





St. Joseph's Hamilton Joint Boards of Governors

May 2015

Open Agenda Package - Web Version







St. Joseph's Hamilton Joint Boards of Governors – Open Agenda Thursday, May 28, 2015 3:30 – 6:00 p.m.

Dofasco Boardroom – St. Joseph's Healthcare Hamilton 2nd Floor, Juravinski Innovation Tower 50 Charlton Avenue East. Hamilton

Elected Members

Mr. Carl Santoni (Chair), Mr. Peter Tice, Mr. Sonny Monzavi, Dr. Mary Guise, Mr.

Jim LoPresti, Ms. Carolyn Milne, Mr. Ray Rocci, Ms. Moira Taylor, Mr. Tony

Thoma, Mr. David Tonin, Mr. Adriaan Korstanje, Ms. Lynn McNeil.

Ex-Officio Members

Dr. Cyndie Horner, Ms. Winnie Doyle, Dr. Ian Preyra, Dr. David Higgins, Dr. John

Kelton, Dr. Kevin Smith

Senior Management Team

Mr. Derrick Bernardo, Mrs. Jane Loncke, Dr. Jack Gauldie.

Resource

Ms. Jessica Fry, Ms. Fadia Ros, Ms. Sera Filice-Armenio, Ms. Maureen Ellis.

Guest(s)

Dr. S. Nesathurai.

VALUES: D = dignity, R1 = respect, S = service, J = justice, R2 = responsibility, E = enquiry

Time	Time Item Topic Motion		Values	Lead	Page	
3:30pm	1.0	Call to Order				
	1.1 1.1.1	Opening Prayer and Reflection on SERVICE		R2	J. LoPresti All	
	1.2	Approval of Agenda	All JBG Voting Members: THAT THE OPEN AGENDA OF THE MAY 28, 2015 ST. JOSEPH'S HAMILTON JOINT BOARDS OF GOVERNORS COMMITTEE BE APPROVED	R2	C. Santoni	
	1.3	Declaration of Conflict of Interest		R2	C. Santoni	
	1.4	Introduction of Guests		R1	C. Santoni	
3:40pm	2.0	Consent Agenda				
	2.1	Approval of St. Joseph's Hamilton Joint Boards of Governors Open Minutes	All JBG Voting Members: THAT THE OPEN MINUTES OF THE APRIL 30, 2015 ST. JOSEPH'S HAMILTON JOINT BOARDS OF GOVERNORS BE APPROVED	R2	C. Santoni	1-5

Time	Item	Topic	Motion	Values	Lead	Page
	2.2	Governance Mission and Values Committee Minutes and Motions	All JBG Voting Members THAT THE MINUTES OF THE GOVERNANCE, MISSION AND VALUES COMMITTEE OF MAY 5, 2015 BE ACCEPTED FOR INFORMATION	R2	P. Tice	6-49
			SJHH Voting Members THAT THE MEMBERSHIP OF THE CHIEF OF STAFF SEARCH COMMITTEE COMPRISED OF THE PARTICIPANTS LISTED IN THE GOVERNANCE MINUTES OF MAY 5, 2015 BE APPROVED			
			SJHH Voting Members THAT THE UPDATED JOINT CHIEF OF STAFF DUE DILIGENCE WORK PLAN BE APPROVED			
			All JBG Voting Members THAT THE FOLLOWING POLICIES BE APPROVED: JBG #2 – BOARD EVALUATION POLICY JBG #16 – ENVIRONMENTAL POLICY			
			JBG #17 – TRAVEL POLICY: BOARD EXPENSE CLAIMS JBG #18 – SCHEDULE A – DECLARATION OF COMMITMENT TO MISSION AND CONFIDENTIALITY AND DISCLOSURE OF RELATIONSHIPS WITH MEMBER ORGANIZATION VENDORS			
			All JBG Voting Members THAT THE 2015-16 NOMINATING REPORT BE APPROVED			

Time	Item	Topic	Motion	Values	Lead	Page
	2.3	Resource & Audit Committee Minutes and Motions	See Item 4.1	, R2	S. Monzavi	
3:50pm	3.0	Quality & Patient Safety				
	3.1	Quality Committee Minutes, Motions and Report	All JBG Voting Members THAT THE MINUTES OF THE QUALITY COMMITTEE OF MAY 12, 2015 BE ACCEPTED FOR INFORMATION	S	R. Rocci	50-67
			THAT THE FOLLOWING POLICIES BE APPROVED: SJHH Voting Members ADM #068 – QUALITY IMPROVEMENT PROCESS (SJHH)			
			SJHC Voting Members ADM #036 - CONTINUOUS QUALITY IMPROVEMENT PROGRAM (HOME CARE)			
			SJVD Voting Members POL #001 – QUALITY MANAGEMENT PROGRAM (VILLA)			
	3.2	Medical Advisory Committee Presentation:	Dr. S. Nesathurai Chief, Physical Medicine and Rehabilitation	E		

905-522-6887

Time	Item	Topic	Motion	Values	Lead	Page
	4.0	Highlight Report			Residence in the second	
	4.0	Highlight Report Resource and Audit Committee	All JBG Voting Members THAT THE MINUTES OF THE RESOURCE AND AUDIT COMMITTEE OF MAY 20, 2015 BE ACCEPTED FOR INFORMATION SJHH Voting Members THAT THE AUDITED FINANCIAL STATEMENTS FOR ST. JOSEPH'S HEALTHCARE HAMILTON FOR THE YEAR ENDED MARCH 31, 2015 BE APPROVED SJHH Voting Members THAT KPMG CHARTERED ACCOUNTANTS BE APPOINTED AS AUDITORS FOR ST. JOSEPH'S HEALTHCARE HAMILTON FOR THE YEAR ENDING MARCH 31, 2016 BE APPROVED SJHC Voting Members THAT KPMG CHARTERED ACCOUNTANTS BE APPOINTED AS AUDITORS FOR ST. JOSEPH'S HOME CARE FOR THE YEAR ENDING MARCH 31, 2016 BE APPROVED SJVD Voting Members THAT KPMG CHARTERED ACCOUNTANTS BE APPOINTED AS AUDITORS FOR ST. JOSEPH'S HOME CARE FOR THE YEAR ENDING MARCH 31, 2016 BE APPROVED SJVD Voting Members THAT KPMG CHARTERED ACCOUNTANTS BE APPOINTED AS AUDITORS FOR ST. JOSEPH'S VILLA DUNDAS FOR THE YEAR ENDING DECEMBER 31, 2015 BE APPROVED	R2		68-167

Time	Item	Topic	Motion	Values	Lead	Page
4:10pm	5.0	Reports				
	5.1	Report of Chair		R2	C. Santoni	
	5.2	Report of the President and CEO, St. Joseph's Health System		R2	K. Smith	
	5.3	Report of Presidents		R2 / S	D. Higgins D. Bernardo J. Loncke	168- 169
	5.4	Report of President SJHH Foundation SJVD Foundation		R2	S. Filice- Armenio M. Ellis	
	5.5	Report of Chief Nursing Officer		R2 / S	W. Doyle	
	5.6	Report of the Vice President Research		R2	J. Gauldie	
	5.7	Report of President, Medical Staff Association		R2	C. Horner	
4:30pm	6.0	Information / Education Ite	ms			
	6.1 6.2	JBG Closed Summary JBG Walkabouts - Education Schedule		R2 / E	C. Santoni	170 171- 172
	6.3	Destination Quality (separate enclosure)				
	6.4	Article – Strategic Director Recruitment for Building Better Boards				173- 175
4:35pm	7.0	Adjournment				
	7.1	Motion to adjourn	All JBG Voting Members: THAT THE OPEN SESSION OF THE ST. JOSEPH'S HAMILTON JOINT BOARDS OF GOVERNORS BE ADJOURNED		C. Santoni	
4:35pm	8.0	Break followed by Closed				







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

Service – It is an Honour to Serve



Definition

Striving to meet the needs of those we serve with the highest level of quality, integrity and effective communication possible. Building trust with and taking ownership of the needs of those being served.

Behaviours

- Communicates effectively
- Is service-focused
- Has integrity



St. Joseph's Healthcare & Hamilton

St. Joseph's

Committee:

St. Joseph's Hamilton Joint Boards of Governors – OPEN SESSION Date: April 30, 2015

Called to order at:

1530 hours

Adjourned: 1615 hours

St. Joseph's Healthcare Hamilton Voting Members:

Mr. C. Santoni, Mr. P. Tice, Mr. S. Monzavi, Mr. A. Korstanje, Mr. J. LoPresti, Ms. L. McNeil.

St. Joseph's Villa Dundas Voting Members:

Mr. C. Santoni, Mr. P. Tice, Mr. S. Monzavi, Mr. R. Rocci, Mrs. M. Taylor, Mr. T. Thoma.

St. Joseph's Homecare Hamilton Voting Members:

Mr. C. Santoni, Mr. P. Tice, Mr. S. Monzavi, Dr. M. Guise, Mrs. M. Taylor, Mrs. C. Milne, Mr. D. Tonin.

Location:

Dofasco Boardroom – 2nd Floor Juravinski Innovation Tower

Present:

Mr. C. Santoni - Chair, Mr. T. Thoma, Dr. M. Guise, Mr. R. Rocci, Ms. L. McNeil, Mr. S. Monzavi, Dr. C.

Horner, Ms. W. Doyle, Mr. P. Tice, Mr. A. Korstanje, Mrs. M. Taylor, Dr. I. Preyra.

Regrets:

Mr. D. Tonin, Mrs. C. Milne, Mr. J. LoPresti.

Resource Staff:

Dr. D. Higgins, Ms. F. Ros, Mr. D. Bernardo, Mrs. J. Loncke, Ms. J. Fry, Mrs. S. Filice Armenio, Dr. J.

Gauldie.

Guests:

NEXT MEETING

May 28, 2015

Subject Disc	cussion
1. PROTOCOL	
1.0 CALL TO ORDER	The meeting was called to order at 1530 hours by C. Santoni.
	S. Matthews, Incoming Chair, St. Joseph's Healthcare Foundation and S. Filice Armenio President SJHCF thanked the JBG for their efforts in raising over \$19K for the Around The Bay Road Race, and issued a challenge from the SJHCF board members to the JBG board members for the next race in 2016.
1.1 OPENING PRAYER	R. Rocci opened the meeting with a prayer. There was reflection with respect to the value of RESPECT.
1.2 APPROVAL OF	All JBG Voting Members
AGENDA	ON MOTION DULY MADE AND SECONDED THE FOLLOWING RESOLUTION WAS PASSED:
	THAT THE ST. JOSEPH'S HAMILTON JOINT BOARDS OF GOVERNORS AGENDA BE APPROVED AS CIRCULATED
1.3 DECLARATION OF CONFLICT OF INTEREST	There was no declaration of conflict of interest.
1.4 INTRODUCTION OF GUESTS	There were no guests for the Open Session. D. Bernardo was introduced as the President for St. Joseph's Villa Dundas (SJVD) and St. Joseph's Lifecare Brantford (SJLB).
2. CONSENT AGENDA	

Subject

Discussion

2.1 APPROVAL OF ST. JOSEPH'S HAMILTON JOINT BOARDS OF GOVERNORS OPEN MINUTES

2.2 GOVERNANCE, MISSION AND VALUES COMMITTEE MINUTES

AND MOTIONS

All JBG Voting Members

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

THAT THE OPEN MINUTES OF THE MARCH 26, 2015 ST. JOSEPH'S HAMILTON JOINT BOARDS OF GOVERNORS BE APPROVED

 An overview of the Governance, Mission and Values Committee meeting was provided.

All JBG Voting Members

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

THAT THE MINUTES OF THE GOVERNANCE, MISSION AND VALUES COMMITTEE OF APRIL 7, 2015 BE ACCEPTED FOR INFORMATION

All JBG Voting Members

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

THAT THE FOLLOWING POLICIES BE APPROVED:

JBG #12 - IN CAMERA MEETINGS OF THE BOARD

JBG#13 - BOARD SUCCESSION AND NOMINATION

JBG#14 - BOARD ANNUAL PLANNING CYCLE

JBG#15 - BOARD TRUSTEE EDUCATION

• The new ethics brochures for ethical decision making, ethics consultation service, advance care planning, informed consent, capacity assessment, power of attorney for personal care were circulated. Personal cards for the Ethical Decision Making Framework "YODA" – You, Observe, Deliberate and Act were distributed. It was noted that S. Abdool, Hospital Ethicist, will present the new framework to the other JBG organizations (SJHC and SJVD) as well.

All JBG Voting Members

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

THAT THE SJHH PRINCIPLE BASED ETHICAL DECISION MAKING MODEL (YODA Model) BASED ON THE CATHOLIC HEALTH ETHICS GUIDE BE APPROVED AS THE GUIDING ETHICAL FRAMEWORK FOR SJHH

2.3 RESOURCE AND AUDIT COMMITTEE MINUTES AND MOTIONS

 The Resource and Audit Committee was presented on the blotter and overviewed.

All JBG Voting Members

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

THAT THE MINUTES OF THE RESOURCE AND AUDIT COMMITTEE OF APRIL 29, 2015 BE ACCEPTED FOR INFORMATION

• In response to a question, it was noted that the number of dialysis stations would remain the same. The proposed schedule is to increase nursing efficiency and the reason for the changes were outlined. This is important as the program is currently in a negative financial variance.

All SJHH Voting Members

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

THAT FORMAL ENDORSEMENT OF OPTION #3, PENDING COMPLETION OF THE HUMAN RESOURCE PLAN, FINANCIAL PROGRAM TRANSFER AGREEMENT AND THE FINAL CLINICAL OPERATING PLAN BE APPROVED

All SJHH Voting Members

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

THAT THE BMO TERM SHEET DATED MARCH 24, 2015 FOR THE JURAVINSKI TOWER DEBT RENEWAL BE APPROVED

- 3. QUALITY AND PATIENT SAFETY
- 3.1 QUALITY COMMITTEE MINUTES, MOTIONS AND REPORT
- A resident story from St. Joseph's Villa was presented.
- The "big dot indicators" were presented in draft format. A presentation was also made on the strategic plan.
- The operating budget planning process and timeline was reviewed.

All JBG Voting Members

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

THAT THE MINUTES OF THE QUALITY COMMITTEE OF APRIL 14, 2015 BE ACCEPTED FOR INFORMATION

3.2 MEDICAL ADVISORY COMMITTEE GUEST PRESENTATION

There was no guest from the Medical Advisory Committee this month.

4. HIGHLIGHT REPORT

There was no highlight report this month.

- 4.1 HIGHLIGHT REPORT
- 5. REPORTS
- 5.1 REPORT OF CHAIR
- C. Santoni attended most of the Committee meetings for the month of April, including the Nominating Sub-committee of Governance.
- Peer reviews have now been completed and all members were thanked for their participation.
- Committee assignments for the 2015/2016 meeting year have been finalized. It
 was noted that there are a few vacancies for community members at this time.
- The Research St. Joseph's Board of Directors met on April 27th. It was the inaugural meeting for the new Vice President, Research, Dr. Jack Gauldie, and some suggested changes to the JBG agenda will be discussed at an upcoming meeting of the Governance Committee. An initial review of finances was undertaken. A presentation on hospital foundation research funding was also

5.5 REPORT OF CHIEF NURSING OFFICER

W. Doyle noted that Nurses Week is the week of May 11th. All JBG members are invited to attend the annual nursing dinner, which will be held on May 12th at Michelangelo's Banquet Centre. It was noted that over 200 nominations for 15 awards have been received, and some of the inspiring nominations which have been brought forward were highlighted.

5.6 REPORT OF PRESIDENT, MEDICAL STAFF ASSOCIATION

- Doctor's Day is Friday, May 1st. The Medical Staff Association will be sponsoring coffee at all sites the morning of May 1st.
- The 2nd Medical Staff Newsletter was released today and will be circulated to the JBG at next month's meeting.
- The Quarterly Medical Staff Meeting will be held on Tuesday, June 16th. The guest speaker will be the President of the College of Physicians and Surgeons of Ontario (CPSO).

Fadia Ros, Recorder







St. Joseph's Hamilton Joint Boards of Governors (JBG)

Summary of March 26th, 2015 Closed Meeting Session

Motions Summary

Recommending Committee	Motion
The Medical Advisory Committee	 It was voted that the: Minutes of the Medical Advisory Committee of March 5th, 2015 be approved (St. Joseph Hamilton Joint Boards of Governors – St. Joseph's Healthcare Hamilton Voting Members). Recommendations on Credentials of the March 5th, 2015 Medical Advisory Committee be approved (St. Joseph Hamilton Joint Boards of Governors – St. Joseph's Healthcare Hamilton Voting Members). Recommendations of the Research Committee of the March 5th, 2015 Medical Advisory
	Committee be approved (St. Joseph Hamilton Joint Boards of Governors – St. Joseph's Healthcare Hamilton Voting Members).

Presentations and Reports to the JBG – Summary

An overview of the results of the recent SJHH Engagement Survey was presented by D. Schubert, SVP of People & Organization Effectiveness SJHS and VP of People & Organization Effectiveness SJHH. It was noted that the results achieved are similar to those of the 2012 Engagement Survey. Over 2600 employees participated in the survey. The three key drivers of engagement for our Employee workforce include *organizational vision and values, patient and family centered care and professional growth*. Separate surveys were undertaken for medical staff and volunteers.

Discussion ensued with respect to the challenges faced by staff in a fast paced work environment and the initiatives in place to ensure respect of quality of work life balance. It was noted that the Wellness Program continues to expand and add new services for staff.

For next steps, D. Higgins and D. Schubert will be holding forums for all staff to communicate the results of the Engagement Survey, and Managers will be meeting with their staff to discuss unit level results.







GOVERNANCE, MISSION AND VALUES (GMV) COMMITTEE of the St. Joseph's Hamilton Joint Boards of Governors (JBG)







GOVERNANCE, MISSION AND VALUES (GMV) COMMITTEE OF THE St. Joseph's Hamilton Joint Boards of Governors (JBG)

- Summary of the May 5th, 2015 Meeting -

The Committee discussed the following standing agenda items:

- Preview of Next Board Agenda
- Selection of Generative Topic for Next Board Meeting
- Review of Previous Board Meeting Evaluation
- Review of Previous GMV Meeting Evaluation
- Review of Board Closed Session Summary
- Tracking Tool: 2014/15 Governance Work Plan
- Education Item: Strategic Director Recruitment for Building Better Boards by John T. Dinner

The Committee discussed the following business arising:

Chief of Staff Recruitment Update

- As per Board bylaws, a motion was brought forward for a recommendation for the membership of the SJHH Chief of Staff Search Committee. The interview process will move forward once the search committee has been approved by the JBG and established.
- The Chief of Staff recruitment due diligence work plan has also been brought forward for approval.

Committee Voting and Board Evaluation

- As previously noted a resolution was passed at the SJHS Board that all local boards will now use the OHA Board Self-Assessment Tool for Board evaluations and voting privileges at the committee level are restricted to volunteer Board and community members only. In order to adhere to these recommendations, we have updated JBG#2 Board Evaluation Policy, and brought forward for approval as amended.
- All JBG Committee Terms of Reference have now been reviewed and (with the exception of Quality, which
 must adhere to voting privileges outlined in the ECFAA) are found to be consistent with voting privileges as
 per SJHS resolution. Committees will be requested to bring forward Terms of Reference to the October GMV
 meeting for annual review.

Highlight Report Effectiveness & Frequency

 A discussion took place on the effectiveness of the current highlight reporting process and frequency. It was recommended to plan highlight report schedule based on reporting need, and beginning with Resource & Audit reporting schedule. Beginning in September 2015, GMV committee will select highlight report on a month to month basis, based on needs of each committee.

The Committee discussed the following new business:

Nominating Report to the JBG

 The Nominating Report was brought forward for recommendation to the Board. It was also requested that this document be shared in draft format with SJHH, SJVD and SJHC Executive Resources for planning purposes.

Initiate JBG Evaluation

- According to the committee work plan, it is time to initiate the annual Board Evaluation. As discussed, we will be using the OHA Self- Assessment Tool as well as supplementary mission questionnaire.

Board Walkabout Report Back

Feedback from a recent Quality Board walkabout was discussed and a question was raised regarding whether a mechanism is in place to provide feedback to the care area that hosted the walkabout. It was recommended the Manager hosting the walkabout provide a written follow up report to the VP responsible and also copying the Board member; this will ensure any issues raised at the walkabout are being communicated for any resolutions to take place.

Credentialing Session

 The JBG will be hosting a presentation on credentialing; some options were presented with regard to the timing of this presentation. The committee agreed to an evening session in the fall of 2015 following the regularly scheduled JBG meeting and it was suggested to invite our community members and appropriate LHIN partners.

Review/Renew JBG Policies

- The following policies were brought forward for review and approval:
 - o JBG#16 Environmental Policy
 - oJBG#17 Travel Policy: Board Expense Claims
 - oJBG#18 Schedule A Declaration of Commitment to Mission and Confidentiality and Disclosure of Relationships with Member Organization Vendors







Policy Name: Board Evaluation						
Policy Number	Cross Reference:					
(JBG or voting organization – number - approval year):						
JBG - #2 – 2015						
Replaces: Earlier Version	Pages: 1 of 3					
Approved by: St. Joseph's Hamilton Joint Boards of	Recommended by: Governance Mission					
Governors (JBG)	& Values Committee of the JBG					
Approved on:	Recommended on: May 5, 2015					

1.0 Purpose

1.1 The JBG and Committees of the JBG will complete a formal, evaluation on an annual basis in order to assist the JBG and Committees of the JBG in meeting its responsibilities as stated in the JBG Terms of Reference and the Committees of the JBG Terms of Reference. The JBG Evaluation includes specifics pertaining to governance, quality, succession planning, etc.

2.0 Policy Statement

2.1 The JBG has existing relationships and shared accountabilities associated with SJHH, SJVD and SJHC, namely: the community, St. Joseph's Health System, Niagara Health System, the Faculty of Health Sciences, McMaster University and Mohawk College of Applied Arts and Technology for research and education; the Ministry of Health and Long Term Care (MOHLTC), LHIN 4 and regulatory bodies for efficiency, effectiveness, accessibility and quality of care.

3.0 Application

3.1 This policy applies to all JBG and Committees of the JBG members.

4.0 Evaluation Procedure

- 4.1 One of the mechanisms by which we demonstrate this accountability is through the completion of an annual evaluation survey by all trustees to obtain feedback on collective JBG and Committees of the JBG performance (attached in Appendix A).
- **4.2** The components of this survey include:
 - Performing Board Roles
 - Board Role and Management Relationship
 - Board Quality
 - Board Structure
 - Meeting Processes
 - Overall Board Functioning
 - Individual Director Functioning
 - Board Functioning in Relation to Organizational Mission (supplementary survey)
- 4.3 In addition, following each monthly JBG and Committee of the JBG meeting, a written evaluation of that meeting is conducted by attendees.

5.0 Process – Annual JBG and Committees of the JBG Evaluation

- 5.1 The OHA Governance Centre of Excellence Board Self-Assessment Tool as well as the supplementary Mission survey (Appendix A) will be provided to all members in June electronically.
- 5.2 The results of the evaluation and recommendations for improvements; if required will be presented at the September meeting of the JBG and Committees of the JBG for discussion and approval.
- **5.3** Results will be collated and reviewed by the JBG and Committees of the JBG and appropriate recommendations for action will be formulated. Follow-up plans will be determined in collaboration with the Committee Chair and the Executive Lead.
- **5.4** The follow-up action plans will be developed during July and August and will be incorporated in the JBG and Committees of the JBG objectives for the upcoming year.
- 5.5 Updates on progress in completing the action plans will be provided to the JBG and Committees of the JBG on a quarterly basis (September, November, February, April).







Appendix A

STEP #2: GCE BOARD SELF-ASSESSMENT TOOL

Instructions

Based on your experience and involvement with the board, rate the degree to which you agree that the statement is true for your board. In considering each statement, interpret if flexibly, recognizing that organizations use different words for the same thing. For example, some use 'performance indicators', while others use 'measures'.

1. Performing Board Roles (Guide Chapter 4)

		Strongly Disagree	Disagree	Neutral	Agree	Strongly Agree	NA / Don't Know		
Provi	Providing Strategic Direction								
1.1	The current Strategic Plan for your organization provides a clear set of relevant and realistic goals and strategic directions to the organization.								
1.2	The board is adequately involved in the process of developing the Strategic Plan.								
1.3	The board considers the Strategic Plan in developing policies and making decisions.								
1.4	The board regularly monitors and evaluates progress towards strategic goals and directions.								
1.5	The board provides meaningful direction to program/service quality in its Strategic Plan and annual goals and priorities.								

		Strongly Disagree	Disagree	Neutral	Agree	Strongly Agree	NA / Don't Know
Moni	toring Financial Viability and Quality Performance						
1.6	The board effectively oversees the development of the annual budget and financial plans for the organization.						
1.7	The performance measurement system is helpful to board members and uses contemporary methods (e.g., dashboards and balanced scorecards).						
1.8	The performance measures and other information received by the board permit directors to monitor results and identify areas of concern.						
1.9	The board receives acceptable explanations for significant financial and quality performance variances, and management's plans for dealing with those variances.						
1.10	The board is informed about significant risk issues in a timely manner.						
Over	seeing the CEO (and Chief of Staff if applicable)						
1.11	There is an effective process for establishing the CEO's annual goals.						
1.12	There is an effective process for measuring the CEO's performance.						
1.13	There is an effective process for establishing the Chief of Staff's annual goals.						
1.14	There is an effective process for measuring the Chief of Staff's performance.						
1.15	The board has a sound plan for the CEO's development and succession.						
1.16	The board has a sound plan for the Chief of Staff's development and succession.						

		Strongly Disagree	Disagree	Neutral	Agree	Strongly Agree	NA / Don't Know
Overs	seeing Stakeholder Relations						
1.17	The board ensures that the organization communicates its performance and plans to its key stakeholders in an effective and transparent fashion.						
1.18	The board speaks with 'one voice' in all communications with stakeholders.						
1.19	The board ensures that the organization engages relevant stakeholders when considering strategic planning and priority issues.						
2. Bo	pard Role and Management Relationship (Guide Chapte	r 3)					
2.1	The board understands and performs its governance role and does not become overly involved in operational issues.						
2.2	The board members are adequately informed about the programs, services, operations and administration of the organization in making governance decisions.						
2.3	The board's goals, expectations and concerns are openly communicated to the CEO and management.						
2.4	The CEO communicates with the board in an open, candid, respectful and timely manner. (*Select N/A for this question if you are the CEO)						

		Strongly Disagree	Disagree	Neutral	Agree	Strongly Agree	NA / Don't Know
3. B	oard Quality (Guide Chapter 7)						
3.1	The board is the right size. It is small enough for effective board discussions, yet large enough to have an appropriate breadth of skills and experience and the ability to carry the committee workload.						
3.2	The membership of the board has sufficient diversity of skills, experience and backgrounds for good governance.						
3.3	The board membership is sufficiently independent to ensure good governance of the organization.						
3.4	New board members receive adequate orientation to prepare them to contribute effectively to the board.						
3.5	The board provides in-depth, ongoing continuing education to its board members.						
4. B	oard Structure (Guide Chapter 8)						
4.1	The board has the appropriate number of committees to support the work of the board.						
4.2	Committee meetings involving board members and staff are constructive and there is open communication, meaningful participation, critical questioning and timely resolution of issues.						
4.3	The board respects the work of its committees and does not redo committee work.						
4.4	Committee reports are effective in providing the necessary information to the board.						
4.5	The Finance Committee or equivalent (Resources, Stewardship) effectively performs its role and fulfills the responsibilities of its terms of reference.						
4.6	The Quality Committee effectively performs its role and fulfills the responsibilities of its terms of reference.						
4.7	The Governance Committee (or equivalent) effectively performs its role and fulfills the responsibilities of its terms of reference.						

		Strongly Disagree	Disagree	Neutral	Agree	Strongly Agree	NA / Don't Know
5. M	leeting Processes (Guide Chapter 8)						
5.1	Board meetings are well organized and the Chair manages them to allow sufficient time for discussion of major issues and to ensure appropriate participation by all.						
5.2	The board has a well conceived and realistic annual work plan.						
5.3	Board materials are sufficiently informative so that board members can participate in discussions and make decisions.						
5.4	Board materials arrive sufficiently in advance to allow for board members to prepare properly for the meetings.						
5.5	The board uses in-camera sessions appropriately.						
5.6	The board uses a consent agenda practice that conserves board time without compromising board oversight.						
5.7	Minutes accurately reflect board discussions and decisions.						
5.8	The board's 'meetings without management' focus on the governance process and support from management.						
6. Overall Board Functioning (Guide Chapters 6 to 8)							
6.1	Directors work well together, seeking consensus, and treat each other with respect and courtesy.						
6.2	Directors ask constructive questions and express their views in a respectful manner.						
6.3	Once decisions are taken by the board, all members support the position.						
6.4	Directors respect the confidentiality of board <i>in-camera</i> discussions.						
6.5	Directors declare conflicts of interest, where appropriate.						

PREVIEW VERSION - THE BOARD SELF-ASSESSMENT MUST BE COMPLETED ONLINE

		Strongly Disagree	Disagree	Neutral	Agree	Strongly Agree	NA / Don't Know
6.6	The board has sufficient opportunities to go into adequate depth on critical issues from time to time (retreats or 'deep dives' at regular meetings).						
6.7	The board has effective evaluation tools to help it make modifications in its governance processes.						
6.8	The board balances its time well between considering future issues and dealing with current governance matters.						
6.9	The board addresses important issues and decisions at a sufficiently early stage.						
6.10	On balance, the board allocates its time effectively between important issues and those of lesser importance.						
7. Individual Director's Functioning							
7.1	I have a good understanding of the difference between the board's governance role and the role of the CEO and management.						
7.2	I have a good understanding of the organization's strategic plans, activities and operations.						
7.3	I have a good understanding of the challenges in the external environment affecting the organization.						
7.4	I feel good about my level of contribution to the board's deliberations.						



Supplementary Mission Survey Questions

To be administered by each SJHS member organization using member organization survey software

Board Functioning in Relation to Organizational Mission

		Strongly Disagree	Disagree	Neutral	Agree	Strongly Agree	NA/ Don't Know
1	All Board Members understand and make decisions within the Mission, Vision and Values and priorities of the SJHS.						
2	The Board is able to communicate the Mission of the organization to others.						
3	The Board understands and embraces the organization's Mission.						

1







Policy Name: JBG – Environmental Policy			
Policy Number	Cross Reference:		
(JBG or voting organization – number - approval year):	SJHH, SJVD, SJHC Administrative By-laws		
JBG - #16 - 2015			
Replaces:	Pages: 1 of 1		
Approved by: St. Joseph's Hamilton Joint Boards of Governors	Recommended by: Governance, Mission &		
(JBG)	Values Committee of the JBG		
Approved on: May 28, 2015	Recommended on: May 5, 2015		

1.0 Policy Statement

1.1 Consistent with our vision of providing outstanding health care and support to clients, staff, and the broader community we serve, the St. Joseph's Hamilton Joint Boards of Governors (JBG) will do so in a manner that minimizes undue risk and adverse environmental impacts on health, and the natural environment. The JBG shall, as a minimum, comply with, or when possible exceed all legal and other requirements to which the organization subscribes, through the application of sustainable development principles. We will strive for continual improvement in our environmental performance through pollution prevention, and optimization of energy efficiency in our everyday activities, and implementation of innovative strategies that promote a healthy environment.

2.0 Procedure

- 2.1 Management will set and review annual environmental objectives and targets with the JBG.
- 2.2 The annual objectives will be presented at the beginning of the fiscal year and the reviews will occur on a semi-annual basis.

3.0 Definitions

3.1 Pollution Prevention – use of processes, practices, materials, or products that avoid, reduce, or control pollution which may include recycling, treatment, process changes, control mechanisms, efficient use of resources, and material substitution.







Policy Name: JBG – Travel Policy – Board Expense Claims			
Policy Number	Cross Reference:		
(JBG or voting organization – number - approval year):	SJHH, SJVD, SJHC Administrative By-laws		
JBG - #17 - 2015			
Replaces:	Pages: 1 of 1		
Approved by: St. Joseph's Hamilton Joint Boards of Governors	Recommended by: Governance, Mission &		
(JBG)	Values Committee of the JBG		
Approved on: May 28, 2015	Recommended on: May 5, 2015		

1.0 Purpose

1.1 To provide parameters for reimbursement for out-of-pocket travel expenses of members of the JBG, members of standing or other JBG committees, and others who may from time-to-time be called upon to travel in connection with service to the JBG.

2.0 Policy

- **2.1 Accommodation:** Single room hotel accommodation will be reimbursed. When accompanied by a spouse, the member must determine if there is an added cost of double occupancy and make the appropriate reduction on the hotel bill submitted for reimbursement.
- **Meals:** The member's reasonable out-of-pocket costs for personal meals will be reimbursed consistent with current SJHH Travel & Expense Policy #002-ADM.

2.3 Transportation

- 2.3.1 The mode of transportation chosen air, train or car should be that which enables the member to attend to JBG business with the least cost to the JBG consistent with the least amount of interruption to the member's regular business and personal schedules.
- 2.3.2 If travel is by automobile, reimbursement for mileage will be consistent with current SJHH Travel & Expense Policy #002-ADM
- 2.3.3 Those not within convenient car distance will be reimbursed for economy airfare, or reserved rail fare, plus the costs of local transportation to and from terminals.

2.4 Miscellaneous items for Reimbursement

- 2.4.1 Telephone Necessary telephone calls occasioned by absence from home base.
- 2.4.2 Tips Reasonable and necessary gratuities for service attendances and porterage. Meal tips are to be included with meal claims.
- 2.4.3 Taxi Fares Taxi or transportation services to and from air terminal or train station.
- 2.4.4 Parking Charges incurred when a personal car is used to travel to and from the original airport. Parking at destination when travel is by car.

2.5 Receipts

2.5.1 Receipts must accompany claims where applicable. All claims should be submitted to the Office of the SJHS Senior Vice-President, Resource and Infrastructure.

2.6 Posting of Expenses

2.6.1 As per the Freedom of Information and Protecting of Personal Privacy Act (FIPPA), all expenses for JBG members will be posted on the member organization's website.







Policy Name: Schedule A - Declaration of Commitment to Mission and			
Confidentiality and Disclosure of Relationships with Member Organization Vendors			
Policy Number Cross Reference:			
(JBG or voting organization – number - approval year):	SJHH, SJVD, SJHC Administrative By-laws		
JBG - #18 - 2015			
Replaces:	Pages: 1 of 2		
Approved by: St. Joseph's Hamilton Joint Boards of	Recommended by: Governance, Mission &		
Governors (JBG)	Values Committee of the JBG		
Approved on: May 28, 2015 Recommended on: May 5, 2015			

St. Joseph's Hamilton Joint Boards of Governors

Declaration of Commitment to Mission and Confidentiality and Disclosure of relationships with Member Organization Vendors

A) Declaration of Commitment to Mission and Confidentiality

I agree to maintain all patient, clinical, employee, medical staff and business information – whether verbal, written or transmitted electronically – in strictest confidence.

I also agree to maintain confidentiality of designated information presented and discussed at St. Joseph's Hamilton Joint Boards of Governors meetings and meetings of Committees of the JBG.

I have received copies of the following documents:

- Mission, Vision & Value Statements for SJHH, SJVD, SJHC
- Mission, Vision & Value Statements for St. Joseph's Health System
- Heath Care Ethics Guide published by the Catholic Health Association of Canada (CHAC)
- JBG Governance Policies
- SJHH, SJVD, SJHC Bylaws

I agree to remain true to the Mission values in all deliberations and decisions of the JBG, its committees
or work groups or activities during my term as a member of the JBG or as a member of any of the
Committees of the IBG

SIGNATURE	DATE
PRINT NAME	

B) <u>Disclosure of Relationships with Member organization Vendors</u>

The following disclosures are **strictly confidential** and will be solely used to determine the presence of any material conflict of interest related to significant member organization vendors (see attached list – list updated annually).

Please check the appropriate box and add disclosure details as applicable.

In accordance with the JBG Conflict of Interest policy,

common law partner of a true (such as a business partner) v knowledge, free of any conflict which may be related to significant me and relate to significant me Board(s) or other corporate I declare honoraria, consulti	any related persons (includes the parents, siblings, spouse or stee as well as any organization, program, company, or individual with a formal relationship to a trustee), are to the best of my ct of interest as described below and do not have relationships ficant member organization vendors: Or monetary potential conflict of interest and/or relationship which mber organization vendors (e.g. membership in Medical Advisory board(s)) Please check and complete table below: Ing fees and/or other remunerations received or shares owned in the ase check and complete table below:	
Name of Member Organization	Category	
Vendor		
	Honoraria	
	Consulting fees	
	Education/conference fees, related travel & accommodation	
Participation in other events (sports or entertainment)		
	Gifts greater than \$500.	
	Other remunerations (funds, rebates and grants to support office staff)	
	Ownership of shares	
	Board member or board member's place of employment or business	
	having current business or contracts with member organization vendor	
SIGNATURE	DATE	
PRINT NAME		







RESOURCE & AUDIT COMMITTEE of the St. Joseph's Hamilton Joint Boards of Governors (JBG)







Treasurer's Report to the JBG Resource and Audit Committee Meeting (May 20, 2015)

4.1 Audited Financial Statements / Audit Findings – SJHH - MOTION TO APPROVE

KPMG provided an overview of the pre-circulated Audited Financial Statements and Audit Findings Report for St. Joseph's Healthcare Hamilton for the year ended March 31, 2015.

Audit Findings Report

- · no changes from the audit plan as presented earlier this year
- · no control deficiencies were identified
- reasonability of critical accounting estimates was confirmed
- · no uncorrected differences or adjustments were identified
- no control deficiencies identified

FRAUD RISK FROM REVENUE RECOGNITION / RISK OF MANAGEMENT OVERIDE OF CONTROLS

• KPMG noted no issues or concerns

ACCOUNTS PAYABLE/OTHER PAYABLES

· no issues were identified in review of the accruals

RESEARCH ST. JOSEPH'S - HAMILTON

 Research St. Joseph's – Hamilton became its own operating entity as of April 1st, 2014 having obtained charitable status

DEBT

- · no issues identified and all debt balances have been appropriately disclosed
- KPMG has confirmed all debt balances with the exception of the West 5th campus debt which is based on the financial model received from ProjectCo

NON-PENSION BENEFITS CENSUS DATA

- testing on data sent to the actuary for the March 31, 2015 employee future benefit valuations was performed with two errors having been noted
- · further testing was performed with no further errors noted
- KPMG has suggested that additional work be performed annually to ensure accuracy of the data
- SJHH has reviewed and an internal audit process will be implemented

WHISTLEBLOWER PROTECTION POLICY

- on-line reporting system available to employees and which is managed externally by Grant Thornton
- SJHH has had relatively low levels of usage
- KPMG has determined that, although SJHH takes appropriate steps to communicate the policy to employees, there is a weakness in information availability and alternative forms of communication should be considered
- SJHH will incorporate into the organization's orientation agenda to ensure new employees are aware
 of the resources available to them

PAY EQUITY ACCRUALS

• assumptions were compared to other healthcare organizations and the accrued benefit liability is properly accrued and disclosed in the notes to the financial statements

EMPLOYEE FUTURE BENEFITS

• management chose to not use the Province's suggested discount rate of 3.31% (prior year 4.36%), but rather to remain consistent with the Health System's weighted average rate of 4.33%

FINANCIAL STATEMENTS

The pre-circulated draft audited Financial Statements for the year ended March 31, 2015 were reviewed with the following being noted:

- at this time KPMG anticipates issuing a clean audit opinion
- a description of the year over year changes in various account values was reviewed

ASSETS

 there was a decrease seen primarily driven by a decrease in accounts receivable related to PCOP funds for West 5th campus

LIABILITIES

 there was a decrease in total liabilities related to a decrease in deferred contributions - expenses of future periods related to Research. This is now recorded on the statements of Research St. Joseph's – Hamilton.

REVENUE

- increase in revenue primarily related to the following changes:
 - incremental funding of the West 5th campus for incremental operating cost (volume) and interest expense
 - amortization of deferred contributions related to capital assets

EXPENSES

• increase in expenses primarily related to West 5th and an increase in salaries (additional FTE's and increase in hourly rate) as well as other supplies and expenses and amortization of capital assets

NOTES TO FINANCIAL STATEMENTS

Changes to the Notes were also reviewed. Some of the highlights include:

Note 1(I) – Controlled Organizations – SJHH has not consolidated the organizations it controls but discloses individual resource information. Research St. Joseph's – Hamilton, although controlled by SJHH, is not consolidated in the Hospital financial statements, but is disclosed in the Notes.

Note 1 (m) – Adoption of New Accounting Policy- SJHH adopted PSAB Liability for Contaminated Sites on a retroactive basis. No adjustments are required as a result of the adoption of this standard.

Note 10 (c) – Commitments and Contingencies – relates to SJHH's involvement in employment related matters and reasonably determinable recorded accruals for potential future settlement. This was also added to the Audited Financial Statement Notes for St. Joseph's Home Care.

4.3 Reappointment of KPMG as Auditors - MOTIONS TO APPROVE

In accordance with the Bylaws, the Resource & Audit Committee recommends appointment of KPMG as auditors for the year ending March 31, 2016.

5.1 Journey to Fiscal Sustainability

The Committee received a detailed presentation describing the impact of Health System Funding Reform (HSFR) on Hospital funding. The presentation described how patient intensity, data quality/ documentation, Level of Care and patient interventions impact future funding.

The presentation described the process the Hospital has undertaken to build awareness and engagement to support evolving clinical and administrative practices in response to these important changes.

Presentation highlights included:

- driven by the Excellent Care for Al Act (ECFAA), HSFR is a patient based funding model, i.e. funding patients not hospitals
- patient based funding is broken into 2 components: Health Based Allocation Model (HBAM) and Quality Based Procedures (QBPs)
- over the last three years, the Hospital has seen its base allocation shift dramatically as proportionately more funding is reallocated to the Hospital through HBAM or QBP volumes
- HBAM is a funding allocation methodology that enables the MOHLTC to allocate / re-allocate a fixed pot of funding to individual hospitals
- HSFR has tied data quality to funding with the coded data influencing the funding share that hospitals
 receive through HBAM which further highlights the importance of accurate documentation and coding
 refinement
- to improve documentation, SJHH is:
 - building greater awareness with program leaders and frontline physicians
 - implementing a new face sheet / discharge summary

 planning a clinical transformation project which will include electronic documentation by all healthcare providers and computerized physician order entry

7.1 Information & Communication Technology Subcommittee Update

Following the March ICT Subcommittee meeting, management was asked to identify the business case / benefits for moving forward with a HIS implementation (as if McKesson had not issued an End of Support notice).

At the May Subcommittee meeting, a benefits evaluation framework was provided for information. KPMG provided a detailed written report, "A Business Case for Hospital Information System Procurement". KPMG attended the meeting and identified three options.

Timeline – June meeting to finalize scope, timeline, budget, governance structure and approach. Analysis of solution options and finalize financial plan (including sustainability. Finalize governance model including decision making, process between SJHH and LHIN partners).

Clinical representatives provided a detailed summary of the project benefits with specific examples of the benefits for patients and providers alike.

Key discussion points included governance risk in a partnership model, recent e-Health 2.0 announcements and the implications for future MOHLTC funding and management review of a preliminary funding model.







QUALITY COMMITTEE of the St. Joseph's Hamilton Joint Boards of Governors (JBG)







QUALITY COMMITTEE OF THE St. Joseph's Hamilton Joint Boards of Governors (JBG)

- Summary of the May 12, 2015 Meeting -

The Committee discussed the following new business:

Women's & Infant's Program - Strategic Plan "Oh Baby! Safe Transitions from Hospital to Home"

- A WebEx on the Optimal Start program was presented which highlighted:
 - Recognition that the care for mothers and babies has changed considerably over the past 20 years; very few family physicians provide obstetrical services in hospital, whereas previously this was a much larger number
 - oThe Triple Aim philosophy is naturally embedded in this project
 - Need for safe transitions into the community (Better Outcomes)
 - Efficient use of resources ensure that the hospital stay is purposeful and not for items that can be followed in the community (Better Value)
 - Improved coordination (Better Experience)

Policy

- The three organizations of St. Joseph's Hamilton require Board approval of their Quality Policies. The following motion was put forward:
 - THAT THE QUALITY COMMITTEE OF THE JBG ENDORSES THE THREE QUALITY POLICIES (WITH AMMENDMENTS) FROM THE ST. JOSEPH'S HEALTHCARE HAMILTON ORGANIZATIONS TO PROCEED TO THE JBG FOR APPROVAL

Other Work Updates

- A discussion on the preliminary Accreditation results:
 - oWe do not know what the Accreditation decision is yet, however of the 2710 criteria were met achieving a score of 99%. We will receive accreditation waiting to hear whether or not we receive exemplary status.
 - o Comments from surveyors included the fact that Board vision is connected to the front line and the Strategic plan was highlighted as robust and we were commended for the focus on working to improve the culture.
- A WebEx on the SEAK Scorecard was presented which highlighted:
 - oThe nature of the compliance orders received at the Villa, and the fact that almost all have been cleared
 - oThe mandatory training process at Home Care, the switch to a new electronic process
 - oThe importance of monitoring the C. Diff rate, that the SJHH rate falls within the teaching hospital average.







INFORMATION ITEMS St. Joseph's Hamilton Joint Boards of Governors (JBG)







OPEN REPORT TO THE ST. JOSEPH'S HAMILTON JOINT BOARDS OF GOVERNORS MAY 2015

1. Environmental Scan

SJHC: Federal and Provincial Budgets 2015-16

- The federal and provincial governments released their yearly budgets in late April. Both budgets included special consideration around home and community care:
 - The federal budget recognized the importance of family caregivers by extending the existing compassionate care leave allowance and introducing a new tax-free family caregiver relief benefit for those who care for veterans. In addition, the new Home Accessibility Tax Credit provides a measure of assistance toward helping to make seniors' homes safe, secure and accessible.
 - The Ontario budget included a continued commitment to invest \$750 million in the home and community care sector by 2016-17; provided assurance of continued support for the PSW wage enhancements; and, included support for Hospice Palliative Care Ontario to expand training for volunteers and caregivers so that more Ontarians can remain at home at end of life. The budget commitment, coupled with the government's adoption of the recommendations by the Expert Group on Home and Community Care, bodes well for the sector.

SJHH: Pan Am Games Planning

The Pan Am Games will take place from July 10th – 26th in Toronto and surrounding areas, with Hamilton hosting the Soccer events. A city-wide planning committee, including representation from all hospitals has been established to oversee planning and emergency preparedness. The primary concern will be traffic considerations in and around the Hamilton region. After detailed analysis, SJHH does not anticipate impacts on clinical utilization over this period. A communication plan for staff has been prepared to ensure staff is aware of traffic or other considerations.

2. Mission, Vision and Values Update

SJVD: Celebration of Staff Week

In recognition of the different teams that comprise the SJVD staff, SJVD has combined Nurses' Week, Health and Safety Week and Staff Appreciation Week into one week of activities. The following highlights the week's events:

- May 11 A free BBQ for Health and Safety Week was provided to all staff. It was held outdoors in the Ground Floor outdoor patio.
- May 12 Free cake and coffee was offered to Nursing staff on all shifts. There were many donated prizes for draws.
- May 13 Managers went to the various units distributing items reminding staff about the importance of good hand hygiene. In-services were provided on the units as well.
- May 14 A vendor fair was held for staff with massage therapists, a psychic, vitamin display, foot care, skin care, Salsa demonstration and prizes. Free pizza was provided to all shifts and draws for prizes occurred.
- May 15 A 'Celebration of Staff' event where staff took breaks and lunch in the Auditorium with a variety of games; music in the background and make your own sundaes.







3. Operational Information

SJVD: Annual Fire Inspection

SJVD underwent the annual fire inspection between April 28 – May 4 2015. The inspection is comprehensive and takes place over a number of days. Once the final report has been received, further information and action items will be shared with the Board.

As required by fire code and regulations, SJVD will organize and undergo a mock horizontal evacuation on one of the units that will be attended by Fire Inspectors. The procedure will be timed by the inspectors and feedback provided upon completion.

SJVD: KPMG Assist with Resident Taxes

On April 11, 2015, a KPMG representative volunteer was on site to do Resident income taxes for those who do not have the resources for this process. This is an annual service that KPMG offers for residents and has been taking place for many years.

SJVD: Capital List

SJVD and the Villa Foundation representatives have compiled a priority capital list to ensure that equipment required for safe, quality care is planned and accounted for. The list has been categorized into high, medium and low priorities (A, B, and C priorities).

The highest priority includes carpeting for the two secured areas as it relates to a compliance order. The RFP for flooring has been completed and Kostco was the organization selected for this work. The renovation will be completed throughout the summer when the Adult Day Program is closed. Residents can be moved to this secure area while the new flooring is being installed. A plan has to be submitted to the Ministry of Health and Long Term Care Service Area Office to ensure that it meets current standards.

SJVD is also in the process of replacing the remaining manual beds on site, with newer bed systems that include the surfaces. This year thus far the Foundation helped support the purchase of 25 new beds.

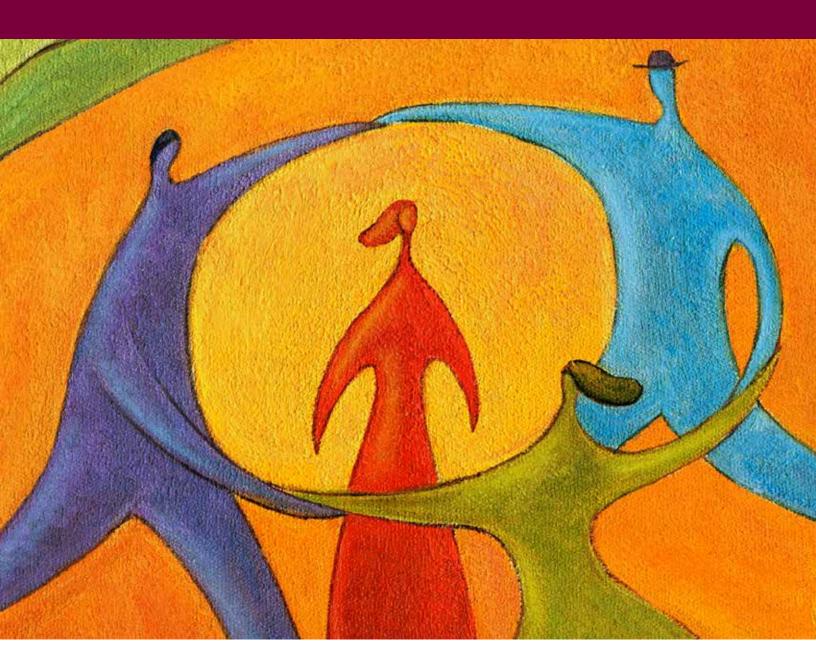
SJHH: Accreditation Canada Visit

The SJHH Accreditation Canada on site visit took place from May 4-8th. After over a year of preparation for this event, it was a rewarding and positive experience to be able to host Surveyors. We are pleased to report that out of 2,716 standards of assessment, our organization achieved a score of 99% compliance, based on the preliminary report.

This is a significant achievement and also an improvement over our 2011 Accreditation results. These results are a testament to the dedication and determination of everyone at St. Joe's to continuously improving the quality of care we provide to our patients and our community.

Along with the areas highlighted as strengths, there were areas with significant opportunity for improvement. We welcome these learnings to help us to better meet the needs of our patients and community, strengthening our commitment to safe and compassionate care.

As you are aware, the Accreditation visit is only one, albeit very important, component of the larger quality of care agenda and will require our continued vigilance to ensure that we are sustaining our progress in providing excellent care to our patients. Our final Accreditation rating will be finalized by Accreditation Canada in the near future.



Strategic Director Recruitment for Building Better Boards

BY JOHN T. DINNER

Director recruitment is often event driven: the annual meeting is fast approaching; there are vacancies on the board that need to be filled; quick consideration is given to who can quickly be tapped into serving as a director or who owes the organization some sort of favour. It's not surprising that many boards don't feel they're ideally equipped to fulfill their responsibilities.

The Canadian Coalition for Good Governance (Coalition) places great importance on how directors find their way to the boardroom. In their highly regarded governance guidelines, the Coalition notes that the single most important corporate governance requirement is the quality of directors. By quality, the Coalition is speaking to the integrity, competencies, capabilities and motivation board members need to carry out their duties.

Many boards' efforts to recruit a strong board team are undermined by a governance model that limits the ability to recruit board members in a strategic manner. Many constituent based boards, where various stakeholder groups have a right to representation, must compromise on their ability to recruit individuals with other important attributes. Many governmental agencies rely on ministerial appointments to populate their boards. Often, the end result is a group of directors whose skills, experience and other attributes lack any sort of thoughtful and complementary construct. However, many such boards fail to identify what opportunity may exit to influence the director appointment process and so acquiesce (as boards often do on so many important matters).

Successful boards require a carefully considered mix of skills and experience, as well as individuals with shared values who can support, contribute to, and complement a productive board/staff dynamic. When viewed as a "board team", it's important to have "bench strength" and "position players". This only results from a disciplined process to leverage opportunities to recruit new board players to reflect emerging issues and opportunities.

Boards need qualified individuals with sound judgment, senior level perspectives, integrated thinking, deep functional or sectoral experience (accounting, legal, and other expertise), strategic competencies, and personal qualities of honesty, integrity and commitment. Other considerations to take into account are board diversity as a means of reflecting the marketplace in which the organization functions (gender, international, ethnic diversity, etc.).

SUCCESSFUL BOARDS REQUIRE A **CAREFULLY CONSIDERED MIX OF SKILLS** AND EXPERIENCE, AS WELL AS INDIVIDUALS WITH SHARED VALUES WHO CAN SUPPORT, CONTRIBUTE TO, AND COMPLEMENT A PRODUCTIVE BOARD/STAFF DYNAMIC.

Working within whatever restrictions may be required by such things as the organization's by-laws, boards should consider undertaking a four-step process to help ensure an optimal mix of skills and experience:

Step One - Required Skills and Competencies: Consider what competencies and skills relative to the organization's strategy the board, as a whole, should possess. In doing so, the board should recognize that the particular competencies and skills required are unique to that organization and are not necessarily the same as those required for another.

Step Two - Assess Skills and Competencies of Existing

Directors: Assess what competencies and skills each current director possesses. It is unlikely that any one director will have all the competencies and skills required by the board. Instead, the board should be considered as a group, with each individual making his or her own contribution. Attention should also be paid to the personality and other qualities of each director, as these may ultimately determine the boardroom dynamic.

Step Three - Identify Skill and Competency Gaps: Based on the assessment and existing skills and competencies and the needs of the board going forward, identify those gaps that exist.

Step Four - Communicate Skills and Competency Needs:

As part of the director search or nomination process, communicate those skills and experience the board needs and request that those putting forward prospective candidate names do so with these needs in mind. An explanation BOARDS NEED QUALIFIED INDIVIDUALS
WITH SOUND JUDGMENT, SENIOR LEVEL
PERSPECTIVES, INTEGRATED THINKING,
DEEP FUNCTIONAL OR SECTORAL
EXPERIENCE, STRATEGIC COMPETENCIES,
AND PERSONAL QUALITIES OF HONESTY,
INTEGRITY AND COMMITMENT.

should be provided on the nomination forms how the particular candidate satisfies these needs.

To further guard against falling into the nominations timeline track, boards can plan for ongoing director succession by:

- Maintaining a 'matrix' of director talents and board requirements to identify skill gaps on the board;
- Building an "ever-green" list of prospective director candidates to ensure outstanding candidates with the needed talents can be identified to fill planned or unplanned vacancies; and,
- 3. Planning for director succession well in advance to enrich and deepen the pool of potential candidates.

It's very important to keep the perspective that your board deserves highly skilled and participative board members. Don't erode your goals by believing the lie that you are lucky to get anyone at all!



JOHN DINNER, President
John T. Dinner Board Governance Services

Since 1996, John T. Dinner Board Governance Services has helped clients across sectors and across Canada achieve their organizational

objectives through excellence in board governance. Board members and organizational leaders value John Dinner's insights, practical approach and ability to facilitate needed governance change and transformation.

In addition to helping boards improve their governance structures and processes, John Dinner is keenly adept at fostering trust and confidence in the sharing of power and authority between boards and those to whom they give oversight. John Dinner knows and understands the needs of directors first-hand.