



# Markham Stouffville Hospital Board of Directors Meeting Summary November 30, 2017

Mr. Thomas Barlow, Chair, called the meeting to order at 5:30 p.m. on November 30, 2017.

## **APPROVAL OF CONSENT AGENDA**

The Board approved the following items contained in Consent Agenda in a single vote:

- Approval of November 30, 2017 Agenda
- Executive Summary Minutes September 28, 2017
- Regular Board Minutes - September 28, 2017
- Approval of Financials YTD Ending September 30, 2017
- Approval of Board of Directors Work Plan
- Balanced Scorecard Q2 2017-18

## **STRATEGY UPDATE**

Ms. Jo-anne Marr provided an update on the strategy, pre-capital submission of Uxbridge site redevelopment project, Data Centre Migration and the hospital's financial position.

She also highlighted the following:

- Humber Reactivation Care Centre (RCC) is a Central LHIN hospital collaborative. The Ministry of Health and Long-Term Care (MOHLTC) has approved a proposal to re-open patient care units at the Finch site of Humber Rivers Hospital (HRH) for patients designated to Alternate level of Care (ALC).
- The Mental Health Hub Proposal is a collaborative partnership among York Region Emergency Medical Services, York Regional Police, York Region Hospitals and numerous community mental health providers. The hub proposal was submitted to the Ministry for review.
- MSH has received approval to work with the regional renal provider to provide dialysis in our critical care unit. This will increase the hospital's capacity to serve patients closer to home and allow the hospital to provide dialysis to critical care patients, therefore reducing the need for transfer.

The Board members participated in a strategic planning exercise.

## **BOARD COMMITTEE REPORTS**

### **Finance & Audit Committee**

Mr. Xerxes Cooper provided an update on the following:

Shared Health Information Network Exchange (SHINE) Master Agreement.

The SHINE Master Agreement is a health information system (HIS) partnership with Southlake Regional Health Centre (SRHC) and Stevenson Memorial Hospital (SMH). This partnership was undertaken in response to the MOHLTC's policy direction regarding HIS platforms, and the direction and the needs of SRHC and SMH to replace their existing hospital information systems.

The Finance and Audit Committee in consultation with MSH's legal counsel, reviewed the agreement and endorsed the signing of the SHINE agreement.

#### **Community Accountability Planning Submission (CAPS)**

All health care organizations receiving community funding from Local Health Integration Networks (LHINs) are required to sign a Multi-Sector Accountability Agreement (M-SAA). The CAPS is a key component of the M-SAA. MSH receives community funding from the Central Local Health Integration Network (CLHIN) for the Community Treatment Order (CTO) program. This program services individuals who suffer from serious and persistent mental disorder and have had multiple admissions.

The board unanimously approved the following:

- Recommendation to approve the signing of the Shared Health Information Network Exchange (SHINE Master Agreement)
- Recommendation to approve the submission of the Community Accountability Planning Submission (CAPS).

#### **Governance Committee Report**

Mr. Ranjeet Wallia provided an update regarding governance renewal, Board Policy Manual development, nominations, and accreditation.

The Committee agreed that there should be public posting once per year providing an opportunity for people to submit their applications, specifying the skill set required.

Mock accreditation will be conducted in February 2018.

#### **Board Mandate and Board Goals**

The Committee has reviewed and endorsed the Board Mandate and Board Goals, and recommended that the Board of Directors review and approve the Board Mandate and Board Goals as presented.

#### **Professional Staff By-Laws**

The revised Professional Staff By-Laws were reviewed and approved by the Medical Advisory Committee and the Medical Staff Association.

The board unanimously approved the following:

- The Board Mandate and Board Goals
- The Professional Staff By-Laws

**Human Resources Committee Report**

Ms. Marcia Mendes-d’Abreu provided an update regarding the Human Resources Committee Terms of Reference and the selection process for the Chief of Staff and related succession plan.

**Quality Committee Report**

Mr. Drew Gerrard provided an update regarding the “my Care, my Team, my Experience” (my CTE) initiative and patient experience strategy.

Mr. Gerrard recognized that Hospital Transitions is an excellent program with goals to reduce visits to the emergency department, admissions, and re-admissions to the hospital, decrease length of stay, improve the patient experience and provide better coordination of care for patients.

An ethics presentation for the Board of Directors is scheduled for March 2018. It has been recommended that MSH implement an Ethics Steering Committee with an Ethical Framework driven by hospital’s values, ensuring a transparent and ethical decision making process. Existing policies pertaining to ethics will be reviewed to ensure alignment with the framework.

**MSH Foundation**

The MSH Foundation organizes activities and initiatives in alignment with three strategies priorities:

- Drive revenue and build capacity in leadership giving;
- Expand our donor base through broader community engagement for sustainable future revenue; and
- Be the industry leader in donor relations for increased revenue.

Mr. Brad Morris provided an overview of “Buy a Bear” program. The goal is to provide every inpatient with a bear over the holiday season. MSH Foundation reached out to local business owners, encouraging them to consider “buying bears” for their clients, colleagues, employee for this holiday season instead of a gift basket.

The meeting adjourned at 7:38 p.m. on November 30, 2017.



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Chair



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CEO

