

# Hamilton Board Committee

*Thursday, December 20, 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 – OPEN SESSION - Agenda**

Date:	Thursday, December 20, 2012
Time	1530-1605 hours
Location:	Dofasco Boardroom, Juravinski Innovation Tower, Charlton Campus, St. Joseph's Healthcare Hamilton
Members:	B. Gould, Chair, M. Dow, W. Doyle, H. Fuller, M. Guise, J. Kelton, J. LoPresti, S. Monzavi, T. Packer, R. Rocci, C. Santoni, I. Schachler, M. Taylor, T. Thoma, P. Tice.
Resource:	D. Higgins, K. Ciavarella, S. Gadsby, S. Filice-Armenio, M. Ellis, J. Fry, F. Ros.
Guests:	S. Seigel
Regrets:	I. Schachler

Item	Topic	Page	Responsibility	Time
1.0	<b>PROTOCOL</b>			1530-1535
1.1	Call to Order		Mr. B. Gould	
1.2	Opening Prayer		Dr. M. Guise	
1.3	Introduction of Guests		Mr. B. Gould	
1.4	Declaration of Conflict of Interest		All	
2.0	<b>AGENDA &amp; MINUTES</b>			1535-1540
2.1	Approval of the Agenda		Mr. B. Gould	
2.2	Additions to Agenda		Mr. B. Gould	
2.3	Approval of Minutes – November 29, 2012		Mr. B. Gould	
2.3.1	<b><u>Motion for Approval by Hamilton Board Committee: THAT THE OPEN MINUTES OF THE NOVEMBER 29, 2012 HAMILTON BOARD COMMITTEE BE APPROVED</u></b>	1-3		
3.0	<b>REPORTS</b>			1540-1600
3.1	Chair's Report		Mr. B. Gould	
3.2	President's Report	4-6	HBC Presidents	
3.3	President of the Medical Staff Association		Dr. T. Packer	
3.4	Presidents of SJH Foundation and SJV Foundation		Ms. S. Filice-Armenio Ms. M. Ellis	
4.0	<b>NEW BUSINESS</b>			1600-1605
5.0	<b>INFORMATION ITEMS</b>			
5.1	HBC Summary of October 25, 2012 – Closed Meeting Session	7		
6.0	<b>ADJOURNMENT</b> <b><u>Motion for Approval by Hamilton Board Committee: THAT THE OPEN SESSION OF THE HBC BE ADJOURNED AND THAT THE HBC MOVE INTO THE CLOSED SESSION</u></b>		Mr. B. Gould	1605

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

Committee: **Hamilton Board Committee – OPEN SESSION** Date: November 29, 2012

Called to order at: 1530 hours Adjourned: 1630 hours

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

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

Regrets: Dr. J. Kelton, Dr. M. Guise, Ms. W. Doyle.

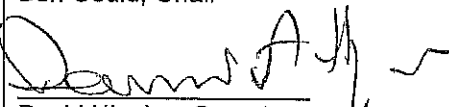
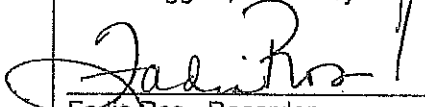
Resource Staff: Dr. D. Higgins, Mr. S. Gadsby, Ms. F. Ros, Dr. K. Smith.

Guests: Ms. C. Gosse, Dr. J. Farrell, Dr. K. Smith, Ms. V. Raab.

NEXT MEETING December 20, 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>	P. Tice 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. AGENDA AND MINUTES</b>	
<b>2.1 APPROVAL OF AGENDA</b>	It was <b>MOVED</b> by C. Santoni, <b>SECONDED</b> by R. Rocci, <b>VOTED AND CARRIED:</b> <b>THAT THE HAMILTON BOARD COMMITTEE AGENDA BE APPROVED AS CIRCULATED</b>
<b>2.2 ADDITIONS TO THE AGENDA</b>	The Integrated Comprehensive Care Project Presentation was moved to the open agenda.
<b>2.3 APPROVAL OF THE MINUTES</b>	It was noted that S. Monzavi was not present at the October HBC Meeting.  With this change, It was <b>MOVED</b> by M. Dow, <b>SECONDED</b> by J. LoPresti, <b>VOTED AND CARRIED</b>
<b>3. REPORTS</b>	<b>THAT THE (OPEN) MINUTES OF THE HAMILTON BOARD COMMITTEE OF OCTOBER 25, 2012 BE APPROVED</b>
<b>3.1 Chair's Report</b>	B. Gould reported the following: <ul style="list-style-type: none"> <li>• The December HBC Meeting will be held on Thursday, December 20<sup>th</sup>.</li> <li>• A patient walkabout took place at SJHH – on CTU West and one walkabout took place at SJVD at the Resident Home Areas – Adult Day Program.</li> </ul>

Subject	Discussion
	<ul style="list-style-type: none"> <li>Members of the HBC attended the OHA Advanced Certificate in Board Governance on November 4<sup>th</sup>. It was a very informative and excellent presentation. Members of the HBC also attended OHA HealthAchieve and the OHA IT Governance Webcast Session in November. HBC Members were encouraged to provide formal feedback on the sessions. This feedback will then be forwarded and reviewed at the Governance Committee.</li> </ul>
<p><b>3.2 President's Report</b></p>	<p><b><u>D. Higgins – President – St. Joseph's Healthcare Hamilton</u></b></p> <ul style="list-style-type: none"> <li>It was noted that SJHH is working through the process to ensure compliance with the Ontario Accessibility Standard for Customer Service. A training blitz is scheduled for December 2012.</li> </ul>
	<p><b><u>S. Gadsby – President – St. Joseph's Villa Dundas</u></b></p> <ul style="list-style-type: none"> <li>It was noted that the newly modeled Responsive Behaviours Committee has been redesigned as there has been a change in the philosophy of the care model. New terms of reference for the Committee have been developed.</li> <li>Congratulations were extended to SJVD on receipt of The Spectator Reader's Choice Awards in the category of "Best Nursing/Long Term Care Home".</li> <li>With respect to medication reconciliation, it was noted that quarterly reviews and audits take place. The review of medications of elderly residents in nursing homes is an important review to ensure that the medication regime provided is appropriate and effective for the patient long term.</li> <li>Understanding targets is very important and LTC facilities are working with Health Quality Ontario to review targets and data.</li> </ul>
<p><b>3.3 President of the Medical Staff Association</b></p>	<p>The following was noted:</p> <ul style="list-style-type: none"> <li>Nominations for membership on the Medical Staff Executive are currently underway. There has been much interest in membership on the Executive for the upcoming year and Dr. G. Chaimovitz is the Incoming President with two further nominees identified for 2013.</li> </ul>
<p><b>3.4 St. Joseph's Healthcare Foundation and St. Joseph's Villa Foundation</b></p>	<p><b><u>St. Joseph's Healthcare Foundation</u></b></p> <ul style="list-style-type: none"> <li>The 15<sup>th</sup> Annual Holiday Gala was held on November 17<sup>th</sup> and was a resounding success with over \$375,000 raised. Fantastic support from the community was realized and thanks was extended to all who supported and attended the Gala.</li> <li>The Around the Bay Road Race will be held on March 24, 2013. Many teams are being formed and all donations and participation in the event is greatly encouraged.</li> <li>The development of the Strategic Plan for the Foundation is currently underway.</li> <li>The Foundation is currently in the process of submitting an application for accreditation standards.</li> </ul> <p><b>ACTION: A LETTER OF THANKS FROM THE HBC WILL BE SENT TO THE MEMBERS OF THE GALA ORGANIZING COMMITTEE</b></p> <p><b><u>St. Joseph's Villa Foundation</u></b></p> <ul style="list-style-type: none"> <li>The Capital Campaign – 12 Bed Renovation Project has raised \$470K to date</li> <li>The SJVD Annual Gala will now be held on Friday, May 3, 2013 at Liuna Station.</li> <li>The Anne and Neil McArthur Memorial Golf Tournament raised \$71K – the best tournament to date.</li> <li>The Foundation Board has just completed its evaluation – results will be discussed at the November meeting.</li> </ul>

Subject	Discussion
<b>4. NEW BUSINESS</b>	
<b>4.1 INTEGRATED COMPREHENSIVE CARE PROJECT</b>	<p>C. Gosse gave an overview of the Integrated Comprehensive Care Project. The following was noted:</p> <ul style="list-style-type: none"> <li>• SJHS includes an acute care teaching hospital, LTC facilities, and a home care provider. It is the perfect setting to demonstrate this model of care which is better, faster and cost effective.</li> <li>• Early results have indicated lower acute lengths of stay (LOS) and a decrease in ER visits 30 days post-discharge.</li> <li>• The questionnaire data will be brought forward in an upcoming interim report in February 2013.</li> <li>• In response to a question, it was noted that the 24/7 call line has been relatively easy to maintain with accessibility for all patients and responds well to patient needs and avoids ER visits.</li> <li>• If there is a language issue, staff work with the family of the patient to sort through the issues.</li> <li>• This project is a great demonstration of how the System can be leveraged for the betterment of patient care through the integration of services.</li> </ul>
<b>4.2 DIRECTOR PUBLIC AFFAIRS</b>	<p>Victoria Raab, Director, Public Affairs for St. Joseph's Healthcare Hamilton was welcomed to the HBC. Victoria was previously the Manager of Public Affairs at St. Mary's General Hospital. Victoria outlined her vision on continued building on past successes, revitalization of the hospital website, branding of West 5<sup>th</sup> and marketing plan as well as improved external, internal and board communications.</p>
<b>5. INFORMATION ITEMS</b>	<p>There were no information items.</p>
<b>6. ADJOURNMENT</b>	<p>There was no further business and the meeting adjourned at 1630 hours.</p> <p>It was MOVED by R. Rocci, SECONDED by M. Taylor, VOTED AND CARRIED</p> <p><b>THAT THE OPEN SESSION OF THE HBC BE ADJOURNED AND THAT THE HBC MOVE INTO THE CLOSED SESSION</b></p> <p>_____ Ben Gould, Chair</p> <p> _____ David Higgins, Secretary</p> <p> _____ Fadia Ros, Recorder</p>

**OPEN REPORT TO THE HAMILTON BOARD COMMITTEE – DECEMBER 2012**

**1. Environmental Scan**

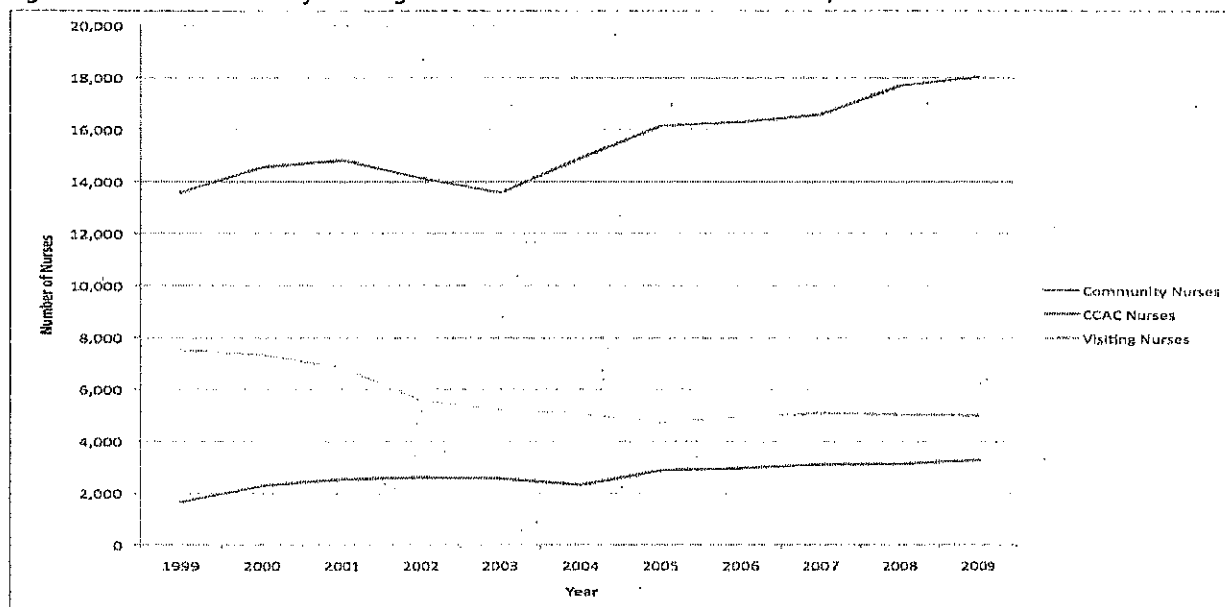
**1.1 SJVD: Ontario Association of Non-Profit Homes and Services for Seniors (OANHSS) Convention**

The OANHSS Convention is an annual opportunity for senior staff from long term care homes and seniors' housing organizations across Ontario to come together and discuss current issues and learn about products and services available in the marketplace. This year's convention is April 29 - May 1, 2013 at the Westin Harbour Castle, Toronto. If any Board members or staff are interested in attending please contact Shawn Gadsby.

**1.2 SJHC: Nursing Health Services Research Unit (NHSRU) Report**

The NHSRU has released a report on nursing in the community. The report shows that demand for home care services has been increasing as care has shifted from hospitals to home and community. Fewer nurses, however, are classified as visiting home care nurses who provide direct in-home patient care. The consequences of fewer visiting nurses on quality of care and wait times for home care services warrants further investigation. Analysis of the College of Nurses of Ontario Membership Statistics Report<sup>1</sup> reveals that the number of nurses classified as working in the community sector has grown. Two main drivers are an increase in the number of nurses working as case managers for the CCACs and a reclassification of nurses providing mental health services from psychiatric hospitals to community mental health programs. At the same time, the number of visiting nurses in the community sector workforce has steadily declined. *Source: College of Nurses of Ontario (2009). Membership Statistics Report<sup>1</sup>* As is the case for the nursing workforce overall, both the CCAC and visiting nurse workforces are aging. The proportion of CCAC nurses 55 years or older increased from 16.3% in 1999 to 32.7% in 2009.

*Figure 1. Total Number of Visiting Nurses and CCAC Nurses in Ontario, 1999–2009*



### 1.3 SJHH: Diagnostic Imaging

SJHH will be participating in Heath Canada's national CT survey commencing December 14<sup>th</sup>, 2012 through to April 5<sup>th</sup>, 2013. SJHH diagnostic CTs, PET/CT and SPECT will be included. The purpose of the survey will be to establish Canadian Diagnostic Reference Levels (DRLs) and create a tool that will allow Ontario hospitals to provide the highest standard of care by standardizing and managing CT scans to ensure radiation exposure is as low as reasonable achievable. The survey will gather information in 4 areas:

- a. Information related to the CT equipment in hospitals;
- b. The image acquisition settings for routine protocols;
- c. Representative patient imaging data;
- d. Standard CT radiation output measurements.

## 2. Mission, Vision and Values Update

### 2.1 SJHH: Employee and Volunteer Engagement Survey

On December 4<sup>th</sup>, SJHH launched the Employee and Volunteer Engagement Survey as a means to understand staff and volunteer perceptions of our culture, work environment, and organizational vision. Having engaged people is of great importance to St. Joseph's and is one of the organization's strategic directions. By collecting data on engagement levels, our organization will be able to identify areas of greatest strength and be able to work towards other areas of opportunity that will enable us to remain one of Canada's top employers.

### 2.2 SJVD: Assessing Resident / Family Quality of Care and Life in SJHS LTC Homes

The Long Term Care Homes Act and regulations require that every licensee of a long-term care home shall ensure that, at least once in every year, a survey is taken of the residents and their families to measure their satisfaction with the home and the care, services, programs and goods provided at the home. The SJHS Long Term Care sites (St. Joseph's Villa Dundas, St. Joseph's Health Centre Guelph and St. Joseph's Lifecare Brantford) utilized the SJHS research network to conduct a full survey during the summer of 2011 based on NRC picker questions. The plan is to implement a survey every 2nd year with quality improvement activities conducted on the basis of the survey results in the intervening year.

## 3. Planning and Development

### 3.1 SJHH: West 5<sup>th</sup> Site Development Update

- West 5<sup>th</sup> Construction:
  - Construction continues to proceed on schedule.
  - In November PCL had approx 617 trades people on site, construction was estimated at 75% complete.
  - Building commissioning activities are ongoing, the final commissioning plan has been submitted to SJHH for review and comment.
  - Work will begin in December for Keying and Security Card planning.
  - We are currently working on integration of IT systems.
- West 5<sup>th</sup> Project Budget:
  - Project Budget remains on target.

-We are currently reviewing the Transition, Trailing and Ancillary budgets.

- West 5<sup>th</sup> Schedule:

-On target for substantial completion December 6, 2012.

- West 5<sup>th</sup> Operational Readiness:

-Work plan development continues as managers provide additions to readiness plans, assign responsibility and determine dates for completion.

## 4. Operational Information

### 4.1 SJHH: Mixed Gender Rooming

On Monday November 5<sup>th</sup>, four patient care units initiated a mixed-gender rooming protocol in order to reduce patient transfers and improve patient flow at our Charlton campus. The patient experience is being monitored along with project outcomes (intra-unit transfers, infection rates and ED wait times). So far the change has been well received by patients and staff. If a patient has identified a significant concern about being placed in a mixed gender room due to their values and/or personal experience, we will make every effort to respect these concerns.

### 4.2 SJHC: MOH Funding

SJHC applied to the Nursing Secretariat in July 2012 for Late Career Nurse Initiative funding; this funding was available to Home Care agencies for the first time this year. The Late Career Nurse Initiative was created in 2004 as a strategy to assist organizations in retaining late career nurses in the workforce. On October 30, 2012, SJHC received notification that we were successful with our application and secured \$88,544 in funding. SJHC will use these funds to mentor new hires or low performing staff, work to update the orientation package and update infection control procedures.

### 4.3 SJHC: M-SAA Performance Targets Met

MOHLTC funded Community Support Services (CSS) programs met all their M-SAA performance targets. This was the first quarter we reported on the Neighbourhood Model for Seniors at Risk following the transfer of responsibility for this program to SJHC from Catholic Family Services.



## Hamilton Board Committee (HBC) – Summary of October 25, 2012 Closed Meeting Session

### Motions Summary

Recommending HBC Committee	Motion Summary
Governance, Mission and Values	It was voted that the: - Hamilton Board Committee – the minutes of the Governance, Mission and Values Committee of October 2, 2012 be accepted for information.
Quality Committee	It was voted that the: - Hamilton Board Committee – the minutes of the Quality Committee of October 9, 2012 be accepted for information. - Hamilton Board Committee – approve the addition of two patient members on the Quality Committee of the HBC on a pilot basis subject to approval at the Governance, Mission and Values Committee November meeting.
The Resource and Audit Committee	It was voted that the: - Hamilton Board Committee – the minutes of the Resource and Audit Committee of October 17, 2012 be approved. - Hamilton Board Committee – St. Joseph’s Healthcare Voting members – approve in principle to work with St. Joseph’s Healthcare Foundation to investigate and assess the potential opportunity and related risks related to offering reduced parking rates for certain patient populations.
The Medical Advisory Committee	It was voted that the: - Hamilton Board Committee – St. Joseph’s Healthcare Voting members – the minutes of the Medical Advisory Committee of October 4, 2012 be approved. - Hamilton Board Committee – St. Joseph’s Healthcare Voting members – the recommendations on research from the Medical Advisory Committee of SJHH of October 4, 2012 be approved.

### Presentations and Reports to the HBC - Summary

- The value of patients coming to the Quality Committee was discussed and it was noted that it is very valuable to have a patient relay their story and experience. It was requested that when critical incidents are presented to the Quality Committee that a printed version be provided on the blotter and then collected following the meeting.
- Radiology provided a presentation on systematic process issues regarding CT requisitions and ordering processes. The department has experienced an increase in workload since the implementation of the Access to Best Care (ABC) plan. It was noted that the number of patients going through ultrasound is in part due to increased morbidity of the patient population in the ER. Accurate communication of patient information is paramount to effective and efficient quality care.
- The tentative date for the HBC Retreat is the afternoon of the January 16<sup>th</sup> and the focus will be on strategic directions, integration and risk.