OPEN SESSION MINUTES OF THE AHI & TDMH JOINT BOARD OF DIRECTORS' MEETING Wednesday, March 29, 2023 Virtually

PRESENT:

AHI

Don Campbell (Co-Chair) Scott Davis Michelle Franklin Cody Groat Stephanie Nevins Tanya Pirie

TDMH

Diane Kleer (Co-Chair) Judy Cayford Carrie Lewis Lidia Piccolo Ruby Withington

EX-OFFICIOS

Dr. Punkuj Chawla Nadia Facca Dr. Clay Inculet April Mullen

REGRETS: Dr. Amy Blake Harold Matthews Heather Spanjers Dr. Michael Surkont

RESOURCE: Mike Bastow, Chief Operating Officer and VP Finance; Jennifer Row, Chief Transformation Officer and VP, Human Resources; Loralee

Heemskerk, Recording Secretary

	AGENDA ITEM	DISCUSSION/OUTCOME	ACTION PLAN/ TIMEFRAME & RESPONSIBILITY
	OPEN SESSION		
1.	CALL TO ORDER	Don Campbell called the open session meeting to order at 5:32 pm.	
1.1	Quorum	A quorum was present for both organizations.	
1.2	Conflict of Interest	There were no conflicts to declare.	

	AGENDA ITEM	DISCUSSION/OUTCOME	ACTION PLAN/ TIMEFRAME & RESPONSIBILITY
1.3	Approval of Agenda	MOTION: Moved by Scott Davis Seconded by Stephanie Nevins RESOLVED that the agenda be approved, including consent items, as circulated. Carried. Consent Agenda Items: Approval of previous open session minutes – February 22, 2023 CNE and VP Clinical Services Report COO and VP Finance Report Chief Transformation Officer, VP Human Resources AHI Joint Health and Safety minutes – February 28, 2023	Obtain signature on meeting minutes (L. Heemskerk)
2.	BOARD CONTINUING EDUCATION SESSION: Hospital Funding with Mike Bastow, COO & VP Finance The presentation provided an overview of hospital funding including the evolution of global funding as well as ministry operating and capital funding sources. It was noted that in 2019-2020 a new funding formula called Growth Efficiency Model (GEM) was introduced which is based on Growth (volumes) and Efficiency (Price). Small hospitals are excluded from the GEM funding based on our size. Small hospitals typically receive annual base increases. One of the biggest challenges for small hospitals is that we don't qualify for quality based procedures/bundled care and therefore do not receive set volumes for surgical procedures and have to go through a reallocation process in order to get volumes. Hospital leaders continue to advocate through the Ontario Hospital Association to have confirmed set volumes.		
3.	BUSINESS ARISING FR	OM CONSENT AGENDA - There is no business arising from the consent agenda.	
4.	MATTERS FOR DECISION/DISCUSSION/INFORMATION		

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4.1	President and CEO Report	The report provided an update on key activities at AHI and TDMH in alignment with the organizational strategic priorities. There is a new regional initiative underway focusing on Emergency Services planning. Discussion ensued with regards to strategies to address our human health resource challenges. We have significantly enhanced our recruitment strategies over the past six months using social media presence as well as participation in job fairs, government supported programs and recruitment initiatives in partnership with other providers.	
4.2	Quality, Risk and Patient Safety Committee	 February 27, 2023 Highlights Medication Errors Report highlighted a plan of action to minimize risk of errors. Quality, Risk and Patient Safety Q3 Report included a deep dive on the patient experience indicator with a focus on enhancing the process. Quality Improvement Plan (QIP) - overview of the process, 22-23 QIP Progress Reports as well as the 23-24 draft QIP narratives and work plans; Patient and Family Centred Care Committee also reviewed the plans and provided feedback; suggest including Accreditation Canada results and follow-up in narrative portion. The 23-24 QIP indicators include: 1. New patient satisfaction survey question, "Did you receive enough information from hospital staff about what to do if you were worried about your condition or treatment after you left the hospital?" 2. Medication reconciliation at discharge. 3. Number of workplace violence incidents reported by hospital workers. 	Revise QIP narrative (N. Facca)

	AGENDA ITEM	DISCUSSION/OUTCOME	ACTION PLAN/ TIMEFRAME & RESPONSIBILITY
		MOTION: Moved by Tanya Pirie Seconded by Michelle Franklin RESOLVED that the AHI Board of Directors accept the F22-23 Quality Improvement Plan Progress Report as well as the F23-24 Quality Improvement Plan (Narrative and Work Plan) with suggested revisions. Carried.	Follow-up (N. Facca)
		MOTION: Moved by Diane Kleer Seconded by Judy Cayford RESOLVED that the TDMH Board of Directors accept the F22-23 Quality Improvement Plan Progress Report as well as the F23-24 Quality Improvement Plan (Narrative and Work Plan) with suggested revisions. Carried.	Follow-up (N. Facca)
		March 24, 2023 Highlights Congratulations to both hospitals on receiving the "Accredited with Commendation" award from Accreditation Canada; process improvements were identified; work plan has been created to fulfil Required Organizational Practice (ROP) requirements; regular updates will be forthcoming to the Board's Quality Committee. AHI and TDMH were approved for some funding in collaboration with the Oxford Ontario Health Team for four initiatives: Quality Management System infrastructure, Staff Training, Clinical Coach and Patient Experience Rounding.	
4.3	Corporate Planning and Finance Committee – March 20, 2023	Meeting highlights: • Cybersecurity Balanced Scorecard presentation • 22-23 Strategic Plan Implementation review.	

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5.	NEW BUSINESS	There is no new business to address.	
6.	MOTION TO MOVE TO IN-CAMERA SESSION	MOTION: Moved by Carrie Lewis Seconded by Scott Davis	
		RESOLVED to move into the in-camera session at 6:56 pm to receive reports on items pursuant to the Board of Director's In-camera policy. Carried.	
		The meeting terminated at the completion of the closed session.	

Nadia Facca,

President and CEO

DR Cylull Don Campbell,

AHI Joint Board Co-Chair