

ATTENDEES:

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

Kiki Ferrari

Ann Ford

Florine Lobo

Dr. Frank Martino

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 - CARRIED

1.1 Chair's Report

Members of the Executive Team were thanked for accommodating yesterday's announcement by the Premier. The announcement pertained to the increased bed capacity and allocation of new beds across the province, including 87 beds for Osler. This item will be further discussed during the meeting.

2.0 LIVING THE VISION

Stuart Johnston provided the *Living the Vision* segment which focused on the patient flow centre. This operational command centre is located in the auditorium at Brampton Civic Hospital with the sole purpose of tracking patient flow in real time across the organization. Up until June, this information was manually collected and tracked. An electronic management system was created in-house and launched in July.

The process undertaken including information collected was discussed. This system impacts workflow processes and provides an electronic transfer of accountability. At any time, staff can identify where a delay in the process is occurring and the reason for that delay. A number of questions were tabled for discussion.

Q: What is the cost savings analysis – what kind of efficiencies have been gained so far?

A: This system is in its infancy stage; cost savings will become evident in the coming months and will be highlighted for the Board.

Q: Is this system something that could be licensed to others?

A: Other organizations may have HIM systems that allow them to do similar work. A decision will be made in the near future whether further investment will be required or whether the existing in-house system will be utilized going forward.

Q: How are managers/leaders using the information to coach, develop and improve overall performance of their teams?

A: The approach taken is not meant to be "Big Brother", however it does allow staff to identify and work through existing barriers that may be causing the issues. In the case of third party contractors, this system will allow management to track performance and ensure that contract obligations are being met.

Q: Is the system deployed across all sites?

A: The system is corporate wide.

It was suggested that this initiative should be showcased to Accreditation Canada as best practice. A video is currently being developed to showcase the work. A further in-depth presentation will be shared with members of the Health Services and Quality Committee. Teams were thanked for a fantastic job in pulling this all together.

3.0 CONSENT AGENDA

One motion is required to approve all items included in the Consent Agenda. A reminder was provided that any of the items contained within the Consent Agenda may be placed on the regular agenda for discussion. A summary of the motions contained within the Consent Agenda have been provided on page 4 of the package.

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

- CA 3.1 Board Minutes: *September 30 (2 sets)*
- CA 3.2 MAC Minutes: *October 14*
- CA 3.3 Governance & Nominating Committee Minutes: *October 8*
- CA 3.4 Health Services & Quality Committee Minutes: *October 7 (2 sets)*

MOVED, seconded

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

4.0 BUSINESS ARISING

4.1a Chair's Report: Governance & Nominating

The Chair's report was included in the package which reflects the October 8, 2020 discussions. The committee was tasked with identifying three new candidates to fill the positions of community committee representatives for the Health Services and Quality Committee and Resources and Audit Committee.

The following candidates were presented to the Board for approval:

Elsa Cabral – Health Services and Quality Committee

Melanie de Wit – Resources & Audit Committee

Glenn Martin – Health Services & Quality Committee.

It was stated that the caliber of candidates was exceptional. A question was asked relating to potential conflicts of interest. The committee did discuss the potential for conflicts of interest given the background and affiliation of each candidate. Individuals may declare a conflict or recuse themselves from any discussions that may present as a potential conflict. Once approved, the appointments will commence in November.

MOVED, Seconded

That the Board of Directors approve the appointments of Elsa Cabral, Melanie de Wit and Glen Martin as Board Community committee representatives, effective immediately – CARRIED.

The Board was advised of two upcoming surveys:

OHA – Board effectiveness survey

Accreditation readiness survey.

In addition to the survey, two educational sessions will be scheduled with BLG. These sessions will focus on specific areas related to Board governance.

4.1b Chair's Report: Health Services & Quality Committee

The Chair's report was included in the package which reflects the October 7, 2020 meeting. No further discussion was noted.

5.0 NEW BUSINESS

5.1 Report of the President & Chief Executive Officer

A written report was included in the package. Highlights from the report were noted as follows.

- COVID update: cases are continuing to rise in Ontario; volumes peaked on Sunday recording 1000 new cases in the province. A number of events/holidays which fall in the next several weeks may impact the results again. A

review of numbers impacting Osler was provided. [REDACTED]

[REDACTED]. The assessment centres are currently testing approximately 1400-1500 people per day. Osler is currently operating five assessment centres in the region (South Fletcher, Peel Urgent Care, BCH emergency, EGH at Humber, and EGH hospital).

- As stated at the top of the agenda, the Premier made an announcement this week to increase bed capacity across the province. Osler will receive 87 beds (40 beds by Oct 1, 41 beds Nov 1, 6 ICU beds). Location of the beds is currently being mapped out. Staff recruitment is underway to support the addition of these beds.
- Patients who are currently in the Complex Continuing Care at Brampton Civic will be moved to Etobicoke General. This will impact approximately 20-25 patients. The created space will be used to care for more acutely ill patients. This move has created some challenges with patients and their families.
- A question was asked whether capital dollars for creating bed spaces was included in the Premier's announcement. It was stated that none of the beds will require capital upgrades. There is available space at Etobicoke General as a result of the move to the new wing. If additional beds are required at Brampton Civic, capital dollars will be required.
- Received email from Ministry regarding Peel Phase II and questions related to project. Process has begun.
- An update regarding the status of support being provided to Woodbridge Vista was provided. Teams are still meeting on a bi-weekly basis. Concern has now been raised regarding a second long term care home, Pine Grove, which is heading towards an outbreak status.
- The Board was provided with an update regarding an exposure that occurred in the ORs at Brampton Civic. The exposure occurred between staff during lunchbreaks. Social guidelines were not followed and as a result 10 staff were quarantined. Some procedures may need to be cancelled due to the reduction of staff availability.
- A question was asked regarding the current cash flow and the status of reimbursement for COVID-related expenses. [REDACTED]
[REDACTED]
[REDACTED]
[REDACTED]
[REDACTED]
[REDACTED]
[REDACTED] The Chair of the Resources and Audit Committee is being updated regarding the financial picture on a regular basis. Time will be allocated at each meeting to discuss the financial situation. Hospitals operate on a flat basis with no deficit or surplus. This year is an anomaly with all hospitals being in a deficit position.
- Board members were reminded of the upcoming virtual concert on November 20 in support of Osler's Heroes Campaign. Registration information was provided.

5.2 Report of the Chief of Staff

A written report was included in the materials. Highlights from the report were provided.

- Dr. Andrew Healey has accepted the role of Corporate Chief and Medical Director of Emergency Services. Dr. Healey previously led the critical care team at Osler.
- Virtual strategy advancements are currently being implemented to improve communication and collaboration between healthcare partners. Pagers will be replaced with mobile applications that will enable secure messaging between healthcare providers.
- Discussions are underway to create corporate versus site specific physician leadership roles. Currently responsibilities are divided between sites utilizing the positions of site chiefs and divisional heads. The intent is

to gradually merge the existing structure towards a single entity and eliminate the need for site specific departments.

6.0 ONTARIO HEALTH TEAM UPDATE

An update on the activities regarding the Brampton Etobicoke Ontario Health team was provided. Highlights included:

- SCOPE pilot launched in October; this initiative will connect primary care providers with urgent access to internal medicine, mental health and addictions and radiology services.
- The first Patient Family Advisory Committee meeting was held in September; a patient declaration of values is being developed by this group.
- The OHT's Steering Committee has been changed to a Collaboration Council. Two co-chairs from the OHT have been designated to lead the Council.
- Osler has been designated as the fund holder for the BE OHT. This year OHTs will be eligible to receive up to \$375,000 with an additional \$750,000 for fiscal 2021/22.
- Organizations are required to sign a Collaborative Decision Making Arrangement (CDMA) by the end of November. Board approval is not required, however, additional information has been shared to provide details of the arrangement.

7.0 IN-CAMERA DISCUSSION

[REDACTED]

8.0 ADJOURNMENT

MOVED, seconded

That the meeting be adjourned – CARRIED