



MINUTES of the **BOARD OF DIRECTORS** meeting held on **Thursday, November 07, 2013**, 1700 hours, Windsor Room, 1030 Ouellette Avenue, Windsor, Ontario.

PRESENT:

Gay Wrye, Chair	Arvind Arya	Dr. Gerry Cooper (ex-officio, non-voting)
Dr. Wilf Innerd	Yvan Poulin	David Musyj (ex-officio, non-voting)
Lisa Landry	Dan Wilson	Dr. Gary Ing (ex-officio, non-voting)
Pam Skillings	Lynne Watts	Dr. Andrea Steen (ex-officio, non voting)
Ruth Orton-Pert	Leanne Leech	Dr. Shobhana Patel (ex-officio, non-voting)
Leanne Leech	John Leontowicz	
Bob Renaud		Karen McCullough (ex-officio, non-voting)
Dr. Maureen Muldoon		

STAFF:

Executive Committee

REGRETS:

Anthony Paniccia Dr. Sowmil Mehta (ex-officio, non voting)

1. CALL TO ORDER:

The meeting was called to order at 1712 hours with Gay Wrye presiding as Chair and Cheryl Clark recording the minutes.

The Chair stated this was the Board's first meeting at the Ouellette Campus.

2. PRESENTATION: "The Road to Excellence":

A hard copy of the presentation had been previously distributed.

Ms. Janice Kaffer, V.P. Clinical Operations, Executive Lead – Met Campus, introduced the following staff members from Ouellette Campus, who played integral parts in the successes she would speak to at this meeting. Other staff members were also involved, but unable to attend the Board meeting.

- Dino Villalta, Director of Regional Programs Renal and Stroke
 - Janice Dawson, Director of Critical Care and Cardiology
 - Joe Karb, Director of Mental Health
- Staff members were working toward individual ends, but the journey mattered because of staff engagement. It was definitely a team effort.

Some of the areas highlighted in her presentation follow:

- i) **Critical Care & Cardiology:**
 - OR to ICU direct patient transfer
 - Cardiology: Development of 24/7 cardiac cath lab operations business case – awaiting approval
 - Work has begun on establishing a Smoking Cessation Program

- ii) **ER & Trauma:**
 - Have been working toward a more stabilized team/consistent leadership
 - Trauma program will be a pilot site for new accreditation standards for trauma. Next week it will host the first accreditation surveyors in Ontario. We are the test case regarding how trauma will be accredited going forward.

- iii) **Renal Department:**
 - Decision expected soon on move to Bell Building
 - Supporting home dialysis programs

- iv) **Infection Control:**
 - Development of a human waste strategy

- v) **Medicine Program:**
 - Resolution of PRC process. Improvement made on the unit and across hospital
 - Successful implementation of Medworxx (clinical utilization tool)
 - Program is supporting other initiatives

- vi) **Perioperative Program:**
 - Many efficiencies introduced into the OR.

- vii) **Patient Flow:**
 - Implementation of VIBE (bed management tool)

- viii) **Mental Health:**
 - Move to patient-centered approach

Ms. Kaffer stated that Messrs. Karb and Villata and Ms. Dawson are phenomenal directors & great leaders in the organization

3. DECLARATIONS OF CONFLICT OF INTEREST:

None noted.

4. PREVIOUS MINUTES –October 03, 2013

The minutes of the October 03, 2013 Board of Directors meetings had been previously distributed.

MOVED by Ms. L. Watts, **SECONDED** by Mr. A. Arya and **CARRIED**
THAT the minutes of the October 03, 2013 Board of Directors meeting be approved.

5. **REPORT OF THE PRESIDENT & CEO:**

Mr. Musyj reported, highlighting the following:

WRH has been invited for the third straight year, to attend the IHI Conference in Florida.

While there, we will be presenting three best practices:

1. **Lean on Me:** Practical Strategies for Improving Patient Satisfaction Through Improved Emotional Support.

Our patient satisfaction rates have been excellent but we needed to improve on providing emotional support to them. Overall patient satisfaction was at 97% but only 67% of the patients were satisfied with the emotional support they received. A Task Force surveyed more than 100 patients to determine their emotional needs. Several initiatives have been launched.

2. **Emergency Medical Paediatric Program (EMP):** Timely Access to Specialized Paediatric Care.

This has been in place for two years. We took this from the OB program where we have moms coming into the E.R. and who have issues that should be addressed immediately. Those moms are able to go to the floor and by-pass ER all together. This has been a very successful program. The patient is seen by a nurse & OB and hopefully sent home in timely manner.

Paediatric cases can bypass E.R. and go to the 3rd floor and be seen by the paediatrician on-call. We have had great success with this and we are looking to expand the hours from 6-10pm. We will be adding more paediatricians next year so we expand the hours.

3. **Starting The Week Off Right:** Monday Morning Huddle to Improve Patient Safety.

Clinical and non-clinical leads meet on Monday mornings for 15 minutes. They review results concerning various areas of the patient journey, such as safety including hand hygiene compliance, HAI, patient falls with injury, patient flow, etc. How many patients did we harm in the previous week; our goal is zero. The staff move on items where there are problems and share ideas and they get rid of things that are not working.

Health Quality Transformation Conference: WRH has been invited to make a presentation on *Benchmarks in Public Reporting: Measuring Performance and Setting Meaningful Goals* at the Health Quality Transformation Conference hosted by Health Quality Ontario.

Telemedicine Program: This program began one year ago. It has been useful in helping patients avoid having to move to another campus to meet with a physician, or meeting in the physician's office. The physician can view results via videoconferencing. This will be expanded to Ouellette

The 4th Annual International Patient Safety Symposium will occur at HFHS in Detroit on December 06.

The Institute of Public Administration of Canada (IPAC) has selected HDGH and WRH as finalists for their leadership award as a result of the re-alignment. There will be a Jury Presentation on November 20.

Ms. Watts referred to page 2 of the report regarding cataract surgeries.

Mr. Musyj stated this is not a financial penalty. Ms. Watts stated it appears what we are trying to accomplish in order to get better financial results, is in fact hurting us.

Mr. Musyj added the Ministry wants to put resources where wait times are higher. Windsor has a wait time of 88 days on average for cataract surgeries. The community here is having their surgeries done ahead of the target of 182 days and the provincial average of 148 days.

6. TREASURER'S REPORT

Ms. Leech highlighted the following:

- We are now half way through the year. This is the last financial report we will see prior to re-alignment.
- As of September, we had a small deficit. This was better than budget and we are pleased with results to September.

7. REPORTS: None

8. CONSENT AGENDA:

i) Finance/Audit & Resources – October 21, 2013

MOVED by Ms. L. Leech, **SECONDED** by Mr. Y. Poulin and **CARRIED**

THAT the report of the October 21, 2013 Finance/Audit & Resources Committee meeting be accepted.

9. NEW BUSINESS:

None

10. BUSINESS ARISING:

None

11. CORRESPONDENCE/PRINTED MATTER:

Media Report – CBC French radio on HFHS

12. BOARD member Questions, Comments or Notices of Motions

None noted.

13. DATE OF NEXT MEETING: Thursday, December 12, 2013

St. Clair Centre for the Arts – more details will be forwarded closer to the date.

Future board dates:

Thursday, January 09, 2014

Thursday, February 06, 2014

Thursday, March 06, 2014

Thursday, April 03, 2014

Thursday, May 01, 2014

Thursday, June 05, 2014

Thursday, June 19, 2014 (tentative date for AGM)

14. ADJOURNMENT:

There being no further business to discuss, it was

MOVED by Mr. Y. Poulin, **SECONDED** by Mr. R. Renaud and **CARRIED**
THAT the November 07, 2013 Board of Directors meeting be adjourned at 1802 hours.

Gay Wrye, Chair
Board of Directors

Cheryle Clark
Recording Secretary

/cc