

ATTENDEES:

(P) Jane McMullan	(P) Ricco Bhasin	(P) Susan Britton Payne	(P) Jasmine Tehara
(P) Kulvir Singh Gill	(P) Linda Franklin	(P) Mark Beckles	(P) Vanita Varma
(P) Pardeep Singh Gill	(P) Geoffrey Ritchie	(P) Stuart Johnston	(P) Dr. David Borts
(P) Dr. Naveed Mohammad	(P) Tiziana Rivera	(P) Dr. Michael Van Gulik	(P) Dr. Hany Youssef
(P) Brenda Bushey (Resource)			

Kim Bellissimo	Val Carter	Kiki Ferrari	Ann Ford
Florine Lobo	Dr. Frank Martino	Ken Mayhew	

1.0 CALL TO ORDER & DECLARATION OF CONFLICT

The meeting was called to order. No declarations of conflict were made.

MOVED, seconded

That the agenda be approved as presented - CARRIED

2.0 COVID-19 UPDATE

Dr. Naveed Mohammad provided an update on the activities regarding COVID-19.

3.0 CONSENT AGENDA

One motion is required to approve all items included in the Consent Agenda. A reminder was provided to the Board that any of the items contained within the Consent Agenda may be placed on the regular agenda for discussion.

The following items are included within the Consent Agenda for approval:

- CA 4.1 Board Minutes
- CA 4.2 MAC Minutes (June 1 and June 5)
- CA 4.3 Health Services & Quality Committee
- CA 4.4 Resources & Audit Committee

One revision was noted in the May 27, 2020 Board minutes on page 5 of the package. Under 5.0, reference to the metric related to 90th percentile ED LOS was omitted from the minutes. The minutes will be corrected to include the missing information.

At its June 1, 2020 meeting, the Medical Advisory Committee presented the 2020 annual reappointment list which was subsequently presented to the Board for approval. Exceptions and reappointments pending further approval and/or outstanding documents were noted (see June 1, 2020 MAC minutes for details).

Motions pertaining to the 2020/21 scorecard and clinical efficiencies as recommended by the Health Services & Quality Committee as well as related motions for the Resources Committee will be deferred for discussion and approval under item 5.0 business arising.

MOVED, seconded

That the items listed within the consent agenda be approved with noted changes – CARRIED.

4.0 BUSINESS ARISING

4.1 Chair's Report: Health Services & Quality Committee

The 2020/21 balanced scorecard was presented to the Health Services & Quality Committee in June and is before the Board for discussion and approval. The proposed scorecard includes nine metrics, a decrease from the previous year's which included 15. All metrics are aligned with Osler's strategic directions. It was noted that the proposed targets are conservative; final results may be impacted by ongoing COVID activities.

A number of points were identified for information.

- The metric related to *e-Orderset Adoption, Reporting of Patient Trauma, and Reporting of Delirium* have been replaced with *Hospital Standardized Mortality Ratio*;
- The metric related to *30-day Readmission* has been moved from the Quality Excellence strategic direction and is now included under Health System Leadership;
- The metric related to *Emergency Department Utilization* has been removed;
- The metric related to *Would you recommend?* has been changed to *Did you feel staff were genuinely concerned about you?*

The targets under People & Culture have remained conservative. Communication to staff and physicians has improved, however these targets are subject to change based on the COVID recovery plan.

The current ratio of 0.43 was recommended by the Resources & Audit Committee.

2020/21 Operating Budget & Clinical Impacts

Clinical strategies in the amount [REDACTED] were presented for discussion. These strategies will be required to balance the budget for 2020/21. An ethical scoring framework was used in order to ensure the best decisions possible on behalf of patients. All strategies are low risk and impact with the exception of the change to Complex Continuing Care. A brief discussion ensued regarding the admission criteria and ability to transfer patients once at Osler. It was stated that these patients are generally long-stay patients and should be transferred to a more appropriate facility other than within the hospital setting. Discussions are currently ongoing with West Park to determine their willingness to accept these patients. West Park originally stated their willingness to accept the patients in the event that the associated funds were also transferred.

MOVED, seconded

That the Board of Directors approve the 2020/21 Balanced Scorecard as recommended by the Health Services & Quality Committee of the Board; and

That the Board of Directors approve the clinical operations balancing strategies related to the 2020/21 operating budget a presented and recommended by the Health Services & Quality Committee of the Board – CARRIED.

4.2 Chair's Report: Resources & Audit Committee

An update on discussions that occurred at the June Resources & Audit Committee meeting was provided. The funding announcement was expected in April however, has just been received. The organization will move forward based on its planning assumptions that were developed and approved by the Board in March. As the financial impact related to COVID is not yet known, the budget strategy for 2020/21 will be developed in three stages: pre-COVID budget, COVID expenditure reimbursement and "new norm" investments. Regular updates will be provided to the Board as additional information is received.

The Ministry announced incremental funding in the amount of \$21.8M of which \$16.1M was already budgeted for. The incremental funding also included \$4.7M of new targeted funding and \$1M of non-targeted funding.

In addition to the budget information, a long range plan including a 10-year cash flow and working capital improvement plan has been developed. It was noted that Osler is one of the few organizations that prepare long range plans however, it is necessary due to the number of redevelopment projects ongoing. This plan is refreshed on

an annual basis. [REDACTED]

MOVED, seconded

That the Board of Directors approve the 2020/21 operating budget as presented;

MOVED, seconded

That the 10-year capital/cash flow plan be received for information, and that the Board of Directors approve the \$27.4M capital release for 2020/21;

MOVED, seconded

That the Board of Directors approve a total margin of \$0 (balanced position) for the 2020/21 balanced scorecard target; and

MOVED, seconded

That the Board of Directors approve a current ratio (adjusted for redevelopment) of 0.43 for the 2020/21 balanced scorecard target be approved - CARRIED

5.0 ENTERPRISE RISK MANAGEMENT

An update on the risk register was provided. The eight risks included in the register reflect those areas that fall within the oversight of the Board of Directors.

The discussion focused on five risks that are experiencing increased risk since the last report: *Clinical Quality & Quality of Operations, Financial Health, Execution of Strategy, Culture & Wellness Capital and Patient Experience.*

Clinical Quality & Quality of Operations: the level of risk for this metric has changed due to the inability of the organization to provide timely care as well as the increase in wait times.

Financial Health: the level of risk for this metric has increased due to the significant stress placed on the organization's finances as a result of COVID-19. This metric will be re-evaluated on a frequent basis going forward.

Execution of Strategy: the focus on the strategic go plan has decreased since COVID-19 resulting in the level of risk for this metric to increase. Initiatives included in the plan will be re-evaluated and brought back to the Board in the Fall.

Culture and Wellness Capital: the onset of the pandemic has placed significant pressures on the workforce thereby increasing the level of risk for this metric. Although the level of staff and physician engagement has increased, the organization continues to monitor and pivot where necessary.

Patient Experience: There are multiple reasons that have impacted the level of risk for this metric including the ramping down of services and introduction of a no visitor's policy. As a result, community concern has increased.

A brief discussion ensued regarding mitigating strategies that will help to address these heightened risks. It was noted that although the risk level for privacy and information security did not change, the teams continue to monitor this areas closely. Privacy continues to be front of mind and protection of identity and personal information is of the utmost importance. Existing platforms may need to be re-evaluated in the future.

6.0 ADJOURNMENT

MOVED, seconded

That the meeting be adjourned – CARRIED