

Hamilton Board Committee

Thursday, May 31, 2012

15:30 pm

*Dofasco Boardroom – Juravinski
Innovation Tower*

Open Session



HAMILTON BOARD COMMITTEE (HBC)

May 31, 2012 – Juravinski Innovation Tower –1530 hours

OPEN SESSION AGENDA

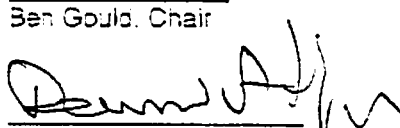
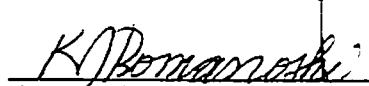
	Page(s)	Time
1. PROTOCOL		
1.1 Call to Order – Mr. B. Gould 1.2 Opening Prayer - Mr. R. Rocci 1.3 Introduction of Guests 1.4 Declaration of Conflict of Interest		3:30-3:35
2. APPROVAL OF AGENDA – Mr. B. Gould		
3. ADDITIONS TO THE AGENDA – Mr. B. Gould		3:35-3:40
4. APPROVAL OF THE HAMILTON BOARD COMMITTEE MINUTES OF APRIL 26, 2012 (OPEN)	1-3	
<u>Motions for Approval:</u> <u>Hamilton Board Committee</u>		
4.1 That the minutes of the April 26, 2012 Hamilton Board Committee be approved		
5. REPORTS		
5.1 Chair's Report – Mr. B. Gould		3:40-3:45
5.2 President's Report – Dr. D. Higgins/Mr. S. Gadsby/Mrs. K. Ciavarella	4-8	3:45-3:50
5.3 President of the Medical Staff – Dr. T. Packer		3:50-3:55
5.4 St. Joseph's Healthcare Foundation and St. Joseph's Villa Foundation – Ms. S. Filice-Armenio/Ms. M. Ellis	9	3:55-4:00
6. OTHER BUSINESS		4:00-4:05
7. INFORMATION ITEMS		
7.1 HBC – Summary of March 29, 2012 Closed Meeting Session	10	
8. MOTION TO MOVE INTO THE CLOSED SESSION		



Committee: Hamilton Board Committee – OPEN SESSION **Date:** April 26, 2012
Called to order at: 1530 hours **Adjourned:** 1600 hours
Location: Dofasco Boardroom – 2nd Floor Juravinski Innovation Tower
Present: Mr. B. Gould, Chair, Mr. C. Santoni, Mr. T. Thoma, Mr. J. LoPresti, Mr. R. Robb, Mr. S. Monzavi, Dr. M. Guise, Ms. W. Doyle, Dr. T. Packer, Mrs. J. Schachler, Mr. P. Tice, Mrs. M. Taylor, Mrs. M. Dow.
Regrets: Mrs. J. Schachler, Mr. S. Monzavi, Mr. T. Valeri, Dr. J. Keton, Dr. H. Fuller, F. Ros.
Resource Staff: Dr. D. Higgins, Mr. S. Gabsby, Ms. K. Romanoski, Ms. V. Dobbs, Mrs. K. Diavarella, Ms. M. Ellis, Ms. S. Filice-Amenio
Guests: Dr. A. Adili, Dr. M. Crowther
NEXT MEETING: May 31, 2012

Subject	Discussion
1. PROTOCOL	
1.1 CALL TO ORDER	The meeting was called to order at 1530 hours by B. Gould.
1.2 OPENING PRAYER	M. Guise opened the meeting with a prayer.
1.3 GUESTS	All guests in attendance were introduced.
1.4 DECLARATION OF CONFLICT OF INTEREST	There was no declaration of conflict of interest.
2. APPROVAL OF AGENDA	It was MOVED by C. Santoni, SECONDED by M. Taylor, VOTED AND CARRIED . THAT THE HAMILTON BOARD COMMITTEE AGENDA BE APPROVED AS CIRCULATED
3. ADDITIONS TO THE AGENDA	There were no additions to the open agenda.
4. APPROVAL OF THE MINUTES	It was MOVED by J. LoPresti, SECONDED by R. Robb, VOTED AND CARRIED . THAT THE MINUTES OF THE HAMILTON BOARD COMMITTEE (OPEN) OF MARCH 29, 2012 BE APPROVED
5. REPORTS	
5.1 Chair's Report	B. Gould reported the following: <ul style="list-style-type: none"> • A list of upcoming events was circulated on the blotter. An updated list will be included in every HBC agenda.

Subject	Discussion
5.2 <i>President's Report</i>	<p data-bbox="427 346 1037 378"><u>D. Higgins – President – St. Joseph's Healthcare</u></p> <ul data-bbox="475 414 1476 549" style="list-style-type: none"> • An update was provided on the Sandoz Drug Shortages • SJHH has implemented a rigorous system for daily monitoring of drugs through the Pharmacy Department • It was noted that this shortage is long term and will continue through to 2013 <p data-bbox="427 602 1184 634"><u>K. Ciavarella – President and CEO – St. Joseph's Home Care</u></p> <ul data-bbox="462 670 1484 883" style="list-style-type: none"> • It was noted that the Home Care Procurement plan is being developed by the community committees involved in collaboration with the Community Provider Associations Committee (CPAC). • Details as to plan and process were provided • Clarification was provided with regard to the new programs and that a polling survey indicated a future series would be encouraged with lunch and learns also being planned. <p data-bbox="427 953 1040 985"><u>S. Gadsby – President, St. Joseph's Villa Dundas</u></p> <ul data-bbox="470 1021 1452 1144" style="list-style-type: none"> • It was noted that the Villa's three outbreaks have been declared over by Public health. • It was confirmed that St. Joseph's Villa does have access to discounts for goods and services through the Central Buying System.
5.3 <i>President of the Medical Staff</i>	<p data-bbox="427 1202 742 1234">The following was reported:</p> <ul data-bbox="470 1272 1492 1591" style="list-style-type: none"> • An update was provided on the breakdown negotiations between the Ontario medical Association (OMA) and the Government of Ontario • This is not perceived as a concern for SJHH physicians and negative messages are not being delivered to patients. • It was announced that MSA has acquired a list of physicians and their services within the hospital, facilitated through SJHH Administration. • The list will be used as a method of communication between physicians with regard to the referral and discussion of patient concerns. • The University Health Network was noted as being an excellent model for this type of database and will be reviewed by the MSA.
5.4 <i>St. Joseph's Healthcare Foundation and St. Joseph's Villa Foundation</i>	<p data-bbox="427 1649 869 1681"><u>St. Joseph's Healthcare Foundation</u></p> <ul data-bbox="462 1713 1492 1996" style="list-style-type: none"> • It was announced that a donation was received in the amount of \$350,000 from PCL Constructors who are the contractors for the West 5th site. • It was also noted that PCL Constructors will be approaching their sub-contractors for further donations to contribute to fundraising efforts • It was announced that a six-page article will be in the Spectator during Mental Health Week which will feature both patient and donor stories to encourage donations for the Redevelopment. • It was also announced that May 3rd, 2012 will be the annual Muffin and Coffee Event for all staff to be held in respective cafeterias at all sites.

Subject	Discussion
	<p><u>St. Joseph's Villa Foundation</u></p> <ul style="list-style-type: none"> • Thanked Board Members who attended the recent Gala which surpassed the goal of \$110,000 and raised between \$112,000 - \$113,000 • It was noted that the Campaign continues with \$470,000 raised so far of a \$2 million dollar goal • It was stated that construction is on schedule to date. • It was announced that a car raffle will be held next month as another fund-raising initiative. • It was also stated that the website is being revamped to have it be more user-friendly.
6. OTHER BUSINESS	None
6.1 Summary of HBC Closed Meeting Session	<ul style="list-style-type: none"> • A summary of the February 23, 2012 HBC Closed Meeting Session was reviewed. The motions summary will be placed on the hospital website on a monthly basis.
7. INFORMATION ITEMS	There was no further business and the meeting adjourned at 1600 hours.
8. MOTION TO MOVE INTO THE CLOSED SESSION	<p>It was MOVED by J. LoPresti, SECONDED by P. Tice, VOTED AND CARRIED THAT THE HBC MOVE INTO THE CLOSED SESSION OF THE APRIL 26, 2012 HBC</p>
	<p>_____ Ben Gould, Chair</p> <p> _____ David Higgins, Secretary</p> <p> _____ Kathleen Romanoski, Recorder</p>

OPEN SESSION REPORT TO THE HAMILTON BOARD COMMITTEE – MAY 2012

SECTION 1: HBC REPORTING

1.0 Environmental Scan (Legislative, Health Care Industry and Government Update)

1.1 SJVD: Compliance Orders

The Villa experienced a positive visit from the Ministry of Health and Long Term Care Compliance Inspectors (April 25, 2012) that reviewed the outstanding Compliance Orders, Written Notifications and Voluntary Plan of Correction. Several of the Compliance Orders and Written Notifications were removed from the Villa's record.

1.2 SJVD: Behavioural Supports Ontario (BSO)

The BSO Project went live successfully on March 31, 2012. Teams of RNs, RPNs and PSWs were discharged to their perspective hubs in Niagara, Hamilton, Brantford, Burlington and Haldimand. These staff are sent to various long term care homes who have signed MOUs with the Villa to consult/assess resident responsive behaviours with the internal staff.

1.3 SJHC: CCAC Procurement

On April 2nd, Ontario Association of Community Care Access Centres (OACCAC) convened a meeting with home care stakeholders to begin a dialogue on how to move forward on procurement. Ministry staff in attendance made it apparent that the sector needs to move quickly to adapt the contracting of home care services to meet the changes coming with the Health Based Allocation Model (HBAM) roll out and population based funding for CCACs this year. HBAM deadline is October 1, 2012.

Takeaways from the Meeting:

- The Integrated Client Care Project (ICCP) has provided the OACCAC with the opportunity to test concepts and reinforce the value proposition. The government has asked OACCAC to coordinate the efforts going forward.
- The Ministry voiced repeatedly that there is an opportunity to collaborate to develop a new framework for moving procurement forward in the delivery of quality care.
- It was stressed that, the Ministry, OACCAC and the service providers are all partners in providing home care and must work together to support the Health Action Plan to design a better system that delivers care in the community with better results.
- Changes will not be in the form of contract renewals or extensions. New contracts will be created effective October 1, 2012 and negotiated only with existing providers for a two-year period.
- There will be no competitive bidding process for the new contract. Whoever is currently in the marketplace will continue to hold contracts with the CCAC. Contracts will be based on performance related to transition, quality improvement, client satisfaction, innovations and value for money.

Timelines:

- By June 30th: The elements of new contracts must be agreed on and education to providers must be ready to deliver to service providers.
- By August 30th: Education is delivered; CCACs and their service providers agree on the contract terms and conditions
- Beginning in October: Within the framework of the new agreement, CCACs and service providers begin to implement changes

The timing of these changes will be influenced by the Local Health Integrated Networks (LHINs), Health Quality Ontario (HQO), and the government. Some changes may take place immediately.

2.0 Mission, Vision and Values Update (Strategic Planning, Quality, Patient Safety, Partnerships and Community Engagement, SJHS Mission Integration)

2.1 SJVD: Service Awards and Sister Edna Walter Applause Awards

"Ignite the Spirit" was the theme to this year's service award event celebrated on May 17, 2012 in the Villa's chapel. The Values of Dignity, Respect, Service, Justice, Responsibility and Enquiry were highlighted. The chapel was filled with staff and some of their family members as over a thousand years of service were commemorated. Sister Diane Oberle and Ray Rocci from the Hamilton Board Committee granted the pins to the recipients as well as to the four Sister Edna Walter Applause award winners. The staff choir, Villa Voices entertained the audience.

2.2 SJVD: Surge Learning

The Long Term Care Homes Act 2007 has implemented additional annual mandatory requirements for staff to complete. The Villa has been proactive and will implement Surge Learning to assist with charting mandatory requirements for over 600 staff. With a Human Resources Department of one, this will be a significant improvement in tracking. Other tools were evaluated such as Upstairs Solutions, but with references from other LTCH, Surge Learning faired the better tool. Highlights are tracking of attendance at fire and mock emergency drills; reporting by user, course, status of all training, skills, course evaluation and program evaluations.

2.3 SJVD: Transfer Sheet Update

The Long Term Care Working Group that consisted of a contingent of physicians and professionals from St. Joseph's Healthcare Hamilton, Hamilton Health Sciences, Hamilton Community Care Access, Local Health Integrated Network and the Villa was created to revise the cumbersome transfer sheet that is currently used by LTCH to acute care. The new one page checklist with attached documents will improve communication and transfer of information between sites for improved resident and patient outcomes. The pilot project is occurring at St. Joseph's Villa, Dundurn Place, HCC, St. Peter's at Chedoke, Parkview, Willowgrove, Idlewyld, and the Meadows beginning June 1, 2012 with an end date of December 31, 2012.

2.4 SJHC: Falls Prevention

Commencing April 1, 2012, SJHC is introducing a new component to our already vigorous Falls Prevention strategy. The goal is to keep the percentage of long stay home care clients who report a fall at 25% or less. A long-stay stay client is defined as an adult who requires more than 60 uninterrupted days of service. To achieve this goal all long-stay clients, in both nursing and

Community Support Services (CSS) programs, will be called on a quarterly basis to find out whether or not they have sustained a fall in the previous 90 days. If they have fallen, they will be provided with a Safety at Home assessment and all necessary community and professional referrals and follow up.

2.5 SJHH: Quality and Patient Safety Improvements

The Laboratory Program completed its Ontario Laboratory Accreditation. A team of 12 assessors spent a full week inspecting our laboratories and discovered only 1 major non-compliance related to documentation which is easily corrected. This represents a highly successful accreditation after a tremendous amount of work from our entire laboratory team.

The program is now running a Lean Green Belt training course for laboratory professional staff including faculty members and residents. The purpose of this course is to prepare and facilitate the involvement of laboratory professional staff to be more involved in our process improvement projects.

2.6 SJHH: Schizophrenia and Community Integration Service (SCIS) Outpatient

The Haldimand-Norfolk Resource Centre presented the Haldimand Norfolk ACT Team with a VOICE (Victory Over Illness by Consumer Empowerment) Awards on May 1, 2012 for their ongoing contributions in supporting a mentally healthy community.

3.0 Planning and Development (Redevelopment, Integration and SJHS Integration Projects; Regional Partners (LHIN, CCAC, MOH, HHS, etc.)

3.1 SJVD: Emergency Preparedness

On Wednesday, May 16 the Villa Emergency Preparedness Committee staged a Code Green mock evacuation. This drill took advantage of the planned annual power outage to test our ability to plan and execute a Villa wide evacuation during a loss of hydro. The scenario read as follows:

During the worst heat wave in recent memory, a local construction company severs a main electrical cable in Dundas. Emergency generators immediately kick in but, after several hours, the upper floors of the Villa become unbearably hot for the residents. Horizon Utilities assures us that electricity will be restored within 48 hours but the rising temperature of the home areas will pose a health risk to residents within 8 hours.

Thanks to many residents, Adult Day Program clients, BSO and Villa staff, and Assess and Restore patients we were able to "evacuate" the 5th Floor and all resident home areas except the secured units. Several recommendations were made to improve the process.

3.2 SJVD: Long Term Care Task Force on Resident Care and Safety – May 2012

On November 18, 2011 the Ontario Long Term Care Association (OLTCA), the Ontario Association of Non-Profit Homes and Services for Seniors (OANHSS), the Ontario Association of Residents' Council (OARC) and Concerned Friends of Ontario Citizens in Care Facilities created the Long-Term Care Task Force on Resident Care and Safety in response to media reports of incidents of abuse and neglect in long-term care homes and underreporting of these incidents. These organizations shared the concerns of the public and the Minister of Health and Long-Term Care about resident care and safety.

The focus of the Task Force was to develop an action plan that examines and addresses the factors contributing to incidents of abuse or neglect in long-term care homes. The Task Force conducted its

work from January to April 2012. Almost 2,000 individuals and groups responded to a survey or sent a submission or email. The opinions, suggestions and stories received by the Task Force were invaluable for guiding its works. Targeted interviews and meetings were also held with over 40 subject matter and industry experts and practitioners, six long-term care homes were visited, and data and reports were reviewed.

The Task Force identified 18 actions to improve the care and safety of residents in long-term care homes. Eleven actions focus on areas where the long-term care sector can play a leadership role. Six actions require leadership by the Ministry of Health and Long-Term Care and may benefit from participation of other partners. In the final action the Task Force commits to implementing the recommendations and regularly reporting on progress.

The following are key action areas where the Long-Term Care Sector can play a leadership role:

- Making resident care and safety the number one priority in Long-Term Care Homes over the next year and a top priority in years to follow
- Committing to reduce incidents of abuse and neglect in Long-Term Care Homes and be accountable for achieving results
- Advancing the development of strong skilled administrators and managers
- Strengthening the ability of staff to be leaders in providing excellent and safe care
- Empowering residents and families with a stronger voice and education
- Committing to implement the action plan

Action areas requiring leadership from the Ministry of Health and Long-Term Care include:

- Developing coaching teams to help homes improve
- Addressing direct-care staffing in homes
- Supporting residents with specialized needs to ensure their safety and safety of others
- Addressing legislative requirements and processes that detract from resident care and may be driving abuse and neglect underground

The entire report can be found at <http://longtermcaretaskforce.ca/>

3.3 SJHC: HNHB LHIN Behavioural Supports Ontario (BSO) Community Sub Committee

Purpose of the committee: To provide expertise to implement, further evaluate, and develop the three components of the Community Model:

1. *'BSO Connect'*, a single point of information and referral for clients, caregivers, health care providers and other agencies to access assistance for individuals with cognitive impairments due to mental health problems, addictions, dementia or other neurological conditions that demonstrate responsive behaviours and their caregivers (referred to as BSO clients).

2. *'Integrated Community Lead'* (ICL) approach, where a single community provider is identified for clients and their caregivers to coordinate and plan community services to meet their health care needs.

3. *BSO Community Outreach Team (BSOCOT)* will work with existing community outreach teams to provide 'just in time' support to BSO clients and caregivers in the community.

In addition SJHC has been identified as an "Integrated Community Lead" in Hamilton.

3.4 SJHC: Community Partnership 4 Independence

Purpose of Committee:

To be ready in the event funding becomes available from HNHB LHIN for Hamilton to develop assisted living programs.

Members of this subcommittee are:

- HNHB CCAC
- Cheshire Homes
- AbleLiving
- Ontario March of Dimes
- CityHousing Hamilton
- Canadian National Institute for the Blind (CNIB)
- St. Joseph's Home Care

Current Position:

SHS consulting has begun work on the background document and proposal for a submission to the HNHB LHIN for funding for Assisted Living for Frail Seniors programs in Hamilton. This partnership has identified seven hubs and we are hopeful to get at least three funded initially. The HNHB CCAC, which is working with this group, has provided data which aligns high need clients with three of the seven hubs identified.

3.5 SJHC: Alternate Level of Care (ALC) Contract with SJHH

Commencing May 22nd, in a pilot project which is an extension of the ALC contract, SJHC will be providing full-time Personal Support Workers (PSWs) to Clinical teaching Unit (CTU) (3 units) and the Cardiology DCD unit. This new model of service provision will emulate the ALC model which guarantees the same PSWs allowing for well-trained employees, with enhanced training in Gentle Persuasive Approaches, a high standard of care and continuity of service provider. If successful we would hope to roll out this model to all units.

3.6 SJHH: West 5th Campus Redevelopment

All project components including construction, and furniture and equipment planning are moving forward on time and on budget. Topping-off Ceremony took place on May 23 and was a great success.



**President's Report to the Hamilton Board Committee
St. Joseph's Healthcare Foundation
May 31, 2012**

Activities related to our **Timeless Care, Tomorrow's Discoveries Campaign** continue in full force. On April 26th, we announced a gift of \$350,000 from PCL Constructors Canada. As well, at the official "topping off" and naming ceremony at the new West 5th Campus on May 23rd, more than 200 staff, invited guests and media learned that the new building will be named the Margaret & Charles Juravinski Centre for Integrated Healthcare in honour of their outstanding campaign support of \$10 million. A number of new gifts to the Campaign have been confirmed.

We are conducting tours of the new surgical centre for prospective supporters as our community outreach continues. We look forward to the fall when we can start offering "hard hat" tours of the Juravinski Centre for Integrated Healthcare.

On April 26th an event called *It's a Man's Thing* to raise awareness of and funds for the McMaster Institute of Urology (MIU) at St. Joe's was held at the Tamahaac Club in Ancaster. This is organized by a team of dedicated supporters and physicians from the MIU. This year, the event is raising funds to support surgical equipment related to the *da Vinci* Surgical Robotic System.

We are embarking on phase two of the Campaign Communications plan which will feature the Campaign Commercials running again on CHCH TV, a revamp of three posters on the Fontbonne Parking Garage, and another phase of billboard and transit shelter advertising.

We are rolling out a new Grateful Patient Program that includes 15 new posters, and corresponding brochure holders and elevator wraps. Our spring appeal has been sent out and for the first time featured a Donor Card for loyal St. Joe's supporters.

The newly invigorated St. Joe's Golf Classic in memory of Shirley Elford at Glencairn Golf Club will be held on Monday, May 28th. Preparations for the Lina DeSantis Memorial Golf Tournament on September 6th are also well underway. We aim to raise more than \$100,000 from each of the two golf tournaments this year.

The 15th Annual Holiday Gala, Palais de Neige, will take place at LIUNA Station on Saturday, November 17, 2012. Our goal is to raise \$300,000 and attract 400 guests in attendance.

Respectfully submitted,

A handwritten signature in cursive script that reads "Sera Filice-Armenio".

Sera Filice-Armenio
President & CEO

Hamilton Board Committee (HBC) – Summary of March 29, 2012 Closed Meeting Session

Motions Summary

Recommending Subcommittee	Motion Summary
Governance, Mission and Values Committee of the HBC	<p>It was approved that the following Terms of Reference be accepted as revised:</p> <ul style="list-style-type: none"> • Governance, Mission and Values Committee of the HBC • Building and Planning Committee of the HBC • Quality Committee of the HBC • Resource and Audit Committee of the HBC
President's Report	<p>It was voted to approve the:</p> <ul style="list-style-type: none"> • Terms and conditions of the new Collective Agreement with SEIU Local 1 Canada
Resource & Audit Committee of the HBC	<p>It was voted that the:</p> <ul style="list-style-type: none"> • Audited and Notice to Reader Financial Statements for the year ended December 31st, 2011 for St. Joseph's Villa, St. Joseph's Estates and St. Joseph's Seniors Centre be approved • Members approve the signing of the HSAA amending agreement for the period ending March 31, 2013

Presentations and Reports to the HBC - Summary

- Update was provided by the Quality Committee of the HBC. The Quality Improvement Plan for 2011-12 was endorsed by the Quality Committee and will be published on the public website on April 2, 2012.
- Update was provided on the Sandoz Drug Shortage. The ongoing challenges related to a single source supplier of many critical drugs were discussed. SJHH is collaborating with LHIN and other partners to address any shortages and forecast supply for upcoming weeks.
- Dr. Rory McDonagh, Chief, Department of Obstetrics and Gynecology was the guest from the Medical Advisory Committee and provided a presentation titled "Towards Improving Public Engagement in Hospital Care". Discussion took place on progress in including patients and family members on Committees and the Department of Obstetrics and Gynecology team approach to quality and patient safety.
- The Infection Prevention and Control Department has developed buttons and leaflets for staff and physicians which state "It's okay to ask me if I have washed my hands". This initiative is currently being piloted on two units to obtain patient engagement in hand hygiene.