

**Trillium Health Partners
Board of Directors Meeting Minutes
Thursday, March 30, 2017**

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; Ms. Anu Dhir; Mr. Chitwant Kohli; Ms. Christine Magee; Ms. Stacey Mowbray*; Ms. Karen Wensley; and Mr. Nick Zelenczuk
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 Hall; Mr. Steve Hoscheit; Mr. Dean Martin; and Dr. Rob Reid
Guests	Ms. Nicole Vaz, General Counsel; Ms. Alison Quigley; Mr. Shawn Kerr; Mr. David Longley; Mr. Doug McCann; Mr. Stefan Romano; and Mr. Gavin Wardle (PSG)
Resource	Ms. Kate Anderson
Regrets:	Dr. Mohamed Lachemi; Mr. Alan MacGibbon; Mr. Perry Miele; Dr. Colin Saldanha; and Dr. Trevor Young

* via teleconference

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 the meeting would commence with a short In-Camera Session.

2.0 In-Camera Session

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

Management, Ms. Vaz and Ms. Anderson then joined the meeting, together with Ms. Quigley; Mr. Kerr; Mr. Longley; Mr. McCann; Mr. Romano; and Mr. Wardle.

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3.0 Approval of Agenda

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

MOVED by Ms. Mowbray and seconded by Mr. Kohli, that the Agenda for the March 30, 2017, 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 Ms. Magee and seconded by Ms. Wensley, that the Consent Agenda for the March 30, 2017, Board of Directors meeting, be approved.

CARRIED

5.0 Board Education and Director Development

System Capacity Planning: Master Plan

Mr. Longley and Mr. Kerr presented the report on System Capacity Planning and Master Plan.

Mr. Longley introduced Mr. Wardle who had worked with management to provide the demographic forecast of growth in THP's catchment area, in order to make a projection for additional beds needed for the next 10-15 years. Mr. Longley reminded the Board that THP had the highest forecast growth in population and faced on-going capacity challenges. He explained the process supporting the data provided and summarized the timeline and status of THP's capital plan process. He indicated that the Ministry of Health and Long Term Care ("MOHLTC") had made adjustments for items such as operational efficiencies and innovative models of care, which would then be used to determine initial funding allocations.

Mr. Wardle reviewed the assumptions used to forecast demographic growth, the projected need for additional beds over the next 15 to 20 years, taking into consideration the age of the Mississauga site, the aging population and the MOHLTC's adjustments, and potential areas where further efficiencies could be realized.

Mr. Longley reviewed the distribution of the projected new beds across the three hospital locations; the planned construction at both the Mississauga and Queensway locations; and advised that management would continue to focus on identifying further efficiencies and new models of care during the development of the five year Strategic Plan for 2018 – 2023.

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Mr. Longley then reported on the risks and mitigation strategies associated with the planning process. He concluded the report by identifying Next Steps, such as securing the government's approval to proceed to Stage 2, which related to functional programming and design development.

The Board and management discussed various topics, including the discussions held with the government regarding funding; the challenges associated with the existing buildings; and the anticipated timeline for the various phases of the development plan.

Messrs. Kerr, Longley, McCann, Romano and Mr. Wardle then left the meeting.

6.0 Strategy Update

Ms. DiEmanuele provided an update on government relations.

Ms. DiEmanuele then reviewed management's plans to address capacity challenges. She provided an overview of projected future capacity needs after consideration of growth, transitional care, expanded capital efficiencies and innovative models of care which would help to address capacity issues. Ms. DiEmanuele highlighted the success of the pilot of Bundled Care in the Cardiac program, which would now be fully implemented.

Ms. DiEmanuele concluded the update with a summary of the detailed level of activities underway, including working with the MOHLTC and the Local Health Integration Network to address capacity challenges.

Management and the Board further discussed the impacts of innovative models of care; the engagement of patients in their own care in the community; the Seniors Health Hub; and the potential to embed some performance indicators related to models of care in future Quality and Improvement Plans.

7.0 Reporting

7.1 Chair's Report

The Chair provided his report to the Board. He thanked Ms. Magee and Mr. MacGibbon for providing their support to the management team at the recent meeting with the Premier. He also invited the Board to the *Better Together Gala*, which would be held in May, to celebrate individual and the organization's accomplishments.

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7.2 President & CEO Report

Ms. DiEmanuele reviewed the President & CEO Report. She advised the Board of the current audit of expenditure; the appointment of Mr. Neil Skelding as the new LHIN Chair; and provided an update on the search for land to accommodate the Seniors Health Hub.

A brief discussion followed regarding workplace violence and measures being taken to ensure that staff is equipped for such incidents.

7.3 Chief of Staff Report

Dr. Morra reviewed the Chief of Staff Report. He advised the Board of several topics, including the annual credentialing process, which was not yet automated; the impact of changes made to Unplanned Care; the departure of the Research Ethics Board (“REB”) Chair; and the strengthened processes related to the REB, which had been included in the Consent Agenda material.

7.4 Chief Nursing Executive Report

Ms. Hayward-Murray presented the Chief Nursing Executive Report. She acknowledged the busy winter season and the increase in activity within the MRI and CT departments; the re-scheduling of over 600 surgeries due to two significant Code Greys; the increased reporting of incidents related to workplace violence; and the feedback received on services which had been provided relating to Assistance in Dying.

Management responded to several questions, including those related to workplace violence and the indicators used to measure the success of Patient-Centred Design initiatives.

The Chair expressed his appreciation of Dr. Bill Wong and the Senior Ethicist, Ms. Dianne Godkin, in leading the Assistance in Dying program. He also thanked Ms. Quigley for her and her team’s management of the two Code Greys.

7.5 Professional Staff Association Report

Dr. Levesque provided a verbal Professional Staff Association Report, which included a review of the Long Service Awards ceremony which was to take place on April 20.

7.6 Trillium Health Partners Foundation Report

Mr. Hoscheit presented the Trillium Health Partners Foundation Report on behalf of Dr. Saldanha. He reported that the Foundation had successfully reached its fundraising goal for the fiscal year; thanked the Board for its support at the recent Laugh Out Loud event; and he thanked Ms. Farrow and Ms. Vaz for their assistance in the completion of the TDL franchises.

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8.0 Committees

8.1 Finance and Audit

Summary Committee Chair Report

Mr. Kohli provided the Finance and Audit Summary Committee Report. He reported on several new appointments: a new Community Representative, Mr. Rohit Sood, as a Committee member; Ms. Terri McKinnon, as the new external audit partner; and Ms. Justyna Konior, as the new internal Chief Auditor, whose focus would be the audit of priority areas identified from risk rating assessments.

Mr. Kohli provided an update on matters related to Phase 3 of construction at the Credit Valley Hospital site, which, despite some issues, was still scheduled for completion in May 2018. He concluded his report by noting the Committee had been involved in the review and discussion of the Five Year Capital Plan.

Financial Statements as at January 31, 2017

Mr. Kohli then presented the financial statements as at January 31, 2017, for the Board's review and approval. Mr. Kohli referred the Board to the highlights included in the Briefing Note which had been provided. He also highlighted THP's recent receipt from the MOHLTC of \$10 million in funding.

MOVED by Mr. Kohli and seconded by Ms. Magee, that the Board approve the January 31, 2017, Financial Statements.

CARRIED

8.2 Quality and Program Effectiveness

2017/2018 Quality Improvement Plan

Mr. Zelenczuk provided a summary of the 2017/2018 Quality Improvement Plan. He reported that the Committee had met on several occasions to discuss the proposed QIP, which included stretch goals based on current performance and on-going capacity challenges.

Mr. Zelenczuk highlighted the changes which had been made from the previous year, including: (i) a set of goals for the next year which would be refreshed once the new Five Year Strategic Plan had been approved in early 2018; s 18(1)(j).

Management commented on the LTC indicators, Emergency Department admission rates and its focus on finding solutions to manage capacity challenges.

MOVED by Mr. Zelenczuk and seconded by Ms. Wensley, that the Board approve the 2017/2018 Quality Improvement Plan (QIP) Narrative and Work Plan, for the hospital and the McCall Centre Interim LTC Unit, as recommended by the Quality and Program Effectiveness Committee.

CARRIED

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Summary Committee Chair Report

Mr. Zelenczuk provided an update on the activities of the Quality and Program Effectiveness Committee, which included on-going efforts underway to manage capacity and the appointment of a new Patient Representative, Ms. Alison Sant-Porter, on the Committee.

8.3 Governance and Human Resources

Summary Committee Chair Report

Ms. Darling provided the Board with a verbal report on the Governance and Human Resources Committee's activities. She reported that the Committee had recently focused on the People Engagement and Pulse Survey Results for 2016 ("Survey") and CEO and COS 2017/2018 Goals and Objectives, which incorporated the QIP, which the Board had now approved.

Ms. Darling provided a summary of the results of the Survey and thanked Ms. Farrow and her team for their work. With respect to the Executive Compensation Framework, Ms. Darling remarked that she would continue to work with Ms. Farrow to develop a philosophy and carry out benchmarking, while awaiting guidance from the Treasury Board.

CEO and COS 2017/2018 Goals and Objectives

Ms. Darling provided the Board with the CEO and COS 2017/2018 Goals and Objectives for approval, and which reflected various discussions which the Board had held.

MOVED by Ms. Darling and seconded by Ms. Mowbray, that the Board approve the 2017/2018 Goals & Objectives for the President & CEO and Chief of Staff, which includes a modified Patient Satisfaction goal from the version of the 2017/2018 Goals & Objectives approved conditionally by the Governance and Human Resources Committee on March 9, 2017.

SECONDED

8.4 Priorities and Planning

Mr. Bossert provided an update on the recent discussions held by the Priorities and Planning Committee, on Mr. MacGibbon's behalf. He indicated that the key topics reviewed were the Strategy Refresh, which would be the focus of the May meeting and the Health Summit to be held on June 15; the Board's approval to proceed with the release of the Request for Partnership Proposals (RPP) document for the Seniors Health Campus; and the Board's approval of a mandate to acquire or lease land, conditional upon approval from the Board on a preferred site.

9.0 Other Business

There was no other business to discuss.

The Chair indicated that the Board Members would now meet In-Camera.

10.0 Adjournment

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MOVED by Mr. Kohli and seconded by Ms. Wensley, that the meeting be adjourned at 7:10 p.m.

CARRIED

Ms. Anderson and management, with the exception of Ms. Vaz, left the meeting.

11.0 In-Camera Session

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

BOARD APPROVED: JUNE 1, 2017