

## BOARD OF DIRECTORS - OPEN MEETING

Date: Wednesday, November 9, 2016  
Meeting: 16:00 – 18:30 hours  
Location: Fenwick Conference Room, Watkins 2  
Dial-in: 1-855-344-7722 7673253#

Start	Time	Item	Topic	Lead	Purpose	Attachment
1. CALL TO ORDER, CONFIRMATION OF QUORUM, AGENDA & MINUTE APPROVALS						
1600	5 min	1.1	Chair's Remarks & Approval of Agenda	Thomson	Inform	Verbal
		1.2	Approval of Previous Minutes: September 29, 2016	Thomson	Decision	Draft minutes
2. CEO UPDATE						
1605	10 min	2.1	CEO Report Highlights & External Environment Update	Flett	Discuss	Written report
3. INTEGRATED BUSINESS						
1615	15 min	3.1	Addictions & Mental Health Redesign Project	Flett / Crawford	Decision	Briefing note & agreement
4. PATIENT CARE & PEOPLE COMMITTEE						
1630	10 min	4.1	Report on Engagement	Kelly	Discuss	Briefing note
1640	10 min	4.2	Patient Experience	Kelly	Discuss	Briefing note
5. MEDICAL ADVISORY COMMITTEE						
1650	5 min	5.1	COS Report	Zelt	Discuss	Written report
1655	15 min	5.2	Medical Assistance in Dying Policy	Zelt	Discuss	Presentation @ meeting
6. FINANCE & AUDIT COMMITTEE						
7. GOVERNANCE COMMITTEE						
1705	5 min	7.1	3SO (Shared Support Services Southeaster Ontario) – Membership Agreement Extension	Janiec/Flett	Decision	Briefing note
1710	5 min	7.2	Board Officers Succession Plan	Janiec/Thomson	Inform	Briefing note
8. IN-CAMERA SEGMENT						
1715	5 min	8.1	Motion to Move In-Camera (agenda items #9-11)	Thomson	Decision	Verbal
11. REPORT ON IN-CAMERA DECISIONS & TERMINATION						
1825	5 min	11.1	Motion to Report the Decisions Approved In-camera	Thomson	Inform	Verbal
		11.2	Date of Next Meeting & Termination	Thomson	Inform	Verbal
12. IN-CAMERA ELECTED MEMBERS SESSION & CEO ONLY						
13. IN-CAMERA ELECTED MEMBERS SESSION WITHOUT MANAGEMENT PRESENT						

## BOARD OF DIRECTORS: OPEN MEETING OF NOVEMBER 9, 2016

A meeting of the Board of Directors of Kingston General Hospital was held on Wednesday, November 9, 2016 in the Fenwick Conference Room, Watkins 2, of Kingston General Hospital from 16:00 to 18:25 hours. The following are the open minutes.

Elected Members Present (voting): Lynn Bowering, Donna Janiec, Diane Kelly, Susan Lounsbury, Geoff Quirt, David O'Toole, Axel Thesberg (phone), George Thomson (Chair), Bill Robertson, Glenn Vollebregt.

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

Ex-officio Members Present (non-voting): Silvie Crawford, Jim Flett, Ron Pokrupa, David Zelt.

Regrets: Peng Sang Cau.

Guests: Dr. Ghadah Abdullah, Deputy Director of Nursing/Critical Care, Emergency and Dialysis Units, King Abdulaziz University Hospital, Saudi Arabia.

Administrative Staff: Rhonda Abson (Recording Secretary), Sandra Carlton, Brenda Carter, J'Neene Coghlan, Roger Deeley, Troy Jones, John Lott.

### 1.0 CALL TO ORDER, CONFIRMATION QUORUM, AGENDA & MINUTE APPROVALS

#### 1.1 Chair's Remarks & Approval of Agenda

The Chair called the meeting to order, confirmed quorum and advised members that David O'Toole and Geoff Quirt would be late joining today's meeting. Regrets have been received from Peng-Sang Cau and the Chair confirmed that Axel Thesberg, who was joining by phone, was able to hear the proceedings. Board members were reminded of the importance of their attendance during the in-camera segment of the meeting when key decisions would be required to support KGH/HDH integration. The Chair introduced and the Board welcomed Dr. Abdullah to the meeting who has accepted a leadership observational opportunity with Silvie Crawford.

The date of the next KGH Board meeting is Thursday, December 8, 2016, followed by a reception. Location, timing and cost per person for the reception will be confirmed in advance.

A special 25<sup>th</sup> anniversary gala will be held on Saturday, December 3, at the Marriott Residence Inn on Kingston's waterfront to celebrate the Museum of Health Care. Interested board members will be able to purchase tickets directly from the Museum's website and all proceeds from the "Artefact or Artefiction" event will benefit the Museum's public programming and exhibitions. Ticket prices range from \$75.00 to \$150.00 per person.

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The Chair thanked Board members who recently attended the “Cheers to Your Health” event at the at the Isabel Bader Centre on October 29.

A brief update was provided on recent integration activities. The Joint Steering Committee continues to monitor the SE LHIN / Ministry approval process to ensure legal counsel deadlines are being met. The next important step in the process is for the release of the key agreements to the Ministry of Health and Long-term Care. A community engagement survey was launched and the results to-date have been favourable and support moving the project forward. Canada Revenue Agency for charitable status has been filed and we await further detail.

George Thomson reported that the Governance Working Group has prepared the first draft Bylaw and legal counsel will be reviewing and the group has started discussions regarding the Chief of Staff selection process. The working group is also preparing the framework for Phase 2 recruitment for the remaining four community board vacancies. Once the full Board is in place, the working group will then define the process for the selection of the Chair and Vice Chair of the inaugural board. A Joint Nominations Committee has been struck to oversee the interview process for Phase 2 board member selection process.

The Transition Team, co-chaired by Jim Flett and Dr. David Pichora, continues to meet on a regular basis and a work plan has been developed highlighting all the deliverables that must be met between now and April 1.

The Chair invited any declarations of conflict of interest; none recorded. The agenda and related materials were pre-circulated in advance of the meeting.

Moved by Glenn Vollebregt, seconded by Bill Robertson:

THAT the agenda be approved as circulated.

CARRIED

### 1.3 Approval of Previous Minutes: September 29, 2016

Moved by Susan Lounsbury, seconded by Lynn Bowering:

THAT the open minutes of the KGH Board of Directors meeting held on September 29, 2016 be approved as circulated.

CARRIED

## 2.0 CEO UPDATE

### 2.1 CEO Report Highlights & External Environment Update

Prior to inviting the CEO to present highlights from his written report, the Chair recognized the contributions of Dr. David Zelt who recently celebrated 25 years of service to Kingston General Hospital.

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The CEO's written report was pre-circulated with the agenda package. Jim Flett reported that KGH has now received the administrative detail letter from the capital branch to support Phase 2 redevelopment planning. Brenda Carter will be leading the project for KGH with members of the executive team in support. Further discussion is needed at the Finance and Audit Committee meeting in terms of governance oversight of the project and a further update will be brought back to the Board in this regard. Discussion focused on the need to develop a risk management plan to support the various phases of the redevelopment project. Agnew Peckham has been engaged and is developing go forward plans. Timing with government will be an important factor; the team will focus on preparing the Stage 2 report by the summer of 2017.

On Wednesday, October 19, KGH senior leaders welcomed ADM Patricia Li to KGH for a series of meetings and a tour of the emergency department. An outline of the areas of focus was included in the CEO staff report.

This year's Tim Horton's Smile Cookie campaign raised almost \$72,000 for the purchase of special NICU equipment. Thank you for Board members and volunteers who participated in this year's fundraiser.

Kevin Empey has been appointed Supervisor at Brockville General Hospital. The duration of the appointment is expected to be between 8-12 months and the BGH Board has now been disbanded.

Nominations are underway for the KGH Team Awards. A Board sponsored annual award program recognizing the contributions of teams demonstrating excellence in "Care", "Knowledge" and "Leadership", individuals and teams are nominated and a submissions are reviewed by the executive team along with a member of the Board. The Chair invited Board members to consider participating on this year's selection committee; please let the recording secretary know if you have time available for this important initiative.

Appended to the CEO Report was a copy of the recent Briefing Note to the SE LHIN Board of Directors regarding the hospital consolidation under the *Public Hospitals Act* of KGH and Hotel Dieu.

Dr. Ron Pokrupa arrived at 16:20 hours.

### 3.0 INTEGRATED BUSINESS

#### 3.1 Addictions & Mental Health Redesign Project

The need for the redesign of Addictions and Mental Health Services in the LHIN has been discussed on several occasions at the Board and committee level. The SE LHIN developed a project plan which began in January 2013 which detailed the planning and redesign elements informed by addictions and mental health providers. The proposed new service delivery arrangement includes a new governing structure and funding model. In preparing the recommendation for the KGH Board, the D.E.C.I.D.E. framework has been applied to ensure alignment with KGH's guiding principles that support decision-making. The hospitals retained Kathy O'Brien with DDO Health Law to provide legal advice. All three Board committees have been briefed on the redesign at their September and October committee meetings.

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Moved by Geoff Quirt, seconded by Diane Kelly:

THAT the Board of Directors of Kingston General Hospital approves the contract for Addiction and Mental Health Services between KGH and the Kingston Frontenac Lennox and Addington Addiction and Mental Health Services being the AMH Agency.

CARRIED

#### 4.0 PATIENT CARE & PEOPLE COMMITTEE

##### 4.1 Report on Engagement

At the recent Patient Care and People Committee, members were briefed on the deliverables required under the *Excellent Care for All Act* regarding staff, physician and volunteer engagement. Surveys were conducted in 2013 and again in the Fall of 2015. The 2015 survey results, analysis and roll-out plan were made available to all staff and physicians in April 2016. Volunteer Services used a survey provided for by the Professional Association of Volunteer Leaders-Ontario. The results from this survey were analyzed and a plan for optimizing volunteer engagement to enhance the patient and family experience has been developed.

Silvie Crawford confirmed that the senior team is continually monitoring and ensuring that the deliverables are being met. Leaders have access to the results, tools, templates, and talking points to assist with the overall roll-out to staff. People Services team members have held individual meetings with teams and worked with various groups to develop engagement plans. It is important for teams to feel ownership and be accountable for the plans as they are developed to address areas requiring attention/action. A similar approach to both the physician and volunteer group has also been implemented.

The 2016-17 KGH Integrated Annual Corporate Plan incorporated a new target this past year to ensure that "the top three opportunities for improvement in engagement are addressed." The tactic status report aligns this tactic to the three stakeholder groups identified above.

Dr. David Zelt highlighted the fact that many of the physician issues relate to resources (i.e. patient access, etc.) While efforts are made to address efficiencies within the system, being more resourceful with the limited resources available is another important consideration amongst the physician population. Discussion focused on the importance of engagement during integration. Dr. Zelt noted that the Joint Program Council, comprised of Program Medical and Operational Directors, recently met to focus on clinical strategy opportunities. It was suggested that holding Town Hall meetings between now and April may be another avenue for physician engagement.

Building trust, listening and addressing concerns, sitting down with staff to discuss and review the overall results and plans to engage all critical elements to support success. Recognizing that survey results are a 'point in time' is important; ensuring the proper mechanisms are in place for staff/physicians and volunteers to have an opportunity to engage is important. Team engagement efforts will continue to be monitored; a communications plan on engagement progress and updates has been developed; People Services staff will

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follow up on Director Team Engagement Plans; touch stone surveys will continue; and work is already underway to set metrics and tactics for 2017/18.

David O'Toole arrive at 16:40 hours.

### 4.2 Patient Experience

At the October Patient Care and People Committee meeting, members received a briefing on KGH's patient experience activity. Quality will be most effectively managed through implementation of an integrated quality management framework focusing on patient safety, patient experience, performance management, integrated risk management, and quality improvement and measurement.

Starting in April 2016, the patient satisfaction surveys changed from the National Research Corporation Canada (NRCC) to the Canadian Institute for Health Information, Ontario Hospital Association, Accreditation Canada endorsed "Canadian Patient Experiences Survey – Inpatient Care" and the "Ontario Emergency Department Patient Experience Survey". NRCC continues to mail out and compile KGH's patient satisfaction surveys to a randomized sample of patients in medicine, surgical, cardiac and emergency inpatients. Results from the surveys are shared with a number of KGH Program Councils, Committees, the Patient and Family Advisory Council, and the Patient Care and People Committee. The new surveys now group questions under designated dimensions of care, some of which are the same as the old survey yet some of the subset questions are not. Outlined in the briefing note was a breakdown comparison of each dimension; Dr. Zelt noted that, because the targets have changed due to the new survey system, the trending will be different.

The briefing also included an overview of the Patient Relations Program at KGH which includes the top five patient concerns by category as well as an overview of the average resolution time (in days) to address concerns. Patient feedback forums allow care team members to meet with a patient/family member and hear, firsthand, positive outcomes as well as opportunities for improvement. These forums are the responsibility of each program.

### 5.0 MEDICAL ADVISORY COMMITTEE

#### 5.1 Chief of Staff Report

The written report of the Chief of Staff highlighting the discussion from the October Medical Advisory Committee meeting was provided to Board members in the advance of the meeting. The annual report of the Infection Control Committee was discussed at the most recent MAC meeting. Hand hygiene compliance continues to trend in the positive with 92% compliance for September. Dr. Zelt reported that Dr. Gerald Evans was recently published in the Journal of Infection Control and Hospital Epidemiology to assess clinically relevant outcomes after complete cessation of control measures for VRE. A link to the article will be forwarded to Board members.

On October 26, 2016, the Canadian Institute for Health Information (CIHI) and the Canadian Patient Safety Institute (CPSI) released "*Measuring Patient Harm in Canadian Hospitals*" to develop a new measure of

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hospital harm that is linked to evidence informed practices to reduce the occurrence of harm. The Patient Care and People Committee will be reviewing the report at its November meeting.

On November 30, CIHI will be releasing data updates to the "Your Health System" website. This release will have no new indicators or a data preview period. Hospital-specific indicators have been updated in the areas of hospital deaths, total time spent in emergency for admitted patients, and emergency wait time for physician initial assessment. David Zelt advised that the management team will review the results and the Patient Care and People Committee will be briefed.

### 5.2 Medical Assistance in Dying Policy

Dr. David Zelt presented an update to the Board of KGH's policy on Medical Assistance in Dying. The presentation focused on the recent Supreme Court of Canada ruling; the criteria for eligibility and medical standards that support a patient requesting support and the definition of a grievous medical condition. KGH's policy was developed by a multidisciplinary group comprised of physicians, palliative care specialists, community/family physicians, nursing, pharmacy, allied health and a Patient Experience Advisor. The KGH policy was adapted from The Ottawa Hospital's policy as well as the University Health Network and University of Toronto's Joint Centre of Bioethics. The Medical Advisory Committee has been consulted throughout the development of the policy and, at the October MAC meeting, the policy was endorsed. An overview of the consent and patient assessment requirements were highlighted during the presentation. The Board received an overview of the documentation required throughout the process and the role of health care practitioners in the areas of pain management, social work, spiritual support, and patient and family support requirements. Further discussions will take place with Dr. Glenn Brown, Head of Family Medicine, as well as family health care teams. While the KGH site will be available to provide the service; faith-based organizations have already confirmed that they would not have a role in providing such care. Education sessions have been developed and are being delivered to health care professionals.

### 6.0 FINANCE AND AUDIT COMMITTEE

No agenda items were identified by the committee.

### 7.0 GOVERNANCE COMMITTEE

#### 7.1 3SO (Shared Support Services Southeastern Ontario) Membership Agreement Extension

As outlined in the briefing note, management is recommending a one-year renewal of the current 3SO Master Services Agreement from 2018 to 2019.

Moved by Donna Janiec, seconded by Diane Kelly:

THAT the KGH Board of Directors endorses the recommended one (1) year renewal of the current 3SO Master Services Agreement and Membership Agreement.

CARRIED



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### 7.2 Board Officers Succession Plan

Donna Janiec, Chair of the Governance Committee, drew attention to the briefing note noting that the committee is responsible for overseeing the succession planning process for these positions. While it is recognized that the Kingston Academic Health Sciences Board will have in place its own succession process, if integration is delayed for any reason, it is important for the KGH Board assures itself that a plan is available. Jim Flett noted that both George Thomson and Donna Janiec have agreed to continue to serve, if required.

### 8.0 IN-CAMERA SEGMENT

#### 8.1 Motion to Move In-Camera

Moved by Diane Kelly, seconded by Glenn Vollebregt:

THAT the Board move into an in-camera session.

CARRIED

### 11.0 REPORT ON IN-CAMERA DECISIONS & TERMINATION

#### 11.1 Motion to Report the Decisions Approved In-Camera

Moved by Axel Thesberg, seconded by Donna Janiec:

THAT the Board rise from committee of the whole and the Chair report.

CARRIED

The Chair reported on the following in-camera decision/discussion items: the board approved the in-camera minutes of the September in-camera board meeting; the board received the final September Patient Care and People, Governance, and Finance and Audit Committee minutes; the board received the draft October Patient Care and People and Finance and Audit Committee minutes and the November 1 Governance Committee minutes; the board approved a number of medical staff appointments and reappointments and housestaff appointments; the board approved a series of Agreements in support of the KGH and HDH integration and their approval will be announced at a later date once all parties to the documents have considered; the board approved a change to the pay for performance reporting for 2016-17; the board approved the legacy board members appointments to the new Kingston Academic Health Sciences Board which will be announced at a later date once all parties have considered this recommendation.

#### 11.2 Date of Next Meeting & Termination

The Chair confirmed that the date of the next meeting is Thursday, December 8, 2016 starting at 16:00 hours in the Fenwick Conference Room, Watkins 2.

The meeting terminated at 18:25 hours on motion by Geoff Quirt.



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### 12.0 IN-CAMERA ELECTED MEMBERS SESSION & CEO ONLY

A brief session was held.

### 13.0 IN-CAMERA ELECTED MEMBERS SESSION WITHOUT MANAGEMENT PRESENT

A brief session was held.

George Thomson  
Chair

## JIM FLETT, INTERIM PRESIDENT & CEO

Submitted to: Board of Directors

Date of Issue: November 2, 2016

Period Covered: September 22, 2016 to November 2, 2016

This note provides an update on activities inside and outside KGH that relate to our mission and annual corporate plan that have been underway since our last Board meeting on September 29, 2016. As always, I am happy to take any questions on items in the report.

### 1. General Update – KGH activities

Latest editions of KGH This Week are appended to my report for your information.

### 2. Patient- and Family-Centred Care Month is Recognized at KGH

I wanted to share the following message from Angela Morin and Daryl Bell, Co-chairs of KGH's Patient and Family Advisory Council, in recognition of all that our advisors do.

*October is Patient- and Family-Centred Care month and Angela and I are taking this opportunity to thank each and every one of you for taking the time to partner in improving the patient experience.*

*Some of you have been a part of this movement from the very beginning in 2010. It's amazing how much we have accomplished in those six and a half years. Sometimes we forget just how far we have come. In the beginning there was resistance and reluctance on the part of staff and physicians and also on the part of patients and families. No one knew how this program would evolve, if it would be a token gesture without any real worth or a valued and vital movement and where it would ultimately lead.*

*Until November 2009 KGH still had restrictive visiting hours and now families are welcome to be with their loved one 24/7. There was a time it was unthinkable to have patients and families at decision making tables. Now it is just expected. Since 2010 there have been over 375 opportunities for patients and families to partner with staff and physicians. Having patients on hiring interviews wasn't even on the radar and now Patient Experience Advisors have participated in over 400 interviews and are valued members of the team. Every month before our CEO welcomes the new hires it is a Patient Experience Advisor who welcomes them. Today we have a Patient and Family Advisory Council for KGH, one for the Regional Cancer Program and another for the Regional Renal Program where Patient Experience Advisors partner with staff. It is truly remarkable.*

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*Your passion and commitment have made KGH an international leader in Patient- and Family-Centred Care. We will never know the impact we have had on organizations from literally around the world. How incredible is that!*

*Patient- and Family-Centred Care is all about partnership so this is a thank you to the patients, families, staff and physicians who saw the incredible potential in working together.*

*Looking forward to continuing to be better together!*

*Angela Morin and Daryl Bell  
Co-chairs KGH Patient and Family Advisory Council*

### **3. Provincial Patient and Family Advisory Council**

Ontario is creating a Patient and Family Advisory Council to advise government on health policy priorities that have an impact on patient care and patient experiences in Ontario. The council will involve patients, families, and caregivers in the policy development process, ensuring that their needs and concerns are fully understood, with the aim of making the system become more responsive, transparent and accountable. Members of the council will be chosen through a public process that includes opportunities to nominate suitable candidates.

Improved and expanded patient engagement is part of the government's plan to build a better Ontario through its Patients First: Action Plan for Health Care, which provides patients with faster access to the right care, better home and community care, the information they need to live healthy, and a health care system that is sustainable for generations to come. The Chair and members will be announced in the winter of 2017.

### **4. Ministry of Health and Long Term Care Visit by Assistant Deputy Minister (Direct Services)**

On Wednesday, October 19, we welcomed ADM Patricia Li and her team to KGH for a series of meetings and tour of our Emergency Department. During the visit, we had an opportunity to provide an update on the Health Care Tomorrow Project, discuss enabling technology opportunities, talk about emergency department patient flow (and our GOOG – “Get out of Gridlock” initiative), discuss ambulance offload and describe the new Hastings-Quinte hospital bypass protocol. The Ministry also requested an opportunity to demonstrate *Wellsoft's Emergency Department Information System (EDIS)* in Emergency. The EDIS system allows for electronic patient, admission and registration tracking, nursing/physician/and allied health documentation, order entry and tracking, results reporting, unresolved issues tracking, prescription entry, links to hospital policies and protocols. The Ministry group also spent time discussing data trends and analytics in the ER area.

### **5. Meeting with MPP Sophie Kiwala**

On Wednesday, October 12, I joined Cathy Szabo, Dr. David Pichora, and representatives of the hospital Boards for breakfast with our MPP. This provided us with a great opportunity to brief her on a number of initiatives such as the Healthcare Tomorrow Project and KGH / HDH integration. We also thanked MPP Kiwala for her support of current redevelopment projects as well as her commitment to see KGH receive its planning grant to support Phase 2 redevelopment.

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## 6. Southeast Local Health Integration Network

On October 31, 2016, the SE LHIN Board discussed the attached briefing note relating to the hospital consolidation under the Public Hospitals Act for HDH and KGH. The briefing document was based on a KGH / HDH submission made to the SE LHIN on October 7, 2016. On November 1, Sherry Kennedy, Chief Operating Officer of the LHIN confirmed that the Board endorsed management's recommendation to support the proposed creation of a new hospital corporation under the *Public Hospitals Act*.

In other initiatives, a number of us continue to work on Healthcare Tomorrow initiatives. While our focus has been narrowed somewhat, our plan is to bring back further updates on the labs, information technology, and decision support services projects.

## 7. Health Care Accord

Last month, Canada's federal and provincial health ministers met to begin negotiating a new health funding formula. Federal Health Minister Jane Philpott has agreed with her provincial and territorial colleagues on new areas of care that need investment, but the health ministers punted more difficult negotiations to Prime Minister Justin Trudeau and the premiers after hitting a stalemate over how much Ottawa should pay to sustain the existing system.

The Federal Health Minister clearly has a different idea than the premiers about how much the federal government should contribute annually to the Canada Health Transfer. The Federal Minister has signaled that the current 6% transfer payment (or \$34B in 2015-16) will be reduced unless the provinces come up with other innovative ideas for improving health care.

Dr. Hoskins is on the record stating that it is more important to look at the diminishing share of the health-spending pie that comes from Ottawa. In Ontario's case, just under 25 per cent of the dollars that are spent on health are provided by the federal government. So a 6-per-cent increase in that would amount to an increase in our health-care budget of about 1.5 per cent. He noted that Ontario's health-care budget has never been at that low level of growth.

## 8. KGH Team Awards Nominations

In March 2011, we launched a board sponsored annual award program at KGH to recognize the contributions of teams who are demonstrating excellence in each of the domains of our mission: Care, Knowledge and Leadership. A call for nominations has gone out to the organization **and we are now seeking one board member** to participate on the panel to evaluate submissions and help select the recipients. The selection meeting will be held in early January – please let Rhonda know if you would like to participate on this.

A special event honoring the winners of award will take place during our Community Showcase Week on Thursday, January 26 at 1:00 pm and we welcome board members to join George Thomson and other members of the executive team in the celebration. Further details will be provided in the New Year. Pictures of the winning teams each year are posted in the Award display area in Watkins 2 Lobby.

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## **9. KGH Long Service Awards Dinner**

On Monday, November 14, George Thomson will join members of the executive team at our annual long service dinner. A celebration of KGH staff, physicians and volunteers who have contributed 25+ years of service to Kingston General Hospital. This year, Dr. David Zelt will be inducted into the "25 Year Club" – our congratulations to David on this significant milestone achievement.

## **10. KGH Auxiliary – Harvest Bazaar 2016**

This year's annual bazaar will be held on November 30, 2016 in the Environmental Exposure Unit (old cafeteria) on Dietary 3. An assortment of baked goods, silent auction items and other holiday gift giving items will be available from 10:00 to 2:00 pm. A great way to support the Auxiliary in their fundraising efforts. If you are in the area, please drop by on November 30.

The KGH Auxiliary is about to launch the 2016 Teddy Bear Campaign under the leadership of Heather Breck and Alice Robertson. This year's goal is to raise \$20,000 for the purchase of equipment in Pediatrics. We hope that all Board members will consider purchasing a bear this year to support such a great cause.

## **11. Providence Care Celebration – SAVE the date – December 3**

A very special event will be held on December 3 when Providence Care celebrates the substantial completion of their new hospital at King West. The event will start at 14:00 hours – and further details will follow.

## **12. University Hospitals Kingston Foundation**

On October 24, I participated in UHKF's orientation session for Board members. Participants were provided with an overview of the Foundation's operations, best practices and new trends in the charitable sector, as well as the legal obligations of board members. Each hospital CEO was invited to provide an overview of the programs and services provided.

**The Masquerade Ball** – A lovely evening was held on October 29, 2016 at the Isabel Bader Centre for Performing Arts in support of Kingston hospitals. Thanks to all board members who were in attendance – it is so important for all of us to spend time with donors in our community and show our support of events like this. Thank you.

**Tim Hortons' Smile Cookies Campaign** – Yet another very successful year! On November 2, UHKF announced that J. E. Agnew Foods, Compass and Sodexo Tim Hortons raised **\$71,814.08** designated for special NICU equipment. Congratulations and thank you to all staff and board members who volunteered their time in early September at local Tim Horton locations - this is the biggest year yet! A cheque presentation was held on Wednesday November 2 at the J. E. Agnew Food Services office located at 83 Terry Fox Drive.

## **13. Brockville General Hospital**

The Province has appointed Kevin Empey as Hospital Supervisor for the Brockville General Hospital, to address the organizational challenges identified by the South East Local Health Integration Network Board. As outlined in the government's press release, Kevin will take the necessary steps to improve the functioning of the hospital, which includes re-establishing a board. A well-respected, senior health care leader with a strong financial

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background and a track record of successful hospital management Kevin recently served as President and Chief Executive Officer of Lakeridge Health from 2008 to 2016.

A Chartered Accountant and graduate of Harvard's Advanced Management Program, Kevin is also a guest lecturer at the University of Toronto, and York University. He has been heavily involved in transforming hospital services through the creation of shared clinical and support services and private/public partnerships. In April 2016, he was appointed as Chair of Ontario's Healthcare Sector Supply Chain Strategy Expert Panel. He previously served on the board of the Ontario Hospital Association.

#### 14. Ontario Hospital Association Announces New Chair

Following the OHA annual general meeting in September, Jamie McCracken, Board Chair at The Ottawa Hospital, has been named Chair of the OHA Board. Mr. McCracken has served on the OHA Board since 2011. Mr. McCracken has been a teacher, department head, vice principal, principal, supervisory officer, associate director and director of education. He has also lectured in the principal and supervisory officer graduate courses at the University of Ottawa and Queens University. He has also been an active member on the Boards of a number of organizations in Ottawa including: Campaign Chairperson, United Way of Ottawa; Chairperson, United Way Board of Directors; Chairperson, Success by Six; President, Catholic Education Foundation of Ottawa; director, Shepherds of Good Hope; and director, University of Ottawa Heart Institute.

#### 15. Health Quality Ontario Releases "Measuring Up 2016"

2016 marks the 10th year Health Quality Ontario (HQP) has been reporting on the performance of the health system and the health of those living in Ontario. *Measuring Up 2016* incorporates new areas that it monitors and measures, and has identified positive trends as well as areas that will require more attention. To learn more about the results of Health Quality Ontario's yearly report and watch a video of the highlights, visit [www.hqontario.ca/MeasuringUp2016](http://www.hqontario.ca/MeasuringUp2016)

#### 16. Legislative Updates

**Bill 41 *Patient First Act*** – on October 27, the Legislature voted on the second reading of the *Patients First Act* or Bill 41. As predicted, this Bill has now moved to the Standing Committee on the Legislative Assembly for further discussion. Many MPPs and Cabinet Ministers have raised the hospital sector's concerns regarding this Bill. No hearings on the Bill have been scheduled at this point in time. Kathy O'Brien with DDO Health Law has prepared an excellent summary of the changes from Bill 210 to Bill 41 – available [here](#).

I would be more than pleased to respond to questions from my report at our November 9 meeting.



Jim Flett  
Interim President and Chief Executive Officer

Att.