

## BOARD OF DIRECTORS - OPEN MEETING

Date: Monday, June 26, 2017  
 Meeting: 1600 – 1845 hours  
 Location: Hotel Dieu Hospital  
 Henderson Board Room, Sydenham 2  
 Dial-in: 1-855-344-7722 7673253#

Start	Time	Item	Topic	Lead	Purpose	Attachment
<b>1.0 CALL TO ORDER, CONFIRMATION OF QUORUM, AGENDA CONFIRMATION</b>						
1600	5 min	1.1	Opening Reflection, Chair's Remarks, Quorum Confirmation, Agenda Approval	O'Toole	Decision	Draft agenda
		1.2	Approval of Previous Minutes: May 29, 2017	O'Toole	Decision	Draft minutes
<b>2.0 CEO UPDATE</b>						
1605	5 min	2.1	CEO Report Highlights & External Environment Update	Pichora	Discuss	Written report
<b>3.0 UNIVERSITY HOSPITALS KINGSTON FOUNDATION</b>						
1610	5 min	3.1	CEO Report	Cumming	Inform	Verbal
<b>4.0 INTEGRATED BUSINESS</b>						
1615	10 min	4.1	KHSC Board & Committee Work Plans 2017-18	O'Toole/Vollebregt Pichora	Decision	Briefing note + work plans
1625	15 min	4.2	Annual Corporate Plan 2017-18 + Strategy Performance Index	Pichora/Bardon	Decision	Briefing note + ACP + SPI
<b>5.0 MEDICAL ADVISORY COMMITTEE</b>						
1640	5 min	5.1	COS Report Highlights	Fitzpatrick	Discuss	Briefing note
1645	5 min	5.2	Appointments, Reappointments to the Professional (Medical, Dental, Midwifery and RN Extended Class) Staff	Fitzpatrick	Decision	Briefing note
1650	5 min	5.3	Housestaff 2017/18	Fitzpatrick	Decision	Briefing note
<b>6.0 PATIENT CARE, QUALITY &amp; PEOPLE COMMITTEE</b>						
1655	15 min	6.1	Patient Flow Update	McCullough	Discuss	Briefing note
1710	5 min	6.2	OHA Governance Overview for Quality & Patient Safety	McCullough	Discuss	Toolkit
1715	10 min	6.3	Accreditation 2018 – Governance Standards	McCullough	Discuss	Briefing note + standards
<b>7.0 FINANCE &amp; AUDIT COMMITTEE</b>						
1725	25 min	7.1	Redevelopment Phase 2 Update <ul style="list-style-type: none"> <li>• MOHLTC Capital Planning Process Overview</li> <li>• Phase 2 Project – Preparing the Functional Program</li> <li>• Hospital Funding &amp; Local Share Requirements</li> </ul>	Thesberg/ Carter	Discuss	Briefing note + presentation  Briefing note
1750	5 min	7.2	Investment Policy, Guidelines & Compliance Reporting	Thesberg	Decision	Briefing note + guidelines

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<b>8.0 GOVERNANCE COMMITTEE</b>						
1755	10 min	8.1	Approach to New KHSC Strategy	Vollebregt/Bardon	Discuss	Verbal
1805	5 min	8.2	Board Education Plan	Vollebregt	Inform	Briefing note
<b>9.0 IN-CAMERA SEGMENT (if required)</b>						
1810	5 min	9.1	Motion to Move In-Camera (agenda items #9-11)	O'Toole	Decision	Verbal
<b>11.0 REPORT ON IN-CAMERA DECISIONS &amp; TERMINATION</b>						
1830	5 min	11.1	Motion to Report the Decisions Approved In-camera	O'Toole	Inform	Verbal
1835		11.2	Date of Next Meeting & Termination	O'Toole	Inform	Verbal
<b>12.0 IN-CAMERA ELECTED MEMBERS SESSION &amp; CEO ONLY</b>						
<b>13.0 IN-CAMERA ELECTED MEMBERS SESSION WITHOUT MANAGEMENT PRESENT</b>						

## BOARD OF DIRECTORS OPEN MEETING: JUNE 26, 2017

A regular meeting of the Board of Directors of the Kingston Health Sciences Centre was held at the Hotel Dieu Hospital site on Monday, June 26, 2017 from 1600 to 1830 hours in the Henderson Board Room, Sydenham 2. The following are the open minutes.

Elected Members Present (voting): Kirk Corkery, Alan Cosford, Michele Lawford, Bruce Lounsbury, Sherri McCullough, David O'Toole (Chair), David Pattenden, Axel Thesberg, Glenn Vollebregt and Sandy Wilson.

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

Ex-officio Members Present (non-voting): Silvie Crawford, Dr. Michael Fitzpatrick and Dr. David Pichora.

Regrets: Peng-Sang Cau, Dr. Jay Engel and Brenda Hunter.

Administrative Staff: Rhonda Abson (Recording Secretary), Elizabeth Bardon, Dale Best, Sandra Carlton, Brenda Carter, J'Neene Coghlan, Roger Deeley, Troy Jones, Mike McDonald, Allan McLuskie, Steve Miller and Dr. Ron Pokrupa, Incoming President of the Medical Staff Association for Dr. Jay Engel.

### 1.0 CALL TO ORDER, CONFIRMATION OF QUORUM, AGENDA CONFIRMATION

#### 1.1 Opening Reflection, Chair's Remarks, Quorum Confirmation & Agenda Approval

David O'Toole opened the meeting with a reflection, confirmed quorum with the Secretary, and ensured that members joining by phone could hear the proceedings.

The Chair called the meeting to order and noted that the next meeting of the Kingston Health Sciences Centre Board would be held on Monday, August 21, 2017 at 1600 hours at the Hotel Dieu site. The date of the September Board meeting is Monday, September 25, 2017 at 1600 hours. The Chair noted that KHSC attending physician, Dr. Karen Graham, was scheduled to join the Board today for a discussion on patient flow. Due to unforeseen circumstances, Dr. Graham is unable to attend and arrangements have been made for her to join the September 25 Board meeting.

Over the summer months, the Chair will meet individually with each member of the Board. The recording secretary will follow up with members to provide dates/times for these meetings.

The Australian Commission on Safety and Quality in Health Care has engaged the Nous Group, a management consulting firm, to review organizations that are undertaking first-rate patient centred care. The group will look to survey and tour one hospital in the United States, Sweden, the United Kingdom, and Canada, along with four hospitals in Australia. David O'Toole advised that he was approached by NOUS to confirm KHSC interest in participating as the Canadian hospital. Further update will be provided once KHSC participation is determined as well as confirming whether the end report/results will be shared with KHSC.

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The Chair extended congratulations to Michele Lawford on her upcoming appointment as General Counsel and Chief Privacy Officer, VON Canada, effective July 4, 2017. Earlier today, McDougall Insurance & Financial Group delivered their financial commitment to support redevelopment projects at the Kingston Health Sciences Centre.

In advance of today's meeting, an updated MAC recommendations briefing note was distributed to members. A slight amendment is required to a new term appointment in the Department of Oncology. The Chair also recommended an additional in-camera agenda item relating to the Phase 2 redevelopment project update.

No declarations of conflict were identified.

Moved by Glenn Vollebregt, seconded by Axel Thesberg:

THAT the agenda is approved.

CARRIED

1.2 Approval of Previous Minutes: May 29, 2017

The draft minutes of the KHSC board meeting were provided in advance of the meeting. No errors or omissions were recorded.

Moved by David Pattenden, seconded by Sherri McCullough:

THAT the open minutes of the Kingston Health Sciences Centre Board meeting held on May 29, 2017 be approved as circulated.

CARRIED

2.0 CEO UPDATE

2.1 CEO Report Highlights & External Environment Update

The written report of the President and Chief Executive Officer was circulated in the agenda package. The report highlighted new program developments in neurology, neurosurgery and pain management. An update on research activities was provided in the report. HDH site has announced their "Exceptional Healers Recipients" honouring Dr. Tom Gonder and Dr. Richard Henry. Both physicians are being recognized for their contributions to health care delivery by the HDH Patient and Family Council.

The University Hospitals Kingston Foundation held their annual Celebration of Giving at the Ambassador Hotel on June 14. At the event, the Ian Wilson Award for Volunteerism in fundraising recognized Erin Finn for her volunteer efforts in the solicitation of donations. The Davies Award for Philanthropic Leadership was also announced and this year's recipient was J.E. Agnew Food Services Ltd., the Royal Canadian Legion

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(District G, Zone 1), and the Ontario Provincial Command Branches and Ladies' Auxiliaries Charitable Foundation, and also Peter and Carol Davy for their contributions.

Dr. Pichora reported on the recent Health Quality Ontario (HQO) conference call with the Ministry of Health and Long-term Care and Cancer Care Ontario to discuss expansion of the HQO public reporting website which will now include wait time reporting for surgeries, diagnostic imaging, and time spent in the Emergency Department. The transfer of the wait times reporting from the Ministry to the HQO website will be phased in over the coming months. Dr. Pichora also noted that, for the first time in Ontario, wait times to see a specialist will also be available on the site – referred to as Wait Time 1. Expected to be released sometime this summer, Wait Time 1 information will include three indicators: average days waiting, percentage seen within target; and volume of patients seen. Hospitals have some of the data results already and, at this point, some KHSC results are favourable while others will require improvement.

The OHA will be hosting a members teleconference on Thursday, June 29 at 0900 hours to provide a further update on the deliverables and timelines associated with the executive compensation framework requirements.

Dr. Jeffrey Turnbull is stepping down as Chief of Staff of The Ottawa Hospital after many years of dedicated service.

Board members were briefed on the recent Health Canada recall of sodium bicarbonate and the Pharmacy team and other clinical leaders have a plan in place to address impacts and will continually monitor the situation.

Dr. Pichora provided an update on Bill 41, *Patients First Act, 2016*, confirming the asset transfer of the Community Care Access Centres (CCACs) to the Local Health Integration Networks (LHINs) across the province. LHINs are now service providers and work is underway to integration staff, create new management structures and reporting, to ensure appropriate oversight of clinical service requirements. Dr. Pichora confirmed that Dr. David Zelt has been appointed Vice President, Clinical, with the SE LHIN.

Congratulations were extended to Vice President Brenda Carter on succession completion of the EXTRA Fellowship program in Palliative Care through the Canadian Foundation for Healthcare Improvement. Outcomes from this program will clearly benefit patients and their families.

Earlier in the week, Board members received an update on a recent story that appeared on CWKS TV relating to a difficult discharge situation for a patient at the KGH site. Dr. Pichora confirmed that all viable options had been exhausted in an attempt to support the patient.

3.0 UNIVERSITY HOSPITALS KINGSTON FOUNDATION (UHKF)

3.1 CEO Report - deferred to the August Board meeting.

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#### 4.0 INTEGRATED BUSINESS

##### 4.1 KHSC Board & Committee Work Plans 2017-18

The Chair drew attention to the draft work plans for 2017-18. A number of key corporate documents inform the preparation of the work plans including the KHSC Bylaws, Board Policies, legislative compliance requirements, and the committee terms of reference.

Glenn Vollebregt, Chair of the Governance Committee, noted that the work plans will be adjusted and amended throughout the year appreciating that, while every effort is made to capture deliverables across both sites, it is recognized that this would not be possible in year 1. The next formal review and reporting to the Board is slated for January 2018. If significant adjustments are needed before this date, the Governance Committee will bring these forward to the Board for discussion. A slight amendment was highlighted to capture oversight preparation for the upcoming Accreditation Canada survey in April 2018 in the Governance Committee work plan.

Moved by Glenn Vollebregt, seconded by David Pattenden:

THAT the KHSC Board and Committee Work Plans for 2017-18 are approved.

CARRIED

Bruce Lounsbury joined the meeting at 1630 hours.

##### 4.2 Annual Corporate Plan 2017-18 + Strategy Performance Index

KHSC Board members received a copy of the Annual Corporate Plan for 2017-18 and proposed Strategy Performance Index. Elizabeth Bardon, Vice President Missions, Strategy and Communications, noted that, once Board input has been provided a user-friendly communications tool would be launched. In advance of the preparation of next year's plan, management commits to seeking input from the Board to help guide and inform the specific measurement indicators. The Annual Corporate Plan (ACP) brings together the two plans of the KGH and HDH sites. Consultation on developing the indicators has taken place with organizational leaders and teams who will be key in achieving the deliverables. The information contained in the plan will inform the creation of a new strategy for KHSC. In response to a question on how engagement and accreditation requirements would be addressed, management confirmed that the team has discussed a number of different ways to embed the accreditation standards and to inform the development of the new strategy as well as the work that is already underway to build create the necessary infrastructure to support engagement.

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## 5.0 MEDICAL ADVISORY COMMITTEE

### 5.1 COS Report Highlights

The written report of the Chief of Staff and Medical Advisory Committee (MAC) Chair was provided in advance of the meeting. Dr. Fitzpatrick highlighted recently approved MAC policies for registered pharmacists to adapt medication orders to correct and optimize medication orders. In response to a question regarding the pharmacist adapt order, Dr. Fitzpatrick confirmed that the attending physician would still be responsible for approving the adjustment; the change would be carried out to alleviate any delay in care.

At the May MAC meeting, Dr. Kiernan Moore, incoming Medical Officer of Health for the southeast region, provided an update on the importance of ensuring that policies are in place to limit opiate prescription duration, the number of doses prescribed including the number of repeat prescriptions. Dr. Fitzpatrick noted that there is an area within the SE LHIN that has the highest opiate prescribing in the country. The MAC will be continuing a dialogue on this important patient care issue and further updates will be provided. Discussion focused on several initiatives underway to address the opiate challenges by improving patient education and support; addressing the way prescriptions are provided to pharmacies; ensuring that prescriptions are on non-photocopy material. Dr. Fitzpatrick reported that J'Neene Coghlan, Vice President and Chief Financial Officer, attended the May MAC meeting to present an overview of how the hospital funding formula works.

### 5.2 MAC Recommendations for Appointments, Reappointments of Medical, Dental, Midwifery, RN (Extended Class) Staff & Residents

Prior to the meeting, Board members received a modification to the MAC recommendations regarding a new term appointment in the Department of Oncology.

Moved by Dr. Mike Fitzpatrick, seconded by David Pattenden:

WHEREAS the Medical Advisory Committee assures the KHSC Board of Directors that all the necessary or advisable due diligence required by the Hospital's bylaws and policies as part of the credentialing process has been completed and the 2017 June 13 report of the Credentials Committee was approved at the MAC meeting held on 2017 June 13 and

WHEREAS the Medical Advisory Committee has confirmed to its satisfaction that the professional staff meet or exceed the criteria required for appointment or reappointment to the Hospital's Professional Staff;

BE IT THEREFORE RESOLVED THAT the Board of Directors has assured itself that the due diligence has occurred and hereby grants to the individuals listed in the attached Table A the appointment as recommended by the Medical Advisory Committee.

CARRIED

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### 5.3 Housestaff 2016/17

The recommendation of the MAC for the appointment of housestaff was circulated to members in advance of the meeting.

Moved by Dr. Mike Fitzpatrick, seconded by David Pattenden:

THAT the physicians on the attached list of *'New and Continuing Residents'* who provided proof of coverage by CMPA and appropriate licensure by CPSO, their Hospital Application Form, and CPIC/VSS be appointed to the Medical Staff as housestaff provided for in the KHSC Professional Staff By-laws, ordinarily for the period 2017 July 1 to 2018 June 30.

CARRIED

### 6.0 PATIENT CARE, QUALITY & PEOPLE COMMITTEE

#### 6.1 Patient Flow Update

Sherri McCullough, Chair of the Patient Care, Quality and People Committee, provided an update on the committee's tour of diagnostic imaging at the KGH site. As part of the tour, participants gained a greater understanding of how endovascular therapy is delivered by interventional radiologists to improve stroke outcomes in patients. An invitation was extended to all KHSC board members to attend upcoming tours which take place one-hour prior to the Patient Care, Quality and People Committee meetings; the tours are invaluable and help to frame reports and updates that come forward to the Board.

The Committee continues to receive regular updates on patient flow initiatives. At the June Patient Care, Quality and People Committee, the update focused on the work of the iCART team (Integrated Community Assessment Referral Team) which is a three question screening tool to help seniors at high risk of returning to the emergency department or being readmitted with the necessary supports to remain in the community. Committee members were also briefed on the work of Health Links which is a partnership with the South East Local Health Integration Network (SE LHIN) with a focus to connecting patients with the resources needed in the community and guides the development of a coordinated care plan to manage chronic conditions. An update on the Home First program which builds a philosophy that supports the patient to be at home while waiting for a long-term care bed. Alternative Level of Care (ALC) patients are supported in their home while they make decisions regarding their next level of care that will be required. Finally, the committee was briefed on the revised bed map that was implemented in February 2017. The new map resulted in additional medicine beds on Kidd 9 and the creation of an Admission and Transfer Unit in March 2017. The goal of these two initiatives is to ensure that patients do not wait in the emergency department more than 24-hours. Silvie Crawford, Executive Vice President and Chief Nursing Executive, noted that these key initiatives has also resulted in improvement patient flow, particularly in light of the teams handling an increase of 7,000 more emergency department visits and the rate of surgical cancellations has decreased. As noted earlier in the meeting, Dr. Karen Graham, a physician in the emergency department, will be joining the Board at its September meeting to have further discussions on patient flow.



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Dr. Richard Reznick signed off on the phone at 1655 hours.

## 6.2 OHA Governance Overview for Quality & Patient Safety

At the June Patient Care, Quality and People Committee meeting, a copy of the OHA's Quality and Patient Safety Toolkit was discussed at the meeting. Committee members felt that it would be a great resource for KHSC Board members as the document provides the elements of quality care in a patient- and family-centred setting; highlights the legislation and standards for quality and patient safety; provides guidance in terms of the roles of the Board, quality committee, relationships with the Medical Advisory Committee, CEO, hospital management and the LHINs, as well as suggestions for collaboration with other sectors in the community; an overview of the governance functions for quality, patient safety and patient- and family-centred care is highlighted and the final chapter outlines how the Board can align priorities, measurement, and reporting.

## 6.3 Accreditation 2018 – Governance Standards

A copy of the updated Accreditation Canada Governance Standards was provided in the Board package. The KHSC Accreditation will take place in April 2018. As part of the survey process, Board members will be interviewed by a team of surveyors. Executive leads Brenda Carter and Janine Schweitzer will be working with the Board and additional details will follow. While the Patient Care, Quality and People Committee has oversight to ensure reporting on outcomes from a variety of accreditations across the organization (i.e. labs, pharmacy, Royal College), discussed focused on the importance of having the KHSC Governance Committee play an active role in the coordination of the April visit. For the benefit of new board members who have not participated in a survey, a mock survey will be held in advance (March) to simply inform the process and to gain an understanding of the types of questions that will be asked. Further details will follow at the September KHSC Board meeting from the Governance Committee.

## 7.0 FINANCE & AUDIT COMMITTEE

### 7.1 Redevelopment Phase 2 Update

Axel Thesberg, Chair of the Finance and Audit Committee, drew attention to the pre-circulated briefing note and slide deck provided in advance of the meeting. The Board Redevelopment Sub-committee has provided regular updates to the Finance and Audit Committee on the project. The presentation deck provided members with an overview of the background and history of the Phase 2 project including a future deliverables timeline for design and construction schedules as aligned with the Ministry's capital planning process. Master plan priorities identified as 'extremely poor and require immediate attention' include: surgical suite/procedure suite, emergency department, perinatal services (labour delivery/NICU), clinical laboratories, IT data centre. Staff / end users have been engaged throughout the planning stages of the submission. In keeping with the capital planning process timeline, the submission must be made to government by the end of September.

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Work continues on preparing the final cost estimate for the project which will come through the Redevelopment Sub-committee and Finance and Audit Committee in September. The local share plan is a requirement of the Stage 2 submission to government. Final cost estimate will have implications for the local share component (to cover 10% of construction and equipment costs). Recommendation on financing KHSC contribution will be presented to Finance & Audit Committee once the outcomes of the UHKF Feasibility Study have been considered. The KHSC and UHKF Boards will need to ensure motions to support the financial commitments are in place. The checklist detailing local share requirements will need to be completed and management is confident, working closely with the University Hospitals Kingston Foundation Board, that this can be achieved. It was agreed that further discussions would take place as part of the in-camera discussions regarding the local share plan.

Discussion then focused on Etherington Hall and the implications for KHSC in terms of land requirements. Management confirmed that a letter of support to proceed with redevelopment of this space had been received from the University.

With Ministry support by April 2018, design work would commence immediately and it is recognized that completing the design work by April 2019 is a very aggressive schedule. Following design completion, the bidding process will then get underway and award of the contract would be by July 2019 with Phase 1 construction starting in August 2019 to 2021. Occupancy is planned for January to March 2025.

Planning office staff continues to work with the City of Kingston in relation to traffic flow and emergency ramp egress during construction as well as solutions for additional parking. Discussion focused on whether consideration had been given to moving the current helipad location to be in closer proximity to the new emergency department entry point now being off Stuart Street; management confirmed that the helipad would remain in the same location due to air exchange concerns.

An important element discussed at the June Board meeting identified the need for a government relations strategy plan to support Phase 2. At the August KHSC Board meeting, a further update will be provided on preparation for Phase 2 and, in preparation for the September KHSC Board meeting, the proposed recommendation of support: *“THAT the Board of Directors approves the Stage 2 Functional Program submission, which includes a detailed plan for the functions, operations, staffing, room and space requirements and capital and operating requirements for each space within our Redevelopment Phase 2.”*

Allan McLuskie and Dale Best departed the meeting at 1740 hours.

## 7.2 Investment Policy, Guidelines & Compliance Reporting

As outlined in the KHSC Corporate By-laws, the “Board is authorized to make or receive any investments which the Board, in its discretion, considers advisable.” Axel Thesberg noted that KHSC’s ability to undertake investments is limited. It is important, however, for KHSC to have investment guidelines in place. In bringing HDH and KGH together, HDH was gifted shares in Brookfield Business Partners. It is recommended that these shares be sold by KHSC and the proceeds added to the Fiscal 2018 approval capital budget for the purchase of equipment at the HDH site. The second investment of approximately

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\$1M represents an account held with CIBC Woody Gundy. Further review by management with HDH Kingston Research Institute confirmed that these funds will be held and are designated to support research activities.

Moved by Axel Thesberg, seconded by Kirk Corkery:

THAT the Board of Directors approves the draft investment guidelines; and

THAT the Board of Directors approves the sale of the share of Brookfield Business Partners; the proceeds to be added to the Fiscal 2018 approval capital budget and utilized for the purchase of equipment for use at the HDH site.

CARRIED

## 8.0 GOVERNANCE COMMITTEE

### 8.1 Approach to New KHSC Strategy

Glenn Vollebregt, Chair of the Governance Committee, provided a verbal update on the deliberations from the June committee meeting with respect to the approach for the development of the new KHSC Strategy. The committee suggests that senior team prepare a work plan outlining deliverables and key touchpoints where Board input should be sought in the development of the Plan; the KHSC Board would engage as one of the key stakeholders. In preparation for a further update at the August Board meeting, members were encouraged to reflect on their role in the process.

### 8.2 Board Education Plan

At the June 14 KHSC Governance Committee meeting, the draft education plan for the KHSC Board was presented and endorsed. It is recognized that the plan will evolve throughout the Board year and that other educational opportunities will be identified through the OHA and other sources. As outlined in the committee's recommendation, management has identified an approximate cost and a budget has been allocation for this important board development activity.

Moved by Glenn Vollebregt, seconded by Bruce Lounsbury:

THAT the Board endorses the Board Education Plan 2017-19 as presented at the June 26, 2017 KHSC Board meeting with an understanding that additional course offerings may be available throughout the year, depending on available education funds; and

THAT the Board approves an adjustment to the overall education budget from \$13K to \$30K for the upcoming year.

CARRIED

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## 9.0 IN-CAMERA SEGMENT

### 9.1 Motion of Move In-Camera

The Chair invited a motion to go in-camera and for members of the Executive team to remain for the in-camera meeting.

Moved by Sherri McCullough, seconded by Kirk Corkery:

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

The Chair reported on the following in-camera decision/discussion items: the Board approved the in-camera KHSC Board minutes from the May 29, 2017 meeting; the Board received the final KHSC Board Committee May minutes as well as the draft June minutes; an update was provided on discussions with Brockville General Hospital; revisions to the Board policy on naming assets were approved; and support provided for a naming in the W.J. Henderson Centre for Patient Oriented Research; and the Board was briefed on the local share requirements to support Phase 2 redevelopment.

### 11.2 Date of Next Meeting & Termination

The date of the next KHSC Board meeting will be Monday, August 21, 2017 from 1600 to 1830 hours in the Henderson Board Room, HDH site. The meeting terminated at 1830 hours on motion of Sherri McCullough.

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

A brief session was held.

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

No session was held.

David O'Toole  
Chair

**DR. DAVID R. PICHORA, PRESIDENT AND CEO**

**Submitted to:** Board of Directors  
**Date of Issue:** June 21, 2017  
**Period Covered:** May 25 to June 21, 2017

This note provides an update on activities at the HDH and KGH sites that relate to our mission and annual corporate plans since our last KHSC Board meeting on May 29. I am happy to take any questions on items in the report.

**1. HDH and KGH Sites Updates**

Both KGH and HDH produce regular weekly and monthly updates sharing stories about the great things that are happening at both sites. As an interim measure, attached to my report are copies of HDH's "What's Up" and KGH This Week - June editions. The Strategy Management & Communications Team will be exploring over the summer processes to gather feedback about staff information needs with a goal of moving toward an internal integrated news vehicle.

**2. Acronyms**

Acronyms listing attached and regular updates will be provided throughout the Board year.

**3. W.J. Henderson Centre for Patient Oriented Research**

We are asking KHSC board members to 'hold the date' for the opening ceremony of the W.J. Henderson Centre for Patient Oriented Research on Connell 4, KGH, on Monday, September 11. The event will start at 1000 hours and the formal part of the opening will be completed by 1100 hours. Facility tours will take place after the opening and researchers will be on hand to discuss their work. Invitations will be issued closer to the event date. We wanted to give members lots of lead time for their calendars and I look forward to seeing you at the event.

**4. New Program Developments in Neurology, Neurosurgery and Pain Management**

In addition to the recent funding announcement for EVT (endovascular therapy for acute Stroke Management), we have been advised by the SE LHIN that the LHIN, in collaboration with the MOHLTC, will soon be announcing KHSC as a Designated Epilepsy Center (DEC), and will be announcing new funding for our programs in epilepsy and neuromodulation (deep brain stimulation for Parkinson's Disease, and implanted Spinal Cord Stimulation for chronic pain).

**5. Health Canada Notice**

Earlier this month we received notification from Health Canada outlining a recall of sodium bicarbonate which is used to combat buildup of acid in the blood. It is used in open heart surgery, as an antidote to certain

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poisons, in cases of organ failure and in some types of cancer chemotherapy. Pfizer informed Health Canada that it has recalled two lots of vials because of possible microbial contamination. KHSC was part of this recall. The global supply of the vials has been tight since May due to manufacturing delays and Health Canada has stated that this recall means that there is now a shortage in Canada and around the world. The KHSC Pharmacy team and other clinical leaders have a plan in place to address impacts and are continually monitoring the situation.

## **6. Update on Research Activities**

Kingston Health Sciences Centre (KHSC) is committed, in collaboration with Queen's University (Queen's), to building and fostering strong partnerships which help to improve the health and wellbeing of our patients and their families and maximize our health research potential. Two of these local and global partnerships, established by KHSC researchers at each hospital site, are illustrated below.

Four global health researchers at Queen's University and Kingston General Health Research Institute (KGHRI) are aiming to change the lives of some of the world's poorest and most vulnerable populations, particularly mothers and children. Drs. Heather Aldersey (School of Rehabilitation Therapy), Susan Bartels (Emergency Medicine), Colleen Davison (Public Health Sciences) and Eva Purkey (Family Medicine), through new secured funding, have recently established The Queen Elizabeth Scholars (QES) Network for Equity in Maternal and Child Health. This research collaboration will leverage their combined extensive knowledge and experience working with partners in sub-Saharan Africa, Asia, the Americas and the Canadian North to examine the impact that war, poverty, natural disasters, socioeconomic change and preventable diseases has on the lives and health outcomes of vulnerable families and communities in these regions. Through the use of novel technologies and better approaches to data collection, these four researchers are building strong relationships with local health practitioners and community members in these regions in order to help build healthier communities by addressing the factors leading to inequities in mother-child health, which will hopefully interrupt the cycle of global poverty. These researchers are also helping to train the next generation of caregivers, mobilize knowledge, and create global linkages to improved health equity not only in Canada but internationally. This QES project is the first initiative of ARCH – a research collaborative for global health equity that was recently established by these four researchers. *This news story was extracted from two articles written by KGHRI's Communications Specialist, Mary-Anne Beaudette and Queen's Communications Officer, Anne Craig.*

The Hotel Dieu Hospital Kingston Research Institute (HDHKRI) has facilitated a number of ongoing projects in collaboration with the Canadian Institute for Military and Veteran Health Research (CIMVHR). Dr. Heidi Cramm (CIMVHR, Queen's School of Rehabilitation Therapy), along with Dr. Sarosh Khalid-Khan and her team from Child and Adolescent Psychiatry, are leading a three-year study funded by a \$150,000 grant from the Health Research Foundation on the effects of frequent mobility and deployment on the mental health of Canadian military families. The research team gathers military families in focus groups in order to acquire their first-hand accounts, and focusses on challenges faced when navigating new civilian health care and educational systems. For a related project, funded by the Queen's University Senate Advisory Research Committee, Dr. Cramm along with Dr. R. Garth Smith and his team at KidsInclusive (previously

**TOPIC OF REPORT: CEO STAFF REPORT – June 26, 2017 Board Meeting**

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Child Development Centre) are conducting personal interviews with military families who have a child with Autism Spectrum Disorder (ASD). These families are routinely required to lose their child's place in a wait list of two to four years for treatment, or discontinue treatment abruptly. Findings from these two collaborations will be used to guide potential interventions and government policy, with the goal of improving health outcomes for Canadian military families.

By nurturing our existing partnerships and growing new ones, we continue to play a pivotal role in addressing the health of patients and their families, locally and world-wide.

### **7. Exceptional Healer Awards Announced – HDH Site**

Their strong commitment to putting patients and families at the centre of care has earned two physicians a special new honour at the HDH site of Kingston Health Sciences Centre. Ophthalmologist Dr. Tom Gonder and anesthesiologist Dr. Richard Henry are the first winners of the Exceptional Healer Award, a new annual award of excellence bestowed by the HDH Patient & Family Council on physicians who demonstrate in their clinical practice the core concepts of patient and family-centred care: dignity and respect, information sharing, participation and collaboration.

A total of 22 physicians were nominated by HDH patients, family members and staff for the award, with several specialists receiving multiple nods. The nominees were applauded for being good listeners who took time to answer questions and provide information, for showing empathy and compassion and for including other family members when planning and delivering care. The inaugural Exceptional Healer Awards will be presented at a special ceremony on Thursday, June 29, 2017 at the HDH site of Kingston Health Sciences Centre.

### **8. UHKF Celebration of Giving**

I was pleased to join donors at the UHKF annual Celebration of Giving event at the Ambassador Hotel on Wednesday, June 14. This was an opportunity for the Foundation, Providence Care, and KHSC to thank the many donors who support our hospitals. Awards for both philanthropic leadership and volunteerism were presented at the event. Denise and her team had created several moving videos that showcased the impact of donations on patient care and links have been provided below. We are grateful for the strong support that our community provides for our hospitals through UHKF.

Mackenzie's Story:

<https://www.youtube.com/watch?v=BVClt9jOqjk>

Chasing Her Dream – Kyla's Story:

<https://www.youtube.com/watch?v=6JEBVgsfFnQ>

Martin's Story

[https://www.youtube.com/watch?v=lws2biR\\_bLQ&t=5s](https://www.youtube.com/watch?v=lws2biR_bLQ&t=5s)

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### 9. KGH Auxiliary

The 112<sup>th</sup> annual general meeting and luncheon of the KGH Auxiliary was held on Monday, June 12. David O'Toole and Elizabeth Bardon attended this year's event and a cheque in the amount of \$386K was presented at the luncheon. The Auxiliary membership will work with the executive to determine where they would like to direct this year's funds. Last year the group opted to purchase two neuronavigational systems to support patients in need of brain and spinal surgeries. I had the opportunity to join [DJ Cooke](#) in the operating room recently to see this new equipment – truly impressive. Our thanks to the Auxiliary members for all that they do. Both David and I also want to thank KGH Board member, Diane Kelly, who has served in the liaison position this past year. David O'Toole and I will be back to the Board this summer to discuss KHSC's board liaison position and reporting from HDH Volunteer Services and the KGH Auxiliary.

### 10. Annual Strawberry Social

Everyone who works, learns or volunteers at KHSC was invited to come out for a complimentary strawberry parfait and some conversation on Wednesday, June 14. Afternoon and evening events were held on both sites and very well attended. It was a great opportunity to speak with staff and share in this summer treat and over 3000 parfaits were enjoyed between the four events (two on each site)! Thanks to the Compass staff who started preparing strawberries on Sunday for Wednesday's event at the KGH site and to the HDH Brockview Café who similarly put tremendous effort into catering this lovely event.

### 11. CIHI Publishes Updated Indicator Data – [www.cihi.ca](http://www.cihi.ca)

Further to my May CEO staff report, CIHI has now published a number of indicators in the [Your Health System](#) web tool (In Brief and In Depth sections) and the [Health Indicators e-Publication](#). Additionally, a new regional level indicator was introduced: Hospitalizations entirely caused by alcohol. The C.difficile and MRSA in-hospital infection indicators were not included in the recent public release.

Also released were updates to the following six additional acute care indicators to reflect the most recent year of data:

- 30-Day In-Hospital Mortality Following Acute Myocardial Infarction (by place of service)
- 30-Day In-Hospital Mortality Following Stroke (by place of service)
- In-Hospital Hip Fracture in Elderly (65+) Patients
- Obstetric Trauma: Vaginal Delivery Without Instrument
- Nursing-Sensitive Adverse Events for Medical Patients
- Nursing-Sensitive Adverse Events for Surgical Patients

The Quality Utilization and Improvement Committee of KHSC will review these results and, in particular, will focus on understanding any reports of potential concern relating to KHSC, and potential opportunities for improving outcome measures.

### 12. Quinte Health Care (QHC) – Prince Edward County Memorial Hospital - <http://www.qhc.on.ca/>

At their May Board meeting, the South East LHIN Board of Directors approved the Stage 1A Master Program proposal from Quinte Health Care (QHC) for the redevelopment of Prince Edward County Memorial Hospital



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(PECMH). The proposal, which builds on the Pre-Capital Submission that was approved by the Ministry of Health and Long-Term Care in January 2017, outlines the service delivery model and preliminary plans for the rebuilding of the hospital.

Significant planning and community engagement has been done to outline the proposed model for PECMH. As part of this vision, PECMH will continue to provide all services currently delivered at the hospital. In order to meet the needs of the population, QHC is looking to enhance and evolve existing services and partnerships at PECMH to provide an integrated model of care for the residents of Prince Edward County. A health care campus model also continues to be pursued with the Prince Edward Family Health Team, community clinics and community supports being co-located/adjacent to the new hospital. The next phase of the capital process (1B) will include an evaluation of the current site, investigation of site options and a high-level space plan and cost estimate. The Stage 1B proposal will be provided directly to the MOHLTC for approval.

**13. Brockville General Hospital – New President and CEO Announced - <http://www.bgh-on.ca/>**

Late last month, BGH Supervisor Kevin Empey announced the appointment of Mr. Nicholas Vlacholias as President and Chief Executive Officer effective July 17, 2017. With over 20 years of experience transforming and integrating healthcare organizations into high-performers, he served as Senior Vice President and Chief Financial Officer of the Children's Hospital of Eastern Ontario (CHEO) and, prior to joining CHEO, he was the Chief Operating Officer at Cornwall Community Hospital.

A Chartered Professional Accountant with an Honours Degree in Business Administration from Wilfrid Laurier University in Waterloo, he holds a Health Leadership Certificate from the University of Ottawa's Telfer School of Business and University of Toronto's Rotman School of Management. In 2014 he completed the Community Shift Executive Leadership Program from the University of Western Ontario's Ivey Business School. Vlacholias also serves the healthcare community as an active member of the Board of Directors for the Eastern Ontario Regional Laboratory Association, the Board of Directors for Mohawk Medbuy Corporation, the Board of Directors for various other organizations and serves as a member of the Ministry of Health and Long Term Care funding committee.

**14. The ED Return Visit Quality Program: Results from the First Year**

Earlier this month, Health Quality Ontario released **The Emergency Department Return Visit Quality Program: Results from the First Year**. The report summarizes HQO's analyses of the year one results submitted by the 86 hospital emergency departments that participated in the first year of the program. The program was designed to help clinicians and hospitals identify and study return visits to their EDs within 72 hours or within one week of key diagnoses. The report also looks at avoidable causes which prevent future return visits. The idea for the program came from ED physicians as part of the taskforce on quality improvement.

The quality improvement initiative at the KGH site was profiled on page 19 of the report highlighting the use of Chart Cards at triage.

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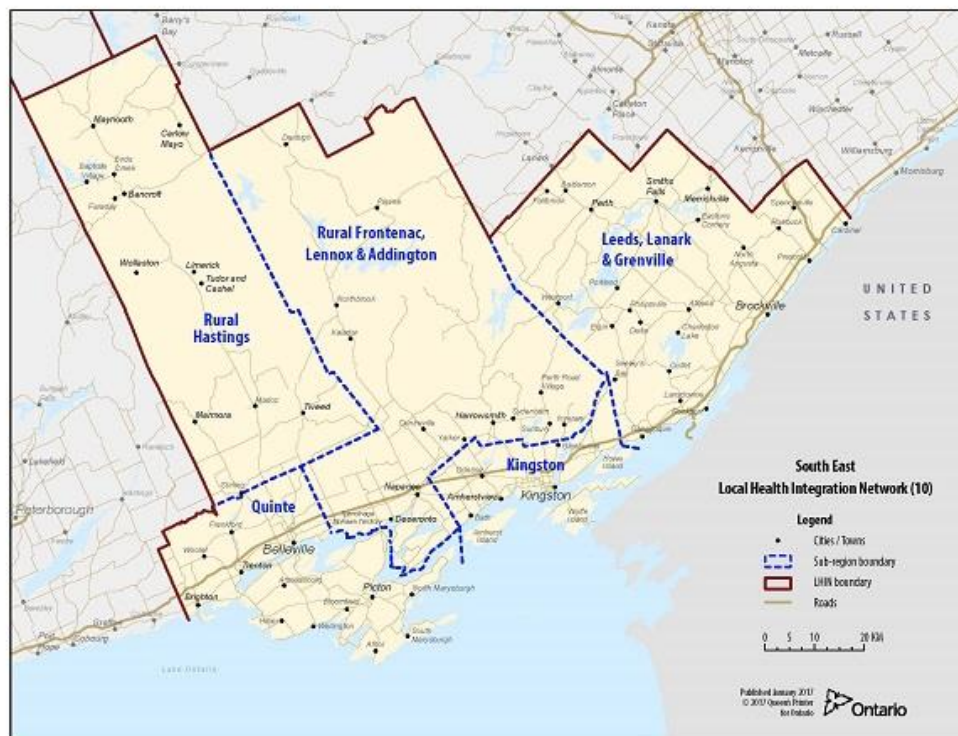
**15. Ontario Enhancing Emergency Services across the Province**

Earlier this month, the Ontario government announced that it would be investing in a new medical dispatch system that will help triage and prioritize 911 calls for ambulance services. The new system is expected to be in place in the first site in March 2018 will prioritize calls based on patient need and redirect low acuity patients to locations other than emergency departments (in instances where it would be safe and appropriate to do so).

The province plans to update the Ambulance Act through a consultation process. The proposed changes, if passed, would enable the government to: 1) expand the scope of paramedics to provide appropriate on-scene treatment and refer patients to non-hospital options, such as primary care and community-based care, and 2) provide funding for two pilots in interested municipalities that will enable firefighters certified as paramedics to respond to low acuity calls to treat and release or treat and refer a patient, and provide symptom relief to high acuity calls. Emergency 911 services will continue to provide immediate response to medical emergencies and may redirect, in a timely and convenient manner, those with non-urgent needs.

**16. SE LHIN Seeking Community Representatives – Patient & Family Advisory Council**

The SE LHIN is seeking applicants for their Council to help shape the future of health care services in the south east. The Council will include 15 residents from our LHIN with three members per geographic sub-region:



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PFAC Advisors are persons with recent experience as a patient or as a family member of a patient (generally within the last three years) and who work with health service providers to provide direct input into policies, programs and practices which affect patient care and services. The role of advisors will be to keep the patient and family as the focal point of our healthcare system.

Interested candidates are asked to submit a 250-word expression of interest that answers the following questions: 1) why would you like to serve as a Patient and Family Advisory Council member? 2) what are some issues of special interest to you? 3) are you currently, or have in the past, participated on other Patient Advisory Council(s)? Submissions will be accepted at the South East LHIN office by mail and/or email to the address below. Submissions must be received by June 30, 2017 and successful applicants will be contacted by July 31, 2017. Please submit your expression of interest to: Darryl Tooley South East Local Health Integration Network 71 Adam St. Belleville, ON K8N 5K3 [Darryl.Tooley@lhins.on.ca](mailto:Darryl.Tooley@lhins.on.ca).

#### **17. Workplace Violence – Keeping Health Care Professionals Safe on the Job**

Ontario's Workplace Violence Prevention in Health Care Leadership Table endorsed 23 recommendations and outlined further practical steps needed to make hospitals safer, reduce incidents of workplace violence in hospitals and across the health sector and to change attitudes around safety for health care workers.

Ontario is making progress on a number of these recommendations, including:

- Developing resources and supports to help hospitals create a psychologically safe and healthy workplace based on the Canadian Standards Association
- Creating a campaign aimed at increasing awareness and preventing workplace violence amongst health care professionals, including nurses
- Increasing supports for patients with known aggressive or violent behaviours
- Creating reliable reporting systems for workplace violence incidents
- Posting information about all government fines against employers in health care under \$50,000

#### **18. Legislative Updates**

On June 1, the Ontario Hospital Association (OHA) held a teleconference to update hospital members on the government's plans regarding executive compensation in the broader public sector. During the call the OHA provided a detailed overview of the advocacy efforts that have been undertaken over the past several months as the OHA attempted to work with Treasury Board Secretariat in designing an approach to creating executive compensation frameworks. The OHA has been advocating for an approach that respected the authority of boards and facilitated the flexibility naturally required for a sector as large and diverse as Ontario's hospitals. David O'Toole and Kirk Corkery participated in the June 1 call along with Sandra Carlton and Steve Miller.

The OHA, the Council of Ontario Universities, the College Employer Council and Ontario's school board associations do not endorse the approach taken by government. Following the June 1 teleconference, the Hon. Liz Sandals, President of the Treasury Board, sent a letter to the OHA and other broader public sector

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associations confirming that the government is moving ahead with imposing its changes to the existing Executive Compensation Framework Regulation and that a new directive has been approved by Cabinet. In response to a direct request by the OHA, Minister Sandals stated that the government would undertake a review of the new executive compensation process following two years of experience. The OHA is working to ensure that this review process be codified in the regulation to ensure that it actually takes place.

On June 9, 2017, the government filed a significantly amended Executive Compensation Framework Regulation (Regulation) under the **Broader Public Sector Executive Compensation Act**. This Regulation sets out the process for determining the maximum amount of salary and performance pay that will be available for designated executives of designated employers, including public hospitals, as well as parameters regarding other elements of the executives' compensation. Importantly, additional requirements, including new provisions related to permit annual increases in total organizational executive pay, have been added to the Regulation. As outlined in the draft Governance Committee minutes (see in-camera agenda), the committee is working with Ian Cullwick, Partner with Mercer, to prepare recommendations to the Board at our August meeting. The purpose of this update is to provide KHSC board members with a brief update as we move through this process.

#### **19. Law Commission of Ontario (LCO)**

Earlier this month, the Law Commission of Ontario released a Discussion Paper and launched province-wide consultations for its [Improving the Last Stages of Life](#) project. The project responds to public concerns regarding how the law shapes the rights, choices, and quality of life for persons in Ontario who are in the last stages of life. It addresses the experiences of everyone involved in the dying process, including individuals, caregivers, and other family and friends, health care institutions and professionals, government, other professionals and community organizations.

The LCO is currently conducting public consultations with the goal of “identifying and recommending law reforms that are concrete, precise and responsive to the experiences of persons in the last stages of life.” Consultations will run continuously from June through September 2017. Submissions are invited in a number of formats including written feedback, webcast sessions, consultation surveys or through in-person meetings with LCO staff. The results of the province-wide consultations will be summarized in an Interim Report to be released in early 2018.

#### **20. Province Launches Care Coordination Services for Medical Assistance in Dying**

Ontario has established a care coordination service (CCS) to help patients and clinicians' access information and supports for medical assistance in dying (MAID) and other end-of-life options. Supports available for patients and their caregivers include information about end-of-life options, such as hospice care, other palliative care options in their community, and MAID. Patients and caregivers looking for information and support on MAID can also request to be connected to a physician or nurse practitioner who can provide MAID-related services. Supports for physicians and nurse practitioners include facilitating a connection to doctors or nurse practitioners who can provide MAID services or a second assessment, and to a community pharmacist who will dispense the drugs needed for MAID.

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To contact the CCS, call 1-866-286-4023 or TTY 844-953-3350 from Monday to Friday between 9:00 am and 5:00 pm EST. Service is available in English and French, and translation assistance in other languages can be requested. Beginning September 1, 2017, the information line will be available 24/7.

**21. Mission Moment: Caught living our mission ... all who are involved in supporting and caring for patients and their families in the Kingston Health Sciences Centre:** in preparing and after assuming my new responsibilities as President and CEO this past April, I continue to hear excitement about our integration, I see the positive changes that staff are already making and experiencing and, most importantly, an unwavering commitment to provide the best care possible to patients and their families. There has also been a very positive impact with respect to external relations and perspectives. For example, the Deputy Minister has stated that the Ministry is very pleased with how KHSC has come together so well. I am very proud of what we have already accomplished as we continue a philosophy of *Transforming Care, Together*.

I would be more than pleased to respond to questions from my report at our June 26 KHSC Board meeting.

Respectfully submitted



Dr. David R. Pichora  
President and Chief Executive Officer