MINUTES OF
Bruyère Continuing Care Board of Directors

Thursday, March 30, 2017
Gilberte Paquette Garden, 6th Floor, Élisabeth Bruyère Hospital,
43 Bruyère Street, Ottawa, Ontario

Directors (voting)
√ Fiona Gilfillan
√ John Hoyles
√ Dr. Melody Isinger
√ Barbara Kieley
(R) Sylvie Lalonde
√ Carol Najm
√ Dianne Parker-Taillon
√ Jean Pruneau
√ Philippe Renaud
√ Louis Savoie
√ John Riddle
√ Dr. Phil Wells

Directors (non-voting)
√ Dr. Nicole Dunlop (non-voting)
√ Debbie Gravelle (non-voting)
√ Daniel Levac (non-voting)
√ Dr. Shaun McGuire (non-voting)

Guests:
√ Dinis Cabral (Interim Chair, BRI Board of Directors)
√ Elizabeth Sampson (Recorder)

1.0 Reflection
D. Parker-Taillon gave a reflection focused on Bruyère's value of learning.

2.0 Patient Perspective
A. Porteous introduced D. McGregor to present the patient perspective. D. McGregor shared accolades and feedback received through patient surveys by the Bruyère Family Health Team from staff, patients and family members.

3.0 Conflict of Interest Declarations
No conflicts were declared.

4.0 Chair's Remarks (J. Riddle)
J. Riddle congratulated Bruyère management and staff on the success of the "Passer le flambeau" event held on March 24, 2017. As part of the ceremony, a symbolic key to the properties was presented to the Sisters of Charity of Ottawa and plaques were unveiled for installation at the main entrance at each of our three sites. He noted that the location of the May 25, 2017, board meeting will be moved to Saint-Vincent Hospital to coincide with the Bruyère Day Media-thon taking place on the same date.

5.0 Business Arising (J. Riddle)
There were no business arising items.

6.0 Education Session – Developing Research to fit Bruyère's mission (J. Riddle)
J. Riddle introduced H. Sveistrup who gave a presentation on the Bruyère Research Institute, including sources of funding, types of research conducted, and how current research matches Bruyère's mission and clinical programs. Presentation slides were included in the meeting materials. She spoke specifically about research into memory and dementia and how this particular area is connected in some way to all Bruyère programs. She then introduced Dr. F. Knoefel, a clinician and researcher at the Bruyère memory program, to talk about research and technology developments around early detection and prevention, intervention and monitoring, and caregiver/patient supports for those living with Alzheimer's. Dr. Knoefel emphasized that technology will play a

key role in dementia care, and Bruyère has particular expertise and practical solutions in this area. In addition, Bruyère has developed a partnership with the University of Ottawa's Brain and Mind Institute to support funding for memory.

7.0 Approve Consent Agenda (J. Riddle)

BE IT RESOLVED THAT:

The Bruyère Continuing Care Board of Directors approves consent agenda items 7.1 to 7.4 as presented.

MOVED BY: L. Savoie
SECONDED BY: F. Gilfillan
CARRIED UNANIMOUSLY. Consent Agenda Motion #441/2017-03-30

7.1 Minutes of past *meetings;*
(a) Minutes of Board meeting held on February 23, 2017
(b) Minutes of Board in-camera meeting held on February 23, 2017

7.2 Motions from GNC to approve revisions to policies:
(a) Investments (GOV01)
(b) Business Expenses, Board of Directors and Senior Management (GOV02)
(c) Delegation of Authority (GOV 11)

7.3 Motions from ARMC to approve:
(a) 2017-2018 Multi-Sector Service Accountability Agreement (MSAA)
(b) 2016-2019 amended Long-Term Care home Service Accountability Agreement (L-SAA)

7.4 Motions from MAC to approve physician appointments & privileges
(a) Change in status from associate to active in Family Medicine for Dr. Claire Kendall;
(b) Change in status from associate to active in Family Medicine for Dr. Marc Lebeau.
(b) Change in status from associate to active in Care of the Elderly, Dermatology, for Dr. Julie Lacroix;
(c) Change in Status from associate to active in Care of the Elderly for Dr. Margaret Thomson.

8.0 Quality Management & Mission Effectiveness Committee (QMME) (L. Savoie)

8.1 Approve sign-off on QIP 2017-18

L. Savoie confirmed that QMME reviewed the indicators as part of the 2017-18 Quality Improvement Plan (QIP) being presented for board approval. The QIP is a mandated report under the *Excellent Care for All Act* (ECFAA) and must be submitted to Health Quality Ontario by April 1st of each fiscal year and published on our external website. The Board Chair, QMME Chair and the CEO must sign off on the QIP narrative report to certify that it meets the requirements of ECFAA. He mentioned that work done to improve quality throughout the organization is now beginning to be reflected in satisfaction survey scores.

The following motion came forward from QMME for board approval.

BE IT RESOLVED THAT:
The Board of Directors of Bruyère Continuing Care authorizes accountability sign-off by the Chair of the Board of Directors, the Chair of the Quality Management and Mission Effectiveness Committee (QMME), and the Chief Executive Officer to certify that the QIP 2017-18 fulfills the requirements of the Excellent Care for All Act (ECFAA).

MOVED BY: J. Hoyles
SECONDED BY: C. Najm
CARRIED UNANIMOUSLY. Motion #443/2017-03-30

9.0 Audit and Resource Management Committee (ARMC) (B. Kieley)

9.1 Approve 2008-18 amended Hospital Service Accountability Agreement (H-SAA)

B. Kieley reported that the H-SAA is an annual process to secure funding for the next fiscal year. The H-SAA is predicated on the Hospital Annual Planning Submission (HAPS) that sets the foundation for Bruyere's agreement with the Champlain LHIN. She explained that on February 27, 2017, Bruyère was asked by the LHIN to provide a detailed plan with strategies to achieve the established alternate level of care (ALC) target. This plan was submitted on March 8, 2017. Subsequently, on March 29, 2017, the LHIN provided Bruyère with a short-term H-SAA extension to June 30, 2017, and requested supplementary reports to be submitted by May 15, 2017, on the following four indicators:

a) Assumptions for Non-Ministry/Non-LHIN Revenues;
b) Planned Expense Reductions;
c) Working Capital; and
d) Alternate Level of Care;

In discussion that followed, management confirmed its opinion that the plan is attainable. Funding will continue to flow during the period of the 3-month extension. However, resolution of the ALC issue would require Bruyère to be granted priority access to long-term care beds, and this was specifically noted in the submission made to the LHIN. ARMC will be updated on the supplementary reports prior before they are submitted to the LHIN by the May 15th deadline.

The following motion was presented to the board for approval of the 3-month extension of the H-SAA.

BE IT RESOLVED THAT:

The Board of Directors of Bruyère Continuing Care approves the short-term extension of the 2008-18 HSAA for a three month period from April 1, 2017 to June 30, 2017.

MOVED BY: J. Hoyles
SECONDED BY: J. Pruneau
CARRIED UNANIMOUSLY. Motion # 444/2017-03-20

10.0 Chief of Staff Report (Dr. S. McGuire)

Dr. McGuire referred board members to his written report and spoke specifically about three items – wait times, clinical department resources and workload, and inpatient program staffing. He reported that the Quality Improvement Plan (QIP) covers three programs – hospital programs, long-term care, and the Family health Team. All have set quality targets and actions plans for the coming year. The focus is now on results, numbers and outcome targets. He also reported that an internal planning structure for sub-acute care implementation at Bruyère (over a 1.5 year time frame) is being created to mirror the LHIN process.

10.1 Approve Physician annual credentialing for 2017-18

Dr. McGuire reported that the 2017-18 physician reappointment process was completed according to bylaws and policy as outlined in the briefing note. He confirmed that the list of physician names coming forward for appointment represents a total of 191 individuals who fall into three categories (associate, consulting, courtesy/locum). He provided a description for each of the categories. The following three motions were presented for board approval:

BE IT RESOLVED THAT:

The Active and Associate staff list attached be reappointed to the Medical Staff of Bruyère Continuing Care. The reappointments will be in place for the period of April 1, 2017 to March 31, 2018.

MOVED BY: Dr. M. Isinger
SECONDED BY: L. Savoie
CARRIED UNANIMOUSLY. MOTION #445 /2017-03-30

BE IT RESOLVED THAT:
The Consultant Staff list attached be reappointed to the Medical Staff of Bruyère Continuing Care. The reappointments will be in place for the period of April 1, 2017 to March 31, 2018.

MOVED BY: Dr. M. Isinger
SECONDED BY: L. Savoie
CARRIED UNANIMOUSLY. MOTION #446 /2017-03-30

BE IT RESOLVED THAT:

The Courtesy and Locum staff list attached be reappointed to the Medical Staff of Bruyère Continuing Care. The reappointments will be in place for the period of April 1, 2017 to March 31, 2018.

MOVED BY: Dr. M. Isinger
SECONDED BY: L. Savoie
CARRIED UNANIMOUSLY. MOTION #447//2017-03-30

11.0 Catholic Health Sponsors of Ontario (CHSO) Designate (D. Parker-Taillon)

D. Parker-Taillon referred board members to two documents included in the meeting materials – CHSO's March newsletter and her CHSO Designate report dated March 21, 2017. She also mentioned that CHSO had released a new guideline on Mission Statements and Catholic Identity that provides an excellent overview of what it means to be a Catholic institution.

12.0 President & CEO (D. Levac)

D. Levac referred board members to his written report and spoke about the following topics:

- The risk associated with Medical Aid in Dying was re-evaluated by the senior leadership team (SLT) and the risk level returned to "high" following feedback from the February board meeting.
- The suggestion by the board that Bruyère accommodate supervised injection sites was reviewed by SLT, and it was agreed that this aligns best with community programs run by other agencies (eg. community centres).
- The agenda and speaking notes from the "Passer le flambeau" event were distributed at the meeting. Board members who attended the ceremony congratulated management on the success of the event.
- Champlain LHIN representatives will give a presentation to the Bruyère Board of Directors on the implementation of Patients First in May 2017.
- A discussion on opportunities to enhance Bruyère's academic focus was part of a recent visit by Mr. Jacques Frémont, new President and CEO of the University of Ottawa. A document called "Vision for Bruyère" (appended to the CEO Report) was shared as part of this visit. This "vision" was prepared in follow-up to the sub-acute review and outlines what Bruyère (all inpatient beds at one Saint-Vincent Hospital side) could look like in the future. Board members felt that the vision needs to be situated in the larger context of the strategic plan.
- Several board and SLT members participated in an OHA webcast on Advancing Health System Integration on March 20th which featured a presentation by the Deputy Minister of Health, Dr. B. Bell. The province is seeking immediate solutions and recognizing the connection between alternate level of care and affordable housing. It was felt that Bruyère could offer support and expertise in this area based on our experience with the Village and the upcoming redevelopment long-term care redevelopment at the ÉBH site. Board members asked that a formal offer of support be sent to the Minister.

ACTION:
→ D. Levac to follow up with the Deputy Minister of Health to "formalize" Bruyère's offer of support.

13.0 Chief Nursing Executive (D. Gravelle)

D. Gravelle reported on changes made by the Ministry of Health and Long-Term Care (MOHLTC) to the nursing graduate program which provides funding for hospitals to recruit new nursing graduates. The length of the program has been reduced from 26 to 12 weeks. In addition, each graduate must receive a guarantee of a permanent, full-time position within 12 months, and if not, the funding must be returned. Based on these changes, only one hospital (The Ottawa Hospital) in the region will enrol in the program. Smaller hospitals do not have the number of positions to make the program feasible. These changes to the program will have a major impact on recruitment. Board members suggested approaching Catholic Health Sponsors of Ontario (CHSO) to advocate with the MOHLTC for reconsideration of this policy decision.

ACTION:

→ D. Parker-Taillon to follow up with D. Gravelle to connect with CHSO regarding advocacy around the nursing graduate program initiative.

14.0 Foundation Board (F. Gilfillan)

F. Gilfillan referred board members to the Foundation report handout which was updated based on discussion and review at the Foundation Board meeting on March 29, 2017. She reminded board members of the Bruyère Day Media-thon to take place on May 25, 2017, with a focus on innovation, brain and memory health. She noted the importance of moving the focus of fundraising from palliative care to other innovative Bruyère programs.

P. Taillon left the meeting at 7:35 p.m.

15.0 Bruyère Research Institute Board (D. Cabral)

D. Cabral drew attention to the Research Institute poster boards on display at the meeting featuring memory research. He also remarked that based on items included in the recent federal budget, the government appears ready to invest in research in aging.

16.0 Adjournment

Adjournment was moved by Dr. P. Wells and seconded by C. Najm at 7:40 p.m. The next regular board meeting will be held on April 27, 2017, at 5:30 pm in the Gilberte Paquette Garden, 6th Floor, Élisabeth Bruyère Hospital.

J. Riddle, Chair	D. Levac, Secretary