

Hamilton Board Committee

Thursday, April 25, 2013

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, April 25, 2013
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, G. Chaimowitz, R. Rocci, C. Santoni, M. Taylor, T. Thoma, P. Tice, I. Schachler, J. Gauldie.
Resource:	D. Higgins, S. Filice-Armenio, M. Ellis, J. Fry, F. Ros.
Guests:	A. Adili, K. Langstaff.
Regrets:	

Item	Topic	Page	Responsibility	Time
1.0	PROTOCOL			1530-1535
1.1	Call to Order		Mr. B. Gould	
1.2	Opening Prayer		Mrs. M. Taylor	
1.3	Introduction of Guests		Mr. B. Gould	
1.4	Declaration of Conflict of Interest		All	
2.0	AGENDA & MINUTES			1-3
2.1	Approval of the Agenda		Mr. B. Gould	
2.2	Additions to Agenda		Mr. B. Gould	
2.3	Approval of Minutes – March 21, 2013		Mr. B. Gould	
2.3.1	<u>Motion for Approval by Hamilton Board Committee: THAT THE OPEN MINUTES OF THE MARCH 21, 2013 HAMILTON BOARD COMMITTEE BE APPROVED</u>			
3.0	REPORTS			1535-1600
3.1	Chair's Report		Mr. B. Gould	
3.2	President's Report	4-8	HBC Presidents	
3.3	President of the Medical Staff Association		Dr. G. Chaimowitz	
3.4	Presidents of SJH Foundation and SJV Foundation		Ms. S. Filice-Armenio Ms. M. Ellis	
4.0	NEW BUSINESS			1600-1605
5.0	INFORMATION ITEMS			
5.1	HBC Summary	9		
6.0	ADJOURNMENT <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>		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: March 21, 2013

Called to order at: 1530 hours Adjourned: 1610 hours

Location: Dofasco Boardroom – 2nd Floor Juravinski Innovation Tower

Present: Mr. B. Gould, Chair, Mrs. M. Taylor, Mrs. M. Dow, Dr. M. Guise, Mr. J. LoPresti, Ms. W. Doyle, Mr. R. Rocci, Mr. T. Thoma, Dr. H. Fuller, Mr. S. Monzavi, Mr. P. Tice, Dr. G. Chalmowitz, Mr. C. Santoni.

Regrets: Dr. J. Kelton, Mrs. I. Schachler, Dr. J. Gaudie.

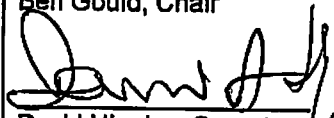
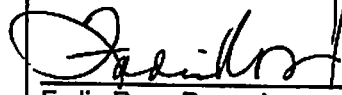
Resource Staff: Dr. D. Higgins, Ms. F. Ros, Ms. J. Fry.

Guests: Dr. J. Ferencz, Ms. L. Macbeth, Mr. R. Cercone, Ms. S. Hollis, Mr. S. Gordon, Ms. S. Browne, Mr. D. Bakker, Mr. C. Coventry, Dr. P. Bieling.

NEXT MEETING April 25, 2013

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	S. Monzavi 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. AGENDA AND MINUTES	
2.1 APPROVAL OF AGENDA	It was MOVED by P. Tice, SECONDED by R. Rocci, VOTED AND CARRIED: THAT THE HAMILTON BOARD COMMITTEE AGENDA BE APPROVED AS CIRCULATED
2.2 ADDITIONS TO THE AGENDA	There were no additions to the agenda.
2.3 APPROVAL OF THE MINUTES	It was MOVED by T. Thoma, SECONDED by M. Guise, VOTED AND CARRIED THAT THE (OPEN) MINUTES OF THE HAMILTON BOARD COMMITTEE OF FEBRUARY 28, 2013 BE APPROVED
3. REPORTS	
3.1 Chair's Report	B. Gould reported the following: <ul style="list-style-type: none"> HBC members were asked to complete the meeting evaluation form and submit to F. Ros in the President's Office.

Subject	Discussion
<p>3.2 President's Report</p>	<ul style="list-style-type: none"> • B. Gould attended the HHS board meeting as a guest. • Two walkabouts took place during March. One occurred on the Mental Health Program and the other in the Urgent Care Centre at King Campus. Discussion centered around patient safety and quality issues. Issues with respect to communication were also addressed. An upcoming walkabout is taking place in April in the Health Records Department. Representatives from the HBC will also be attending the Patient Advisory Committee. • The OHA Conference on "Risk Governance for Health Care Boards and Senior Management" will take place on April 8th. Representatives from both senior management and the HBC will be in attendance. • The Health Links Project continues to move quickly and meetings are being held to discuss this initiative. A central pilot project and three new health links have also been created to address patients with multiple health related issues and high frequency of hospital admissions. The project is a "bundled care" approach to bring the health community together in order to create a seamless patient care experience from hospitalization to home care and links to other community service providers. It is a large undertaking involving over 33 agencies in the City. • It was noted that the infection control results from the Ministry of Labour data blitz at SJVD will be provided to HBC members once they are received.
<p>3.3 President of the Medical Staff Association</p>	<ul style="list-style-type: none"> • A statement from the Medical Staff Association has been submitted with respect to the Casino issue in Hamilton. • The Medical Staff Association Exemplary Service Award has been presented to Mary Kay Genesiee. This is awarded to a staff member who has gone above and beyond normal work duties. • The Physician Support Team, a model of support for physicians, has generated some interest from other hospitals.. • The Forensic Service Risk and Recovery Conference will be held in late April and complimentary invitations will be sent to all HBC members.
<p>3.4 St. Joseph's Healthcare Foundation and St. Joseph's Villa Foundation</p>	<p>There was no report.</p>
<p>4. NEW BUSINESS</p>	
<p>4.1 Off Label Pharmaceuticals</p>	<ul style="list-style-type: none"> • In response to a question regarding off label pharmaceuticals, all drugs in the SJHH formulary recommended for use are prescribed/subscribed. The formulary recommendations are reviewed by the Pharmacy and Therapeutics Committee. Antibiotic stewardship is in place and it continues to be a work in progress. There are checks and balances in the system and it was noted that hospital administrators nationwide are notified of physicians who are in breach of prescribing practices.
<p>5. INFORMATION ITEMS</p>	<ul style="list-style-type: none"> • HBC Summary
<p>6. ADJOURNMENT</p>	<p>It was MOVED by J. LoPresti, SECONDED by C. Santoni, VOTED AND CARRIED</p> <p>THAT THE OPEN SESSION OF THE HBC BE ADJOURNED AND THAT THE HBC MOVE INTO THE CLOSED SESSION</p>

Subject	Discussion
	<p data-bbox="422 361 649 404">Ben Gould, Chair</p> <p data-bbox="414 383 812 500"></p> <p data-bbox="422 489 730 532">David Higgins, Secretary</p> <p data-bbox="389 532 795 627"></p> <p data-bbox="422 617 682 659">Fadia Ros, Recorder</p>

OPEN REPORT TO THE HAMILTON BOARD COMMITTEE – APRIL 2013

1. Environmental Scan

1.1 SJHH: St. Joseph's Healthcare Hamilton in the News

Hamilton hospitals rate at average or below in national CBC study: Hamilton's hospitals rank about average or slightly below average in a nation-wide Rate My Hospital investigation done by the CBC. St. Joseph's Healthcare rated the best of local hospitals, earning an overall B grade, which means it rates about the same as other hospitals of its size in Canada. Its highest grade in individual categories was an A for the low number of deaths after major surgery (5.34 people per 1,000). It has a C grade for the number of issues related to nursing care, such as urinary tract infections, bed sores, pneumonia and broken bones in medical patients and surgical patients (CBC News Hamilton).

New West Mountain Hospital Nearing Completion- St. Joe's West 5th campus slated to be finished in December: Theresa Reynolds, Redevelopment Project Coordinator, St. Joseph's Healthcare Hamilton, speaks to Hamilton Community News regarding St. Joe's new 855,000 square-foot West 5th Campus that is slated to be completed in December (Hamilton Community News, Hamilton Spectator).

St. Joe's critical care doctor wins national award for research: Dr. Deborah Cook, critical care physician was the recipient of the 14th Anne and Neil McArthur Research Award. Each year, the award honours an internationally renowned researcher whose area of study is also a focus of research at St. Joseph's Healthcare Hamilton. A McMaster University medical school graduate in internal medicine, Cook studied critical care at Stanford University and returned to Hamilton in 1990. Cook is also a professor of medicine and clinical epidemiology and biostatistics at McMaster and academic chair of critical care medicine. Her research interests include life support technology, risk factors for critical illness, prevention of ICU-acquired complications, end-of-life choices and research ethics (YourHamiltonBiz.com).

New Leader at Hamilton Addictions Facility: Debbie Bang, Manager of Men's & Womankind Addiction Service, St. Joseph's Healthcare Hamilton, discusses a change in governance and administration for Hamilton's Men's Withdrawal Management Centre. The facility on Main St. East has fallen under Hamilton Health Sciences' umbrella for almost 20 years. But as of April 1st the operation will be taken over by St. Joseph's Healthcare. As for clients, the changeover will be seamless. The centre provides withdrawal and rehab services as well as a day program for men with an addiction or substance dependency. There are almost 10,000 program participants each year (CHCH News).

1.2 SJHH: Under Dosing of IV Chemotherapy Drugs

There has been considerable media attention related to alleged under-dosing of the IV chemotherapy drugs, cyclophosphamide and gemcitabine, prepared by Marchese Hospital Solutions. At St. Joe's we do not purchase these two products from Marchese Hospital Solutions. All chemotherapy drugs that are used at St. Joseph's Healthcare are prepared by the hospital's pharmacy department. The hospital does purchase a small number of IV minibags from Marchese. These include: vancomycin 1g, clindamycin 600mg, cefazolin 1g, amiodarone 450mg, fentanyl 1000mcg. The hospital also purchases fentanyl/bupivacaine bulk solutions that are used to prepare epidural syringes. Epidural medications

are titrated to clinical effect, which ensures that the patient is receiving the amount of drug clinically required. There has been no change identified in terms of clinical response to or utilization of epidurals at SJHH.

There have been no concerns identified with the drug contents of the products purchased at our hospital. We remain engaged in provincial level discussions about this issue and are encouraged that the Ontario government has selected Dr. Jake Thiessen to lead an independent review of quality assurance in the province's cancer drug supply chain to safeguard patient care. Dr. Thiessen is the Founding Director of the University of Waterloo's School of Pharmacy. His review will focus on the alleged under-dosing of chemotherapy drugs to determine how such an incident could have occurred and will provide recommendations to prevent future incidents. Dr. Thiessen's review is in addition to the current investigations being conducted by the Ontario College of Pharmacists and Health Canada.

1.3 SJHC: Quality and Value in Home Care (QVHC)

Background

The Quality and Value in Home Care (QVHC) is a provincial initiative that involves a multi-year home care sector project to bring improvements in the delivery of quality care in the community sector and to support government policy for maximizing value for money.

Phase 1 of the project is complete. This phase focused on changes to the service provider contracts, which were signed by October 1, 2012.

Phase 2 of the QVHC initiative has begun with the implementation of a new reporting and table structure. The work of the tables will focus on:

- Implementation of Outcome Based Pathways and Outcome Based Reimbursements
- Design and implementation of a fair and value-based fee for service schedule
- Development and implementation of a performance management framework including new performance measures, public reporting and quality improvement plans for CCACs and Service Providers.
- Development of a human resources strategy to ensure long-term planning for human resource needs and ensure sustainability

The working tables and steering committee are comprised of representatives from all 14 CCACs across the province, professional associations (Ontario Home Care Association and Ontario Community Support Association) and service providers.

Outcome-based pathways will be rolled out across the province by October 31, 2013.

Update

The Hamilton Niagara Haldimand Brant Community Care Access Centre (HNHB CCAC) held an introductory (kick-off) meeting on March 8, 2013 with all service providers to introduce the outcome-based care strategy and action plan for wound care paths and Hip and Knee replacements. Action items from this meeting were:

- Each agency had to complete a service flow process of current state of operations by April 1, 2013;
- To develop an implementation committee with representation from each service provider and of various work groups.

The next meeting will be held in mid-April. The main focus of the meeting will be to validate current state service flow maps, discuss future state development and prepare a gap analysis.

Under the auspices of QVHC, the Performance Management Table developed a (draft) provincial Client Service Contract Performance Framework incorporating all requirements as outlined in the September 2012 Contract Management Guidelines for CCACs released by the MOHLTC. The Contract Performance Management Framework is comprised of 4 components: performance measurement, monitoring,

reporting and management and is centered on the client. Webinars are scheduled throughout April to finalize the Performance Management framework and contract.

1.4 SJHC: Ontario Home Care Association (OHCA)

Ontario home care providers strive for continuous, measurable improvement and, based on their feedback and recommendations, the OHCA has retained Sentiens Research to conduct an industry benchmarking survey of home care providers (members and non-members). The purpose of the project is to provide objective and accurate information about home care services in Ontario. The project goals are to gain a better understanding of:

- Cost structures such as administration, education, compensation
- Performance ratios that measure efficiency and proficiency (i.e. hours coordinated per coordinator, clients/supervisor, error rates etc)
- Staff satisfaction and retention factors
- Private market size (in relation to the publicly funded market)

Completion of the survey and final reporting is anticipated by the end of July 2013.

1.5 SJHC: Health Links – Role of Community Support Services (CSS)

There continues to be rapid advancement across the province of the Health Links projects since initiation last December. All Health Links will have a coordinating partner; most being a Family Health Teams (FHT) or Community Health Centre (CHC). Few Community Support Services (CSS) providers have been chosen as lead organizations (only one so far), however CSS partners are seen as necessary to coordinate other services that seniors require and there are CSS partners in each of the Health Link sites. It is important to note that this may present a strategic opportunity for SJHC, which has shown potential for innovative partnerships in projects such as Health Links through work with the Integrated Comprehensive Care Project.

1.6 SJHC: Release of the Senior's Strategy – "Living Longer, Living Well"

The full length Senior Strategy report, "*Living Longer, Living Well*", was released March 14. The full report is over 200 pages long and provides 169 recommendations (more details than the key recommendations document, released in January). It is important to note that the SJHS ICC Project is referenced on page 128 of the report:

"... in some cases it may make sense for hospitals to be supported in developing targeted care coordination structures and home and community care delivery models to address the needs of select populations that require enhanced care coordination or a specialised and time-limited set of home and community care services. With the success of such bundled-care models for specialised populations being demonstrated with the St. Joseph's Health System in Hamilton, the opportunity to expand the delivery of care in this way should be strongly considered in other areas of the province and for populations where this would make the most sense."

Further, recommendation #71 states:

"The Ministry of Health and Long-Term Care should encourage the further expansion and testing of hospital-led care coordination and home care models for select populations. These models need to complement existing community-based care coordination structures and patients' primary care providers."

1.7 SJHC: Regulatory Changes - PSW Services

On December 18, 2012, Ontario Community Support Association (OCSA) received notice from MOHLTC concerning changes to the regulations under the Home and Community Services Act related to the provision of personal services. Currently the regulation authorizes services to be delivered by providers

contracted by the Community Care Access Centres (CCACs) for the delivery of publicly funded personal support services. The changes to this regulation will allow for the delivery of Personal Support service to be provided by select Community Support Services (CSS) agencies. The intent is to have policy work completed over the course of this year – no date for implementation has been provided.

Extensive work, involving both home care and community support providers, will be required over the next couple months for the changes to be implemented.

1.8 SJHC: Employment Standards Act changes for Caregiver Leave

On March 5, 2013, Labour Minister Yasir Naqvi introduced Bill 21, the Employment Standards Amendment Act (Leaves to Help Families), 2013 (Bill 21). If passed, Bill 21 would create three new unpaid leaves of absence under the Employment Standards Act, 2000 (ESA): Family Caregiver Leave, Critically Ill Child Care Leave and Crime-Related Child Death and Disappearance Leave. These leaves would apply to all HBC organizations and we would be supportive of any staff requiring such consideration.

2. Mission, Vision and Values Update

2.1 SJHH: SJHH Mission Legacy Awards Ceremony

SJHH has selected 11 recipients of the Mission legacy Awards for the current year. The Mission Legacy Award ceremony will take place on June 20th at 1:30pm at the SJHH Charlton Campus. This event is noted on the 'events blotter' circulated at all HBC meetings and Board members are encouraged to attend.

4. Operational Information

4.1 SJHC: United Way Funding

SJHC receives \$60,356 from United Way to provide homemaking services to low-income seniors living in Hamilton. The United Way Board of Director's has now approved the 2013-14 agency allocations and the following is an excerpt from their report to the community agencies they currently fund.

"The first significant issue facing us is that while we believed the economy was rebounding, the impact of the 2008 financial crisis is still being felt with major layoffs, downsizing, early retirements and campaign cancellations to name but a few of the pressures we faced over the past 12 months. Consequently funds available for allocations are short \$299,000.

To be equitable to the programs and services we support we have decided to implement a reduction in funding to all agencies based on the 2012-2013 allocations and based on the monies raised by each community for that community. The reductions for 2013-2014 are 4.54% for Hamilton programs and services and 11.35% for Burlington programs and services."

As a result of this announcement the funding received from United Way for 2013/2014 will be reduced to \$57,942. SJHC does not anticipate that this will result in a reduction in services.

4.2 SJHC: Changes at Community Care Information Management (CCIM)

The closing down and movement of CCIM functions to direct management of the MOHLTC will be complete as of March 31, 2013. This impacts a number of initiatives including the support of the MIS GP Dynamics solution (accounting software used by SJHC), the Human Resources Information System initiative (also utilized by SJHC) and the roll out and support of the interRAI CHA client assessment tool

(also utilized by SJHC). There is no clear sustainability plan in place and it is our understanding that the CCIM functions will be managed under MOHLTC's Health System Information Management and Investment division.

Having said this, St. Joseph's Home Care has a plan in place to move forward without disruption to operations. Specifically, we are looking at going directly to the manufacturer/source for information management and support. We have assessed this to be a low risk and do not anticipate disruptions. Further updates will be provided to the Board on this matter as information is available.

4.3 SJVD: Outbreak

The Villa experienced a Respiratory Syncytial Virus (RSV) outbreak on March 26th, 2013. The outbreak was contained to the specified unit and was declared over on April 5, 2013.

4.4 SJVD: St. Joseph's Estates Annual Meeting

St. Joseph's Estates (the two Villa life lease buildings), is holding their AGM on April 25th, 2013 in the Villa Auditorium. The Estates' audited financial statements will be presented at the meeting. This audit was performed by KPMG perform at the same time as the Villa's audit.

Hamilton Board Committee (HBC) – Summary of February 28th, 2013 Closed Meeting Session

Motions Summary

Recommend by HBC Committee	Motion Summary
Governance, Mission and Values Committee	<p>It was voted that the:</p> <ul style="list-style-type: none"> ▪ Minutes of the Governance, Mission and Values Committee of February 5th, 2013 be accepted for information (Hamilton Board Committee). ▪ HBC approve the appointment of Dr. Jack Gaudie to the Hamilton Board Committee effective February 2013 (Hamilton Board Committee). ▪ HBC Policy 19 – Chair of MAC/Chief of Staff Evaluation as amended be approved (Hamilton Board Committee). ▪ HBC Policy 21 – Site President Evaluation Policy and Process be approved (Hamilton Board Committee).
Quality Committee	<p>It was voted that the:</p> <ul style="list-style-type: none"> ▪ Minutes of the Quality Committee of February 12th, 2013 be accepted for information (Hamilton Board Committee).
Resource and Audit Committee	<p>It was voted that the:</p> <ul style="list-style-type: none"> ▪ Minutes of the Resource and Audit Committee of February 20th be accepted for information (Hamilton Board Committee).
The Medical Advisory Committee	<p>It was voted that the:</p> <ul style="list-style-type: none"> ▪ Minutes of the Medical Advisory Committee of February 7th 2013 be approved (Hamilton Board Committee – St. Joseph's Healthcare Voting Members) ▪ Recommendations on research from the Medical Advisory Committee of SJHH of February 7th 2013 be approved (Hamilton Board Committee – St. Joseph's Healthcare Voting Members) ▪ Recommendations on credentials of the February 7th 2013 Medical Advisory Committee be approved (Hamilton Board Committee – St. Joseph's Healthcare Voting Members)

Presentations and Reports to the HBC - Summary

- Dr. McDonagh, Chief of the St. Joe's Department of Obstetrics and Gynecology presented to the Board on Cesarean Section classification and appropriateness, with a specific focus on classification and coding of elective cesarean sections. An explanation was provided on the factors that influence Cesarean Section rate, along with the rates of this procedure at St. Joe's over the past 10 years. It was noted that work is taking place in collaboration with the Canadian Institute for Health Information (CIHI) on appropriateness of the use of terms 'elective' vs. 'indicated' cesarean sections.
- The Board heard a presentation from the Mental Health and Addictions program, highlighting the specific integration opportunities within the Mental Health and Medicine programs and how this partnership could benefit the health of patients and families in our communities. The Board looks forward to another update from the Mental Health and Addictions program in March focusing on "Program Refresh and New Program Developments".