

Board of Trustees Meeting MINUTES of Meeting Wednesday, March 19, 2014 6:00-8:00 p.m. Room 5E100 150 Kilgour Road, Toronto, ON

| Present: | R. Carmichael M. Kardos Burton J. Morrison | L. Hicks (via teleconf) J. Lam W. Onuwa | C. Hopper R. Laxer H. Ort | C. Hunt R. McLeod L. Torneck | S. Jarvis G. Milo-Manson |
|-----------------|--|---|---------------------------------|------------------------------------|-----------------------------|
| Sr. Management: | T. Bailey | J. Hunter | D. Kline | J. Schleifer Taylor | B. Sybring |
| Regrets: | G. Black T. Muir | T. Chau | R. Cranston | J. Hanigsberg | J. Kustec |
| Guests: | O. Szabo | L. Williams | M. Walkington | | |
| Recorder: | B. Webster | | | | |

- J. Morrison chaired the meeting in J. Hanigsberg's absence. The meeting was called to order.
- S. Jarvis introduced the Education session. The topic, "Experiential Learning: Medical Students and Family-Centred Care" was presented by Dr. Golda Milo-Manson, Vice President, Medicine and Academic Affairs and Laura Williams, Director, Client and Family Integrated Care. G. Milo-Manson explained that the medical student visiting program has evolved significantly over the past 10 years. It is now available to any 1st and 2nd year U of T medical student and includes the opportunity to accompany a family to a medical appointment. Over 50 students have participated in the program to date. The hope is to formalize the program to become part of the U of T curriculum. It is felt that the program could easily be adapted to any clinical environment.
- J. Morrison thanked G. Milo-Manson and L. Williams for their excellent presentation.

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 indicated.

A MOTION for the Board of Trustees to approve:

- 1.1 Agenda March 19, 2014
- 1.2 Minutes February 19, 2014
- 1.3 Board Standing Committees Report March 2014

was made by Ron Laxer, and seconded by Harry Ort.

Laxer / Ort CARRIED

2.0 President & CEO Report

S. Jarvis presented the President and CEO Report and highlighted the reports on a network failure that occurred at the hospital on March 7th. A full debrief with a multi-disciplinary group of staff is scheduled for this week. Our IT Department knows what happened but is still trying to determine why it happened. G. Milo-Manson reported that although there was some inconvenience to outpatient clinic appointments, everyone was seen eventually. S. Jarvis indicated that she will report back to the Board with lessons learned after the debrief.



- S. Jarvis noted that our new website will launch on March 31st. We will provide a glimpse of the new look at our April meeting. She also highlighted the impressive results from the Volunteer Opinion Survey. We have a solid program which is highly regarded by our extremely dedicated volunteers.
- B. Sybring reported that we have not yet received our funding letter but has been notified that they will be mailed by March 31st.
- J. Morrison encouraged Trustees to watch the CTV segment *Everyday Hero* on Dr. Tom Chau. There is a link to the segment on our website.

3.0 Business Arising

There were no items to address.

4.0 New Business

4.1 Quality Improvement Plan (QIP) 2014/2015

R. Laxer explained that the 2014/15 QIP continues to be anchored in our new strategic plan and shaped by Health Quality Ontario guidelines. Our plan identifies 3 'new' indicators, 5 'revised' indicators and 2 'new' targets. In all, the 2014/15 quality improvement plan outlines a total of 14 indicators.

The 'New' Indicators include:

- 1) % of eligible staff and volunteers receiving influenza vaccine annually 80%
- 2) % of staff compliant with 2 client identifiers for all care 90%
- 3) % of clients contacted post inpatient discharge within 3 business days to assess if clients have been appropriately integrated back into the community 80%

Discussion ensued regarding the target set for #1. All hospitals have been faced with the challenge of how to promote higher immunization rates amongst staff/volunteers. Last year we reached 81% compliance but historically we have been at 45%. We are confident we can maintain 80%; the target is 95% within 3 years. We are currently out-performing all other TAHSN hospitals.

R. Laxer reviewed the 'Revised' indicators. He indicated that the Wait Time Indicator will include the new clients we have recently acquired from North York General Hospital. We will continue to monitor all wait lists and teams are continuing to work to reduce the number of days waiting. The 2 'new' targets for this year include outpatient medication reconciliation and access to autism services.

The 'Final' Indicators were reviewed. Discussion ensued regarding the target for 'Total Margin'. C. Hunt agreed to take the issue to the Business & Audit Committee for a more fulsome discussion.

MOTION: It was MOVED by Lynda Torneck, and seconded by Mary Kardos Burton, that the Board of Trustees of Holland Bloorview Kids Rehabilitation Hospital approve the 2014/2015 Quality Improvement Plan as pre-circulated.

Torneck / Kardos Burton

CARRIED

J. Hunter explained how the Excellent Care for All Act requires that the compensation of CEO's and other executives be linked to the achievement of performance improvement targets laid out in our quality improvement plan. Holland Bloorview's executive compensation framework is consistent with other Toronto teaching hospitals.

The guiding principles used to develop and support the executive compensation framework were presented to the Quality Committee. The parameters have been used for the past 4 cycles - they include:

- Keeping the design simple
- Ensuring uniformity in the design for all executives;



- Ensuring percentage of base pay at risk associated with quality improvement initiatives were 'meaningful' and;
- Ensuring plan consistency with the Ontario Hospital Association (OHA) guidelines.

The indicators tied to executive compensation for 2014/15 include:

- 1) % of eligible staff and volunteers receiving influenza vaccine annually
- 2) Ensure our total financial margin is within a range of 0 to 1%
- 3) 80th percentile of clients accessing Autism Spectrum Disorder (ASD) services within 151 days
- 4) % of 'straight forward complaints' resolved within 10 business days

Corridors are a maximum 10% variation below target in order for executive compensation to be paid out at 100% and 5% variation above target to achieve 120% payout.

J. Morrison assured Trustees that the Quality Committee has engaged in several lengthy discussions regarding the executive compensation piece and fully endorse the recommendation presented.

MOTION: It was MOVED by Robin McLeod, and seconded by Ron Laxer, that the Board of Trustees of Holland Bloorview Kids Rehabilitation Hospital approve the 2014/2015 Quality Improvement Plan – Executive Compensation.

McLeod / Laxer CARRIED

4.2 Employee Engagement Survey Results

J. Hunter provided an overview of our Employee Engagement Survey results. Holland Bloorview had a very strong response rate this year at 77% for all active staff. The industry average for participation is 44%. The highest scores were in the areas of Organizational Vision, Senior Leadership and Client Focus & Communication. The lowest scores were in the areas of Work/Life Balance, Professional Growth and Immediate Management. The three drivers of employee engagement at Holland Bloorview are Organizational Vision, Professional Growth and Innovation. The results of the survey are being shared with all staff during March and April. Periodic updates will be provided to the Board.

4.3 President and CEO Performance and Compensation Committee 2013/14

J. Lam referred to the memo from R. Cranston dated March 14, 2014 which outlines the process for the evaluation of the President and CEO. The evaluation tool will be presented at the April Board meeting. It will also be sent electronically for those who prefer to complete it online. All Trustees are strongly encouraged to complete the evaluation form.

MOTION: It was MOVED by Jean Lam, and seconded by Robin McLeod, 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 and Compensation Committee for 2013-2014: Julia Hanigsberg, Robert Cranston, Janet Morrison, Cally Hunt and Ron Laxer.

Lam / McLeod CARRIED

4.4 M.A.C. Credentialing Approval - Dr. Dana Frisch and Dr. James Dowling

Dr. Milo-Manson reviewed the credentials that would enable Dr. Dana Frisch to join the active medical staff as a developmental pediatrician in the Child Development Program Satellite clinic. This appointment has no impact on our resources.

She then reviewed the credentials for Dr. James Dowling join our consulting medical staff in the neuromuscular clinic. His appointment would have no impact on our resources.

MOTION: It was MOVED by Ron Laxer, and seconded by Mary Kardos Burton, that the Board of Trustees of Holland Bloorview Kids Rehabilitation Hospital approve the recommendation



from the Medical Advisory Committee for the appointment of Dr. Dana Frisch to our active medical staff and Dr. James Dowling to our consulting medical staff.

Laxer / Kardos Burton

CARRIED

5.0 Reports

5.1 Quality Committee Reports - February 19/14 and March 7/14

R. Laxer indicated that written reports from meetings held February 19, 2014 and March 7, 2014 were included in the package. There were no questions at this time.

5.2 Medical Advisory Committee Report

G. Milo-Manson indicated that the Medical Advisory Committee report was reviewed in detail at the Quality Committee meeting. There were no questions at this time.

5.3 Foundation Report

T. Bailey indicated that there were no additional items to report at this time.

6.0 Fill out Meeting Feedback Form

J. Morrison asked Trustees to complete the feedback form in their folders.

7.0 Adjournment

J. Morrison asked for a Motion to adjourn the Board of Trustees meeting of March 19, 2014.

MOTION: It was MOVED by Linda Torneck, and seconded by John Kustec, that the Board of Trustees of Holland Bloorview Kids Rehabilitation Hospital approve the adjournment of the Board of Trustees meeting held March 19, 2014.

Torneck / Kustec CARRIED

The Closed meeting of the Board began at 7:40 pm.

8.0 Date of Next Meeting

Wednesday, April 23, 2014, 6:00-8:00 pm Room 5E100, Holland Bloorview, 150 Kilgour Road

> Janet Morrison, Vice Chair Board of Trustees

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