols. Additionally, the Measles protocol was updated to align content with other Provincial and Federal guidance documents. The committee has also been working on updating and standardizing the protocol format and reminding hospitals about the importance of ensuring all people working within the hospital environment are in compliance with the protocols.

Section 21 Committee (Bi-partite Healthcare Advisory Committee to the Minister of Labour). Due to the OHA representative's request to review the committee's priorities and activities, the May Section 21 meeting was dedicated to setting new priorities, with the assistance of Ministry of Labour facilitators. This was requested by the OHA to reduce time and focus on out-of-date guidance notes related to legislation already in place.

Through the facilitated process, the committee determined they will focus on the development of guidance notes related to newer emerging legislative changes and practices. The committee will also focus on timelier publication of the resources they develop, and to better communicate their work through a more extensive communication strategy. The Section 21 committee also heard from the MOL about their proposed Safe at Work Ontario enforcement plan for 2014-2015.

Attendance Support Guide. The OHA staff and members of the Attendance Management Advisory Committee and Validation Committee are currently reviewing and providing feedback on the draft Attendance Support Guide prepared with Aon Hewitt's assistance. The final report will be released to members in late summer 2014.

Leadership Selection Diagnostic and Assessment Tools. The OHA Leadership Assessment Tools Working Group was formed and will hold a kick-off meeting in early July 2014. The working group will identify assessment tools currently available, how they can be utilized in health care, and which ones have been proven to be the most successful. A draft report will be developed in the coming months.

Quality Healthcare Workplace Awards. The 2014 Quality Healthcare Workplace Awards (QHWAs), a partnership of the OHA and the Ministry of Health and Long-Term Care's HealthForceOntario (HFO) with sponsorship from the National Research Corporation Canada, was launched via teleconference on March 26, 2014. Applications are due June 27, 2014 and awards will be announced to participating hospitals on October 24, 2014 with a public announcement at HealthAchieve on November 4, 2014. Success stories from the 2013 QHWAs are being celebrated in each edition of *healthscape*. A report highlighting learning and best practices from the 2013 QHWA submissions will be released in June.

PWC Saratoga Human Capital Effectiveness Survey. The OHA partnered with PWC Saratoga for the fifth consecutive year to provide hospitals and Community Care Access Centres with the opportunity to participate in the 2014 Human Capital Effectiveness Survey that benchmarks human resources and workforce metrics at the organizational level. The survey was launched to OHA

members on April 1, 2014 accompanied by three live survey tool demonstrations. The survey closed on May 23, 2014 with participation from 50 member organizations. An online report of results will be released in July and a summary presentation scheduled for September.

Administrative Physician Compensation Survey. On June 13, 2014, the OHA will launch the 2014 Administrative Physician Compensation Survey Report with participation from 57 hospitals. The report examines hospital compensation practices (e.g., stipends, time commitments, and common perquisites) as they pertain to the administrative component of select administrative physician positions, including Chief of Staff, Chief Medical Executive/Vice President of Medical Affairs, Program Chiefs, Department Chiefs, Division Heads, and Medical Directors in various specialty categories.

Research Salary Survey. On May 5, 2014, the Research Salary Survey Call for Participation was released. The survey collects data pertaining to 38 research positions in the hospital and academic communities. The survey closed on May 30, 2014 with the report to be released in July.

Regional Salary Survey. On June 16, 2014, the 2014 Regional Salary Survey Call for Participation will be released. The Regional Salary Survey collects compensation information for over 150 middle-management, professional, service, and clerical positions in Ontario hospitals. The report will be released in September 2014.

Non-Union Vacation Survey. On June 16, 2014, the 2014 Non-Union Vacation Survey Call for Participation will be released. This survey collects information on vacation entitlements for 11 non-unionized employee groups in Ontario hospitals. The report will be released in September 2014.

Non-Union Salary Planning Survey. On April 22, 2014, the 2014 Non-Union Salary Planning Survey Call for Participation was released. This survey examines salary information for the current fiscal year (April 2014- March 2015), and the previous fiscal year (April 2013-March 2014). The information collected is intended to assist hospitals in future budget planning exercises related to salary increases. Going forward, this survey will be conducted, edited, and accessed on the HR Exchange portal. This new tool allows for live reporting, in that participating hospitals can view the results of the other hospitals at any particular moment in time.

Hospital HR Benchmarking Survey. The 2014 Hospital HR Benchmarking Survey Call for Participation was launched on May 15, 2014. This survey collects data regarding Staffing, Overtime, Turnover, Vacancy, Age, Tenure, as well as Sick Leave. Information is collected at the job class level for permanent employees. Organization-wide information on overall sick leave information is also requested. The survey is due July 25, 2014 with the online reporting tool to be released this fall.

Unifor Economic Survey. Results from the 2014 Unifor Economic Survey were used to establish the base year total compensation model for the nine participating hospitals in the Northern Group and to understand the financial consequences of any changes to the collective agreement that are negotiated, mediated, and/or arbitrated. These results will be used during Unifor Bargaining (July 14 to 18, 2014).

UPDATE – PROVINCIAL LEADERSHIP COUNCILS

French Language Service Provincial Leadership Council. The FLS Council was established in 2013 to advise the OHA on issues affecting the delivery of health care services to the Francophone community. There are 12 regular members and three permanent guest members of the Council. The FLS Council hosted a breakfast session at the OHA's HealthAchieve 2013, featuring the Honourable Madeleine Meilleur, Minister Responsible for Francophone Affairs, and an FLS Education Conference on May 7, 2014. The conference targeted delegates from OHA Members that are "identified" or "designated" agencies under the French Language Services Act to provide health care services in French and English.

Provincial Human Resources Leadership Council. The HR Provincial Leadership Council will meet on June 23, 2014. Five new members have joined the Council in recent months to fill vacancies:

- Barbara Mildon, Vice-President Professional Practice & Research/ Chief Nurse Executive, Ontario Shores Centre for Mental Health Sciences
- Jeff Hohenkerk, Vice-President Human Resources, Medical Affairs & Support, Quinte Healthcare Corporation
- Michelle Cyr, Director, Office of Health Sciences, Council of Ontario Universities
- Richard Bedard, Chief Operating Officer & Vice-President Corporate Services, Alexandra Marine and General Hospital
- Rona Hamilton, Vice-President HR & Organizational Effectiveness, Queensway Carleton Hospital

The Council will continue to provide feedback to the OHA on several initiatives within the Provincial Health HR Work Plan 2013-16, including the Attendance Support Guide, the Leadership Assessment Tools report, and the Performance Management project.

OTHER INFORMATION

HealthAchieve. HealthAchieve has confirmed the Official Opening Keynote and the Feature Session Keynote speaker for 2014. The Official Opening Session scheduled for Monday, November 3 will showcase, Michael E. Porter, Harvard Business School Professor and his presentation will focus on Effective Health Care Policy: Improve Value for Patients and Reduce Costs. The Feature Session, scheduled for Tuesday, November 4, will feature three unique presentations by a selection of TED Fellows whose ground breaking work in various fields is making way for a better tomorrow. The speakers are: Vijay (Robert) Gupta, Founder of Street Symphony, TED Senior Fellow and Mental Health Advocate; Jessica Green, Director of The Biology and Built Environment Center and TED Senior Fellow; and Nina Tandon, CEO and Co-Founder of EpiBone, TED Senior Fellow. Both sessions will be broadcast to the HealthAchieve satellite locations in Thunder Bay and Halifax.

OHA's Corporate Customer Relationship Management System. In a collaborative effort, the Information Technology department and the President's Office are in the final stages of a re-design of the Corporate Customer Relationship Management system. This system houses information on our corporate members – hospital, associates, and affiliates. This new system will enable new functionality, easier access to data and enhanced reporting to support member engagement initiatives. The system will be used to record key interactions with members, track member participation in OHA committees, record responses to member satisfaction survey questions, and

([Bill 21](#)). We also anticipate that legislation related to a privacy framework for electronic health records will come shortly.

Outside of the Legislature, things have been accelerating just as quickly, with the Ministry of Health and Long-Term Care taking action on two new policy initiatives.

The first is a [review of the Quality Information and Protection Act](#). We understand that this review will be focused on the use of the legislation – i.e., how and when it is used in hospitals rather than the need for the legislation itself. We are currently working with the government to learn more about the full terms of reference for the review. Recognizing that this legislation is both important and complex and that it often garners the interest of media and certain interests groups, the OHA plans to continue playing a leadership role in ensuring that the reasons for and importance of the legislation remain widely known and valued.

The other relates to [fulfilling the Liberal's campaign promise to "cut or cap" hospital parking rates](#). As one of their first steps, they have reached out to us asking the OHA to play a part in developing guidelines based on leading practices that will be presented to the Minister for his consideration. The OHA is pleased to take on this role and will engage members extensively in our work. We're already working to establish a member working group to help guide our efforts and have also begun a review of hospitals existing policies. We know there are some already-existing policies that effectively balance hospitals' revenue-generation imperatives with the need to ensure that patients and their families do not face undue hardship when visiting the hospital, and we plan to use those policies as the cornerstone for our work.

Of course, all of this emerging work continues to happen amid our commitment to you to stay focused and centred on the longer-term priority items for the health system. Under the guidance of the OHA Board's post-election government transition committee we have been able to keep our focus, and as a result, our early outreach efforts with government have remained on four core areas: 1) strengthening health system funding reform, 2) initiating health system capacity planning, 3) moving forward with the next phase of the mental health and addictions strategy, and 4) labour relations reform. During these early discussions, it seems there is positive reception for work in each of these areas. We plan to have more to say separately on each of these areas in the short time ahead.

In the interim, please know that the advice you give to us about what will make the health system better is at the heart of all of our government relations efforts. I encourage you to please continue to share that advice with us as it is so central to the work we can do on your behalf. You are always welcome to call or email me any time. I look forward to hearing from you.

Anthony

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