Holland Bloorview Board of Trustees MINUTES of Meeting Wednesday, December 12, 2018

6:00-8:00 pm Holland Bloorview, Room 5E100

Present:	C. Cowan L. Hicks (via teleconf) Y. Pavri M. Rappolt	B. Cooper S. Jorisch D. Ponder (via telecor L. Torneck	L. Dottori-Attanasio (via A. Kaplan f) C. Wood	teleconf) G. Milo-Manson P. Puri (via teleconf)	J. Hanigsberg W. Onuwa
Sr. Management:	T. Chau S. Wong	E. Dininio	T. Millar	B. Rubashewsky	D. Savage
Regrets:	M. Ballantyne	S. Hawken	M. Johnson	T. Muir	S. Smile
Guests:	E. Berezovskaia P. Vankessel	M. Castaldo	L. Oxenham-Murphy	A. Sium	N. Tanel
Recorder:	B. Webster				

Call to Order

The Chair called the meeting to order at 6:00 pm. W. Onuwa welcomed the speakers for the Education Session on "Evolving client-centred quality & safety: The story of youth-led approaches to feedback-driven change".

Education Session

A.Sium introduced the education session. Over the past 2 years, the Quality, Safety & Performance and Client and Family Integrated teams have listened, as kids and youth expressed a need for realtime and year-round opportunities to share feedback on the quality and safety of their experience. Several youth spoke up about needing to see their feedback more clearly connected to quality improvements and advocacy across the hospital. Kids were asked to co-design 2 feedback initiatives: one geared towards soliciting quality and safety related feedback from kids and youth and the other geared towards soliciting open ended youth feedback. Youth Leaders who have lived experience with pediatric disability were hired to plan, facilitate and co-lead each initiative. Combined they interviewed more than 150 kids and youth.

M. Castaldo spoke about his involvement in the Youth Feedback Corner. He interviewed 59 individuals which included a good balance of clients, siblings and parents from both inpatient and outpatient settings. He used his experience as a former client to give youth permission to be critical and share what wasn't working, and to celebrate what was. The emerging themes included: "Ongoing improvement areas" and "What's important to clients".

A.Sium noted examples of some of the changes that have been made based on the feedback they received through the videos.

W. Onuwa thanked the speakers for their excellent presentation.

Opening Remarks from the Chair

W. Onuwa commented on what an honour it was to attend the Gala on November 22nd recognizing Julia Hanigsberg as one of the recipients of Canada's Top 100 Most Powerful Women Award.

He indicated that there will be a Meeting without Management immediately following the regular Board meeting and reminded Trustees to complete their feedback forms after the meeting.

Declaration of Conflict of Interest for Meeting

The Chair asked whether anyone wished to declare a conflict of interest on any of the items slated for discussion at this Board meeting, and there were none.

1.0 Consent Agenda

The Chair asked for a Motion to approve the Consent Agenda as pre-circulated.

MOTION: It was MOVED by Carol Cowan and SECONDED by Suzanne Jorisch that the Board of Trustees of Holland Bloorview Kids Rehabilitation Hospital approve the Consent Agenda of December 12, 2018 as pre-circulated.

- 1.1) Agenda for meeting of the Board of Trustees December 12, 2018
- 1.2) Minutes of the meeting of the Board on November 21, 2018
- **1.3)** Board Standing Committees' Report December 2018
- 1.4) Board Standing Committees Terms of Reference

Cowan / Jorisch

CARRIED

2.0 President & CEO Report

J. Hanigsberg presented the President & CEO Report. She commented on the excellent vaccination rates to date. Comparative data with other hospitals will be shared when available.

She noted that Holland Bloorview has been named one of Greater Toronto's Top Employers for the ninth consecutive year.

In S. Hawken's absence, J. Hanigsberg reported that the Foundation has raised \$14.4 M towards our goal of \$25M for the BRI Growth Strategy. Fundraising has been extended to the end of March; an update will be provided in January. She thanked all the trustees who gave at Evening of Possibility (EOP), the post-EOP match and to Giving Tuesday. A special thank you to Laura Dottori and her family who pledged \$250K to the BRI Growth Strategy and to Catherine Wood for making Holland Bloorview the beneficiary of her family holiday party.

3.0 Business Arising

3.1 Update on BRI Growth Strategy and Expansion

T. Chau reminded Trustees that the Board approved the BRI expansion plan back in January 2018. He introduced P. Vankessel who is the consultant leading the project. P. Vankessel explained that the Project Charter sets the framework for the goals and objective and outlines how we will measure success. Stakeholder engagement has already begun. The Project will be implemented in 3 phases: Phase 1 – Research Dedicated MRI Suite; Phases 2/3 – Building Addition/Renovations. The Design phase has begun with construction expected to begin by Fall of 2019. Once design work is done, urban planning is required. Because a Zoning by-law amendment is required a gap in the timeline could be created. A meeting is scheduled with the City of Toronto to discuss the project in detail. He noted the key areas of risk being addressed which include: governance and approvals timing, urban planning approvals timing, procurement, design coordination, construction conditions/constraints and commissioning/approvals.

P. Vankessel explained that we have secured the architectural team that will work with us – they have a significant amount of MRI experience. Plexxus is supporting us in the procurement process.

J. Hanigsberg will provide regular updates in her President & CEO reports.

4.0 New Business

4.1 Holland Bloorview, TC LHIN, Safehaven Transition Initiative

D. Savage explained that we are seeking approval from the Board to submit an amendment to the Hospital Services Accountability Agreement. This will enable the Toronto Central Local Health Integration Network (TCLHIN) to flow Ministry of Health and Long Term Care (MOHLTC) funding to Holland Bloorview in order to subcontract with Safehaven to support the transition of two brothers with complex medical needs. Holland Bloorview will be designated a Home and Community Service Provider, potentially paving the way for future bundled payment partnership opportunities.

She explained that the Holland Bloorview team has been working on this transition for the past 16 months. The two brothers are stable but have complex needs that require extensive staff training.

J. Hanigsberg noted that we will retain legal counsel to review the MOU.

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D. Savage noted that an oversight committee will be established to provide year round consultation and monitoring.

MOTION: It was MOVED by Carol Cowan, and seconded by Marg Rappolt, that the Board of Trustees approve the plan to amend to Hospital Services Accountability Agreement (HSAA) to enable enhanced funding for transition of medically complex clients as presented.

Cowan / Rappolt

4.2 Financial Statements to October 31, 2018

E. Dininio presented the financial statements. We currently have a surplus of \$600K primarily due to investment revenues that are \$300K better than budget. Our vacancy savings are \$400K in excess of budget due to vacancies in roles that take time to fill (executive) or vacated roles being eliminated or restructured (quality, decision support).

While savings from vacancies will continue, there is still much uncertainty as to the impact that financial market volatility will have on our year end investment distributions. With additional known cost overruns related to the implementation of Meditech Expanse, we are forecasting a year end position of \$224,089 which is slightly below budget.

MOTION: It was MOVED by Bruce Cooper, and seconded by Marg Rappolt, that the Board of Trustees approve the Preliminary Financial Statements for the period ending October 31, 2018 for Holland Bloorview Kids Rehabilitation Hospital, as recommended by the Business & Audit Committee.

Cooper / Rappolt

5.0 Reports

5.1 Quality Committee Reports – October and November

L. Torneck presented the Quality Committee reports from both the October and November meetings. She mentioned that Family Leader, Cheryl Peters and her daughter Jillian presented a challenging and touching patient story at the November 7th meeting. There were no questions at this time.

5.2 Medical Advisory Committee Report

G. Milo-Manson presented the Medical Advisory Committee report. She noted that the higher number of urinary tract infections are attributed to an increased number of inpatients with spinal cord injuries. There were no questions at this time.

6.0 Adjournment

The Board Meeting adjourned at 7:40 p.m. Trustees moved into a Meeting without Management.

William Onuwa, Chair Board of Trustees :bw

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