



St. Joseph's Hamilton Joint Boards of Governors

June 2017

Open Agenda Package – Web Version

Mission: Living the Legacy – Compassionate Care.
Faith. Discovery.

Vision: On behalf of those we are privileged to serve, we will: deliver an integrated high quality care experience, pursue and share knowledge, respect our rich diversity, always remaining faithful to our Roman Catholic values and traditions.

Values: We commit ourselves to demonstrate in all that we undertake, the vision and values that inspired our Founders, the Sisters of St. Joseph. These are: **Dignity, Respect, Service, Justice, Responsibility and Enquiry.**

JBG Values

Respect – Mind, Body & Spirit of the Whole Person



Definition

Places high emphasis on the well being and quality of life by responding to the needs of the whole person: body, mind and spirit. Appreciates the viewpoint and circumstances of others and recognizing the value of the individual

Behaviours

- Provides positive interpersonal relations
- Is focused on the quality of life
- Is concerned with diversity

St. Joseph's Hamilton Joint Boards of Governors – Open Agenda
Thursday, June 29, 2017
3:35 – 6:00 p.m.

Dofasco Boardroom – 2nd Floor – Juravinski Innovation Tower – T2215

- Elected Members** Mr. Peter Tice (Chair), Mr. Carl Santoni, Mr. Sonny Monzavi, Dr. Mary Guise, Mr. Ray Rocci, Ms. Moira Taylor, Mr. Tony Thoma, Mr. David Tonin, Mr. Adriaan Korstanje, Ms. Lynn McNeil, Mr. Rod Dobson, Mrs. B. Beaudoin, Mrs. C. Olsiak, Dr. C. Byrne.
- Ex-Officio Members** Dr. Anil Kapoor, Ms. Winnie Doyle, Dr. Tom Stewart, Dr. David Higgins, Dr. P. O'Byrne, Dr. Kevin Smith.
- Senior Management Team** Mr. Derrick Bernardo, Dr. Carolyn Gosse, Dr. Jack Gauldie.
- Resource** Mrs. Jessica Fry, Mrs. Fadia Voogd, Ms. Sera Filice-Armenio, Ms. Maureen Ellis.
- Guest(s):** Dr. N. Hambly
- VALUES:** D = dignity, R1 = respect, S = service, J = justice, R2 = responsibility, E = enquiry

Time	Item	Topic	Motion	Values	Lead	Page
3:35pm	1.0	Call to Order				
	1.1	<i>Opening Prayer and Reflection on RESPECT</i>		R2	T. Thoma All	
	1.2	<i>Introduction of Guests</i>				
	1.3	<i>Declaration of Conflict of Interest</i>				
	1.4	<i>Approval of Agenda</i>	<u>All JBG Voting Members:</u> THAT THE OPEN AGENDA OF THE JUNE 29, 2017 ST. JOSEPH'S HAMILTON JOINT BOARDS OF GOVERNORS COMMITTEE MEETING BE APPROVED	R2	P. Tice	
3:55pm	2.0	Consent Agenda				
	2.1	<i>Approval of St. Joseph's Hamilton Joint Boards of Governors Open Minutes</i>	<u>All JBG Voting Members:</u> THAT THE OPEN MINUTES OF THE MAY 25, 2017 ST. JOSEPH'S HAMILTON JOINT BOARDS OF GOVERNORS MEETING BE APPROVED	R2	P. Tice	
	2.2	<i>Governance Mission and Values Committee Minutes</i>	<u>All JBG Voting Members</u>	R2	S. Monzavi	

Time	Item	Topic	Motion	Values	Lead	Page
		<i>and Motions</i>	THAT THE MINUTES OF THE GOVERNANCE, MISSION AND VALUES COMMITTEE MEETING OF JUNE 6, 2017 BE ACCEPTED FOR INFORMATION			
	2.3	<i>Resource and Audit Committee Minutes and Motions</i>	<p><u>All JBG Voting Members</u> THAT THE MINUTES OF THE RESOURCE AND AUDIT COMMITTEE MEETING OF JUNE 21, 2017 BE ACCEPTED FOR INFORMATION</p> <p><u>SJHH Voting Members</u> THAT THE SJHH ATTESTATION FOR THE PERIOD OF APRIL 1, 2016 TO MARCH 31, 2017, PREPARED IN ACCORDANCE WITH SECTION 15 OF THE BROADER PUBLIC SECTOR ACCOUNTABILITY ACT (BPSAA) BE APPROVED</p>			
4:00pm	3.0	Quality & Patient Safety				
	3.1	<i>Quality Committee Minutes, Motions and Report</i>	<p><u>All JBG Voting Members</u> THAT THE MINUTES OF THE QUALITY COMMITTEE MEETING OF JUNE 13, 2017 BE ACCEPTED FOR INFORMATION</p>	S	R. Rocci	
4:15pm	4.0	Medical Advisory Committee Presentation				
		Dr. N. Hambly – Department of Medicine, Service of Respiriology				
4:40pm	5.0	Reports				
	5.1	<i>Report of Chair</i>		R2	P. Tice	
	5.2	<i>Report of the President and CEO, St. Joseph's Health System</i>		R2	K. Smith	

Time	Item	Topic	Motion	Values	Lead	Page
	5.3	<i>Report of Presidents</i>		R2/S	D. Higgins D. Bernardo C. Gosse	
	5.4	<i>Report of the Chief Nursing Executive</i>		R2/S	W. Doyle	
	5.5	<i>Report of the Vice President Research</i>		R2	J. Gauldie	
	5.6	<i>Report of the Chief of Staff</i>		R2	T. Stewart	
	5.7	<i>Report of President, Medical Staff Association</i>		R2	A.Kapoor	
	5.8	<i>Report of the President SJVD Foundation SJHH Foundation</i>		R2	M. Ellis S. Filice-Armenio	
4:50pm	6.0	Information / Education Items				
	6.1	Walkabout Schedule and Council Meeting Schedule		R2 / E	P. Tice	
	6.2	LTCHomes.net – Memo to the Sector – Article				
4:50pm	7.0	Adjournment				
	7.1	<i>Motion to adjourn</i>	<u>All JBG Voting Members:</u> THAT THE OPEN SESSION OF THE ST. JOSEPH'S HAMILTON JOINT BOARDS OF GOVERNORS MEETING BE ADJOURNED		P. Tice	
4:50pm	8.0	Break followed by Closed Session				

Committee: St. Joseph's Hamilton Joint Boards of Governors – OPEN SESSION Date: May 25, 2017
Called to order at: 1530 hours Adjourned: 1700 hours

St. Joseph's Healthcare Hamilton Voting Members:

Mr. P. Tice, Mr. S. Monzavi, Mr. A. Korstanje, Ms. L. McNeil, Mr. C. Santoni, Mrs. C. Olsiak, Dr. C. Byrne.

St. Joseph's Villa Dundas Voting Members:

Mr. P. Tice, Mr. S. Monzavi, Mr. A. Korstanje, Mr. R. Rocci, Mrs. M. Taylor, Mr. T. Thoma, Mr. R. Dobson.

St. Joseph's Homecare Hamilton Voting Members:

Mr. P. Tice, Mr. S. Monzavi, Mr. A. Korstanje, Dr. M. Guise, Mrs. M. Taylor, Mr. D. Tonin, Mrs. B. Beaudoin.

Location: Dofasco Boardroom – Juravinski Innovation Tower
Present: Mr. P. Tice, Chair, Mr. A. Korstanje, Mr. R. Dobson, Mr. T. Thoma, Mrs. C. Olsiak, Mrs. B. Beaudoin, Dr. C. Byrne, Dr. T. Stewart, Ms. W. Doyle, Mr. C. Santoni, Mr. R. Rocci, Mr. S. Monzavi, Dr. M. Guise, Mr. D. Tonin, Dr. A. Kapoor.
Regrets: Mrs. M. Taylor, Mrs. L. McNeil, Dr. K. Smith.
Resource Staff: Dr. D. Higgins, Mrs. F. Voogd, Mr. D. Bernardo, Dr. C. Gosse, Ms. S. Hollis Ms. J. Fry.
Guests: Dr. M. Smieja, Ms. C. Sutherland, Mr. R. Tiffin.
NEXT MEETING June 29, 2017

Subject	Discussion
1. PROTOCOL	
1.0 CALL TO ORDER	The meeting was called to order at 1530 hours by P. Tice.
1.1 OPENING PRAYER	B. Beaudoin opened the meeting with a prayer. There was reflection with respect to the value of DIGNITY.
1.2 INTRODUCTION OF GUESTS	All invited guests were introduced.
1.3 DECLARATION OF CONFLICT OF INTEREST	There was no conflict of interest declared.
1.4 APPROVAL OF AGENDA	<p style="text-align: center;"><u>All JBG Voting Members</u></p> <p><i>ON MOTION DULY MADE AND SECONDED THE FOLLOWING RESOLUTION WAS PASSED:</i></p> <p>THAT THE ST. JOSEPH'S HAMILTON JOINT BOARDS OF GOVERNORS AGENDA BE APPROVED AS CIRCULATED</p>
2. CONSENT AGENDA	
2.1 APPROVAL OF ST. JOSEPH'S HAMILTON JOINT BOARDS OF GOVERNORS OPEN MINUTES	<p style="text-align: center;"><u>All JBG Voting Members</u></p> <p><i>ON MOTION DULY MADE AND SECONDED THE FOLLOWING RESOLUTION WAS PASSED:</i></p> <p>THAT THE MINUTES OF THE OPEN SESSION OF THE APRIL 27, 2017 ST. JOSEPH'S HAMILTON JOINT BOARDS OF GOVERNORS COMMITTEE BE APPROVED</p>

Subject	Discussion
<p>2.2 GOVERNANCE, MISSION AND VALUES COMMITTEE MINUTES AND MOTIONS</p>	<ul style="list-style-type: none"> • There was no further discussion. <p style="text-align: center;"><u>All JBG Voting Members</u></p> <p><i>ON MOTION DULY MADE AND SECONDED THE FOLLOWING RESOLUTION WAS PASSED:</i></p> <p>THAT THE MINUTES OF THE GOVERNANCE, MISSION AND VALUES COMMITTEE OF MAY 2, 2017 BE ACCEPTED FOR INFORMATION</p> <p style="text-align: center;"><u>All JBG Voting Members</u></p> <p><i>ON MOTION DULY MADE AND SECONDED THE FOLLOWING RESOLUTION WAS PASSED:</i></p> <p>THAT THE MINUTES OF THE SPECIAL GOVERNANCE, MISSION AND VALUES COMMITTEE MEETING OF MAY 16, 2017 BE ACCEPTED FOR INFORMATION</p> <p style="text-align: center;"><u>All JBG Voting Members</u></p> <p><i>ON MOTION DULY MADE AND SECONDED THE FOLLOWING RESOLUTION WAS PASSED:</i></p> <p>THAT THE REPORT OF THE NOMINATING COMMITTEE FOR 2017-2018 BE APPROVED</p>
<p>2.3 RESOURCE AND AUDIT COMMITTEE MINUTES AND MOTIONS</p>	<ul style="list-style-type: none"> • The Resource and Audit Committee report was overviewed. • It was noted that discussion occurred with the auditors and Executive Team and that a report will be provided in writing with respect to SJHC. • Discussion occurred with respect to the transfer of stroke care and related funding from SJHH to HHS. <p style="text-align: center;"><u>All JBG Voting Members</u></p> <p><i>ON MOTION DULY MADE AND SECONDED THE FOLLOWING RESOLUTION WAS PASSED:</i></p> <p>THAT THE MINUTES OF THE RESOURCE AND AUDIT COMMITTEE OF APRIL 26, 2017 BE ACCEPTED FOR INFORMATION</p> <p style="text-align: center;"><u>All JBG Voting Members</u></p> <p><i>ON MOTION DULY MADE AND SECONDED THE FOLLOWING RESOLUTION WAS PASSED:</i></p> <p>THAT THE MINUTES OF THE RESOURCE AND AUDIT COMMITTEE OF MAY 24, 2017 BE ACCEPTED FOR INFORMATION</p> <p style="text-align: center;"><u>SJHH Voting Members</u></p> <p><i>ON MOTION DULY MADE AND SECONDED THE FOLLOWING RESOLUTION WAS PASSED:</i></p>

Subject

Discussion

THAT THE SJHH AUDITED FINANCIAL STATEMENTS FOR THE YEAR ENDED MARCH 31, 2017 BE APPROVED

SJHC Voting Members

ON MOTION DULY MADE AND SECONDED THE FOLLOWING RESOLUTION WAS PASSED:

THAT THE SJHC AUDITED FINANCIAL STATEMENTS FOR THE YEAR ENDED MARCH 31, 2017 BE APPROVED

SJHH Voting Members

ON MOTION DULY MADE AND SECONDED THE FOLLOWING RESOLUTION WAS PASSED:

THAT THE APPOINTMENT OF KPMG LLP AS AUDITORS FOR SJHH FOR THE YEAR ENDING MARCH 31, 2018 BE APPROVED

SJHC Voting Members

ON MOTION DULY MADE AND SECONDED THE FOLLOWING RESOLUTION WAS PASSED:

THAT THE APPOINTMENT OF KPMG LLP AS AUDITORS FOR SJHC FOR THE YEAR ENDING MARCH 31, 2018 BE APPROVED

SJVD Voting Members

ON MOTION DULY MADE AND SECONDED THE FOLLOWING RESOLUTION WAS PASSED:

THAT THE APPOINTMENT OF KPMG LLP AS AUDITORS FOR SJVD AND SJVD ESTATES FOR THE YEAR ENDING DECEMBER 31, 2017 BE APPROVED

SJHC Voting Members

ON MOTION DULY MADE AND SECONDED THE FOLLOWING RESOLUTION WAS PASSED:

THAT THE SJHC OPERATING BUDGET FOR THE FISCAL YEAR APRIL 1, 2017 THROUGH MARCH 31, 2018 BE APPROVED



SJHH Voting Members

ON MOTION DULY MADE AND SECONDED THE FOLLOWING RESOLUTION WAS PASSED:

THAT THE TRANSFER OF STROKE CARE AND THE RELATED FUNDING FROM SJHH TO HHS BE APPROVED

Subject	Discussion
<p>3. QUALITY AND PATIENT SAFETY</p> <p>3.1 QUALITY COMMITTEE MINUTES, MOTIONS AND REPORT</p>	<ul style="list-style-type: none"> • A patient story from SJHC was provided. The story highlighted the need for community based programs, patient and staff engagement, appropriate care and discharge planning and by allowing clients to be cared for in their own home. • A webex on the Q4 scorecard indicators was presented. Presentations were also received on the Quality Improvement Plan (QIP) Year End results for all JBG organizations as well as a Quality Presentation on SJHC. • The monthly critical incident report for May 2017 was reviewed. • The OHA Quality Safety Standards were overviewed. • Acceptance rates for SJHC referrals were discussed. <p style="text-align: center;"><u>All JBG Voting Members</u></p> <p><i>ON MOTION DULY MADE AND SECONDED THE FOLLOWING RESOLUTION WAS PASSED:</i></p> <p>THAT THE MINUTES OF THE QUALITY COMMITTEE OF MAY 9, 2017 BE ACCEPTED FOR INFORMATION</p>
<p>4. MEDICAL ADVISORY COMMITTEE PRESENTATION</p>	<ul style="list-style-type: none"> • M. Smieja, Head of Service, Medical Microbiology, Department of Laboratory Medicine gave an informative presentation on the culture of innovation in the medical microbiology service. The diagnosing of various viruses and diseases was overviewed, as well as the national and international impacts of virology/molecular testing which has been developed at SJHH were highlighted. Internationally, it was noted that supportive roles in national collaborations for improving diagnostic tests in Nunavut and international collaborations in Botswana and Vietnam have been realized. • There has been superb collaboration between research and clinical labs in test development and validation. • Extensive discussion ensued. Thanks were extended to Dr. Smieja and his team for their dedication and innovation in this ever evolving and rapidly changing field.
<p>5. REPORTS</p> <p>5.1 REPORT OF CHAIR</p>	<ul style="list-style-type: none"> • M. Guise and R. Tice participated in the Chief of Staff Performance Review Committee. The Committee reviewed the Chief of Staff performance and set targets for the coming year. • Members of the JBG participated in the interview process for JBG membership. • C. Byrne, P. Tice and M. Guise attended the Nursing Excellence Award Dinner on May 9th.
<p>5.2 REPORT OF THE DEAN, FACULTY OF HEALTH SCIENCES</p>	<ul style="list-style-type: none"> • There was no report.
<p>5.3 REPORT OF PRESIDENT AND CEO, ST. JOSEPH'S HEALTH SYSTEM</p>	<ul style="list-style-type: none"> • There was no report.

Subject	Discussion
<p>5.4 REPORT OF PRESIDENTS</p>	<ul style="list-style-type: none"> • It was noted that Eldercare will be the generative discussion topic at the June JBG meeting. • The May 10th St.Joes Livestream on Facebook of a living donor kidney transplant was highlighted. It is believed to be the first living streaming of a kidney transplant in Canada and it is noted that on the actual day almost 350,000 people were reached through social media. Almost 3,000 people wrote messages from around the world including questions to the clinical team, stories of gratitude and emotional support for the Turagas family on facebook the day of the surgery. Local highschools were involved, particularly Saltfleet Highschool which live streamed into their auditorium for students to watch and ask questions. This event, which was led by the Public Affairs Team with the collaboration of the Kidney and Urinary Program, garnered national media coverage. Interest continues to grow, with a social media reach of more than 650,000 and growing.
<p>5.5 REPORT OF THE CHIEF NURSING OFFICER</p>	<ul style="list-style-type: none"> • W. Doyle thanked the JBG for their support of all nursing colleagues during Nursing Week activities. • Shelby Wiersma, this year's winner of the "Star on the Horizon" Award, was presented with the award at the Annual Nursing Week Dinner. A videotaped acceptance speech was viewed by the JBG.
<p>5.6 VICE PRESIDENT RESEARCH</p>	<ul style="list-style-type: none"> • J. Gauldie provided a CAHO data comparison snapshot with respect to research. Highlights included direct research funding per investigator, trainees per investigator, five year publication comparison, and notable achievements for the 2016-17 research year were discussed.
<p>5.7 REPORT OF THE CHIEF OF STAFF</p>	<ul style="list-style-type: none"> • An update on physician recruitment was provided. • T. Stewart has started his role as Chief of Staff at Haldimand War Memorial in Dunnville. Currently there are partnerships with SJHH and HWMH in several clinical areas. • The Medical Affairs Team is currently attending physician department meetings to provide feedback from the engagement surveys and follow up on any requested information. • A patient concerns update was provided. • Ontario has three Ministry approved Innovation Brokers (Council of Academic Hospitals of Ontario being one of them). T. Stewart is representing SJHH on CAHO's Innovation Brokers Task Force. The specific task of this group is to facilitate connection between health care innovations and academic hospitals. • Physician HR Planning continues. A key component is alignment with University Chairs and the Research Institute on academic focus/planning. • SJHH continues to be a welcome active partner in most physician searches in the Niagara Health System, bringing an academic perspective – partnership is an important opportunity for both organizations.
<p>5.8 REPORT OF THE PRESIDENT PROFESSIONAL STAFF ASSOCIATION</p>	<ul style="list-style-type: none"> • An update on the OMA – Provincial Government arbitration was provided. • Meetings are occurring amongst the medical staff with respect to the upcoming Dovetale implementation. • It was noted that the commitment of physicians on the Medical Staff Association Executive is now a three year rather than a four year commitment.

Subject	Discussion
<p>5.9 REPORT OF PRESIDENT</p> <p>SJVD FOUNDATION</p> <p>SJHH FOUNDATION</p> <p>6. INFORMATION EDUCATION ITEMS</p> <p>7. OTHER BUSINESS</p> <p>8. ADJOURNMENT</p>	<ul style="list-style-type: none"> • The SJVD Annual Gala "Red" was held on Friday, April 28th. Over 580 people were in attendance and over \$174K was raised. Thanks were extended to all JBG members for their support. • An update on the residential hospice project was provided. • Letters patient have been updated and submitted for approval. • Two new members have been appointed to the SJVD Foundation Board. One vacancy remains. • All Foundation policies and procedures have been updated and approved. The Risk Management Plan has also been approved. • The Annual Neil McArthur Golf Tournament will be held on October 3rd at Dundas Valley Golf and Curling Club. • An update with respect to the recent Around the Bay and Paris 2 Ancaster fundraisers was provided. • Patient/Family Council Walkabout Schedules • Canadian Board Diversity Council – Annual Report Card • Centre for Healthcare Governance – Article • SJHC Newsletter (e-materials) • News Release – MOHLTC – More Support for People Living with Dementia • There was no other business. <p>THAT THE OPEN SESSION OF THE ST. JOSEPH'S HAMILTON JOINT BOARDS OF GOVERNORS BE ADJOURNED</p> <p>_____ Peter Tice, Chair</p> <p> _____ David Higgins, Secretary</p> <p> _____ Fadia Voogd, Recorder</p>

OPEN REPORT TO THE ST. JOSEPH'S HAMILTON JOINT BOARDS OF GOVERNORS
JUNE 2017

1. Environmental Scan

SJHH: St. Joe's nurses provide safe transitions for new families and baby

Any new mom knows that the first few days with her baby come with a rush of emotion and countless questions, all centred around one thing: a healthy baby. The nurses at St. Joseph's Healthcare Hamilton see first-hand what new parents are experiencing, and they identified that more could be done to support parents after leaving hospital.

The stepping stone was the Baby Assessment Clinic (BAC), created by St. Joe's nurses in 2014, alongside physician leads and in collaboration with nurses from City of Hamilton's Public Health.

As one of the nursing leads who helped facilitate the new initiative, Jaskolka says, "BAC represents our community coming together to support new moms and babies. The Clinic is staffed by a St. Joe's nurse working at full scope of practice, completing baby's assessments including weight checks and blood work and also connecting the new mom with any other support she needs."

That support could come from any of the Clinic's partners: family doctors, nurse practitioners, midwives, Public Health, Early Words programs and Pediatricians. At BAC, nurses have ensured that families have access to a one-stop-shop for information and assessments right after discharge from hospital.

Engaging families and collaborating with community healthcare partners is translating into healthier transitions from hospital to home, and often means that new families can leave the hospital sooner.

The Baby Assessment Clinic is a completely nurse-led Clinic at St. Joseph's Healthcare and one of only three Clinics of its kind in Ontario.

SJHH: Grass roots initiative brings Insulin Pens to St. Joe's

What started with a conversation among colleagues - Ruby Weresch, Diabetes Educator, Cathy Burger Nephrology Pharmacist, Stephanie Gilbreath, Pharmacist, Connie Lukinuk, Pharmacist and Jeremy Johnson, Diabetes Educator – has now become an organization wide initiative to improve the care of patients with diabetes who are transitioning between hospital and home.

"If you consider every injection an opportunity for education, with syringes, we are losing a lot of potential teachable moments," explained Jeremy Johnson, Diabetes Educator at St. Joseph's Healthcare Hamilton. "Using the products that patients' use at home, which are actually more accurate, less-painful and safer for nurses, just seemed like good common sense."

With that, an insulin pen pilot study began in 2013 on the Renal Transplant and Nephrology Units. Results from the pilot found that there was a higher rate of nurse satisfaction and cost neutrality.

"We were pioneers in insulin pen devices in acute care, and we did all this because we truly believe that preserving familiarity increases opportunities for patient education and patient engagement at St. Joe's," said Jeremy.

"From the beginning, we knew this type of an initiative really had to be a marriage between nursing and pharmacy," continued Jeremy. "With the help of dedicated pharmacists and guidance from Heather Radman, Julie Holmes, Carmine Nieuwstraten and Cheryl Evans, we turned our grass roots pilot study, into a full organization-wide conversion!"

SJHH: Dr. Jack Gauldie Receives Distinguished Achievement Award from American Thoracic Society

On Sunday May 21st, Dr. Jack Gauldie, VP Research at St. Joseph's Healthcare Hamilton and Scientific Director of the Research Institute of St. Joe's Hamilton, received the Distinguished Achievement Award from the American Thoracic Society.

The Distinguished Achievement Award recognizes outstanding contributions to fighting respiratory disease through research, education, patient care or advocacy. This award is one of the most prestigious recognitions given to scientists in this field.

Recognized around the world for his work in immunology and gene therapy, Dr. Gauldie's research has used genes as a way for the immune system to fight disease. This approach has allowed him to make contributions to the treatments of diseases such as arthritis, asthma, cancer, and fibrosis.

His recent work has applied gene therapy to make major contributions to the study of pulmonary fibrosis. By uncovering some of the mechanisms responsible for causing lung fibrosis, Dr. Gauldie has not only advanced scientific understanding of this disease – he has also discovered new targets for treatment.

These new treatment targets can lead to the development of new approaches to the treatment of pulmonary fibrosis – improving patient outcomes and saving lives.

Through his leadership, Dr. Gauldie has also played a significant role in establishing the International Pulmonary Fibrosis Colloquium – a small meeting that has grown to 320 annual attendees in thirty years. His mentorship has inspired the next generation of scientific and research talent, as his former trainees lead academic departments around the world and continually publish in some of the world's most prestigious academic journals.

We congratulate Dr. Jack Gauldie on receiving this award, and we look forward to seeing the outcomes of his fruitful career as the future unfolds.

SJHC: Thrive Group Social Media Event

On May 4, 2017, N. Voogd (Executive Assistance & Communications Lead) and L. Lawson (Director, Community Support Services) attended an educational event hosted by Thrive Group on Social Media. The panel of speakers recommended each organization having a social media policy, which SJHC has, and to incorporate it in the orientation package for new employees (we will pursue adding this to our orientation session). With any discipline action with staff, we have to show that we have educated them on the appropriate use of social media.

2. Mission, Vision & Values Update

SJHH: 2017 National Nursing Week Celebration at St. Joe's

The remarkable efforts of nurses at St. Joseph's Healthcare Hamilton consistently exhibit selfless care, expertise, compassion, and service. Employees throughout St. Joseph's Healthcare Hamilton were asked to nominate nursing staff who they felt demonstrated nursing excellence across various areas.

Over 170 nominations were received for Nursing Excellence and Robertson Memorial Awards this year - recognizing exemplary achievement across all nursing domains. These nurses represented the best of the profession and St. Joseph's Healthcare, and highlighted the important contributions of nurses to quality care and interprofessional environment. Congratulations to all of the 2017 award nominees and award recipients.

The nominations were meticulously reviewed and evaluated by a Nursing Week Planning committee. To honor these dedicated nurses, St. Joseph's Healthcare hosted its 16th Annual Nursing Excellence Awards Dinner on Tuesday, May 9th, at Michelangelo's Banquet Centre.

The 2017 award recipients were:

- Mental Health & Addiction Nursing – Tanya Coppola, RPN
- Surgical Nursing – Marian Wiskar, RN
- Women's & Infants' Nursing – Caitlin Stewart, RPN
- Critical Care Nursing – Katie Zwolak, RN
- Emergency/ Ambulatory Nursing – Jennifer Cronk, RPN
- Medical Nursing – Andrea Graci, NP
- Preceptorship/Mentorship – Francisco Magat, RPN
- Star on the horizon – Shelby Wisersma, RN
- Nursing Education – Jennifer Olarte-Godoy, RN
- Nursing Research – Kelly Holt, RN
- Nursing Leadership – Lily Waugh, RN
- Robertson Memorial Award – Elisabeth Palade, RN

SJHC: Compliments

SJHC received a compliment from Jana (Health Links) regarding the wonderful care a mutual client is receiving at Gwen Lee Supportive Housing. Jana stated her client "looked the best I have seen him, and I cannot thank you (C. Laidlaw, Manager) and your staff enough for your kindness and great care..."

SJHC: Mission Legacy Awards

The first SJHC Mission Legacy Awards (MLA) Selection Committee meeting occurred on June 8, 2017 to discuss housekeeping items as the award has not occurred in three years. It was decided that the awards for SJHC will now occur every two years, and the pre-existing nominations will be discarded to start fresh, as they are up to six years old and there are many staff that are no longer with SJHC. The deadline for nominations will be June 30, 2017 and the next and final Selection Committee meeting will take place in the beginning of July to vote for the MLA recipients. A date for the event is still to be finalized. An email to the SJHC Board Members was sent out as a call for nominations.

3. Planning & Development

SJVD: Sisters of St. Joseph's Update

Further to the last report re: The Sisters of St. Joseph's exploring the available space at the Villa, a letter was received stating their intent to continue to look for accommodations elsewhere. The Sisters felt that the required renovations in the undeveloped space at the Villa had the potential to exceed their budget.

SJHC: Gentle Persuasive Approach (GPA)

On May 30, 2017, L. Lawson, along with M. Staresinic (Manager, Human Resources) and G. Jassy (Quality Manager) participated in an educational session on Workplace Violence Prevention and use of Gentle Persuasive Approach. Information focused on the employer's responsibilities for a Workplace Violence Prevention program; overview of Accreditation Canada's Required Organizational Practice on Workplace Violence and tips on how to promote GPA as an important element/strategy in Workplace Violence Prevention at SJHC.

SJHC: Bayshore Healthcare Strategic Partnership

Phase 1 of the contract with Bayshore Healthcare has been extended again until the end of June 2017. The extension was provided to further ensure the full development and approval of an operating plan co-developed with SJHC and Bayshore Healthcare. St. Joseph's Health System and Bayshore will be conducting a planning session in June to finalize the plan details.

4. Operational Information - SJHH

SJHH: Vice-President People and Organizational Effectiveness

The St. Joseph's Healthcare Hamilton leadership team is pleased to announce that Dr. Judy Hunter has accepted the position of Vice-President People and Organizational Effectiveness for St. Joseph's Healthcare, Hamilton. Dr. Hunter was selected following an extensive national search process and comes with extensive experience and an exemplary track record of major accomplishments in the field. She will start with us on Monday July 24, 2017.

Judy has been the Vice-President at Holland Bloorview Kids Rehabilitation Hospital since 2009. Prior to that she had extensive experience as a Human Resources Executive in a number of private sector companies.

Her many career accomplishments while at Holland Bloorview include:

- Chair of the Chief Human Resource Officers for the Council of Academic Teaching Hospitals of Ontario;
- Member, Chief Human Resource Executives Committee, Conference Board of Canada;
- Development and implementation of a people strategy and renewed people plan at Holland Bloorview focused on four priority areas: Leadership, Talent, Culture and Organization Design;
- Developed and implemented a change management framework;
- Led the establishment of Holland Bloorview as the first Canadian Hospital to establish Schwartz Centre Rounds for Compassionate Healthcare.

Dr. Hunter received her Master's Degree from the IMCA Business School in England and her Doctor of Management Degree from Southern Cross University in Australia.

Please join St. Joe's in welcoming Judy to St. Joseph's Healthcare Hamilton when she starts later in July.

SJHH: Accreditation for Doctoral Programmes and Internships in Professional Psychology

The Accreditation Panel for Doctoral Programmes and Internships in Professional Psychology recently voted to re-accredit the St. Joseph's Healthcare Hamilton Clinical Psychology Residency Programme for a period of 7 years. In making this re-accreditation decision, the Panel noted the programme's many strengths. These include the following:

- The overall quality and cohesiveness of its approach to training, attention given to research, planning and quality improvement initiatives.
- The strength of the support the programme receives from St. Joseph's Healthcare Hamilton and the fact that the programme is a source of pride for St. Joseph's Healthcare Hamilton.
- The thoughtful development of the director/associate-director of training leadership model and the dedicated administrative support provided to them in fulfilling their responsibilities.
- The commitment to the scientist-practitioner model of training.
- The exemplary resources and training settings and excellent physical facilities, which were seen to promote the cohesiveness of the training programme.
- The commitment to programme evaluation training.
- The well thought out policies and excellent resource handbook.
- The consistent attention to work-life balance of residents and staff, as evidenced by positive evaluations from both programme staff and current and past residents.

5. Operational Information - SJVD

Hospice Update

Villa Hospice Project

As per the previous meeting and after several meetings with stakeholders and the Villa's Senior Team, the change in project scope from a 1 storey 6-bed hospice to a 2-storey 10-bed Hospice building has been proposed and vetted through Resource & Audit committee for review and approval.

Hospices as Hubs for Palliative Care

Currently the Regional Palliative Care Network is in the exploration phase of the concept of Hospices as Hubs for Palliative Care. The goal of this concept is to improve access, ensure seamless transitions in healthcare delivery and improve quality of palliative/ end of life care, create capacity through education and support.

Partnership with Hospice Palliative Care of Ontario (HPCO)

Currently all Hospices in our region are collaborating with the HPCO re: Family and Caregiver Support. To date the hospices have reviewed various educational programs for PSWs. The focus has been to create videos for caregivers and activities of daily living for those diagnosed with a life-limiting illness. One on one are currently being conducted with caregivers.

Partnership re: Palliative Transitions in Care

Further to the last report the Villa and SJLC are in partnership re: the most recent proposal submission that reflects seamless transitions for patients & families with a life limiting illness. The location of this 6

bed Transitional unit will be at Stedman House in Brantford and will be leveraging on the current Day Wellness program, Villa's back office support and expertise from Stedman Hospice. It is anticipated that an approval will be received by July 2017.

Long Term Care Update

The Role of the RN Prescribing Medication

The Ontario government approved changes to the Nursing Act to permit RNs to prescribe medication according to a list, and to communicate a diagnosis for the purpose of prescribing medication.

Although the government has approved changes, RNs do not have the authority to perform either of these activities until the College makes regulations under the Nursing Act.

Diagnosing and prescribing are high-risk activities; the College is accountable for providing proper regulatory oversight that protects the public's right to safe nursing care. The College will be working on ensuring there are regulatory mechanisms in place to promote safe nursing practice.

The college will define the scope of this new authority for RN practice and develop regulations that will implement this change safely, while supporting the government's goal of improving public access to medication. The College will consult with a broad range of stakeholders.

Eldercare Update

Senior Friendly Hospital Emergency Room Departments Initiative Update

The Eldercare Task Group re: The Senior Friendly Hospital Emergency Rooms completed a review of the Welland Hospital ER Department. Overall, the many processes were found to reflect best practice and address the needs of seniors with their region. It is also noted that this community has a large population group of seniors over the age of 65. A fulsome, report will be provided at a later date, while the final review for the St. Mary's ER Department has yet to be determined.

Senior Housing Project - Request for Expression of Interest

After some discussions with senior housing developers, management had decided to follow SJLC's lead in the RFEI process. The REFI is still to be approved by the Resource and Audit Committee. Commencement of this project, will relay heavily on the hospice project.

Eldercare Executive Update

A formal presentation will be provided by D. Bernardo and D. Wormald in the Fall 2017 re: Update of Strategic Plan initiatives.

MOH and LTC Highlights

Plans of Care

It is a legislative requirement to have up-to-date and complete plans of care for residents of long-term care homes. The Long-Term Care Homes Act, 2007 (LTCHA) sets out care planning requirements that include engaging with the resident and any substitute decision-makers of the resident, where the resident is not capable of making decisions. This engagement is part of the plan of care process to determine the planned care for a resident, the goals of the care, and clear directions for staff and others who provide direct care to the resident. Family members or other support people may also be

designated by the resident or substitute decision-maker (where the resident is incapable) to participate in the process.

Do Not Resuscitate (DNR) Orders and DNR-C Forms

According to the GLTCRC, "healthcare professionals are reminded that a "Do Not Resuscitate" (DNR) order does not mean do not treat". The specific meaning of a DNR Order, a DNR-C Form, and Advance Care Plan, should be clearly discussed with the patient, family, and/or substitute decision maker within the context of overall care and treatment planning at the end of life, and in situations of rapidly changing health status.

Here is how these important terms are described in Ontario, in the references noted below.

DNR (Do Not Resuscitate) Orders This is a written medical order that documents a patient's decision regarding his/her desire to avoid cardiopulmonary resuscitation. DNR should not be mistaken as do not treat; it is specific only to CPR.

DNR-C (Do Not Resuscitate Confirmation) Forms when completed, this form provides direction to both paramedics and firefighters with respect to what patient care interventions may be initiated for patients experiencing respiratory or cardiac arrest. This form cannot be printed or filled "on-line" due to the unique serial number that is pre-printed on each form.

MOH Inspection Process

Recently, the LTC Inspections Branch has put in place a number of new policies in response to recommendations made by the Auditor General of Ontario. Below is a summary of the new policies and the impact they will have on the inspection process:

1. There are new guidelines for determining compliance due dates. Using a judgment matrix tool, Inspectors come to a conclusion regarding the timeframes associated with different actions they will take or sanctions they will make.
2. At the time of inspection, Inspectors can now determine whether a Compliance Order is considered to be a High Risk Order or not. The follow-up inspections associated with High Risk Orders have shorter timeframes.
3. An inspector may now issue a Director Referral to address non-compliance. This decision is based on a combination of the judgement matrix and the home's compliance history.
There are three other situations when a Director Referral may be made:
 - a. Cases of repeated non-compliance with Orders (e.g., when a Compliance Order has been re-issued twice);
 - b. Inspections with high risk findings;
 - c. The appropriate response to the non-compliance is beyond the authority of the inspector
4. Inspectors are to contact complainants for all intakes to gather or confirm information, and to notify them of the inspection status and findings.
5. Inspectors at Central Intake & Assessment Triage Team or at the Service Area Office may contact a LTC Home by phone to gather additional information. This is being done more frequently by the ministry to help determine the appropriate action to take as a result of information received from various sources including telephone calls, complaint letters forwarded from the home, emails, and critical incident reports.