



**Stevenson Memorial Hospital
Meeting of Board of Directors**

February 6, 2020
Physical Therapy Department
5:02 p.m. – 8:30 p.m.

**Vision: Setting a New Standard for Community Hospital Care
Mission: Promising Progress, Pursuing Perfection**

"P"= Present, "R"= Regrets, "A"=Absent, "T"=Teleconference, "S"= Staff, "G"= Guest, "E"= Ex-Officio							
Colleen Butler	P	John Murray	P	Norm Depta	T	David Knight	P
Wendy Fairley	P	Jan Tweedy	P	Sheila Kaarlela	P	Kevin Mullins	T, LE
Shelly Cunningham	R	Jeff Stubbs	P	Alison Howard	P	Nishika Jardine	P
Jody Levac	E,P	Carrie Jeffreys	E,P	William Bye	E,P	Barry Nathanson	S,T
Margaret Barber	E,P	Gary Munro	E,P	Oswaldo Ramirez	E,L, LE		

Chair: Colleen Butler

Recorder: Sharon Crowe

1.0 WELCOME AND CALL TO ORDER – C. Butler

1.1 Quorum

C. Butler advised the Directors there was a quorum.

1.2 Declaration of Conflict of Interest

C. Butler reminded those in attendance of their responsibilities as Board members with respect to the conflict of interest as outlined in the Corporation Bylaws and asked if anyone present wished to declare a conflict of interest. No declarations were made.

1.3 Approval of the Agenda

*Motion: Moved by J. Murray, seconded by W. Fairley.
"That the Board of Directors accepts the agenda as presented."
All in favour. Motion passed.*

2. IN-CAMERA – Dr. B. Nathanson

3. PRESENTATION - Balanced Scorecard Update – MB. Hennin

3.1 MB. Hennin presented on Item #5 and #6 from the Board Scorecard– Did you receive enough information about what to do if you were worried about your condition after you left the hospital? Her update is set forth as follows:

With growing focus on ensuring SMH is meeting the needs of patients and reducing the likelihood of readmissions, there is a need to comprehensively assess the quality of

transitional care, including discharge practices, patient perspectives, and patient understanding.

Safely transitioning patients from hospital to home is a complex process that requires successfully completing a number of tasks, from coordinating care with primary care physicians and Home Care Services and to educating patients. SMH is currently in the process of developing and implementing a standardized discharge pathway that will be used with patients 100% of the time. Discharge summaries are being faxed to Primary Care offices to ensure that they have the necessary information that is required for the patient's follow-up appointments.

MB Hennin presented on Items #9 and #10 from the Board Scorecard– Would you recommend SMH to your family and friends (Emergency Department). Her update is set forth as follows:

There is strong evidence that positive patient experience can lead to improvements in health care quality and outcomes. Providing a positive patient experience is taking the time to be kind and understand the patients beyond the data of their symptoms. Patient experience with front-line staff can impact patient satisfaction and the patient's likelihood to recommend the Emergency Department to friends and family. SMH is focusing on provide service education and training to the front-line staff.

4. CONSENT AGENDA

- 4.1 Board of Directors Minutes – January 9, 2020
- 4.2 Finance, Audit and Property Minutes – January 21, 2020
- 4.3 Board Quality – January 8, 2020
- 4.4 Governance & Nominating – January 17, 2020
- 4.5 Redevelopment and Community Engagement Minutes – January 22, 2020

Motion: Moved by J. Tweedy, seconded by W. Fairley.

“That the Board of Directors accepts the February 6, 2020 consent agenda.”

All in favour. Motion passed.

5. BUSINESS ARISING FROM CONSENT AGENDA

There was none.

6. REPORTS

6.1 Report of President and CEO

J. Levac provided an update consisting of themes within the Strategic plan:

Partnerships

- Meeting with Base Borden Commander Colonel Atherton regarding health care for family members of the military. Discussed establishing a SMH clinic at the Base with a focus on Well Woman Care and Mental Health.
- Meeting at Innisfil Town Hall regarding Innisfil's support for SMH's

redevelopment.

- Celebrated 40th Anniversary of Mary McGill Mental Health services.

Care

- The OHT progress report was submitted and C. Jeffreys did a great job.
- Consultants are moving forward with the draft Stage 2 submission

People

- Employee service awards took place on January 6th, 2020. J. Levac would like to invite the Board to take part in this next year.

Investments

- Meeting with Scott McLeod, CEO of the Central Office and all CEOs of the Central LHIN hospitals. Administrative Management Committee will be reviewing the 2020/21 budgets next week.
- J. Levac is coordinating with SMH Foundation on Hospital tours, Breakfast with the CEO and Dinner with the Docs as part of the fundraising efforts.
- The ICU project is well underway and an integral service for the Hospital.

6.2 Report of the Chief of Staff

Dr. Nathanson provided the following update:

In the wake of the Coronavirus, the Hospital has reviewed its process in addressing infectious disease and is well prepared. Dr. Nathanson praised D. Paton, SMH's IPAC nurse for her hard work in this matter.

6.4 Report of VP, Patient Services/Chief Nursing Executive

C. Jeffreys provided an update:

- ICU Update – Respiratory Therapist and ICU nurse to be hired. Working through the details of the physician model.
- C. Jeffreys attended an OHT Physician Engagement Session. Will find out in March whether SMH is approved to go to full submission. There are currently 19 signatory partners and a total of 25 partners for the South Simcoe OHT.

6.5 Report of the VP, Chief Finance and Information Officer

W. Bye provided the following update:

- ICU has two components: the physical build; and the models of care. SMH completed the RFP review and awarded the construction contract.
- Finance team is preparing the operating and capital budgets for the next fiscal year. There is a special budget meeting for the FAP Committee on Feb 24th to review the budgets.
- SMH has entered into a contract with Garda to provide security at the hospital. SMH is content with the services provided to date.
- HIM (Health Information Management) Update
 - patient portal is working very well with SHINE (Shared Health Information Network Exchange).
 - CNE's of each SHINE partner getting together to set priorities and set direction of the next phase.

6.6 Report of the Auxiliary

G. Munro provided an Auxiliary update.

- Coffee corner renovations taking place including getting a debit machine.
- New items arriving shortly in the Gift shop.
- Have rented a portable Debit machine with pin pad for donations at a cost of \$50.00 per day. Trying this out at the Beer Store on June 20th which is Tag Day.

6.7 Report of the Foundation Board Chair

M. Barber referenced her written report circulated with the agenda.

- Brought new donor pamphlets and handed out to all Board members.
- Has been making thank you calls and getting lots of great comments.

K. Mullins left the meeting at this point – 6:50 pm

7. CARE – S. Kaarlela

7.1 Patient Experience – Deferred to next meeting.

7.2 Critical Incident Report – There are no critical incidents to report.

7.3 Risk Management Presentation – S. Kaarlela went through the presentation noting the RAC (Risk Assessment Checklist) and IRM (Integrated Risk Management). This included recognizing the risks, the risk rating and mitigation plans.

MOTION: Moved by W. Fairley, Seconded by J. Tweedy. 1 Abstention.

“The Board accepts the Risk Management RAC and IRM presentation”

All in favour. Motion passed.

7.4 Report of the Chair, Quality Committee – noted two corrections to the Quality Minutes and these will be changed.

Dr. Ramirez joined the meeting at this time – 7:03 pm

6.3 Report of the President of the Professional Staff

Dr. Ramirez provided the following update:

- Next meeting of Professional staff coming up on Monday.
- HOC to be finalized by Dr. B. Nathanson.
- Meetings taking place about staffing for the ICU, Baby On Call back up and ER.
- Working on getting the word out to physicians to engage in OHTs.

Dr. Ramirez left the meeting at this point – 7:34 pm

8. PARTNERSHIPS – W. Fairley

8.1 Report of the Chair, Redevelopment and Community Engagement Committee

- Continue with bi-weekly conference calls to review progress on redevelopment.

- Committee held a meeting in January. Sylvia Biffis, chair of the Campaign Cabinet, provided an update on the fundraising campaign for redevelopment.
- Discussed the Financial Dashboard that was developed.
- Reviewed political and community engagement taking place.

9. INVESTMENTS

9.1 Report of the Chair, Finance, Audit and Property Committee

- Meeting in January with a presentation from Wayne Willcott.
- Auditor attended the January FAP meeting
- There was a small surplus in the third quarter. Projecting a small surplus at year end despite a 22% increase in cost of supplies.
- Additional revenues from increase in DND inpatient and purchasing rebates
- Scheduling monthly meetings with all the managers to focus on finding additional cost savings as the next fiscal year will be very difficult to keep on budget if there is no increase to base funding.
- HSAA targets are either being met or exceeded.

9.2 Financial Statements as at December 31, 2019

MOTION: Moved by N. Jardine, Seconded by J. Murray.

“That the Board of Directors approves the Financial Statements as at December 31, 2019”

All in Favour, Motion passed.

10. GOVERNANCE

10 Report of the Chair, Governance and Nominating Committee – J. Tweedy

- Working on interview questions for new directors and advisory members.
- The Board will have a full slate of Directors for next year but will have some Advisory Member openings. These will be discussed at the March Governance and Nominating Committee meeting.
- Policy writing committee met again to work on the Hospital Naming Policy. Members of the Foundation also attended this meeting.

Motion: Moved by W. Fairley, Seconded by S. Kaarlela. 1 Abstention.

That the Board of Directors approves the Naming and Dedication Opportunities within the Hospital policy.

All in Favour. Motion passed.

11. REPORT OF THE HOSPITAL BOARD CHAIR

- Attended Capital Campaign Cabinet meeting this morning.
- Executive met yesterday and this will be discussed more in the In-Camera portion of this meeting.

UPCOMING MEETING DATE

The next Board meeting will be held on Thursday March 5, 2020.

There being no further business, the meeting adjourned at 8:10 p.m. Moved by S. Kaarlela.



Colleen Butler, Board Chair

Recording Secretary: Sharon Crowe