# BOARD OF DIRECTORS – OPEN MEETING

**Date:** Monday, May 7, 2018  
**Meeting:** 1600 – 1830 hours  
**Location:** Hotel Dieu Site, Henderson Board Room  
**Dial-in:** 1-855-344-7722  7673253#

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<td>1600</td>
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<td>1.1</td>
<td>Opening Reflection, Chair’s Remarks, Quorum Confirmation, Conflict of Interest</td>
<td>O'Toole</td>
<td>Decision</td>
<td>Draft agenda</td>
<td>Our Annual Corporate Plan 2017-18</td>
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Accreditation Standard 1:1: The roles, responsibilities and legal obligations of the governing body are defined and regularly reviewed.

Accreditation Standard 5.5: The governing body has a formal process to understand, identify, and resolve conflicts of interest.

| 1605  | 10 min | 2.1  | KGH Auxiliary Annual Report, Sandra Fletcher, President               | O'Toole/Fletcher | Inform | Written report |                                            |

Accreditation Standard 11.1: The governing body works with the CEO to identify stakeholders and learn about their characteristics, priorities, interests, activities, and potential to influence the organization.

| 1615  | 5 min  | 2.2  | Accreditation Update – April 27 Organizational Debrief                | O'Toole/Pichora/Carter | Discuss | Briefing note |                                            |

Accreditation Standard 2.9: Members of the governing body receive ongoing education to help them fulfill their individual roles and responsibilities and those of the governing body as a whole.

Accreditation Standard 12.1: The governing body demonstrates accountability for the quality of care provided by the organization.

Accreditation Standard 13.10: The governing body identifies and addresses opportunities for improvement in how it functions.
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<td><strong>CEO Report &amp; External Environment Update</strong></td>
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<td>Update</td>
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<td>**Hospital Services Agreement with Addictions &amp; Mental Health</td>
<td>Pichora/</td>
<td>Decision</td>
<td>Briefing note + agreement to</td>
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<td>Services Agencies for Addictions and Mental Health Services (Part C</td>
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<td>1630</td>
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<td><strong>CEO Report</strong></td>
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<td>Discuss</td>
<td>Written report</td>
<td><strong>Strategic Enabler: Philanthropy</strong></td>
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<td>Accreditation Standard 11.1: The governing body works with the</td>
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<td><strong>Outcome: KHSC has a viable plan to fund</strong></td>
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<td>CEO to identify stakeholders and learn about their characteristics,</td>
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<td><strong>MEDICAL ADVISORY COMMITTEE</strong></td>
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<td><strong>COS Report / MAC Update</strong></td>
<td>Fitzpatrick</td>
<td>Discuss</td>
<td>Written report</td>
<td><strong>Strategic Direction: Create seamless</strong></td>
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<td>Accreditation Standard 12.1: The governing body demonstrates</td>
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<td><strong>transition in care for patients across</strong></td>
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| 1640  | 5 min| 7.1  | Quarterly Patient Feedback Report: Q4 | McCullough/Carter | Discuss | Written report + presentation | Strategic Direction: Improve the patient experience through a focus on compassion and excellence  
Enabler: People |
|       |      |      | Accreditation Standard 5.3: The governing body provides oversight of the organization’s efforts to build meaningful partnerships with clients and families.  
Accreditation Standard 5.4: The governing body monitors and evaluates the organization’s initiatives to build and maintain a culture of client-and family-centred care.  
Accreditation Standard 10.2: The governing body monitors organizations-level measures of patient safety.  
Accreditation Standard 10.3: The governing body addresses recommendations made in the organization’s quarterly patient safety reports. | | | | |
| 1645  | 5 min| 7.2  | Quarterly Patient Feedback Report: Patient Story | McCullough/Carter | Discuss | Patient story @ meeting | Strategic Direction: Improve the patient experience through a focus on compassion and excellence  
Strategic Enabler: People |
|       |      |      | Accreditation Standard 10.5: The governing body regularly hears about quality and safety incidents from the clients and families that experience them. | | | | |
| 1650  | 5 min| 7.3  | Second MRI – KHSC – KGH Site | McCullough/Jones | Discuss | Verbal | Strategic Direction: Create seamless transitions in care for patients across our regional health care system |
|       |      |      | Accreditation Standard 12.5: The governing body monitors and provides input into the organization’s strategies to address client flow and variations in service demands. | | | | |
| 1655  | 15 min| 7.4 | Update on Health Human Resources | McCullough/Carlton | Discuss | Briefing note | Strategic Direction: Improve the experience of our people through a focus on worklife quality  
Enabler: People |
<p>|       |      |      | Accreditation Standard 12.1: The governing body demonstrates accountability for the quality of care provided by the organization. | | | | |
| 1710  | 10 min| 7.5 | Annual Report of the CNE | McCullough/Crawford | Discuss | Briefing note + presentation @ meeting | |</p>
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<td>1720 5 min</td>
<td>9.1</td>
<td>KHSC Strategy – Community Engagement Plan Update</td>
<td>O'Toole/ Pichora</td>
<td>Inform</td>
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<td>Accreditation Standard 6.1: The governing body oversees the strategic planning process and provides guidance to the organization’s leaders as they develop and update the organization’s vision and strategic plan.</td>
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<td>Accreditation Standard 11.4: The communication plan includes strategies to communicate key messages to clients and families, team members, stakeholders, and the community.</td>
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<td>1725 5 min</td>
<td>9.2</td>
<td>South East Local Health Integration Network Activities</td>
<td>O'Toole/ Corkery</td>
<td>Inform</td>
<td>Agenda Meeting notice</td>
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<td>• Chair/Vice Chairs Forum – March Meeting</td>
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<td>Accreditation Standard 11.2: In consultation with the CEO, the governing body anticipates, accesses, and responds to stakeholders’ interests and needs.</td>
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<td>1730 5 min</td>
<td>11.1</td>
<td>Motion to Move In-Camera (agenda items #11-14)</td>
<td>O'Toole</td>
<td>Decision</td>
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<td>14.0</td>
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<td>REPORT ON IN-CAMERA DECISIONS &amp; TERMINATION</td>
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<td>1820 5 min</td>
<td>14.1</td>
<td>Motion to Report the Decisions Approved In-camera</td>
<td>O'Toole</td>
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<td>Accreditation Standard 13.3: The governing body shares the records of its activities and decisions with the organization.</td>
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<td>CAMERA ELECTED MEMBERS SESSION &amp; CEO ONLY</td>
<td>Accreditation Standard 3.5: Required information and documentation is received in enough time to prepare for meetings and decision making. Accreditation Standard 3.6: The governing body reviews the type of information it receives to assess its appropriateness in helping the governing body to carry out its role. Accreditation Standard 13.10: The governing body identifies and addresses opportunities for improvement in how it functions.</td>
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A regular meeting of the Board of Directors of the Kingston Health Sciences Centre was held at the Hotel Dieu Hospital site on Monday, May 7, 2018 from 1600 to 1815 hours in the Henderson Board Room, Sydenham 2. The following are the open minutes.

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

Ex-officio Members Present (voting): Dr. Chris Simpson.

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

Regrets: Brenda Hunter and Dr. Ron Pokrupa.

Administrative Staff: Rhonda Abson (Recording Secretary), Elizabeth Bardon, Sandra Carlton, Brenda Carter, J’Neene Coghlan, Denise Cumming, Roger Deeley, Troy Jones, Mike McDonald and Steve Miller.

Guests: Cheryl Doornekamp/UHKF Board of Directors, Sandra Fletcher/President KGH Auxiliary, Dr. Al Jin/Vice President of the Medical Staff Association, Ron Grice/Millwrights Local 410 and Bill Pearse/International Brotherhood of Electrical Workers Local 115.

1.0 CALL TO ORDER, CONFIRMATION OF QUORUM, DECLARATIONS OF CONFLICT, AGENDA & MINUTE APPROVAL

1.1 Opening Reflection, Chair’s Remarks, Quorum Confirmation, Declarations of Conflict & Agenda Approval

David O’Toole opened the meeting with a reflection, confirmed quorum, called the meeting to order and introduced Cheryl Doornekamp who is joining as a guest in a cross-appointment capacity from the University Hospitals Kingston Foundation Board. Board members welcomed Sandra Fletcher, President of the KGH Auxiliary to provide an annual update. No declarations of conflict were recorded.

The Chair then recognized Sherri McCullough’s leadership as the Rose of Hope Committee Chair. On Monday, May 14, the Committee will be announcing a significant five-year pledge at 0900 hours in the Sydenham Street lobby of the HDH site. KHSC Board members are welcome to join.

A number of calendar reminders were included in the Notice of Meeting. It was noted that, Board members wishing to attend the Southeastern Ontario Academic Medical Organization (SEAMO) showcase are required to pre-register for the event slated to take place on Wednesday, June 6, at the Isabel Bader
Centre. The date of the next KHSC Board meeting will take place on Monday, June 11, 2018 at 1500 hours.

The agenda and meeting materials were distributed to members on Thursday, May 3, 2018. Relating to agenda item #3.2, Hospital Services Agreement with Addictions and Mental Health Service Agencies, additional agenda materials were provided to members by email on Friday, May 4, 2018.

Moved by Kirk Corkery, seconded by Alan Cosford:

THAT the agenda be approved as circulated.

CARRIED

1.2 Approval of Previous Minutes: March 28, 2018

The draft March 28, 2018 Board minutes were circulated to members in advance of the meeting.

Moved by David Pattenden, seconded by Axel Thesberg:

THAT the minutes of the KHSC Board of Directors held on March 28, 2018, be approved as circulated.

CARRIED

2.0 PRESENTATIONS / EDUCATION SESSION

2.1 KGH Auxiliary Annual Report

Sandra Fletcher drew attention to the written annual report of the Auxiliary. The report provided members with an overview of the Auxiliary donations over the last two year period; updates on the retail businesses; disbursements from the Millennium Endowment Fund to support continuing education; as well as information on other fundraising events undertaken over the year. The report featured a piece on the Family Services area which celebrated its 25th year of operation in 2017. In 2017, three Auxiliary members were honoured with provincial life memberships at the Hospital Auxiliaries Association of Ontario annual convention. Sandra Fletcher recognized the contributions and support provided by KHSC Board member David Pattenden who is serving as the Board’s liaison to the Auxiliary.

The Auxiliary will be holding its annual meeting and luncheon on Monday, June 11, 2018 and members will be asked to consider approving a multi-year pledge towards KGH’s stage 2 redevelopment project. The President reported on upcoming renovations to The Café and the need for investment in order to replace order equipment in this location. Elizabeth Bardon, Vice President Mission, Strategy and Communications, recognized Sandra Fletcher and her team for not only operating as a great organization, but also recognizing the needed reinvestments that needed to be made in The Café to ensure that a safe
In closing, Sandra Fletcher confirmed that the nominations report would be presented at the annual meeting and that she has expressed an interest to continue as President. The KHSC Board thanked Sandra Fletcher for her informative report and extended their congratulations on another very successful year!

2.2 Accreditation Update – April 27 Organizational Debrief

Dr. David Pichora drew attention to the update provided in the Board package on the April 27, 2018 Accreditation Canada surveyors debrief to staff. The Chair thanked Brenda Carter and Janine Schweitzer for all their hard work in preparing and educating the Board in preparation for the survey. Additional comments will be shared with the Board during today’s in-camera segment.

3.0 CEO UPDATE

3.1 CEO Report & External Environment Update

The written report of the CEO was distributed to the Board in advance of the meeting. Dr. Pichora highlighted the upcoming leadership changes at Queen’s University. The Chair congratulated staff on the recent Whig Standard health care series and, following publication of the final article this Saturday, the CEO’s office will forward the links to the articles to Board members. Dr. Pichora drew attention to the recent meeting with Deputy Minister Bob Bell and Dr. Elizabeth Eisenhauer regarding KHSC’s innovation portfolio. As well, Dr. Pichora had an opportunity to meet Vicki McKenna, the new President of the Ontario Nurses’ Association. Appended to the CEO report was a presentation deck outlining the many achievements of the Council of Academic Hospitals of Ontario.

3.2 Hospital Services Agreement with Addictions & Mental Health Services Agencies

KHSC Board members received a copy of the Hospital Services Agreement between the Hotel Dieu Hospital and Addiction and Mental Health Services/Kingston Frontenac Lennox and Addington, which should have been executed and returned to legal counsel following the approval provided by the HDH Board back in January 2017. Dr. Pichora noted that Kathy O’Brien with DDO Health Law received a call from the LHIN looking to secure the final signed document. Simply an oversight, DDO has prepared a resolution for the KHSC Board to consider so that the Agreement can be signed and delivered accordingly.

Moved by Alan Cosford, seconded by Sandy Wilson:

1. The Religious Hospitallers of Saint Joseph of the Hotel Dieu of Kingston (“HDH”) transferred substantially all of its assets and liabilities, including its rights and obligations in a Hospital Services Agreement (AMH Services) between HDH and Addiction and Mental
Health Services – KFLA (the “AMH Agency”) dated as of October 30, 2016 (the “AMH Agreement”), to the Corporation pursuant to an asset transfer agreement between the Corporation and HDH dated March 31, 2017 (the “Effective Date”).

2. None of the Corporation, HDH, or the AMH Agency has, or can obtain, a copy of the AMH Agreement executed by authorized signatories of each of HDH and the Agency.

3. The Corporation has evidence that the corporate members of HDH unanimously approved HDH entering into the AMH Agreement at a special meeting of the members of HDH that was held on January 18, 2017.

4. A copy of the version of the AMH Agreement that was approved by the members of HDH has been provided to the Board and is attached as Schedule “A” to these resolutions.

5. The Corporation wishes the Board to adopt the AMH Agreement and confirm that the Corporation has held the rights, and been subject to the obligations, of HDH under the AMH Agreement since the Effective Date.

NOW BE IT RESOLVED THAT,

1. the AMH Agreement, in the form attached as Schedule “A” to these resolutions, is hereby adopted by the Corporation;

2. with effect as of the Effective Date, the Corporation has held the rights, and been subject to the obligations, of HDH under the AMH Agreement; and

3. any officer or director of the Corporation is hereby authorized and directed to do, execute or perform, or have done, executed or performed, all acts, documents and instruments necessary or desirable to give full force and effect to the foregoing.

CARRIED

4.0 UNIVERSITY HOSPITALS KINGSTON FOUNDATION

4.1 CEO Report

The written report of the President and CEO of the University Hospitals Kingston Foundation was pre-circulated to Board members. Denise Cumming extended an invitation to all KHSC Board members to attend a special event on Tuesday, May 29 at 1000 hours “Navigating the Health Care System” which will take place at Providence Care Hospital in Founders’ Hall. The session will focus on health care access issues in our community. KHSC Board members congratulated Denise Cumming and her team on exceeding their fundraising goal for the year!

5.0 INTEGRATED BUSINESS

No agenda items identified.
Open Board Meeting: May 7, 2018

6.0 MEDICAL ADVISORY COMMITTEE

6.1 COS Report / MAC Update

The written report of the Chief of Staff was provided in the agenda package. Dr. Fitzpatrick drew attention to recently approved MAC policy ‘Expectations of On-Call and Rostered Physicians’ which clarifies physician responsibilities when on-call. The other item highlighted at the meeting relates to KHSC and Brockville General Hospital formulary integration. Dr. Fitzpatrick recognized the great work of Troy Jones and his team to bring the hospitals together to start a discussion on a common drug formulary.

7.0 PATIENT CARE, QUALITY & PEOPLE COMMITTEE

7.1 Quarterly Patient Feedback Report: Q4

Sherri McCullough, Chair of the Patient Care, Quality and People Committee, thanked Mike McDonald, Executive Vice President Patient Care and Community Partnerships, for arranging a tour and completing the arrangements for the April committee meeting to be held at Street Health. KHSC will continue to partner with Street Health to work together and find solutions to support their patient population.

KHSC Board members received a copy of the Patient Feedback Report for Q4 outlining the total number of concerns and compliments received by site and includes the average resolution timeframes and shows concern trending. Patient experience is also measured utilizing surveys with inpatients being randomly selected from the areas of medicine, cardiology, surgical and critical care) to complete the Canadian Patient Experience Survey. Emergency and urgent care patients are also selected to receive the Ontario Emergency Department Patient Experience Survey. For the inpatient survey, the results of each survey are broken down in the following dimensions of care: access, respect and dignity, responsiveness, information sharing, physical environment, coordination of care, and discharge planning. For emergency care, quadrants include communication, timeliness of care, and explanation of medications prior to release.

7.2 Quarterly Patient Feedback Report: Patient Story

Brenda Carter, Vice President Quality and Regional Vice President Cancer Services, shared a patient story with the Board which focused on the importance of communicating with care providers and patients to ensure timely information is provided. Discussion focused on the type of technology available to share information and the need for updating the current scheduling system.

7.3 Second MRI – KHSC – KGH Site

Troy Jones, Executive Vice President and Chief Information Officer, confirmed that strategies are in place to manage patient flow during the construction phase for the second MRI installation. A presentation was delivered to the Patient Care, Quality and People Committee, outlining the three stages of the construction plan and how urgent and life and limb cases will be completed. There is a six week period of vibrations that
will cause interference and not allow the MRI to operate during the day when constructions crews are on site. The MRI will be staffed evenings and nights operating from 1700 to 0700 the following day.

7.4 Update on Health Human Resources

The briefing note circulated to the Board provides an overview of the key recruitment, retention and wellness initiatives underway at KHSC. Discussion focused on page 5 of the briefing and the percentage of KHSC managers and directors that are relatively new in their current roles. It was noted that there has been a renewed focus on leadership development this past year including implementation of the “Head Start” program to equip new leaders with the necessary tools to being their roles; education/course offerings to enhance communication skills training; the deployment of the Harvard Management Mentor system; and the use of skills training hosted on KHSC’s learning management system.

7.5 Annual Professional Practice/Chief Nurse Executive Report

Prior to presenting highlights of the report, Sherri McCullough asked members to reflect on the question “is the Board satisfied that there is alignment with the activities of Professional Practice and the quality mandate of the Board?”

The report provided Board members with an overview of how KHSC promotes and enhances professional practice of both nursing and allied health providers across the sites as well as describing how this is achieved. The briefing described regulated health discipline positions, outlined the obligations of employers to inform respective College when staff are terminated and to report specific incidents, and how professional practice oversees these reporting obligations. An overview of the professional practice framework was provided with KHSC using the structure-process-outcome model of quality care. Professional practice has taken an active role in the delivery of Nurse Sensitive Outcomes such as falls, pressure injury prevalence, and use of restraints. The report also highlighted opportunities to develop leadership skills/scholarly support as well as overseeing a number of scholarships and awards that support staff seeking continuing education. Professional practice provides support to frontline professionals through consultation regarding documentation processes, patient assessment tools and patient order sets – KHSC has been recognized as a leader in the implementation of quality based procedure order sets. The briefing note included an update on research partnerships as well as changes to the clinical learning specialists model (clinical educators) who have moved from reporting to individual programs to a centralized reporting structure.

Silvie Crawford, Executive Vice President and Chief Nursing Executive, reported that the team has been focused this past year on consolidating professional practice into one cohesive structure to ensure integrated clinical practices across KHSC sites. Patient care policies are under review and will ensure standardized and consistent care. By bringing the nursing and allied health professionals together now, professional practice will now start to explore structures and opportunities to integrate clinical education. Finally, work is underway for the KGH site to begin a 3-year candidacy to become a Registered Nurse
Association of Ontario (RNAO) Best Practice Spotlight Organization (BPSO). This will align with the HDH site as it is already designated.

8.0 FINANCE & AUDIT COMMITTEE

The Finance and Audit Committee met on April 23, 2018. No items identified by committee for the Board agenda.

9.0 GOVERNANCE COMMITTEE

9.1 KHSC Strategy – Community Engagement Plan Update

A brief update was provided on the recent engagement sessions – Monday, April 30 included a number of community partners and Wednesday, May 2 included input from KHSC education partners. Elizabeth Bardon confirmed that a session was recently held to engage the Francophone community. Feedback from the sessions will be brought forward to the June 5 Board planning session and that KHSC is still on track to launch the new strategy in September.

9.2 South East Local Health Integration Network Activities

Kirk Corkery, co-chair of the Hospital Chairs and Vice Chairs Forum, drew attention to the March 28, 2018 agenda which focused mainly on the hospital information system project. Joanne Billing provided a home and community care update to members. Future members will be held throughout the SE LHIN region in future.

The SE LHIN Collaborative Governance Forum is coordinating a workshop on Saturday, May 26, on the fundamentals of governance. This session will provide participants with the basics of good governance, share best practices, and provide an update on LHIN directions and discuss new concepts in health care. KHSC board members are welcome to join; session starts at 0830 to 1630 hours at the KFLA Public Health Unit.

10.0 EXECUTIVE COMMITTEE

The Executive Committee has not met since the last Board meeting.

11.0 IN-CAMERA SEGMENT

11.1 Motion of Move In-Camera

The Chair invited a motion to go in-camera and for Executive Committee members to attend the in-camera session.
Moved by Glenn Vollebregt, seconded by Michele Lawford:

THAT the Board move into an in-camera session.

CARRIED

13.0 REPORT ON IN-CAMERA DECISIONS & TERMINATION

14.1 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 March 28, 2018 meeting; the Board received the final March and draft April Board committee minutes; the Board approved several professional staff appointments, housestaff appointments and the reappointments to the Departments of Diagnostic Radiology and Oncology; the Board approved an Naming offer; the Board approved the annual compliance report to the Partnership Council regarding the deliverables outlined in the Operating Agreement; the Board passed a motion that management now align executive compensation to the approved framework and the Board Chair was directed to sign the necessary compliance attestation for submission to the Ministry; the Board was briefed on the approach to the annual performance evaluations for the CEO and COS; the annual COS sudden succession planning process was confirmed; and the CEO provided a brief update on additional Accreditation information as well as anticipated funding for surge beds and KHSC’s Transitional Care Unit.

14.2 Date of Next Meeting & Termination

The date of the next KHSC Board will be Monday, June 11, 2018 starting at 1500 hours in the Henderson Board Room. The meeting terminated at 1815 hours on motion of Bruce Lounsbury.

15.0 IN-CAMERA ELECTED MEMBERS SESSION & CEO ONLY

A brief session was held.

16.0 IN-CAMERA ELECTED MEMBERS SESSION WITHOUT MANAGEMENT PRESENT

A brief session was held.

David O’Toole
Chair
Briefing Note

<table>
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<tr>
<th>Topic of Report:</th>
<th>CEO REPORT</th>
<th>For Decision</th>
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<tr>
<td>Submitted to:</td>
<td>Board of Directors – May 7, 2018 Meeting</td>
<td>For Discussion X</td>
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<td></td>
<td>Medical Advisory Committee – May 8, 2018 Meeting</td>
<td>For Information X</td>
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<td>Submitted by:</td>
<td>Dr. David R. Pichora, President and CEO</td>
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<td>Date submitted:</td>
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Background

This note provides an update on activities at the HDH and KGH sites that relate to our mission and annual corporate plan since the last KHSC Board in March and the April MAC meeting. As always, I welcome feedback and suggestions in terms of content and focus for these regular updates.

Current State

1. Thank you ... to our Volunteers!

National Volunteer Appreciation Week was April 15 – 21 – a time to celebrate and thank our 1,000 strong volunteers at our KHSC sites. Volunteering is often seen as a selfless act; a person gives their time, skills, experience, and passion to help others, without expecting anything in return. And while volunteering is a form of service, many volunteers will tell you that “you get more than you give”. From opportunities to develop new skills, to finding deep and meaningful personal connections, the magic of volunteering is that it creates social and economic value for all. KHSC’s dedicated volunteers contribute so much to both healthcare sites including supporting patients and family members, providing directions and information, raising funds and complementing the high quality care provided by staff. Thank you, volunteers, for making Kingston Health Sciences Centre a great place to work, learn and receive care! Special thanks are also offered to the team in Volunteer Services (Director: Jill Holland-Reilly, Manager at HDH site: Lynda Laird, Secretary Carol Botting, Coordinator Kim Kelly, and Elder Life Specialist Tracy Kimmett.)

2. KHSC Accreditation

I would like to extend my appreciation to all of you for contributing to our successful site visit from Accreditation Canada during the week of April 23rd. The six surveyors had the opportunity to meet with staff, volunteers, learners, patients, families, physicians and advisors over the course of their week here. They heard of the pride and commitment of our teams; the way that patients are embedded in our decision-making processes; about our culture of safety; about the high quality, compassionate care and service that is provided each day across both our HDH and KGH sites; about our innovative services; about our regional and academic partnerships; and about the work we have been doing to meet nationally set standards of excellence at every level of the organization. Further details are provided under Board agenda item #2.2)
3. **Meeting with Deputy Minister Bob Bell**

On April 10, Dr. Elizabeth Eisenhauer joined me for a meeting with the Deputy Minister to gain Dr. Bell’s insights and advice on the question of an approach to the development of a meaningful innovation portfolio for KHSC. We discussed the strong academic relationship that exists in the Kingston community and the positive and growing partnerships KHSC has with other hospitals and health care providers in the region. The Deputy highlighted potential practice extender roles (a potential partnership opportunity for strategizing with SEAMO), ways to further enhance the delivery of mental health services in Ontario, via CBT in the community, opportunities to improve the delivery of musculoskeletal health (especially Wait 1), bundled care for chronic disease (diabetes, chronic heart failure, chronic obstructive pulmonary disease), adapting the UK’s ESCAPE model for chronic pain, as well as discussing how surgical practice will evolve over the next decade and how we will anticipate and prepare for these changes in terms of equipment, training, and facilities. We also reflected on how new accountability frameworks for clinical quality and deliverables might be leveraged through the Southeastern Ontario Academic Medical Organization and the SHiiP program of KFL&A Public Health.

Dr. Bell also arranged for an introductory meeting with the new President of the Ontario Nurses’ Association, Vicki McKenna. We discussed the role of the Occupational Health and Safety Committee and I confirmed my ongoing commitment to the important work of this group.

At the conclusion of the meeting, I shared the preliminary results of the Transitional Care Pilot Project that the Ministry and SE LHIN have developed to address surge challenges. For KHSC, the objective of the project was to leverage 10 empty beds in a local retirement home to provide interprofessional nursing and rehabilitation care to create an alternative to in-hospital ALC care. Post-meeting, I forwarded the following results to the Deputy:

- 100 % Occupancy (10 beds)
- 903 ALC days saved (from inpatient hospital resources)
- 19.8 average length of stay
- 18 visits to the ED (4 readmits)
- 49 patients served
- Q4 ALC rate decreased to 13.6 (Q3 15.2); lowest rate since Q2 16/17
- ALC-LTC conversion rate has decreased from .34 to .25
- High patient and family satisfaction

4. **Meeting with Anthony Dale, President, Ontario Hospital Association**

During my trip to Toronto on April 10, I also had an opportunity to meeting with Anthony Dale at the OHA offices. Our discussion focused mainly on the future direction of health system funding reform, provincial budgets/OHA’s advocacy plan for the upcoming provincial election, and hospital performance metrics.

5. **SE LHIN Meeting & Tour**

On Tuesday, April 17, 2018 members of the KHSC Executive team had an opportunity to meet and tour with the SE LHIN Board Chair, Hersh Sehdev, and CEO Paul Huras. We started at the KGH site with a brief presentation (similar to the one delivered to the Accreditation Canada surveyors) with discussion focusing on KHSC KGH Site Phase 2 redevelopment project and future redevelopment needs at the HDH site.
We then toured the following areas at the KGH site: labs, emergency department and pharmacy. We then transferred over to the HDH site the tour focused on Johnson 7, Ophthalmology, cysto and operating rooms and a tour of the human mobility research area at HDH. This provided us with a great opportunity to recognize the LHIN’s support in moving our projects forward.

6. Transitional Care Unit and Surge Bed Funding

Further to continuing discussion with the SE-LHIN, KHSC anticipates receiving funding to continue the Transitional Care Unit pilot project. Also, funding is expected to support the continued operation of the two NICU beds opened in Fiscal 2018 and additional funding for surge bed capacity for Fiscal 2019. KHSC continues to discuss with the SE-LHIN/Ministry the request for increased funding to support a number of priority programs (e.g. Stroke, Renal Transplant) at completed patient level volumes for last year.

7. Research Update

The first recorded clinical trial occurred in 1747 when Dr. James Lind, a Scottish naval surgeon, investigated treatments for sailors with scurvy. He divided the sailors into pairs and gave each pair a different treatment. Dr. Lind observed that the sailors who received two oranges and a lemon every day recovered remarkably well. Dr. Lind published his findings and the British Navy began to send its sailors out to sea with a supply of limes to prevent scurvy, earning the sailors the nickname “limeys”.

The celebration of International Clinical Trials Day originated in 2005 and pays tribute to and recognizes all those who have participated in or are involved in the delivery of clinical trials. Today, clinical trials transform new scientific discoveries into the standard treatments of tomorrow and make new therapies available to patients sooner. Clinical trials have become an extension of the delivery of patient care.

International Clinical Trials Day is celebrated each year on May 20th. Over the past decade at KHSC, various research groups have held research showcases, panel discussions, and/or information booths for staff, patients and their families to learn more about the benefits in participating in clinical trials.

This year, the Hotel Dieu Hospital Kingston Research Institute (HDHKRI) will be hosting the KHSC Clinical Research Associates Advisory Committee (CRAAC) for a meeting and tour focusing on clinical trial research at the HDH site. CRAAC members will learn about the development of clinical trials over recent years, particularly in outpatient care, such as Respirology, Gastrointestinal conditions, Ophthalmology, and Youth Mental Health. Dr. Onofre Moran-Mendoza will speak about his clinical trial research with patients who have idiopathic pulmonary fibrosis (IPF), a chronic disease of unknown etiology, characterized by scar tissue (fibrosis) within the lungs. The CRAAC group will tour the Human Mobility Research Lab, Skeletal Observation Lab, Clinical Neurosciences Centre, and Ophthalmology Simulation & Teaching Lab, where researchers in each area will be present to demonstrate and discuss clinical trials. The HDHKRI looks forward to introducing CRAAC members to potential collaboration opportunities, and to joining in worldwide recognition of the importance of clinical trials to the development of best practice in patient care.
The entire research program of the Faculty of Health Sciences will be undergoing its 5 year external review on May 9-10. The external reviewers are Dr. Jon Meddings, MD, FRCPC, who is Dean of the Cumming School of Medicine at the University of Calgary and Dr. Jane Rylett, Associate Dean and Director of Animal Research Facilities, Schulich School of Medicine & Dentistry, Western University.

The purpose of the review is to obtain an external perspective on the present state and future prospects of research, Faculty of Health Sciences at Queen’s University and Kingston Health Sciences Centre with the objectives of:

- Assessing the research productivity of the Faculty
- Determining the opinions of stakeholders on the research performance of the faculty in relation to the overall research program of the university
- Assessing culture and climate
- Assessing the relationships among the FHS/University and the University’s fully affiliated hospitals
- Identifying significant strengths, weaknesses, opportunities and threats that are pertinent to the future performance and leadership of the research enterprise.
- Recommending actions that will enable the development of additional capabilities and performance enhancement

8. Service Group Bargaining Update

The Canadian Union of Public Employees (CUPE), Service Employees International Union (SEIU) and Unifor participated in a campaign relating to central bargaining with the Participating Hospitals. The three unions utilized this approached to publically demonstrate their interest to resume negotiations at a joint table between them and the Participating Hospitals. KHSC was notified by the OHA on April 22nd that the Participating Hospitals’ negotiating teams for CUPE, SEIU, and Unifor were successful in reaching tentative settlements with each of the respective unions following a lengthy mediation over the weekend of April 21 and 22.

For the CUPE bargaining unit at the KGH site, the term of the CUPE collective agreement is from September 29, 2017 – September 28, 2021 and the tentative wage settlement is as follows: Year 1 – 1.4%; Year 2 – 1.4%; Year 3 – 1.6%; and Year 4 – 1.65%. In accordance with the tentative agreement, the ratification date for the CUPE settlement must be held no later than May 31, 2018. KHSC and CUPE Local 1974 signed a Memorandum of Settlement on the local provisions of the collective agreement on December 12, 2017.

For the OPSEU bargaining unit at the HDH site, the OPSEU clerical (Local 443) and service (Local 465) bargaining units reached settlements on March 7th and 8th respectively. The term and wage settlements for both OPSEU locals are aligned with the term and wage settlement for CUPE, SEIU and Unifor.

9. Public Sector Labour Relations Transition Act

In May of last year, CUPE had filed an application with the Ontario Labour Relations Board (OLRB) under the Public Sector Labour Relations Transition Act (PSLRTA). The application was related to the integration of KGH and HDH and it triggered a process to rationalize the current bargaining unit structure between the two sites.
Since the filing of the application, most of the outstanding items between the parties (Hospital/unions) have been resolved either through mediation or OLRB decisions. Most recently (April 16th), the OLRB made a decision on whether or not Advanced Practice Nurses (Nurse Practitioners and Clinical Nurse Specialists) at the KGH site will be represented by the Ontario Nurses' Association (ONA). The Board decided that those positions are to be included in the ONA bargaining unit.

The one matter that remains outstanding in the process is to determine which union (CUPE or OPSEU) will represent the clerical and service group. A vote among the service and clerical employees will be conducted by the OLRB on May 16, 17 and 18. In advance of the vote, there will be a campaign period starting Saturday, May 5 and ending Wednesday, May 16. During the campaign period, CUPE and OPSEU will be actively campaigning within the workplace under agreed upon protocols. With the resolution of this issue, the Hospital will commence negotiations with the unions for first collective agreements.

10. HQO Launches: Committed to Better: Reducing Infections after Surgery Campaign

On Monday, April 16, the Ontario Surgical Quality Improvement Network (ON-SQIN) launched it’s Committed to Better: Reducing Infections after Surgery campaign.

Since February 2018, 31 participating hospitals have been working together to make meaningful improvements to the care they provide by further reducing rates of infection in three key areas: surgical site infections, urinary tract infections and pneumonia. Over the next year, with the support of HQO, participating hospitals will benchmark their infection rates against their international counterparts. They will also change their practices before, during and after surgeries, and measure the impact.

ON-SQIN is part of an international program that collects and compares surgical data on 14 indicators. In addition to the data, it provides hospitals with best practices and programs to reduce the risks of post-treatment complications to make every stage of surgery as safe as possible. For more information on ON-SQIN’s Committed to Better: Reducing Infections after Surgery campaign, visit the Health Quality Ontario website.

This program will leverage the use of high-quality clinical data collected through the American College of Surgeons National Surgical Quality Improvement Program (ACS NSQIP). The American College of Surgeons National Surgical Quality Improvement Program® (ACS NSQIP®) is a leading validated, risk-adjusted, outcomes-based program to measure and drive improvements in surgical care. For each year of participation in ACS NSQIP, a hospital has, on average, the opportunity to:

- prevent 250–500 complications
- save 12–36 lives
- reduce health care costs by millions of dollars

KHSC has applied and received a grant to participate in collecting data through NSQIP and has joined the Ontario Surgical Quality Improvement Network focusing on preventing complications and improving patient outcomes by reducing variations in practices while standardizing care. We have appointed a Surgeon Champion and a Surgical Clinical Leader who have been participating in educational sessions in order to launch our program in the Fall.
As part of the Board’s and Organization’s accountability to ensure the delivery of quality of care, this initiative will be reported through the Patient Care, Quality and People Committee of the Board and the Perioperative Services Committee of the Medical Advisory Committee.

11. **Bridging the Gaps: A Substance Abuse Workshop**

KHSC KGH site Nursing Practice Council will be offering the above workshop to staff on May 24, from 0700 – 1100 hours. The objectives of the session are for staff to participate in interactive exchanges on new concepts and research in substance abuse; to network with colleagues from diverse clinical settings; to achieve an enhanced and expanded comprehension of substance abuse management; and to develop a great understanding of the current issues affecting frontline staff on how to manage them.

Mike McDonald has also been working with clinical teams on Connell 10 (medicine) and the Emergency Department over the past few months to partner in new ways with local providers of shelters and substance abuse programs. In early April, Mike took a number of clinical staff (e.g. charge nurses, managers, NPs) to visit In from the Cold shelter (a non-medical shelter for people who are homeless) and Street Health (a community based program that supports people living with and recovering from addictions. This program also provides harm reduction initiatives). These visits helped introduce staff to one another and establish closer relationships to facilitate enhanced communication and support for our homeless, poorly housed, vulnerable and addicted/at risk patients. Similarly, Mike arranged for Dr. Meredith McKenzie, a physician from Street Health, to provide a series of in-services for clinical staff on Connell 10 about addictions and the physiology of addictions in the brain. These helpful educational sessions provide additional support and context for staff managing patients in hospital who are IV drug users.

12. **Transitional Aged Youth Mental Health Planning Day**

On March 23rd Kingston Health Sciences Centre and the Kingston Lennox & Addington United Way hosted a youth Mental Health Services Planning day supported by the Southeast Local Health Integration Network. The purpose of the planning day was to develop a roadmap for the next year that provides local solutions for transitional-aged youth ages 16-24, and youth in crisis as a result of mental health.

The session included: several briefings from people working in the field; some sharings from youth of lived experiences; and three facilitated interactive sessions. Throughout the day the group brainstormed over 130 potential initiatives. These were narrowed down to the top five key priorities. A steering committee to be co-chaired by Mike McDonald and Bhavana Varma is being created to move forward on the priorities identified.

13. **Council of Academic Hospitals of Ontario** [www.caho.org](http://www.caho.org)

KHSC is a member of the Council of Academic Hospitals of Ontario and, at our recent April meeting, the attached presentation was shared and discussed with member hospitals. CAHO has delivered on a number of initiatives this past year thanks to Michelle Noble and her team.
14. **Provincial Government – Investments in Health Care**

On April 20, Premier Kathleen Wynne attended the annual meeting of the Registered Nurses' Association of Ontario to highlight how the government is supporting nurses by strengthening the health care system to meet the needs of patients. In that announcement, the Premier confirmed that the government will continue to improve care in long-term care homes by investing more than $300M over the next three years, including $50M in 2018-19, to hire an additional registered nurse at every LTC home; increasing the amount of direct care for each person in LTC to a provincial average of four hours daily by 2022 by providing residents with more direct, 1:1 care including nursing, personal support and therapeutic care; and creating 5,000 new LTC beds across Ontario (by 2022).

15. **Legislative Update**

- **Occupational Health & Safety Inspections**

In mid-April the government announced further inspection blitzes to ensure employers are meeting health, safety and employment standards at workplaces across the province. Enforcement staff will be visiting a variety of organizations including health care organizations. The focus of the next blitz will be sectors where new and young workers are employed, temporary help, vulnerable workers and organizations with a history of low compliance.

Inspectors will look for occupational health and safety violations involving hazardous materials, mobile equipment, violence, ergonomics, and falls.

16. **CCO Patient Experience Week – April 23 – 27**

To help thank and celebrate the important work of the Patient Experience Advisors, CCO has dedicated April 23 to 27 as Patient Experience Week (PX Week) to celebrate accomplishments, energize efforts, and honour the people who positively impact the patient experience every day. Patients are at the centre of everything done at CCO. Insights gained from Patient Experience Advisors helps to deepen the understanding of patient, caregiver and screening participant experience and needs across the cancer and renal systems. CCO is the Ontario government’s principal advisor on the cancer and renal systems, as well as on access to care for key health services.

In our region the work of CCO is delivered through the Cancer Centre of Southeastern Ontario and renal program at Kingston Health Sciences Centre. There have been many accomplishments in these programs as a result of the Patient Experience Advisors who volunteer in these areas. Some of the recent local highlights include:

- **Centralization of blood room** - thanks to valuable feedback from patients, the blood collection room in Burr Wing was relocated to a new and bigger space. Patients receiving treatment for cancer or a kidney disease are now directed to this new room when they need to provide a blood sample for lab testing. This room is easier to find, offers more privacy, extended hours and is staffed with three phlebotomists

- **Breast Reconstruction Program** - a new level of support is being offered to breast cancer patients through a more comprehensive breast reconstruction program that connects patients with a breast reconstruction surgeon sooner than ever before.
• **Conservative Care Kidney Clinic** - an innovative clinic was launched for patients requiring more support in exploring conservative care as their choice for management of end-stage renal disease (ESRD). The Conservative Care Kidney Clinic (CCKC) runs weekly and receives consults from the MCKC for patients who have either chosen conservative care, or would like further information about this option.

• **Vidaza treatment offered to patients at local hospitals** - patients in SE Ontario on a specific type of chemotherapy are now benefiting from a novel approach to receive their care closer to home.

• **Chemotherapy at Home program helps patients receive the care they need at home** - a new initiative out of the Cancer Centre of Southeastern Ontario is helping patients stay out of the hospital and receive their chemotherapy treatment at home. Known as the Chemotherapy at Home program this exciting initiative allows patients who require continuous chemotherapy to receive it through a pump that they wear as they go about their day. This change has been a positive step for patients who previously had to stay in the hospital to receive their chemotherapy treatment.

• **Healing Blankets available to patients of the Cancer Centre** - healing Blankets, traditionally used in Indigenous culture to help give strength to a loved one in a time of sickness, are available to patients of the Cancer Centre.

These initiatives, and many more are positively impacting the experience of our cancer and renal on a daily basis are a result of the time, participation and feedback of our patients, staff and volunteers. We would like to thank those who are always putting in continued effort to improving the experience for others.

17. **Upcoming Events & Conferences**

**Community Engagement Sessions in support of KHSC Strategy Development**
Several community engagements sessions are scheduled in the coming weeks. Thanks to David O'Toole and Sherri McCullough for agreeing to participate in the April 30 session and Kirk Corkery and Axel Thesberg for their participation in the May 2 session with Glenn Vollebregt as our host at SLC.

- Community Partners Session (April 30th) – engagement session with local health and social service partners
- Educational Partners Session (May 2nd) – engagement session with local educational partners from Queen's and St. Lawrence College
- Francophone community engagement (tentatively booked for May 3rd) to engage members of the Francophone community (note: the session will be held in French).

We are also working to engage the clinical leaders of the SECHEF table in our strategy development process.

**Rose of Hope Charity Tournament – July 31, 2018**
Each summer the ladies of the Cataraqui Golf and Country Club hold the Rose of Hope golf tournament to raise funds for cancer programs at the Kingston Health Sciences Centre. This year’s fundraiser will take place on July 31 and Sherri McCullough has agreed, once again, to chair this year’s event. This event has raised $1.4M for cancer services and last year alone raised $140K.

We invite KHSC Board members to attend this year’s gift announcement pledge slated for Monday, May 14 at 0900 hours at the HDH site in the Sydenham Street Lobby.
Value-Based Health Care through Collaborative – How Do We Make Progress?
Please join Chris Simpson and me on **Wednesday, May 16, 2018** for the above session at the Queen’s School of Medicine Building, 15 Arch Street, to discuss opportunities for greater collaboration to standardize value-based health care practices in Ontario. As outlined in the recent invitation sent by my office, thought-leaders from across Ontario will be joining us to explore opportunities for the future including innovative procurement practices to improve the clinical management of COPD patients and a demonstration study that aims to provide care closer to home for patients with traumatic brain injury. Registration is required and can be easily arranged through my office by calling or emailing Rhonda.

SE LHIN Collaborative Governance Forum – Fundamentals of Governance Workshop
On **Saturday, May 26, 2018**, an all-day session will be held at the KFL&A Public Health Auditorium, from 0830 to 1630 hours, on the fundamentals of governance. KHSC Board members may wish to participate in the morning session when SE LHIN Board Chair Hersh Sehdev will be speaking at the LHIN’s perspectives on governance and, in the afternoon, Dr. Duncan Sinclair, former Dean of the Faculty of Health Sciences at Queen’s, will be discussing the concepts of benefits of “Accountable Care Organizations” (see agenda item #9.2 in your board package).

Your Passport to Healthcare
The next bus tour will take place on **Tuesday, June 5, 2018** departing at 1630 hours from the UHKF parking lot, 55 Rideau Street. The tour includes Providence Manor, the operating rooms at Hotel Dieu site, and the labs at the KGH site. KHSC board members are more than welcome to join fellow donors on the tour. To register simply email Marie.MacKenzie@uhkf.ca

SEAMO Innovation Showcase
Spend the day with foremost experts in the field of digital health care. Confirmed as keynote presenters are **Dr. Eric Topol**, **Dr. Brian Goldman** and **Dr. Richard Birtwhistle**. Topol is a world-renowned cardiologist, geneticist and author of the book The Patient Will See You Now. Goldman is a highly regarded Toronto emergency room physician, author of the book The Secret Language of Doctors and host of the CBC Radio program “White Coat, Black Art”. Birtwistle chairs the Canadian Primary Care Sentinel Surveillance Network, an organization that securely collects and reports on information from electronic health records across Canada to improve the way chronic diseases and neurologic conditions are managed. Explore the landscape of digital health care in Canada with government and industry leaders, learn about the research undertaken by SEAMO’s Clinician Scientists and discover the cutting-edge work done by recent Innovation Fund winners.

The 2018 SEAMO Research & Innovation Showcase features keynote presentations, panel discussions, Clinician Scientist engagement, a Health Care Innovation Hackathon facilitated by Joule Inc., research poster displays, networking opportunities and a wine and cheese reception.

When? **Wednesday, June 6, 2018** from 0730 to 1800 hours. If you are interested, please connect with my office - Rhonda.Abson@kingstonhsc.ca to complete the registration requirements.
Catholic Healthcare: Living our Mission – CHAO 2018 Convention & AGM
We have received notification of this year’s convention and annual meeting – September 27-28 in Toronto. KHSC Board members who have an interest in attending this year’s conference should let my office know so that registration can be completed. Keynote speakers include Dr. Amer Kaissi, Professor, Author, and National Speaker from Trinity University who will present “Building a Culture of Kindness and Accountability” and the closing speaker is Craig Deao, Author, National Speaker and Senior Leader/Managing Director of the Studer Group who will be delivering “Closing the Knowing-Doing Gap.” At the invitation of Ron Noble, President of the Catholic Health Association of Ontario, I have been invited to participate in a panel discussion at this year’s conference.

19. Mission Moment … Thank to HDH Operating Room Staff
I wanted to share the thank you that the operating room team received from the Royal University Hospital Foundation in Saskatoon. Brockville General, Quinte Health Care and the operating room staff at HDH came together to send a donation to buy breakfast for staff on Friday, April 13, who worked the weekend of the tragic bus accident near Humboldt Saskatchewan.

From: Boersma, Candace SHA <candace.boersma@ruhf.org>
Sent: April 13, 2018 1:00 PM
To: barb campbell
Subject: Thank You

Hi there,

Just wanted to let you know that the Pancake Breakfast for the staff was fantastic!! The staff really appreciated all your support. It really meant a lot to them, and to us.

I’ve attached a photo of the Thank You Signage we had out today as well as a photo of a display that was done in honour of the Humboldt Broncos.

Thank you again for your kindness and generosity.

Candace Boersma | Annual and Legacy Giving Officer

103 Hospital Drive Saskatoon SK S7N 0W8
Mission Moment … Letter from a Resident to the Mayor of Quinte West

The following letter was shared by Denise Cumming to the Mayor of Quinte West (the letter also refers to an article which was recently published in The Trentonian and is available here.

60 Dean Rd
Frankford, ON
K0K 2C0

18 April 2018

Dear Mayor Harrison,

With interest & approval I read the article in The Trentonian dated April 12, 2018.

On behalf of Quinte West residents my heartfelt thanks for your support of the significant financial contribution toward the redevelopment of Kingston General Hospital.

My family benefits from excellent care at Kingston hospitals. The statistical increase in QW residents requiring specialized care in Kingston confirms the need for technological advancement in health care. The April 12 article highlights the critical, ongoing & projected need. As a visionary you are key to QW residents receiving the best health care available.

Currently six residents from Queen's University are honing their physician skills on 5th floor of Hastings Manor Long Term Care under the capable supervision of Dr. Kim Macleod. My mother is fortunate to have Dr. Samantha Graitson as her general practitioner.

Dr. Graitson introduced herself to me & we have had chats on two occasions while I was at the Manor. She is a warm, delightful person. Dr. Graitson's family is from Ottawa & a male colleague is from Toronto. 'This area' is located between their families of origin & they feel this area is attractive as a place to raise a family!

Paula Mason & I have communicated regarding ‘recruitment’ of these promising physicians.

Medicine is well-represented in my extended family on my father's side. Noah, 11 in April, aspires to be a physician like Dr. Kent Gerred! I was pleased to introduce you & Noah at the arena. Noah was impressed that the busy Mayor spent time getting to know us.

Carry on 'Fearless Leader'. Most of all take care & enjoy your day.

Respectfully,

Barbara

cc: Dr. Graitson & colleagues
20. **On the Move …**

Earlier this week, **Carleton University** announced the appointment of **Dr. Benoit-Antoine Bacon** as their newest president and vice-chancellor. Dr. Bacon will be Carleton’s 15th president replacing Alastair Summerlee. The five-year term is effective July 1st, 2018. Our congratulations to Dr. Bacon on this appointment.

Supervisor **Kevin Empey** officially completed his role at **Brockville General Hospital** on April 30, 2018. Brockville General Hospital recently recognized his leadership and contributions to get BGH back on track and with the hospital projecting a balanced budget for 2018-19.

Respectfully submitted

Dr. David R. Pichora  
President and Chief Executive Officer