



unplanned volumes negatively impact the staffing and supply costs with year-to-date incremental costs of approximately \$4.5M

- MOHLTC has invested additional funding to increase system capacity. SRH has received additional \$2.0M to support an additional 29 beds that were opened in late December.
- Received confirmation that SRH will receive \$1.2M in Q4 to support cardiac procedure volumes
- The projected year-end forecast has been revised to \$13.0M to reflect the additional funding and anticipated expense trends for Q4
- HSAA wait time performance indicators results continue to trend below target with the exception of CT scans. The most concerning indicator performance continues to be ALC volumes. An individual with expertise in managing ALC volumes has been hired on a six month contract.

### **3.1.1 Receive the November 2017 YTD Financial Statements**

**Moved by:** Krishan Sunthalingam

**Seconded by:** Terri McKinnon

**THAT** the Board of Directors receives the December 30, 2017 Financial Statements for Scarborough and Rouge Hospital as presented.

**CARRIED**

### **3.1.2 Hospital Annual Planning Submission**

- The Central East LHIN (the “LHIN”) deadline for the 2018/19 Board approved Hospital Annual Planning Submission (HAPS) was January 31, 2018. The LHIN communicated in December that this deadline would not be met due to the unresolved \$5.7M that was flowed to Lakeridge Health in error. The finalization of HAPS was dependent upon the MOHLTC approval of the cash flow correction.
- On January 23, 2018, SRH received communication from the LHIN directing SRH to submit the final Board Approved HAPS by February 28<sup>th</sup> with an explanation indicating that the submission includes the assumption that \$5.7M additional funding is to be allocated to SRH.
- The Hospital has also received notice that there will be a new Hospital Services Accountability Agreement (HSAA) template (see Attachment 1 – HSAA Communiqué). This will replace the agreement that has been in effect since 2008 and renewed annually. The Hospital will participate in upcoming webinars to determine the material changes to the 2008 agreement.

**Moved By:** Krishan Sunthalingam

**Seconded by:** Ome Jamal

**THAT** the Board of Directors approves the 2018/19 Hospital Annual Planning Submission (HAPS – a high level operating plan and budget).

**CARRIED**

## **4.0 Items for Information/Discussion**

### **4.1 Value Realization Framework Report**

M. James provided an overview of the pre-circulated quarterly Value Realization Framework Report, with highlights of discussion as follows:

- Overall, our third VRF progress report tells a positive story of the post-merger transition period.
- The VRF progress report identifies a baseline value and the actual value for the reporting period. The baseline for all indicators in the VRF progress report is fiscal year 2016/17.

- VRF progress reports have been provided to the Board on a quarterly basis since September 2017.
- The VRF progress report is primarily a tool for the Board of Directors and Senior Leadership Team to support communication with internal and external stakeholders. It serves a different purpose than the hospital's performance management reports.

**Motion:** Valerie Carter

**Seconded:** Graeme McKay

**THAT** the Board of Directors accept the 2017/18 Q3 VRF progress report.

**CARRIED**

#### **4.2 Report from the Quality Committee**

V. Carter provided an update from the Quality Committee, providing an overview of the pre-circulated report, with highlights as follows:

- Sustainability activities are taking place in preparation for the corporate-wide Accreditation Canada survey visit in 2020. Several strategies are in place at the program and unit level to support teams to achieve and sustain accreditation standards.
- An overview of the development of the 2018/19 Quality Improvement Plan was presented that included highlights of the three components of the QIP:
  - Progress Report on the previous year QIP(2017-18)
  - Narrative Overview for the upcoming year (2018-19)
  - Work Plan for the 2018/19 QIP
- Several strategies are underway to review the SRH Workplace Violence and Prevention current state, and strengthen the processes and structure presently in place for this new mandatory indicator.
- The final Quality Improvement Plan will be brought forward to the Quality Committee on March 12th and then to the Board of Directors on March 22nd, 2018, for approval.

#### **5.3 Report from the Board Chair**

M. Adamson thanked community members Lai Chu and Phyllis Hill of behalf of the Board of Directors and Community. Recently the Board had the privilege of approving the first Community Advisory Council for Scarborough and Rouge Hospital. The Community Advisory Council, or CAC, consists of 12 members of our community who will provide advice to our Board on community needs, issues and opportunities. Hospital leadership implemented a comprehensive recruitment campaign. We received expressions of interest from 46 applicants and interviewed 21 very strong individuals. From there we selected 12 highly skilled, highly motivated people to serve on the CAC. This process was led by a Selection Panel comprised of the members of the Board's Governance Committee and two very dedicated members of our community who gave selflessly of their time to support our recruitment effort. M. Adamson presented a plaque and flowers in thanks.

#### **5.4 Report from the President and CEO**

E. Buller spoke to the pre-circulated report, with highlights of discussion as follows:

- ONA ended negotiations and mediation with the OHA on February 3. Two sides will meet again on February 26 and 27 with an arbitrator. The current two-year contract for Ontario nurses expires on March 1.
- Ontario government announced that it will be renewing its investment in surge beds for the 2018/2019 fiscal year and will be investing \$187 million to create short-term capacity within the

hospital sector.

- Superior Court of Justice ruled on January 31 that doctors who have a moral or religious objection to treatments such as assisted dying, contraception or abortions must still refer patients to another doctor who can provide the service. Follows a legal challenge against a policy issued by the College of Physicians and Surgeons of Ontario by group of five doctors and three professional organizations arguing it infringed on their right to freedom of religion and conscience under the Charter of Rights and Freedoms.
- Premier Kathleen Wynne, Ministers Mitzie Hunter and Tracy MacCharles, and MPP Soo Wong were welcomed on February 14 to announce the government's support for the redevelopment and expansion of our ED at the Centenary site.
- First broad community forum to share information about our entire planning process and hear from our community on February 27 from 6 to 8 p.m. Many internal and external groups have been consulted to date and a coordinated approach has been developed for the engagement over the next few months. A separate strategic planning update will be provided to the Board.
- We continue to see increased ED volumes across our three sites, as well as persistent high demand for isolation capacity, due to the flu season and high numbers of ALC patients. Our bi-weekly corporate command centre is ongoing to help facilitate communication, coordination, and problem solving across our sites and programs.
- Our regional cardiac care program has held a number of very successful events and activities within the hospital and the community during Heart Month in February to promote heart-healthy living.
- The first employee long service recognition dinner for SRH was held on January 18. A total of 143 employees with 25 or more years of service across all three sites were recognized at this event.

#### **5.5 Report from the Interim Chair of the Medical Advisory Committee (MAC)**

Dr. Naresh Mohan provided an overview of the report that was pre-circulated in the agenda package, with highlights of discussion as follows:

- CPSO requirements on reporting activities with physicians have changed and Dr. Mohan provided a high level overview;
- The College has changed reporting requirements in caution for public safety;
- The MAC appointed an interim lead for plastic surgery, in position until new leadership structure is determined, and will recruit for a permanent position at that time;
- Physicians are required to attend least 50 per cent of MSA meetings, and department meetings. Engagement is important so physicians are aware of what is happening at the Hospital and being able to advocate appropriately for hospital and patients.

#### **5.6 Foundation Update**

M. Mazza, President and CEO of the SRH Foundation provided an update with highlights of discussion as follows:

- Introduced Philanthropic Councils website;
- Foundation will be reaching out to directors to book meetings to discuss how each person can make SRH a charity of choice.

#### **6.0 Next Meeting**

Thursday March 22, 2018 between 4 pm – 7 pm.

#### **8.0 Termination**

The meeting terminated at 5:00 pm.