



**MINUTES OF MEETING OF
Bruyère Continuing Care Board of Directors**

*Meeting on Thursday, April 27, 2017, at 5:30 pm
Gilberte Paquette Garden, 6th Floor, Élisabeth Bruyère Hospital,
43 Bruyère Street, Ottawa, Ontario*

Directors (voting)

(R) Fiona Gilfillan
√ John Hoyles
√ Dr. Melody Isinger
√ Barbara Kieley
√ Sylvie Lalonde
√ Carol Najm
√ Dianne Parker-Taillon

(R) 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), Michel Bilodeau (Honourary Director)
√ Elizabeth Sampson (Recorder)

The meeting opened with an in camera session for voting and non-voting directors.

1.0 Perception Audit Report (J. Riddle) at 6:10 p.m.

A. Porteous gave a high level overview of the report which has not yet been made public. She noted that consultation with internal stakeholders will be taking place later this month. In addition, actions based on the recommendations from the report have been incorporated into the strategic plan and will serve as a guide to identify subjects to be emphasized in communications with the public at large and with political stakeholders. She also noted that Bruyère now has a tri-communications team functioning as one to coordinate the approach and make the most effective use of limited resources. The groundwork will be done in 2017-18, with implementation of all recommendations over a longer period of time. Regular updates on implementation of the audit recommendations will be provided to the External Development Committee.

Board members asked for additional details on the following:

- Recommendation #1 (Bruyère perceived as uncollaborative) – A. Porteous clarified that based on this item, Bruyère will hold discussions first internally and then with external stakeholders to verify assumptions and identify specific areas for improvement. One entire pillar of the strategic plan is devoted to “partnerships”, and enhanced metrics will eventually be incorporated into the dashboard.
- Recommendation #3 (identification of thought leaders to represent Bruyère) – A. Porteous explained that these individuals will have expertise in specific topics. The goal is to highlight clinical and research leaders to present expertise in the public forum.

The Board members attending the meeting moved to conclude the in camera session at 6:25 p.m. and the remainder of the meeting was open to the public.

2.0 Reflection (D. Parker-Taillon)

D. Parker-Taillon shared a reflection focused on Bruyère’s value of respect.

3.0 Patient Perspective (J. Riddle)

J. Riddle invited A. Porteous to introduce a video which will be shared as part of volunteer week and mission week. The video highlights how our volunteers help Bruyère to live its mission. Bruyère held appreciation events throughout the week to thank Bruyère volunteers who are also recognized as part of the organization’s awards of

excellence held in December each year. D. Levac thanked board members for the ongoing contribution as volunteers to the organization.

4.0 Conflict of Interest Declarations

M. Isinger declared a conflict for the consent agenda motion (item 9.4) to approve membership on the Research Ethics Board.

5.0 Chair's Remarks (J. Riddle)

J. Riddle provided details about upcoming events including Bruyère Day (radiothon), Bruyère Golf Day. In addition, he asked directors to take time to complete the 2017 Board evaluation survey,

6.0 Business Arising (J. Riddle)

There were no business arising items.

7.0 Approve Consent Agenda (J. Riddle)

BE IT RESOLVED THAT:

The Bruyère Continuing Care Board of Directors approves consent agenda items 9.1 to 9.4 as presented.

MOVED BY: S. Lalonde

SECONDED BY: D. Parker-Taillon

ABSTAIN: Dr. M. Isinger (item 9.4 – REB membership)

CARRIED UNANIMOUSLY.

Consent Agenda Motion #449/2017-04-27

7.1 Minutes of past *meetings*;

- (a) Minutes of Board meeting held on March 30, 2017
- (b) Minutes of Executive Committee meeting on April 6, 2017.

7.2 Motions from GNC to approve revisions to policies:

- (a) Recruitment and Appointment, Board of Directors (GOV09)
- (b) Honourary Directors (GOV 12)
- (c) Succession Planning and Recruitment, CEO and Chief of Staff (GOV15)

7.3 Motions from ARMC to approve:

- (a) Financial report #3 (to February 28, 2017)
- (b) Declaration of compliance under the Multi-Sector Service Accountability Agreement (M-SAA)

7.4 Motion from QMME to approve the appointment of Helen Niezgoda as a new member on the Research Ethics Board

8.0 Executive Committee

8.1 Approve revisions to Strategic Plan 2016-2021

J. Riddle indicated that the refresh of the strategic plan was a “refinement” of priorities with a view to Bruyère's future state and included discussions on importance of initiatives, sequencing, and new opportunities. As part of the refresh process, Executive Committee members agreed on three main areas to achieve by 2021 – sub-acute, development of brain and mind, and resource optimization. The overarching focus will be on maintaining strong partnerships and exploring areas for integration to provide quality care.

Overall, the changes proposed will result in a reduction in the number of goals from 18 to 12. The document included in the meeting package outlines the proposed changes to the plan and also includes the strategic objectives (some of which are multi-year) to show how the goals and directions will be achieved.

Board members commented on specific wording of the proposed changes to the directions and goals and recommended the following:

- Revisit the recommendation to remove the word “regional” from strategic direction #4;
- Restore the reference to “volunteers” which was lost with the merging of goals 2.4 and 2.5;
- Reword objective 1.3.1 to “create a plan for one-site hospital” to more accurately reflect what can be achieved by 2021.

Given that the strategic plan is a ‘living document’, Board members agreed that changes should be made now as opposed delaying until the arrival of the new CEO. The motion to approve the revisions to the 2016-2021 strategic plan was deferred pending recommended revisions to come forward to the board on May 25, 2017.

ACTION:

→ Management to back proposed revisions to 2016-2021 strategic plan for board approval at next meeting.

9.0 Update on Sub-acute implementation (J. Riddle)

Dr. McGuire and Dr. Wiebe were introduced to present details on the implementation of the sub-acute capacity plan at the LHIN level and internally at Bruyère.

Dr. McGuire reported that the report was completed in spring 2016, and planning is now underway to implement the recommendations. Of the 875 beds in the region designated as complex continuing care, 48% are located at Bruyère. Findings of the review indicate that should sub-acute services continue as currently delivered to accommodate an older and larger population in the region, the number of beds would need to increase by 18%. Plans are now underway to optimize and restructure the current system and will mean decreasing lengths of stay in chronic beds, moving patients to specialized rehab, reducing alternate level of care, and expanding community hospice. The overall goal is to ensure that the Champlain region is well equipped to meet the rehabilitation and complex care demands in years to come. Bruyère continues to be involved with implementation as a member of the Steering Committee and related working groups. Business plans are brought forward to an executive committee and a finance committee with siting of beds expected to be approved in Q3 2017-18.

Dr. Wiebe reported that planning is underway at Bruyère led by the Extended Senior Leadership team which includes the medical leadership. Working groups have been established to match the LHIN structure. This will present a huge shift for Bruyère requiring our Saint-Vincent Hospital site to adapt from a complex continuing care hospital to a rehabilitation hospital. New criteria will be developed on admission, transfer and discharge to follow the Rehab Care Alliance definitions. This will also mean changes to targets around therapy and length of stay and requirement for 7 days/week availability for lab and imaging services and staffing.

Questions around reducing length-of-stay to provincial averages, timelines for implementation, and identification of service gaps for some patient populations were answered to the satisfaction of board members. It was pointed out that sole authority to relocate individual programs rests with the Champlain LHIN.

10.0 Quality Management & Mission Effectiveness Committee (QMME) at 7:35 p.m.

L. Savoie referred board members to the Q3 2016-17 dashboard report and commentary included in the meeting package and specifically highlighted the following results:

- Percentage of positive responses to the patient satisfaction surveys (CCC – 93% and Rehab 100%);
- Hand hygiene compliance results showing some improvements but still below target;
- Falls ratio targets not met in long-term care, but showing improvement;
- Medication reconciliation will now focus on discharge.

He also noted that QMME had reviewed one critical incident which occurred in long-term care. Ministry inspectors completed a review, and the incident has been closed.

11.0 Audit and Resource Management Committee (ARMC) (B. Kieley) at 7:40 p.m.

B. Kieley provided an update on discussions at the ARMC meeting of April 10, 2017, including:

- Work continues on the Enterprise Risk Management (ERM) and identification of new priority risks and actions;
- Bruyère is currently operating under a 3-month extension of the H-SAA. The LHIN has asked Bruyère to submit a report with strategies to address four obligations (non-Ministry revenues, planned expense reductions, working capital, and alternate level of care). ARMC will hold a special meeting to review the plan prior to submission to the LHIN by the May 17, 2017 deadline.
- Significant financial efforts to achieve a balanced budget in hospital operations.

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

D. Parker-Taillon referred board members to the CHSO documents included in the meeting package.

- The recently revised guidelines on director recruitment were used by GNC to guide the candidate recruitment and selection process.
- The “Mission Statements and Catholic Identify” document includes three sections around sponsor role, distinctive elements of catholic identity and tools and resources for mission review. The second section provides a valuable summary of what a Catholic Hospital unique and will be used as part of our new director orientation. Our current mission statement aligns with the elements set out by CHSO.

13.0 President & CEO (D. Levac)

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

- Sovereign Medal awards presented to five Bruyère volunteers on April 28, 2017 by the Governor General; and
- OHA will hold a debriefing on the provincial budget released on April 27, 2017. Initial reports indicate an a minimum increase of 2% for hospitals.

14.0 Chief of Staff Report (Dr. S. McGuire) at 7:50 p.m.

Dr. McGuire referred board members to his written report mentioned the following:

- Commitment to redesign of Saint-Vincent Hospital following sub-acute capacity plan.
- Continued theme of clinical resource challenges;
- Staffing pressures are being addressed by acquiring manpower through temporary services;
- High alternate level of care as beds with appropriate services to meet patient needs are not available;
- Quality is on the rise as a result of innovation and external partnering initiatives.
- The Physician engagement agreement was passed by the Medical Advisory Committee, and following presentation to Senior Leadership will be presented to the board in June 2017.

15.0 Chief Nursing Executive (D. Gravelle)

D. Gravelle referred board members to her written report, now prepared quarterly. She mentioned the following:

- Increase in Bruyère representation at provincial colleges;
- The Ministry of Health and Long-Term Care (MOHLTC) has made changes to the nursing graduate program which provides funding for hospitals to recruit new nursing graduates. The new requirement to guarantee full-time employment within 12 months presents a challenge for smaller hospitals. Recent updates indicate exceptions to the requirement to hire may be allowed in situations where there is limited flexibility due to collective agreements and seniority,
- Bruyère will be participating in an international initiative to engage patients called “What Matters to you Day” on June 6, 2017.

16.0 Foundation Board (F. Gilfillan)

P. Taillon presented the Foundation report in the absence of F. Gilfillan. She referred board members to the Foundation report in the package and spoke about the following activities and upcoming events:

- A financial summary will be provided following reconciliation from year end. All funding commitments to the Bruyère Research Institute have been met. A shortage in funding for hospital equipment will be met on receipt of a donation expected in the next few weeks.
- Bruyère Life Changing Day (radiothon) to take place on May 25, 2017, provides an opportunity to increase awareness of Bruyère in the community. Local artisans have created a necklace design called “circle of care” to be launched as part of this event.
- Bruyère is an official partner and recipient of proceeds from the 2017 Tulip Festival.
- Bruyère is a designated charity for the Tamarack Ottawa Race Weekend (May 27 – 28, 2017).
- Golf Day (June 20, 2017) will be a retirement event for Daniel Levac.

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

17.0 Bruyère Research Institute Board (D. Cabral)

D. Cabral referred board members to his BRI President’s Report dated April 2017 which was included in the meeting package.

- The Research Institute Board has recruited new members and now has strong representation from the University of Ottawa
- The Bruyère Foundation and the University of Ottawa have collaborated to launch a “go funding” event on June 19, 2017, to raise money for brain and memory.
- Launch of “UniWeb”, a web-based software for academic institutions and granting agencies. It is a tool to manage academic data and will streamline funding applications for researchers. A short demo was given for board members and the link to the tool will be included in the next board package.

ACTION:

→ D. Cabral to provide a link to “UniWeb” at the May board meeting.

18.0 Adjournment

Adjournment was moved by L. Savoie and seconded by D. Parker-Taillon at 8:10 p.m. The next regular board meeting will be held on May 25, 2017, at 5 pm in the Jeanne Mance Conference Room at Saint-Vincent Hospital followed by a reception at 7 p.m. to conclude Bruyère Day (radiothon).

J. Riddle, Chair

D. Levac, Secretary