



NIAGARA HEALTH SYSTEM
Board of Directors Meeting (Open Session)
MINUTES OF MEETING

December 22, 2015; 3:00 p.m.
St. Catharines Site – Corporate Boardroom

	Sept 22/15	Oct 27/15	Nov 24/15	Dec 22/15					
Barry Wright, Chair	✓	✓	✓	✓					
Bunny Alexander	✓	✓	✓	✓					
Larry Boggio	✓	✓	✓	✓					
John Bragagnolo	✓	✓	✓	✓					
Satish Chawla (ex-officio)	✓	✓	R	R					
Suzanne Johnston (ex-officio)	✓	✓	✓	✓					
Marti Jurmain	✓	✓	✓	✓					
Ken Kawall	✓	✓*	✓	✓					
John MacDonald	✓	✓	✓	✓					
Derek McNally (ex-officio)	✓	✓	✓	✓					
Murray Paton	✓	✓	✓	✓					
Cathy Sutherland	✓	✓	R	✓**					
Thomas Stewart (ex-officio)	✓	✓	✓	✓**					
Robert Tiffin	✓	✓	✓	✓					
Staff in Attendance:									
Linda Boich	✓	✓	✓	✓					
Flo Paladino	✓	✓	✓	✓					
Kevin Smith		✓							
Brady Wood/Caroline Bourque-Wiley+	✓		✓	✓+					
Angela Zangari	✓	✓	✓	✓					

*via teleconference/videoconference

**attended in part

Guests:

- Nancy Fletcher – NHS
- Brian Guest – SJHS
- Gord Statham – ONE Foundation
- Kristina Manzi – ONE Foundation

1. CALL TO ORDER

Board Chair Barry Wright called the meeting to order at 3:00 p.m., and welcomed guests, staff and fellow Directors.

1.1 Quorum

There was quorum and the Meeting was properly constituted for the transaction of business.

1.2 Approval of the Agenda

MOTION B15-141:

It was MOVED by K. Kawall and SECONDED by J. MacDonald that the NHS Board of Directors approves the Open Session Agenda for the December 22, 2015 Meeting, as presented. CARRIED.

1.3 Declaration of Conflicts

There were no conflicts declared.

1.4 Chair's Remarks

A reminder was provided that the January 26th Board Meeting will be held at the St. Catharines Site and we will again be welcoming our St. Joseph's partners.

Kristina Manzi and Gord Statham were welcomed and were in attendance to provide the update from the ONE Foundation.

1.5 Reaffirming our Mission

Bunny Alexander led the Board through a review of the Mission, Vision and Values with a focus on how they were observed by the Accreditation Surveyors at the front line during the Accreditation process.

1.6 Patient Story

Nancy Fletcher provided the story of an elderly patient who, following a fractured hip, demonstrated stroke-like symptoms postoperatively. The patient was transferred to the stroke unit and underwent specialized care that enabled her to eventually return home. The story demonstrates the commitment to a collaborative approach to care.

2. PRESENTATION

There were no presentations at this meeting.

3. APPROVAL OF BOARD MINUTES

MOTION B15-142:

It was MOVED by L. Boggio and SECONDED by J. MacDonald that the Minutes of the November 24, 2015 Open Session of the NHS Board of Directors Meeting be approved. CARRIED.

4. MATTERS FOR DECISION/DISCUSSION

4.1 Report of the Quality Committee

Bunny Alexander, Committee Chair, provided highlights from the Committee's December 8th meeting, as outlined in the Committee Report to the Board, as follows:

- The patient story focused on the compassionate care provided for a family with stillborn twins as well as a concern from the family that was subsequently rectified.
- The Committee received the Women's, Babies and Children's Health Program report. The Committee is interested in receiving further information related to the effectiveness of discharge phone calls.
- The Committee was provided with an overview of the Professional Practice department. Practice Councils are currently being structured and the department is in the process of identifying indicators to measure success.

4.2 Report of the Governance Committee

Murray Paton, Governance Committee Chair, provided highlights from the December 14th meeting, as outlined in the Committee Report to the Board, as follows:

4.2.1 Policies: Role of the Board Chair and Role of the Board Vice-Chair

Further to the discussion at the November Board Meeting, revisions were required to both policies to clarify the qualifications required to serve in these positions.

MOTION B15-143:

It was MOVED by M. Paton and SECONDED by J. Bragagnolo that, on the recommendation of the Governance Committee, the NHS Board of Directors approve the Role of the Board Chair and Role of the Board Vice-Chair policies as presented. CARRIED.

- In follow up to the discussion at the November Committee meeting, management has prepared some tips for presenting synoptic reports. These tips will be shared with the incoming Committee Chairs for the 2016/17 Board year.
- Annually the Committee will be monitoring the Integrated Risk Framework Risk Assessment with a focus on matters that relate to Governance.
- The Committee reviewed the Board Meeting evaluation results for September, October and November 2015. No substantive issues were raised.
- Continuing with the commitment to review existing Board policies monthly, the December review focused on the Confidentiality and Media policies. Directors were reminded of the key elements of these policies.

4.3 Report of the Ad-Hoc Strategic Planning Committee

John MacDonald, Strategic Planning Committee Chair, provided highlights from the November 30th meeting, as outlined in the Committee Report to the Board, as follows:

4.3.1 Draft Purpose, Vision, Values and Commitment

The Committee reviewed and made further modifications to the document which incorporated all feedback received to date. The Board examined the draft Purpose, Vision, Values and Commitments provided as part of the Committee's report and discussed the rationale behind each of the statements. An engagement process will be launched to validate the modified document. Following this consultation, a revised draft will be brought forward for final approval by the Board. Further discussion will occur with respect to the overarching strategic directions as well as the development of the measures for success.

MOTION B15-144:

It was MOVED by J. MacDonald and SECONDED by J. Bragagnolo that, on the recommendation of the Ad-Hoc Strategic Planning Committee, the NHS Board of Directors approve the draft Purpose, Vision, Values and Commitment as presented. CARRIED.

4.4 Medical Advisory Committee and Chief of Staff/EVP Medical

Dr. Tom Stewart attended this portion of the meeting by teleconference to provide highlights from the Chief of Staff/EVP Medical and Medical Advisory Committee December 2nd meeting, as outlined in the Committee Report to the Board, as follows:

- Work continues on finalizing the revision of the Professional Staff By-Laws and Rules and Regulations.

- The Program Structure has been effective in defining clear accountabilities.
- An NHS/St. Joseph's medical affairs retreat is scheduled. Part of the discussion will be sharing processes for physician related complaints and critical incidents.

5. REPORTS

5.1 Report of the ONE Foundation

Kristina Manzi and Second Vice-Chair Gord Statham attended the Board meeting to provide an update on Foundation activities, as follows:

- Planning is underway for the March 5th Gala "Springtime in Paris".
- An RFP will be launched in the New Year to determine the feasibility of the commitment of support for the capital campaign from a donor perspective. A report is anticipated to be completed by October 2016.
- The November moustache campaign doubled its 2014 total and raised over \$20,000 for diagnostic assessment.

5.2 Report of the President

Suzanne Johnston highlighted the following items from her December report to the Board:

- The December "Pulse" newsletter was shared with the Board.
- A key learning obtained from the Institute for Healthcare Improvement (IHI) Conference (Ten radical redesign principles) was shared.
- Brag Books prepared by management during the Accreditation process are available for viewing by Directors.

6. OTHER BUSINESS

There was no other business to report.

7. MOTION TO MOVE TO CLOSED SESSION

MOTION B15-145:

It was MOVED by B. Alexander and SECONDED by M. Paton that the NHS Board of Directors meeting of December 22, 2015 be adjourned and move to Closed Session.

8. ADJOURNMENT

The Open Session adjourned at 4:09p.m.

Barry Wright, Chair

Recording Secretary: D. Dube



Strategic Planning

Planning continues to shape the deployment of our vision, purpose and values and the development of the strategic directions and subsequent operational plan. It will be a critical time to signal to the organization our desired way of being and our culture and values. It will be through a successful implementation that we will achieve our organizational goals. The guidance and direction of the Strategic Planning Committee and Board is deeply appreciated.

SJHS Executive Retreat

Along with Dr Stewart, I attended the strategic retreat for executive team members for the SJHS. The objectives of the retreat were threefold: (1) discuss the evolution of SJHS in the context of the strategic plan and ever changing external environmental factors in the health system, (2) discuss and finalize initiatives and outcomes and finally, (3) determine a process and structure for implementation. Further work will develop in this area.

Accreditation

We are proud to report that as a result of the Accreditation Survey and exposure to an array of individual surveyors, the NHS has had a number of requests to share our innovative work and best practices. Further information is included in the attached Pulse Newsletter. We have asked for appropriate recognition on shared work.

Executive Focus and Planning

In October the Executive Team meeting agenda was structured to concentrate our areas of focus and discussions to align with the strategic directions of the organization and critical success factors. Sample agenda and reporting schedule attached.

Capital Redevelopment

Submission for December is on target. Further information related to engagement and development is included in the attached Pulse Newsletter.

Institute for Healthcare Improvement (IHI) Conference

I was thrilled to be sponsored to attend the IHI conference this year along with two Board Members and a staff leader. We will plan a presentation on the takeaways and in the meantime I want to share the ten radical redesign principles:

1. ***Change the balance of power*** - Co-produce health and well-being in partnership with patients, families and communities.
2. ***Standardize what makes sense*** - Standardize what is possible to reduce unnecessary variation and increase the time available for individualized care.
3. ***Customize to the individual*** - Contextualize care to an individual's needs, values and preferences, guided by an understanding of what matters to the person in addition to What's the matter?
4. ***Promote well-being*** - Focus on outcomes that matter the most to people, appreciating that their health and happiness may not require healthcare.

5. ***Create joy in work*** - Cultivate and mobilize the pride and joy of the healthcare workforce.
6. ***Make it easy*** - Continually reduce waste and all nonvalue-added requirements and activities for patients, families and clinicians.
7. ***Move knowledge, not people*** - Exploit all helpful capacities of modern digital care and continually substitute better alternatives for visits and institutional stays. Meet people where they are, literally.
8. ***Collaborate and cooperate*** - Recognize that the healthcare system is embedded in a network that extends beyond traditional walls. Eliminate siloes and tear down self-protective institutional or professional boundaries that impede flow and responsiveness.
9. ***Assume abundance*** - Use all the assets that can help to optimize the social, economic and physical environment, especially those brought by patients, families and communities.
10. ***Return the money*** - Give the money from healthcare savings to other public and private.

With gratitude,

Suzanne Johnston
President





Niagara Health System

Système De Santé De Niagara

NHS Executive Team Meeting

December 14, 2015



Item	Questions	Duration	Responsible
Rounding Insights	<ul style="list-style-type: none"> • What are your learning from your rounding? 	10 mns	All
Actions Review		10 mns	Suzanne
Status of Priorities	<ul style="list-style-type: none"> • What's the overall status of the priorities? • What's the focus this week? • Any support required? <ul style="list-style-type: none"> • Accreditation - Linda • Flow- Derek • Vision and engagement - Angela 	10 mns	Priorities Sponsors
Metrics Review using scorecards	<ul style="list-style-type: none"> • QIP plan for 2016/2017 – Linda 	30 mns	Angela
Ad-Hoc items	<ul style="list-style-type: none"> • NHS Purpose – Vision – Values: Linda • Budget: Angela • Succession planning: FLO 	30 mns	All
Recognition & Celebration		5 mns	All
Learning moments		15 mns	All



Executive meetings calendar

Month		Week 1	Week 2	Week 3	Week 4	Week 5
Nov	Date	Nov 2	Nov 9	Nov 16	Nov 23	Nov 30
	Board meetings		Quality – Gover - resource & audit		Board	Quality
	Scorecard Reviewed	Finance and IT		QIP	Programs	HR - Patient relations - communication
Dec	Date	Dec 7	Dec 14	Dec 21	Dec 28	
	Board meetings	Resources and audit	Governance	Board		
	Scorecard Reviewed	Finance and IT	QIP	Programs	HR - Patient relations - communication	
Jan	Date	Jan 4	Jan 11	Jan 18	Jan 25	
	Board meetings			Quality – Gover - resource & audit	Board	
	Scorecard Reviewed	Finance and IT	QIP	HR - Patient relations - communication	HR - Patient relations - communication	

Huddle boards 'a powerful tool'

The Accreditation Canada surveyors provided us with several positive comments in their preliminary report. Among the highlights noted were that the huddle boards are a powerful tool providing patients, staff and others with opportunities to contribute toward how things function within specific areas and aligning our teams with goals and priorities of the organization. This alignment enables our teams to have meaningful discussions that are directly linked to our organizational priorities.

Successful team huddles support the achievement of goals which ultimately contribute toward an improved patient experience. A successful huddle involves:

- Updating headlines regularly with news and events relevant to your team;
- Identifying actions that are clear, focused on your goal and are assigned to an individual with a target date;
- Identifying 1-2 key areas of focus that are within the control of your team;
- Using the Our Ideas matrix to prioritize improvement ideas;
- Identifying proud moments by celebrating individual members of your team for their contributions toward achieving performance goals.

How can I contribute toward a successful team huddle?

- Come prepared with your insights and feedback;
- Recognize your fellow team members for successes;
- Stay focused and on topic;
- Identify ways to make the huddle more engaging and valuable for your team.



From left, Pam Rigo, Brett Hoad, Mike Tonnies and Don Journeay engage in a team huddle in the Maintenance Department at the Port Colborne Site.

Quality & Safety

Target: Enhance our ongoing quality and safety focus by successfully achieving full Accreditation status; Achieve exemplary status in 2 areas or more by November 2015.

Accreditation Success

The Accreditation on-site survey is now complete and the initial feedback we received from the surveyors is overwhelmingly positive. The Accreditors highlighted so many strengths that we have to be proud of, all speaking to the positive culture at Niagara Health System. Of particular note, we were applauded for several remarkable achievements including aligning our teams on our priorities through huddles and rhythm rounds, trust and reputation with our communities and partners, important initiatives in staff recognition and engagement was also a stand-out accomplishment, from leadership, physicians, and our Board, right to the front line.

Other areas where important work has been completed included our improving culture of patient safety and quality, our focus on Ethics, our improved financial position and many others. The Accreditors also mentioned how effective Route NHS was in ensuring that awareness about Accreditation was high.

We still have some areas where continuing work needs to be done. Without exception, we must use two pieces of identification with every patient interaction. We must also remember that NHS has support for ethical decision-making and the SBAR toolkit and other resources are available on SourceNet. We look forward to receiving the final report from Accreditation Canada including our Accreditation status in the near future and look forward to sharing this with you.



How you can contribute:

- 1) Use TWO patient pieces of identification with every patient interaction
- 2) Review We Check ID information on [SourceNet](#)
- 3) Think Ethics – how does it apply to what you do?
- 4) Visit [NHS Ethics SourceNet](#) page for resources



Access & Flow

Target: Improve access and flow for our most vulnerable patients by reducing the 90th percentile of ED length of stay for admitted patients to less than 28 hours by September 2015.

Know your healthcare options in Niagara

Emergency Departments and Urgent Care Centres are very busy with an increased number of patients during the holiday season and winter months. Hotel Dieu Shaver Health and Rehabilitation Centre, Niagara Region Public Health and Niagara Health System are working together on a number of strategies to improve access to healthcare and ensure members of the public proceed to the proper destination for the level of care they require.

One of these strategies is a public education campaign to help the public better understand the most appropriate healthcare options available to them if they require medical attention for flu or other illnesses.

Everyone is encouraged to use patient and client interactions to remind residents of the healthcare options available in Niagara.

During the winter season, we are encouraging the public to visit their family healthcare provider or nearest walk-in clinic as an alternative to the Emergency Department when they do not require emergency care.

They can also find a nearby clinic by going to Healthcare Options Ontario (www.ontario.ca/healthcareoptions) or calling Telehealth Ontario (1-866-797-0000) or 211. For medical emergencies, members of the public should always call 9-1-1 immediately or go to the nearest Emergency Department. NHS's website at www.niagarahealth.on.ca/options has more information on the available healthcare options.



What you need to do:

- 1) Educate yourself and others about flu symptoms; getting the flu shot and preventative measures to stay healthy
- 2) Review the [Know Your Options](#) for healthcare on NHS website
- 3) Educate patients/visitors on the available healthcare options
- 4) Review the [Tip sheet on SourceNet](#)



Vision & Engagement

Target: Engage our people in developing a plan for the NHS's future, including submission of a capital plan to the Ministry by October 2015.

New Hospital Planning (Capital Planning)

While we are still in the very early stages of planning for the new south Niagara hospital, we are pleased to report NHS planning progress as being right on track.

At this stage in the hospital planning, our focus is on identifying how to best use our resources and services to most effectively respond to the healthcare needs of Niagara residents.

A Community Planning Advisory Council (CPAC) has been created to provide an opportunity for our partners to actively engage in the development of the new hospital and accompanying health services. The CPAC is, made up of representatives from NHS, Hamilton Niagara Haldimand rant Local Health Integration Network (LHIN), Niagara Emergency Medical Services (NEMS), health and academic partners, members from across the region including the southern tier communities, and additional external stakeholders.

Above all, we are committed to working with the community by keeping residents informed and considering their aspirations and concerns. We recently completed a series of engagement sessions across the region, which gave over 200 community members an opportunity to work with our organization on a joined vision for the future.

We had excellent representation from the region and look forward to continuing to work with the community on the planning progresses for our vision and on planning for the new hospital.



How to get involved:

- 1) Review our planning initiatives to date by accessing the [Clinical Services Plan](#).
- 2) Learn more about Community Planning Advisory Council (CPAC) on our external NHS website [here](#)

Tis the Season

Know your healthcare options in Niagara



During the months of November to May, flu and other illnesses spread in our communities. As we celebrate the holiday season, people gather in larger groups, they travel, and attend events that create opportunities for illnesses to spread.

Niagara Health System, Hotel Dieu Shaver Health and Rehabilitation Centre, and Niagara Region Public Health are working together to help the public better understand the options available for healthcare during the holiday season and winter months.

In non-emergency situations,
YOUR FIRST OPTION
should be your family doctor or nurse practitioner.

Other options include: _____



Walk-in clinics



Visit Healthcare Options at www.ontario.ca/healthcareoptions to search for a healthcare provider near you



Call Telehealth 1-866-797-0000 for health advice and information from a registered nurse 24 hours a day, 7 days a week



Call 211 for information and services about healthcare in Niagara

For medical emergencies: Call 9-1-1-immediately or go to the nearest Emergency Department
General healthcare options: www.niagarahealth.on.ca/Options

When to go to a Niagara Health System **Emergency Department** or **Urgent Care Centre**

Our **Emergency Department** teams treat patients who call 9-1-1 and arrive by ambulance. They also treat walk-in patients for such emergencies as:

- Broken bones
- Dizziness
- Complications of pregnancy
- Serious illness
- Serious injury
- Mental health issues

Our **Urgent Care Centre** teams treat patients with minor injuries or illnesses such as:

- Minor abdominal pain (nausea, vomiting)
- Ear, nose, throat and eye problems
- Minor mental health issues
- Cuts that may need stitches
- Sprains, strains, sports injuries
- Minor asthma attacks or allergic reactions

#knowyouroptions



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@hoteldieushaver



@nrpublichealth

For wait times visit: www.niagarahealth.on.ca/educwaittimes

For information on the flu: www.niagarahealth.on.ca/health