

Mississauga Hospital, Clinical and Administrative Building, 4th Floor, Large Boardroom 15 Bronte College Court, Mississauga, Ontario

In Attendance: Elected Directors	Mr. Wayne Bossert (Chair); Mr. David Allgood; Ms. Michele Darling; Mr. Chitwant Kohli; Dr. Mohamed Lachemi; Mr. Alan MacGibbon; Ms. Stacey Mowbray; Ms. Karen Wensley; and Mr. Nicholas Zelenczuk (for part of meeting)
Ex-Officio Directors	Ms. Michelle DiEmanuele; Ms. Kathryn Hayward-Murray; Dr. Dante Morra; Dr. Melanie Binnington; and Dr. Jerry Levesque
Senior Management	Ms. Patti Cochrane; Ms. Karli Farrow; Dr. Alison Freeland; Mr. Steve Hoscheit; and Mr. Dean Martin
Guests	Ms. Debra Carson, VP Patient Care Services; and Ms. Nicole Vaz, General Counsel
Resource	Ms. Kate Anderson
Regrets:	Ms. Christine Magee; Mr. Perry Miele; Dr. Colin Saldanha; Dr. Trevor Young; Mr. Steve Hall; and Dr. Rob Reid

1.0 Call to Order

The Chair called the Board meeting to order at 4:00 p.m.

The Chair confirmed quorum.

The Chair indicated that all Board meetings would now commence with a short in-Camera Session.

2.0 In-Camera Session

The Board met briefly In-Camera, without management present.

Management, Ms. Carson, Ms. Vaz and Ms. Anderson then joined the meeting.

3.0 Approval of Agenda

3.1 The Board members reviewed the agenda. No revisions were made.

MOVED by Ms. Mowbray and seconded by Ms. Wensley, that the Agenda for the September 22, 2016,



Board of Directors meeting, be approved.

CARRIED

3.2 **Declaration of Conflict of Interest**

The Chair reminded the Board that conflicts are to be declared as the agenda item arises. No conflicts were declared.

4.0 Consent Agenda

The Chair presented the Consent Agenda for discussion and approval.

MOVED by Mr. Allgood and seconded by Mr. MacGibbon, that the Consent Agenda for the September 22, 2016, Board of Directors meeting, be approved.

CARRIED

5.0 Strategy Update

The CEO provided a Strategy Update to the Board, focusing primarily on the work being done to address systemic capacity issues at THP. She reviewed the government and stakeholder relations work underway, in particular with respect to funding, with the Ministry of Health and Long-Term Care. She indicated that positive progress had been made in these discussions for both short-term funding and longer term solutions.

6.0 Reporting

Chair's Report

6.1 The Chair provided his report to the Board. He provided an overview of improvements to the governance process that would be made based on feedback from the Board to enhance Board Effectiveness. He also provided an update on provincial regulations with respect to executive compensation that will come into effect in 2017.

The Chair concluded his report by referring the Board to the Blotter Item which had been provided in the meeting relating to the Hospital Information System ("HIS"). He indicated that the HIS Project was progressing and that Ms. Sally Daub was engaged as an independent advisor, based on her skillset and experience. He advised the Board that this project may necessitate the need for an ad hoc Board meeting later in the Fall, to discuss significant next steps.



6.2 **President & CEO Report**

Ms. DiEmanuele reviewed the President & CEO Report with the Board. She provided an overview of the current challenges related to the construction projects underway at the Credit Valley site as part of the Phase III capital project. She reiterated the on-going challenges related to capacity which are having an impact on wait times. s18(1)(j)

Ms. DiEmanuele concluded her report by reviewing the status of various Patient-Centred Design initiatives. She also acknowledged the commitment and team work of the people who had been involved at all levels of the organization.

6.3 Chief of Staff Report

Dr. Morra provided the highlights from the Chief of Staff Report. He discussed the capacity issues; physician compensation matters related to on-going negotiations between the Ontario Medical Association and Ministry of Health and Long-Term Care ("MOHLTC"); the Research Ethics Board's annual Report to the Board; and systems and processes which were being strengthened to enforce privacy in healthcare.

Dr. Morra highlighted the changes underway to improve physician services coverage for unplanned care – a key priority within the Patient-Centred Design strategic direction. He specifically reviewed the work being done within patient care services programs, including the Medicine Program. s18(1)(e) and (f)

6.4 Chief Nursing Executive Report

Ms. Hayward-Murray referred the Board members to the report of the Chief Nursing Executive Report.

Ms. Hayward-Murray introduced Ms. Debra Carson, VP, Patient Care Services, to the Board, who is responsible for several areas, including the Neurosciences/MSK and Cardio units. She advised the Board that the other two VPs of Patient Care, Ms. Alison Quigley and Ms. Leslie Starr (also Regional VP, Cancer Care), would attend future Board meetings.

Ms. Hayward-Murray then provided an update on requests for assistance in dying, and on the continued collaboration between staff, physicians and management to address capacity challenges.

6.5 **Professional Staff Association Report**

Dr. Levesque, the new President of the Professional Staff Association, provided the Professional Staff Association Report. He first introduced Dr. Melanie Binnington, Vice-President of the Professional Staff Association, to the Board.

Dr. Levesque provided an update on the Back-to-School event which had been held for physicians in September; a meeting with the Privacy Commissioner; and the status of discussions being held between the Ontario Medical Association and the Ministry.



6.6 Trillium Health Partners Foundation Report

Mr. Hoscheit presented the Trillium Health Partners Foundation Report on behalf of Dr. Saldanha. He discussed the status of donations made to the Foundation; the activities underway in the partnership with the Institute for Better Health; the Kothari Family Innovation Trust; continued collaboration with the hospital's senior leadership team and key donors on funding initiatives; and the possibility of new business ventures beyond the scope of existing franchises.

Ms. DiEmanuele concluded the report by indicating that representatives from the Foundation, Research, Strategy group, and members of the senior leadership team would work together on a Committee, to be chaired by Dr. Morra, to align strategic priorities.

7.0 Committees

7.1 Finance and Audit

Summary Committee Chair Report

Mr. Kohli provided the Finance and Audit ("FAC") Summary Committee Report. He referred the Board members to the contracts and agreements relating to re-development and accountability, which had been recommended by the FAC to the Board and included in the Consent Agenda material.

Mr. Kohli also discussed the FAC's recent tour of the Credit Valley Site, and the Emergency Department specifically, the purpose of which was to experience, first-hand, the challenges that the hospital was currently facing. s13(1) and s18(1)(f) He added that small working groups had been established to provide regular oversight of the Phase III projects.

Mr. Kohli reported that a search was underway to replace Ms. Angela McNeill, Director, Internal Audit.

Financial Statements as at July 31, 2016

Mr. Kohli provided an overview of the Financial Statements as at July 31, 2016. Mr. Kohli referred the Board to the highlights included in the Briefing Note which had been provided. He indicated that management had met with the MOHLTC and the LHIN regarding funding needs, and that management was working hard on a recovery plan and balancing strategies which support its cautious projection for a balanced budget by March 31, 2017.

MOVED by Mr. Kohli and seconded by Mr. Allgood, that the Board approve the July 31, 2016, Financial Statements.

CARRIED



7.2 Governance and Human Resources

Summary Committee Chair Report

Ms. Darling discussed the Governance and Human Resources Summary Committee Report. She noted specifically the implementation of recommendations related to Board Effectiveness, which had resulted from facilitated sessions held earlier in the year.

Ms. Darling reviewed the Committee's plan to provide additional education topics to the Board; the Nominations Sub-Committee's work on finding a new Board member s18(1)(f); and the Opinion Survey results for physicians, staff and volunteers.

Mr. Zelenczuk joined the meeting via teleconference.

7.3 Quality and Program Effectiveness

Summary Committee Chair Report

Mr. Zelenczuk provided a Summary Committee Chair Report for the Quality and Program Effectiveness Committee. He noted that the Committee will monitor key performance indicators of quality, accessibility and patient safety, which had been included in the Quality Improvement Plan. He also indicated that the Committee would continue to meet frequently and would use patient stories to gain a better appreciation for the impact of improvement work.

8.0 Other Business

There was no other business to discuss.

The Chair indicated that a brief In-Camera meeting would now take place.

Ms. Carson, Ms. Hayward-Murray and Management then left the meeting.

9.0 Adjournment

MOVED by Mr. Bossert and seconded by Mr. MacGibbon, that the meeting be adjourned at 6:50 p.m.

CARRIED



10.0 In-Camera Session

An in-camera session was held following adjournment of the Board meeting.

BOARD APPROVED: NOVEMBER 24, 2016