Board of Trustees Meeting
MINUTES of Meeting
Wednesday, March 21, 2012
6:00 – 8:00 p.m. Room 5E100
150 Kilgour Road, Toronto, ON

Present: D. Allgood, Chair
J. Hanigsberg
R. Laxer
T. Muir
B. Alman
C. Hunt
T. McCarthy
J. Ronson
B. Cranston
S. Jarvis
G. Milo-Manson
K. Falzon
M. Kardos Burton
J. Hanigsberg
C. Hunt
S. Jarvis
M. Kardos Burton
J. Morrison

Teleconference: C. Everson

Regrets: E. Carroll
N. Kawale
J. Kustec
A. Kawamura
Sr. Management: J. Hunter
B. Sybring
J. Schleifer Taylor
D. Kline

Guests: J. Maheu
K. Parker
V. McMurtry
S. Jacobson
B. Webster

Recorder: B. James

The Chair called the meeting to order and asked Dr. Golda Milo-Manson, Vice-President Medicine & Academic Affairs, to introduce Dr. Kathryn Parker Director of Academic Affairs, Simulation Lead.

Dr. Parker provided a presentation on the Teaching & Learning Institute at Holland Bloorview including a synopsis of the Teaching & Learning Day 2012, and an outline of strategy mapping—a tool for organizing and measuring effectiveness. Dr. Parker explained that the Institute is working with the Centre for Faculty Development and the Centre for Inter-professional Education (U of T) to enrich faculty development and implement simulation as a teaching vehicle.

Declaration of Conflict of Interest
The Chair asked Trustees to declare any conflict of interest for Agenda items for this meeting, and no conflicts were declared.

1.0 Approval of the Consent Agenda
The Chair asked whether there were additions or questions about the Consent Agenda items, and there were no comments.

A MOTION for the Board of Trustees to approve:
1.1) the Agenda for meeting of the Board, March 21, 2012
1.2) the Minutes of the meeting of the Board on February 15, 2012
1.3) the Board Standing Committee Report for March, 2012

was made by Tom Muir, and seconded by John Ronson. The MOTION was CARRIED.
2.0 President’s Report

2.1 President & CEO's Report – March
Trustees inquired about the opportunity for innovation that had been identified at the Hospital during Patient Safety Walks. A nurse noted that liquid contained in opaque medication syringes was not clearly visible. The result was that syringes have now been recalled nation-wide and are being replaced with clear syringes, to enable safe measurement and visibility of liquid medications.

3.0 Strategic Plan Update
The draft Strategic Directions and Goals for Holland Bloorview for 2012-2017 have been revised following the Board Retreat in February and will be reviewed by the Task Force on April 3, 2012.

The Board of Trustees would be asked to approve the renewed Strategic Plan 2012-2017 for Holland Bloorview in May, 2012.

4.0 Business Arising
4.1 There were no items to discuss under Business Arising.

5.0 New Business
5.1 Approval Appointment Board of Trustees: Harry Ort as Trustee
The Chair of the Governance Committee summarized the process for recruiting Harry Ort for appointment to the Board of Trustees of the Hospital. Mr. Ort has business, financial and general management experience and would assume the vacant position left by J. Darville, effective upon approval by the Board of Trustees, i.e., on March 21, 2012.

The Chair of the Board asked for a Motion to approve Mr. Ort’s appointment to the Board.

MOTION: It was MOVED by Bob Cranston, and seconded by Mary Kardos Burton, that the Board of Trustees approve the recommendation of the Governance Committee for the appointment of Harry Ort to the Board of Trustees of Holland Bloorview Kids Rehabilitation Hospital, to fill the vacancy on the Board, effective March 21, 2012.

Cranston/Kardos Burton        CARRIED

5.2 Appointment of Board Standing Committee Members 2011-2012 (revised)*
In order to include Harry Ort as a new Trustee Representative on the Business & Audit Committee, the Board was asked to approve the revised Membership in Board Standing Committees 2011-2012, as of March 21, 2012.

There being no discussion, the Motion was approved by the Board of Trustees.

MOTION: It was MOVED by Bob Cranston, and seconded by Mary Kardos Burton, that the report of the Governance Committee for the appointment of Members for Board Standing Committees for 2011-2012, be revised, effective March 21, 2012, to include Harry Ort as a Trustee on the Business & Audit Committee of the Hospital.

Cranston/Kardos Burton        CARRIED

5.3 Approval President & CEO Performance Appraisal and Compensation Committee 2011-12
The Chair of the Governance Committee summarized the annual process for the performance appraisal for the President & CEO of the Hospital. The independent Trustees who were officers of the Corporation had been asked to form the President & CEO Performance Appraisal and Compensation
Committee in the past, and the Governance Committee was recommending that this year, David Allgood, Chair of the Board of Trustees, Julia Hanigsberg, Vice-Chair and Treasurer, Carolyn Everson, Vice-Chair, and Bob Cranston, Secretary, be appointed to the Committee.

The performance appraisal process would include a survey of the President’s achievements for 2011-12 that would be distributed to individual Trustees, as well as the Chair of the Foundation, the Chair of the Family Advisory Committee, and the Senior Management Team of the Hospital and submitted to the Chair of the Board of Trustees.

**MOTION:** It was MOVED by Bob Cranston, and seconded by Ron Laxer, that the Board of Trustees of Holland Bloorview Kids Rehabilitation Hospital approve the recommendation of the Governance Committee that the following Trustees be appointed to the President & CEO Performance Appraisal & Compensation Committee for 2011-2012: David Allgood, Julia Hanigsberg, Carolyn Everson, and Bob Cranston.

Cranston/Laxer        CARRIED

**5.4 Quality Improvement Plan 2012 – 2013**
The Chair of the Quality Committee provided the background and process for the development of the new guidelines for the Hospital’s second annual Quality Improvement Plan (Q.I.P.) for 2012-13. The Board would be asked to approve Part A, B and C at today’s meeting. It was noted that this Plan maintained the 15 performance indicators which were being repeated so that year-to-year comparisons could be made over time. Results showed that in 2011-12 most targets were met, and the fourth quarter was anticipated to provide even more progress.

The Q.I.P. 2012-13 represented five categories similar to last year, but demonstrated new targets. Part C of the Plan showed the link to performance-based compensation for Executives.

The Vice-President of Human Resources summarized the implementation of the Q.I.P. for hospitals which arose from the Excellent Care for All Act 2010, and provided details on the method selected to assess pay-for-performance for at-risk-pay for Executives for the upcoming year. A portion of an executive’s pay would depend on the achievement of six selected targets set out in the Q.I.P. 2012-13.

Discussion followed.

The Chair of the Board asked trustees to approve the Q.I.P. 2012-13 as presented.

**MOTION:** It was MOVED by Cally Hunt, and seconded by Julia Hanigsberg, that the Board of Trustees accept the recommendation of the Quality Committee and approve the Quality Improvement Plan 2012-2013 for Holland Bloorview Kids Rehabilitation Hospital.

Hunt/Hanigsberg        CARRIED

**5.5 Approval M.A.C. Credentialing: Dr. Sharon Smile**
The credentials that would enable Dr. Sharon Smile to join the active medical staff of Holland Bloorview Kids Rehabilitation Hospital were reviewed by the Vice-President of Medicine and Academic Affairs. Dr. Smile had completed her fellowship training in developmental paediatrics at Holland Bloorview and would be asked to take on a full time medical position created by the retirement of Dr. Douglas Biggar.

Trustees were asked to approve the appointment of Dr. Smile to the active medical staff.
MOTION: On a MOTION by Ron Laxer, and seconded by Tom Muir, that the Board of Trustees approve the recommendation of the Medical Advisory Committee for approval of the credentialing of Dr. Sharon Smile to join the active medical staff at Holland Bloorview Kids Rehabilitation Hospital.

Laxer/Muir CARRIED

5.6 Approval Hospital Operating Plan 2012-13
The Vice-President of Corporate Services provided a presentation highlighting features of the Hospital Operating Plan 2012-2013. The Plan was developed within the context of renewing the Strategic Plan, enhancing quality, patient safety and access to care, promoting innovation and research, and maintaining the financial position, in an environment of enhanced accountability with new legislation, while planning for potential changes arising from the Drummond Report. The Business & Audit Committee had reviewed the Operating Plan jointly with the Quality Committee considering factors relating to patient care, safety and access. Both Committees are recommending approval of the budget.

The 2011/12 Programs and Services volumes show that the forecast is below target set for inpatient days in rehabilitation and chronic care, but the outpatient/day patient attendances were close to, or slightly above, targets. Trustees questioned whether lower volumes were situational or revealing a trend towards fewer transfers from referring partners. The lower inpatient volumes were considered short term with levels expected to increase again in the coming year.

Challenges revealed were lower funding levels but a relatively large salary increase with the end of Bill 16 in April 2012. While wage increases were originally calculated at a 2.75% level, this is expected to be lowered if the government only provides a 0% base funding adjustment.

Discussion followed on budget plans given a possible 0% increase scenario vs. the 1% increase assumption currently in this budget.

In summary, the Operating Plan 2012-13 presented for approval to the Board is built upon an assumption of a 1% funding increase on or about $450,000. This Plan focuses on building for the future by transforming care, accelerating knowledge, inspiring our staff, while maintaining our strong financial and productive capacity.

Questions arose on the affordability of the renewed Strategic Plan, and it was noted that the Hospital has a strong financial position at this time. However, if the awaited funding announcement reveals a 0% increase then a contingency plan will be required. A revised Operating Budget would be presented to the Business & Audit Committee for approval.

MOTION: It was MOVED by Mary Kardos Burton, and seconded by Tom Muir, that the Board of Trustees accept the recommendation of the Business & Audit Committee and approve the Operating Plan 2012-13 for Holland Bloorview Kids Rehabilitation Hospital.

Kardos Burton/Muir CARRIED
5.7 Enterprise Risk Management Results
The Vice-President of Corporate Services and the Director of Quality and Risk Management informed the Board of the Enterprise Risk Management (ERM) results for the Hospital.

In 2006-07 the first ERM assessment was completed. The HIROC Risk Management Self-Assessment Modules were also completed in 2008-09. In preparation for the 2011-12 ERM, the risk management framework was revised to align with the OHA risk framework. The new framework is made up of eight pillars: Strategic-Reputation-Leadership, Financial, Legal-Regulatory, Client Care, Student Education & Clinical Research, Information and Technology, Health, Safety and Security.

A standardized approach was used to evaluate the likelihood and impact of an occurrence taking place and to determine the overall risk level for specific activities related to descriptors within each pillar.

The action plans for the four potentially critical and high risk items are as follows:

1. Strategic/Reputation/Leadership Pillar
   External Economic & Political Environmental Factors (critical)
   • Continue to scan environment and engage with partners in order to influence where possible and anticipate/prepare for changes as required
   Communication and Branding
   • Develop a crisis/issues management strategy that is updated annually
   Reputation
   • Broad education of all staff regarding impact of actions on reputation of the Organization
   • Complete a run-through of Crisis Contingency Plan.

2. Information and Technology Pillar
   Human Resources
   • To continue to review recruitment strategies for vacant positions.

It is recommended that the critical and high risk items be addressed in a timely manner, that current forums and committees be used to address action items and that an education plan on risk management be developed for all staff to increase and advance the Organization’s risk management ability and competency. It was also recommended that the ERM plan be monitored by the Quality Steering Committee twice per year.

The Chair thanked the Sr. Director of Quality and Risk Management for her work and the presentation.

6.0 Reports

6.1 Quality Committee Reports
   6.1.1 Q.C. Report – March
   6.1.2 Q. C. Report – February
Written reports for the Quality Committee meetings held in February and March had been distributed with the materials for the Board meeting. There were no additions to the reports.

6.2 Medical Advisory Committee Report
There were no questions arising from the Medical Advisory Committee Report.

6.3 Foundation Report
The Chair of the Board acknowledged the departure from the Foundation’s President, Valerie McMurtry and congratulated her on the achievements completed during her tenure. The Board of Trustees expressed their appreciation on behalf of the Hospital, as well.
7.0 Fill Out Meeting Feedback Form
Trustees were asked to provide feedback on the meeting before adjourning the Board meeting.

8.0 Adjournment
The Chair asked for a Motion to adjourn the Board of Trustees meeting for February 15, 2012.

MOTION: It was MOVED by Ben Alman, and seconded by John Ronson, that the Board of Trustees of Holland Bloorview Kids Rehabilitation Hospital approve the adjournment of the Board of Trustees meeting held March 21, 2012.

Alman/Ronson CARRIED

9.0 “CLOSED” meeting
The Chair postponed the closed meeting as no new information was available.

10.0 Date of Next Meeting
   Wednesday, April 18, 2012
   6 – 8 p.m. Holland Bloorview

David Allgood, Chair
Board of Trustees
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