

**ATTENDEES:**

|                              |                           |                         |                       |
|------------------------------|---------------------------|-------------------------|-----------------------|
| (P) Jane McMullan            | (P) Ricco Bhasin          | (P) Susan Britton Payne | (P) Jasmine Tehara    |
| (R) Kulvir Singh Gill        | (P) Linda Franklin        | (P) Mark Beckles        | (P) Vanita Varma      |
| (P) Pardeep Singh Gill       | (P) Geoffrey Ritchie      | (P) Dr. Brendan Carr    | (P) Dr. Frank Martino |
| (P) Tiziana Rivera           | (P) Dr. Michael Van Gulik | (P) Dr. Hany Youssef    |                       |
| (P) Brenda Bushey (Resource) |                           |                         |                       |

|                     |          |              |              |
|---------------------|----------|--------------|--------------|
| Valerie Carter      | Ann Ford | Kiki Ferrari | Florine Lobo |
| Dr. Naveed Mohammad |          |              |              |

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**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 CHAIR'S REPORT**

Dr. David Borts was introduced to the Board. Dr. Borts will be assuming the role of Interim Chief of Staff effective December 13, 2019.

The Vice Chair provided an update on the CEO search. The Committee has met to review the process that will be undertaken. The ideal qualities and characteristics of a preferred candidate have been discussed. Preliminary candidates will be reviewed during the month of December with the first round of interviews to commence in January.

An update was provided on the next steps that will occur following the October Board meeting's generative discussions. The transformation roundtable will commence planning for continuation of this dialogue.

In October, a request for additional information pertaining to Osler's Go Plan initiatives was made. A briefing note has since been circulated to Board members that included the requested information. Further questions or clarification should be directed to the CEO or Val Carter.

As announced at the last meeting, Paul Fairgrieve who has been a volunteer and active member of the Osler family for the past ten years, passed away in October. His family has scheduled a celebration of life on Monday, December 2 at Brampton Civic. The Chair will be attending on behalf of the Board of Directors.

**3.0 CONSENT AGENDA**

One motion is required to approve all items included in the Consent Agenda. Members were reminded that any item may be removed and placed on the regular meeting agenda for additional discussion or clarity.

A reference was made to a statement made within the October MAC minutes pertaining to conflict of interest guidelines. Clarification on what the revisions were and what was actually trying to be resolved was asked. This

discussion was in reference to the code of conduct policy for professional staff. [REDACTED]  
[REDACTED]  
[REDACTED] Efforts are underway to enhance the language of the policy. Once finalized, the policy will be brought forward to the MAC for approval.

A question was asked related to Agenda #CA2.6 Resource & Audit Committee. Clarification was sought as to how the Shared Services Plan relates to the larger procurement initiative at Osler. There are currently three equity members. [REDACTED]  
[REDACTED]

[REDACTED] The agreement that was presented for approval involves the three parties. It was noted that when the motion was brought forward for approval, quorum was no longer valid. An email was sent to all members of the committee who granted approval of the proposed motion. In future, care will be taken to ensure quorum is in place before presenting a motion for approval.

#### **4.0 REPORT OF THE CHAIRS**

##### **4.1a Governance/Nominating Committee**

An update on the recruitment process for the Board and Community representative positions was provided. Interviews were completed on November 26. A total of seven interviews were conducted. The principles in which the nominating committee focused its discussions were based on: prior board/volunteer experience and an honest intention in giving back to the community.

The following individual was presented for consideration as a member of the Board:

Stuart Johnston, President of CIMA. Mr. Johnston is a resident of Brampton and was presented as a Board candidate. Mr. Johnston has deep experience in both the profit and not-for-profit sectors and with all levels of government. He is well connected in the community and his skills would serve Osler well in helping to advance the mission and directions of the hospital.

The following individuals were presented for consideration as community committee representatives:

Michael Torrance, Chief Sustainability Officer & Associate General Counsel for BMO Financial Group. Mr. Torrance is a resident of Brampton and has extensive experience in stakeholder relations and corporate governance. It is recommended that Mr. Torrance be appointed to a committee with the intent of moving forward as a Board candidate in June.

Mr. David Charron, Chief Financial Officer of Terago Networks Inc. Mr. Charron is a resident of Brampton and has participated as a member of the Board for International Datacasting Corp. He is a Certified Management Accountant. It is recommended that Mr. Charron be appointed to a committee and given consideration as a Board candidate in June.

Mr. Shail Sharma, Vice President, Enterprise Portfolio, Change & Project Delivery, OLG. Mr. Sharma is a resident of Mississauga and has extensive knowledge and experience in business transformation and transitions. Although he has little experience serving at the Board level, he may be ready to move forward as a Board candidate within a year's time. It is recommended that he serve on a committee at this time.

The floor was opened for discussion. [REDACTED]  
[REDACTED]

The following motion was tabled for approval:

***MOVED, Seconded***

***That the Board of Directors approve the appointment of Mr. Stuart Johnston to the Board of Directors; and That the Board of Directors approve the appointment of Mr. David Charron, Mr. Shail Sharma and Mr. Michael Torrance as Board Community Committee representatives - CARRIED***

It was noted that these appointments are pending the outcome of the successful completion of reference checks. Linda Franklin was thanked for her leadership and expediency of this recruitment process.

***4.1b Health Services & Quality Committee***

The Committee Chair provided an overview of the recent Health Services & Quality Committee. A presentation was provided by representatives from the Emergency Department. A brief discussion ensued regarding where the bottlenecks exist within patient flow. It was noted that internal and external factors are impacting patient flow.

***4.1c Resources & Audit Committee***

A number of items were discussed at the November Resources & Audit Committee meeting including: a review of the Audit Plan, Peel Phase II project, Q2 performance and information management.

The Committee questioned whether the strategic roadmap for It/IM should be elevated to the full Board to ensure greater understanding by all.

The 10-year forecast discussion was originally delayed pending information pertaining to the OHT status. It was noted that a long range plan exists which will be refreshed and brought forward at a later date. There has been no information on how OHTs will be funded in the future.

**5.0 CEO REPORT**

The CEO reported on the status of the Ontario Health Teams. As reported in the written report, the Ministry conducted a site visit of the Brampton/Etobicoke and Area OHT on November 4. Notification has been received that the Brampton/Etobicoke and Area OHT has been selected as an OHT candidate for the first round of designations. An announcement is pending. A brief discussion ensued regarding the governance framework for the OHT. An active process is underway to confirm the go-forward position. There are varying structures being utilized across the province. Discussions are underway that will crystalize from low rules to decision making processes. It was noted that the risk level is currently equivalent to matters which are being addressed through MOUs currently.

The Ministry announced that the oversight of the LHINs will now be under the management of five CEOs. Scott McLeod will assume the position of Transitional Regional Lead in Central Region and be responsible for managing Central, Central West, Mississauga Halton and North Simcoe Muskoka areas.

Dialogue continues with the Ministry of Health regarding surge capacity. There is an opportunity at EGH to expand services. [REDACTED]

[REDACTED] ADM Mike Heenan is expected to visit Osler on December 5. A letter was received today identifying an additional \$4M that will be applied to Osler's base funding.

The surgical program at EGH has received an award from the American College of Surgeons for the National Surgical Quality Improvement Program (NSQIP) placing EGH in the top 10% of all 722 participating North American hospitals.

**6.0 CHIEF OF STAFF REPORT**

Highlights of the Chief of Staff’s report were provided. Osler continues to draw top quality physicians to the organization. Three new leadership positions were announced including: Dr. Prema Vaidyanathan as Interim Site Chief of Obstetrics & Gynecology at EGH; Dr. David Richardson as Interim Corporate Chief of Medicine and Medical Director, Acute Medicine Program for Osler effective December 13, 2019; and, Dr. Anna Selliah as Corporate Chief of Pediatrics and Co-Medical Director of Women’s and Children’s Services at Osler effective November 15, 2019.

**7.0 REDEVELOPMENT INFRASTRUCTURE UPDATE**

A presentation was provided for the purpose of updating the Board on Osler’s ten year facilities development plan and review of the refreshed long-term demand projections, as well as to review Osler’s near-term infrastructure plan in preparation of the Board’s review of the Peel Memorial Phase II project.

The vision for Osler’s redevelopment and transformation includes a review of existing strategic assets that will support patient care and meet the needs of a diverse, growing and aging population. Inputs into the long-range plan includes: strategic plan, clinical priorities review, health service needs projections, health care delivery and technology trends, MOH and CWLHIN health service priorities as well as municipal economic development plans and community and health system partner engagement.

Consideration of the challenges and opportunities was key in the development of the long-range plan. Consideration was given to: system capacity, community needs and technology supports. Consideration of the OHT implementation, virtual care and innovative partnership opportunities was also considered.

In order to determine next steps, it was important to conduct a prioritization exercise which focused on specific criteria including: alignment to strategy, clinical priority, supports MOH priorities, supports community needs, creates platform for transformation and adds value to the overall health system.

To address the immediate need, a five-year plan was developed. [REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

[REDACTED]

The refreshed five-year plan is aligned with the strategic plan and promotes: better flow of patients, improved quality metrics, reduced risk, a reduction of hallway beds and ensures the patient is treated in the right bed by the right individual. The vision for Phase 2 of the Peel Memorial project is focused on sub-acute care.

Specifics of the Master Plan for the Peel Memorial Phase 2 project were presented. (It was noted that the proposed scope has deviated from the original scope presented as part of the overall redevelopment for the Peel site). The details of the new scope include:

[REDACTED]

The data used to project volumes indicates that within a 10-year horizon, Osler will experience a gap in its acute medicine bed capacity [REDACTED]

The following questions were positioned to the management team by the Board:

Q: What is the Board being asked to commit to in January?

A: The Board is being asked to approve the submission of the Master Plan for Peel Phase II including, building capacity for sub-acute beds. [REDACTED]

Q: What is the associated risk? Can Osler opt out and/or are changes permitted?

A: [REDACTED]

Q: Can the scale and scope of the project be changed?

A: Yes, however, that requires Osler to start the process from the beginning again.

[REDACTED]

Q: Greater clarity is required on the bed count and specifically, where the numbers are coming from. A: Additional discussion will occur to determine what additional information needs to be shared in advance of the January Board meeting.

Q: What does the plan beyond 5 years look like?

A: The plan beyond 5 years will need to be developed based on specific criteria, assumptions and future needs.

In preparation for the January Board meeting, members were asked to share any outstanding questions with the Chair in advance of the January meeting.

#### **8.0 ADJOURNMENT**

The meeting was adjourned. The next meeting is scheduled for January 29, 2020.