

# Hamilton Board Committee

*Thursday, October 25, 2012*

*15:30 pm*

*Dofasco Boardroom – Juravinski  
Innovation Tower*

***Open Session***

St. Joseph's  
Villa  Dundas

St. Joseph's  
Healthcare  Hamilton

St. Joseph's  
Home  Care

**HAMILTON BOARD COMMITTEE (HBC)**

October 25, 2012 – Juravinski Innovation Tower – 1530 hours

**OPEN SESSION**

	Page(s)	Time
1. PROTOCOL		
1.1 Call to Order – Mr. B. Gould 1.2 Opening Prayer - Mrs. M. Dow 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 SEPTEMBER 27, 2012 (OPEN)  <u>Motions for Approval:</u>  <u>Hamilton Board Committee</u>  <i>4.1 That the minutes of the 2012 Hamilton Board Committee of September 27, 2012 be approved</i>	1-3	
5. REPORTS		
5.1 Chair's Report – Mr. B. Gould 5.2 President's Report – Dr. D. Higgins/Mr. S. Gadsby/Mrs. K. Ciavarella 5.3 President of the Medical Staff – Dr. T. Packer 5.4 St. Joseph's Healthcare Foundation and St. Joseph's Villa Foundation – Ms. S. Filice-Armenio/Ms. M. Ellis	4-5	3:40-3:45 3:45-3:50 3:50-3:55 3:55-4:00
6. OTHER BUSINESS		4:00-4:05
7. INFORMATION ITEMS		
8. MOTION TO ADJOURN – OPEN SESSION		

*Note: Trustees who wish to have items moved from the Consent Agenda to the Closed/Open Agenda should contact the President's Office prior to the Board Meeting. Trustees also have an opportunity to make this request when the agenda is presented at the Board Meeting.*



Committee: Hamilton Board Committee – OPEN SESSION

Date: September 27, 2012

Called to order at: 1530 hours

Adjourned: 1600 hours

Location: Dofasco Boardroom – 2<sup>nd</sup> Floor Juravinski Innovation Tower

Present: Mr. B. Gould, Chair, Mr. S. Monzavi, Mrs. I. Schachler, Mr. S. Monzavi, Mrs. M. Taylor, Mrs. M. Dow, Mr. C. Santoni, Mr. T. Thoma, Dr. H. Fuller, Dr. M. Guise, Mr. J. LoPresti, Mr. P. Tice.

Regrets: Dr. J. Kelton, Mr. R. Rocci, Ms. W. Doyle, Dr. T. Packer.

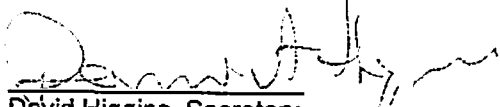
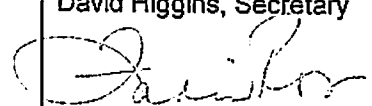
Resource Staff: Dr. D. Higgins, Ms. V. Dodds, Mr. S. Gadsby, Ms. F. Ros, Dr. K. Smith, Mrs. K. Ciavarella.

Guests: Mr. J. Woods, Ms. S. Hollis, Mr. R. Cercone, Ms. D. Elder, Dr. M. Crowther, Ms. R. Repa.

NEXT MEETING October 25, 2012

Subject	Discussion
<b>1. PROTOCOL</b>	
<b>1.1 CALL TO ORDER</b>	The meeting was called to order at 1530 hours by B. Gould.
<b>1.2 OPENING PRAYER</b>	T. Thoma opened the meeting with a prayer.
<b>1.3 GUESTS</b>	All guests in attendance were introduced.
<b>1.4 DECLARATION OF CONFLICT OF INTEREST</b>	There was no declaration of conflict of interest.
<b>2. APPROVAL OF AGENDA</b>	It was <b>MOVED</b> by M. Guise, <b>SECONDED</b> by C. Santoni, <b>VOTED AND CARRIED:</b> <b>THAT THE HAMILTON BOARD COMMITTEE AGENDA BE APPROVED AS CIRCULATED</b>
<b>3. ADDITIONS TO THE AGENDA</b>	There were no additions to the open agenda.
<b>4. APPROVAL OF THE MINUTES</b>	It was <b>MOVED</b> by M. Dow, <b>SECONDED</b> by S. Monzavi, <b>VOTED AND CARRIED</b> <b>THAT THE MINUTES OF THE HAMILTON BOARD COMMITTEE (OPEN) OF JUNE 28, 2012 BE APPROVED</b>
<b>5. REPORTS</b>	
<b>5.1 Chair's Report</b>	B. Gould reported the following: <ul style="list-style-type: none"> <li>o HBC upcoming events and walkabout session dates were included on the blotter.</li> </ul>

Subject	Discussion
<p>5.2 <i>President's Report</i></p>	<ul style="list-style-type: none"> <li>◦ The hospital newsletter, "Connections" now has a board page which highlights the function and role of the HBC. This will be a quarterly feature in Connections.</li> </ul> <p><u>D. Higgins – President – St. Joseph's Healthcare</u></p> <ul style="list-style-type: none"> <li>◦ The Mission, Vision and Values Statement for St. Joseph's Healthcare Hamilton was overviewed.</li> <li>◦ Details with respect to the fire at H1 Wing West 5<sup>th</sup> Campus were reviewed. It was noted that the fire was contained and no patients or hospital staff were injured. Patient services were not affected. A debrief was held with staff to review the incident and processes.</li> <li>◦ SJHH Cancer Surgery wait times were reviewed. SJHH handles a very large volume of surgeries due to the extensive catchment area. In response to a question, it was noted that the definition of wait time is from the time the surgeon and patient mutually agree to carry out the surgery and the time that the surgery is actually performed. There are many factors that can affect wait times.</li> </ul> <p><b>ACTION: A BRIEFING NOTE WITH RESPECT TO WAIT TIMES WILL BE DEVELOPED AND CIRCULATED TO THE HBC.</b></p> <ul style="list-style-type: none"> <li>◦ The C-diff outbreak in July was quickly extinguished. It was noted that a large number of community cases coming in to hospital preceded the outbreak. In response to a question, it was noted that SJHH's VRE-MRSA infection rates are amongst the lowest of peer hospitals.</li> </ul>
<p>5.3 <i>President of the Medical Staff</i></p>	<p>There was no report.</p>
<p>5.4 <i>St. Joseph's Healthcare Foundation and St. Joseph's Villa Foundation</i></p>	<p><u>St. Joseph's Healthcare Foundation</u></p> <ul style="list-style-type: none"> <li>◦ A \$300K gift from Scotiabank was announced last week. There was excellent coverage of the event in The Spectator and a glossary of photos has also been published on thespec.com.</li> <li>◦ The 2012 Foundation Checkup Report will be sent out to donors shortly.</li> <li>◦ It was noted that a future edition of Hamilton Magazine will feature an article on mental health.</li> <li>◦ A gift announcement will be made on October 30<sup>th</sup>. Details on the event will be provided shortly.</li> <li>◦ The Foundation will hold a retreat on October 16<sup>th</sup>. A draft Strategic Plan will be formulated and the final draft should be complete by Spring 2013.</li> </ul> <p><u>St. Joseph's Villa Foundation</u></p> <ul style="list-style-type: none"> <li>◦ There was no report.</li> </ul>
<p>6. OTHER BUSINESS</p>	<p>There was no other business.</p>
<p>6.1 <i>Summary of HBC Closed Meeting Session</i></p>	<ul style="list-style-type: none"> <li>◦ A summary of the June 28, 2012 HBC Closed Meeting Session was reviewed. The motions summary will be placed on the hospital website on a monthly basis.</li> </ul>
<p>7. INFORMATION ITEMS</p>	<p>There were no information items.</p>
<p>8. ADJOURNMENT</p>	<p>There was no further business and the meeting adjourned at 1600 hours.</p>

Subject	Discussion
	<p>It was MOVED by M. Taylor, SECONDED by P. Tice, VOTED AND CARRIED THAT THE KBC MEETING MOVE INTO THE CLOSED SESSION</p> <p><u>Ben Gould, Chair</u></p> <p> <u>David Higgins, Secretary</u></p> <p> <u>Fadia Ros , Recorder</u></p>

## OPEN REPORT TO THE HAMILTON BOARD COMMITTEE – OCTOBER 2012

### SECTION 1: HBC REPORTING

#### **1.0 Environmental Scan**

##### **1.1 SJHC: Provincial Registry of Personal Support Workers**

In May 2011, the Ministry of Health and Long-Term Care announced the creation of a registry of personal support workers (PSWs) that will "better recognize the work they do for Ontarians while helping to better meet the needs of the people they care for". This registry has the potential to improve protection for seniors and vulnerable populations and to help drive improvements in quality care by supporting appropriate training for PSWs.

Registration is mandatory for all Personal Support Workers (PSW) employed by publicly-funded health care employers and Phase I of the project will focus on those working in the home care sector.

#### **2.0 Mission, Vision and Values Update**

##### **2.1 SJHH: Employers Award**

St. Joseph's Healthcare Hamilton has been awarded the Canada's Top 100 Employers Award and the Hamilton-Niagara Top Employers Award for the 3<sup>rd</sup> year in a row.

##### **2.2 SJHH: Workplace Wellness**

The new Wellness Calendar with expanded program has been established with 17 yoga classes and running club. There is programming at all three Campuses with two additional instructors added. Seminar for Compassion and Resilience has been developed in collaboration with the Compassion Project Team out of the Mental Health Program. Seminars will be tested with the staff in the Out Patient Schizophrenia and Homes for Special Care Programs.

#### **3.0 Planning and Development**

##### **3.1 SJHH: Mood and Anxiety Services: Mental Health & Addiction Program**

The Psychological Trauma Program for Veterans was launched in September and began receiving the first referrals. An in-service presentation to the Veteran's Affairs Office was conducted and there was great enthusiasm for the program particularly for the opportunity to have local, comprehensive, evidence-based assessment and treatment available for veterans.

##### **3.2 SJHH: Pediatric Psychiatric Emergency Services (PES) model**

The new model for Pediatric PES launched on Oct 1st. Child and Youth Crisis workers are on call to assess children who present to the ED and require mental health assessment. A separate space, located in the same hallway as PES and ED has been renovated to create two interview rooms, so children can be moved from the PES environment.

##### **3.3 SJHH: West 5<sup>th</sup> Campus Redevelopment: Construction Update**

The building is moving quickly to becoming watertight for the end of October, the last of the exterior cladding is being installed at the West 5th/Fennell corner. Block A of level 1 is in target for

construction clean in November, this will be the first area to be essentially complete, should follow that completion of a block a month will follow. Project budget remains on target.

**3.4 SJHH: West 5<sup>th</sup> Campus Redevelopment: Heritage**

We have received a proposal from Plenary Group for heritage re-use and will be meeting with them in the near future to discuss and decide on the approach we want to take. We will be looking to have all costs covered by PCL or the PCC or a combination of both. A meeting to discuss options has been scheduled for early November.

**3.5 SJHH: West 5<sup>th</sup> Campus Redevelopment: Communications**

Over the course of the next three months we will be working on updates to the Website and Intranet, site tours and the time capsule.

**3.6 SJHH: West 5<sup>th</sup> Campus Redevelopment: Operational Readiness**

A new Operational Readiness Structure for completing all required activities has been put in place and reviewed with all stakeholders. In brief, the structure requires all programs to have a detailed work plan, outlining all task required to operationalize in the new facility matched to a specific timeline; corporate or facility-wide issues such as the future security model, human resource planning, etc. will be addressed via Task Force. Lastly, a significant process improvement endeavor which includes process mapping of 20 initiatives will occur simultaneously, with implementation of new processes prior to occupancy where possible.

**SECTION 2 – OPERATIONAL INFORMATION**

**1.0 SJHC**

**1.1 Accreditation**

SJHC has been advised by Accreditation Canada that, because the recent evaluation of the Qmentum program identified the benefits of having a longer accreditation cycle, they will be extending the time between on-site surveys from three to four years. Therefore, the decision SJHC receives at our on-site survey in 2014 will be in place for the following four years.

**2.0 SJVD**

**2.1 Organizational Restructuring**

The Director of Care has begun the process of taking all Resident Care programs and services (Recreation, Therapy, Social Work and Spiritual Care) under her span of control/operation. This has been a shift from our traditional care model and organizational structure. Enhancements include more evening and weekend coverage of programs such as therapy and recreation, decentralization of all program departments, integration of dietary and housekeeping staff into the care team on each Resident Home Area and Tower.

This initiative continues on our path of reorganization to meet the emerging needs of our Residents and Patients, expectations under new legislation (LTCH Act) and heightened focus on outcomes. A number of changes have been made such as the replacement of Nurse Managers with Charge Nurses, a focus on rehabilitation and restorative care, breaking down internal barriers to effective work processes. More information as this plan unfolds will be communicated to the HBC.

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