

and he anticipates completion of the individual Chair-Governor meetings by the end of February.

E. Vandewall advised the Board that Dr. Love, Dr. Rogers and Julie McBrien will attend the Board meeting to discuss the Surgical Program Task Force – Item 8(b). He noted that the Task Force was successful in reducing its deficit to \$100k, compared to \$700K at this time last year. The Task Force has agreed to expand its mandate and engage their entire OR program. Mr. Vandewall noted the Senior Team’s appreciation for the work done to date and the commitment from Task Force members to work towards the expanded mandate.

6. Committee Chairs’ Report

Rob Hamilton (Quality Committee)

- Nothing additional to report

Don Dalicandro (Building & Facilities Committee)

- Nothing additional to report

Michael Pautler (Governance & Nominating Committee)

- Nothing additional to report

Don Wray (Audit Committee)

- The Audit Committee has begun the process to select the Hospital’s statutory auditors for the next year

7. Consent Agenda

The Chair queried as to whether any member wished to have a specific item contained within the Consent Agenda, as presented, removed for further discussion. There were no items removed for further discussion.

It was,

Moved by: Dave Dean

Seconded by: Rob Hamilton

That the motions of the Consent Agenda (Items 7.a, 7.b and 7.c) be approved as presented.

...CARRIED

Marianne Meed Ward abstained from the vote.

a) Quality Committee

The minutes of the January 16, 2014 meeting were presented for information and included the following attachments:

- QC Pharmacy Services Annual Report Slides
- QC Medicine Quality Improvement Report Slides
- QC October 2013 High Harm Report
- QC November 2013 High Harm Report

b) Building & Facilities Committee

The minutes of the January 13, 2014 meeting were presented for information.

c) Governance and Nominating Committee

The minutes of the January 9 and 23, 2014 meetings were presented for information and included the following attachments:

- GNC Governance Accreditation Action Plan – Jan 20 2014 – UPDATED

- GNC Governor Role Description – UPDATED – Jan 20 2014
- GNC Engaging Independent Advisors for Board Matters Policy – UPDATED Jan 20 2014
- GNC Governor Expense Reimbursement Policy – UPDATED Jan 20 2014
- GNC Policy for Evaluation of Governors – UPDATED Jan 20 2014

The following motion was presented:

That the Board of Governors approve the four (4) policies as presented:

- *Governor Role Description*
- *Engaging Independent Advisors for Board Matters Policy*
- *Governor Expense Reimbursement Policy*
- *Policy for Evaluation of Governors*

8. New Business

a) Accreditation Update

M. MacLeod reported that the Accreditation Steering Committee has been in operation for a year and the action plan is on target. Ms. MacLeod and T. Romain will present an Accreditation overview and mock survey at the upcoming Board Advance. M. MacLeod noted that the hospital is confident in their preparation efforts for 2014 Accreditation.

Ms. Macleod reported there is a new regional ethicist housed at Hamilton Health Sciences whose time is split between the LHIN, CCAC and regional hospitals.

b) Surgical Program Task Force Update

Dr. Faulkner introduced Dr. Rogers - Chief of Surgery, Dr. Love a urologist at JBH and Julie McBrien, Director of Surgery & Maternal Child.

A briefing note was pre-circulated with the agenda package, which summarized the origins of the Task Force and the work completed to date. Dr. Love reported that when faced with the budget short falls, the Task Force reviewed materials, staffing patterns and other opportunities for savings. The savings realized have contributed to no service cuts in the Surgical Department. Dr. Love also believes there is good momentum in the program to continue to make progress on the budget and other initiatives underway in the department.

Dr. Rogers noted that the success of the Task Force demonstrates a collaborative working relationship between physicians and the hospital that can be duplicated across multiple departments. Dr. Rogers thanked E. Vandewall, M. MacLeod and F. Lobo for their support and participation, which contributed to the right discussion and great engagement across the department.

E. Vandewall thanked Dr. Rogers, Dr. Love, Dr. Harrigan and Julie McBrien for their significant leadership on the Task Force. The Task Force was resilient in committing to its goals and now continues to move forward with its expanded mandate. Mr. Vandewall noted the positive relationship between the physician and administration teams on this project.

The Chair thanked the guests on behalf the Board for their work on the Task Force and asked that they pass their appreciation back to the Surgical Department.

c) Board Advance

The draft agenda for February 22, 2013 was pre-circulated with the agenda package.

d) Strategic Plan Update & Work Plan

A briefing note and the Strategic Initiatives Work Plan draft were pre-circulated with the agenda package.

E. Vandewall reported that given the significant initiatives underway including capital and operational readiness planning, patient flow, service excellence, quality improvement, etc., the Hospital has created an aligned Strategic Initiatives Work Plan to guide the organization over the next three to four years.

The Strategic Initiatives Work Plan was developed by Management through engagement with administrative and physician leadership to create clarity, focus and understanding of capacity.

The Work Plan consists of 3 main areas of focus: Redevelopment, Operational Readiness and Patient Experience and is built from the hospital's Strategic Plan.

Following a brief discussion, it was noted that the final draft of the Strategic Initiatives Work Plan will be brought forward for approval at the March 2014 Board of Governors meeting.

e) Strategic Scorecard – Q2 2013/14

The Q2 2013/14 Strategic Scorecard was pre-circulated with the agenda package.

The Chair queried whether there were any questions concerning the Strategic Scorecard.

It was noted that there are some delays in receiving data but JBH will utilize interim or alternate measures where possible as in the case of Patient Satisfaction in the Emergency Department where an internal survey has been implemented and will be reported in the next quarter. The Quality & Safety Dashboard included with the Strategic Scorecard also now includes a column with the forecast year-to-date for each of the measures.

E. Vandewall reported that there are a number of indicators that continue to improve, and the summary chart reflects those achievements. On occasion, metrics can be achieved that are over the provincial targets but lower than the provincial averages, or metrics may or may not be achieved by more than one Hospital in the LHIN.

f) President & CEO Report

The President & CEO Report was pre-circulated with the agenda package. Mr. Vandewall provided a verbal update on the following:

- JBH is on track to balance the budget with strong second quarter results.
- The Phase 2 RFP has been issued, signalling a significant milestone for the Hospital. Three (3) proponents will work on design submissions for July 2014. One submission

will be chosen to move to commercial and financial close and to begin construction in 2015.

g) Chief of Staff Report

The Chief of Staff Report was pre-circulated with the agenda package. Dr. Faulkner provided a verbal update on the following:

- Patient flow has incurred increased pressure by a significant number of admitted patients over the past few weeks. Annual volumes in the ED remain consistent, and the Hospital is challenged with the number of ALC patients. It continues to focus on enabling their safe discharge in order to ensure acute patients have access to these beds. The Hospital continues to work with the LHIN and CCAC on this urgent issue.
- The provincially mandated Life and Limb Policy is now in place at JBH which provides that certain hospitals within the LHIN, including JBH, must receive patients who need medical treatment within 4 hours. This Policy went into effect on January 13, 2014.
- Joseph Brant is the first hospital in the LHIN to participate in an ED Coaching Team initiative provided by the LHIN. The Coaching Team will be onsite January 30 & 31, 2014.

9. Reports

a) Vice President Patient Care Services and Chief Nursing Executive Report

The Vice President Patient Care Services and Chief Nursing Executive Report was pre-circulated with the agenda package.

b) Medical Staff Association Report

The Medical Staff Association Report was pre-circulated with the agenda package.

c) Foundation Report

The Foundation Report was pre-circulated with the agenda package. B. Heagle provided a verbal update on the following:

- Governors are encouraged to speak with the Foundation if there are any additional items they would like to see included in the Foundation Report
- September 13, 2014 is the annual Crystal Ball
- Connor Withers won Ontario Junior Citizen of the Year 2013. The Foundation has committed to name a patient room in recognition of the Withers family support.
- New gift announcements will be made in the coming months

d) Auxiliary Report

The Auxiliary Report was pre-circulated with the agenda package.

10. Hospital Related

The following items were pre-circulated for information:

- Redevelopment e-newsletter December 2013
- JBH RFP Release January 17, 2014

11. Other Business

T. Romain provided an update regarding a product enhancement underway by Directors Desk which may affect some devices used by Board members.

12. Adjournment

It was,

Moved by: Rob Hamilton **Seconded by:** Brian Heagle

That the Open meeting of the Board of Governors be adjourned at 4:45 p.m.

...CARRIED

Don Wray
Chair, Board of Governors

Christine Thomson
Recorder