



## Markham Stouffville Hospital Regular Board Meeting Meeting Summary March 28, 2019

Mr. Tom Barlow, Chair, called the meeting to order at 5:32 p.m. on March 28, 2019.

### **APPROVAL OF CONSENT AGENDA**

The Board approved the following items contained in the Consent Agenda:

- Board of Directors Meeting Agenda March 28, 2019
- Board of Directors Meeting Minutes January 31, 2019
- CNE Report
- Financial Performance – YT D January 2019
- Integrated Risk Management Q3 update
- Balanced Scorecard Q3 Update

### **CEO REPORT**

Ms. Jo-anne Marr and Dr. Caroline Geenen presented the CEO and COS reports, highlighting the following:

- At February 28, 2019, the hospital remains in a surplus position of \$9.1M and volumes are on track with projections.
- A detailed strategy map for the annual cycle has been developed, and is supported by many individual road maps.
- Current work on the following pillars were highlighted:
  - Extraordinary patient experience- launch of bedside Pediatric Early Warning System (PEWS);
  - Empowering our people – Inaugural Honoured to Care Awards
  - Embracing our community – Hospital Brand Evolution
- New Master Plan work was started in February, kicking off with clinical service planning.
- An update related to current government changes was provided, highlighting Bill 74- The People's Health Care Act; creation of Super Agency and the Creation of Ontario Health.

The Board approved the credentialing recommendations for physicians as presented.

The Board approved the appointment of Dr. Rus Sethna term as Chief, Department of Psychiatry.

### **PATIENT STORY**

A patient story was shared.

### **FINANCE AND AUDIT COMMITTEE REPORT**

Mr. Bob Nicholson presented an update from the Finance and Audit Committee, highlighting the following:

#### **2019/20 Hospital Service Accountability Agreement (H-SAA)**

The H-SAA was received from the Central Local Health Integration Network (CLHIN) at the beginning of March. Terms and conditions of the H-SAA have not changed since entering the agreement in fiscal 2018/19.



The Board approved the 2019/20 Hospital Service Accountability Agreement.

### **GOVERNANCE COMMITTEE REPORT**

Mr. Glenn Winder presented an update from the Governance Committee, highlighting the following:

#### **Director Recruitment**

Four new Board members and four new Community members were appointed by the Board for the 2019/20 Board cycle. The new Board members will be elected by the members at the Annual General Meeting in June.

The Governance Committee will identify Board officer and Board Committee chairs, and make recommendations on Board committee membership for 2019/20 at the May Board meeting.

#### **Corporate and Professional Staff By-laws/Board Policy Manual Review**

The updated by-laws and policy manual will be brought forward to the May Board meeting for approval.

#### **Board Evaluation**

The Board chair will review results from the Board member evaluation survey with individual members.

#### **Future of Human Resources Committee**

A discussion was held on future of Human Resources Committee.

#### **Board and Physician Engagement**

There is an opportunity to strengthen the relationship between the Board of Directors and the physician leadership group. A discussion was held on the involvement of Board in the Chief recruitment process and having Chiefs on select Board Committees. Board members supported both of these practices.

#### **Board Retreat Participation**

The Governance committee discussed who should participate at Board retreats, and agreed that physician leaders and Hospital directors should be invited to relevant parts of Board retreats as required.

Board members commented that it was great to see greater physician involvement at the Board retreats

#### **Board Report on the Annual Report.**

All Board committees will create individual reports for the year, identifying the goal of the committee from the beginning of the year, key accomplishments and future objectives. This will be consolidated into one Board report to be included in the hospital's annual report.

### **HUMAN RESOURCES COMMITTEE REPORT**

Ms. Mendes-d'Abreu provided an update from the Human Resources Committee (HRC), highlighting the following:

#### **Pay for Performance Compensation Framework**

2019/20 Pay for performance compensation framework was approved by the Board

**QUALITY COMMITTEE REPORT**

Mr. Luca Rotta Loria provided an update from the Quality Committee, highlighting the following:

**Quality Improvement Plan (QIP)**

The hospital is required to publicly post and submit the QIP to Health Quality Ontario (HQP) on or before April 1, 2019 following approval by the Board.

The Board approved the 2019/20 Quality Improvement Plan.

**Quality and Patient Safety**

Ms. B. Steed provided an education session on Patient Relations Process.

**MSH FOUNDATION REPORT**

Mr. Brad Morris provided an update on behalf of the MSH Foundation.

The meeting concluded at 7:45 p.m.



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Chair  
Tom Barlow



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CEO  
Jo-anne Marr