



**Board of Governors
Minutes of the Public Meeting
Wednesday, April 3, 2019 at 4:00pm
General Campus, Executive Boardroom**

Governors	Present	Regrets	Governors	Present	Regrets
Katherine Cotton, Chair	X		Katie Lafferty	X	
Jennifer Adams	X		Dr John Mahoney		X
Dr Debra Bournes	X		James McCracken	X	
Sylvain Charbonneau		X	Dr Virginia Roth	X	
Marion Crowe	X (by phone)		Claudio Silvestri	X	
Claude DesRosiers	X		Allan Smith	X	
Claude Doucet	X		Tony Sottile	X	
Dr Bernard Jasmin		X	Gordon Thiessen	X	
Dr Alan Karovitch		X	Lillian Thomsen	X	
Dr Jack Kitts	X		Brendan Timmins		
Patricia Kosseim	X				X
			Jennifer Matthews – Recorder		
Management & Staff					
Nathalie Cadieux	Bernie Etzinger	Renée Légaré	Cameron Love	Nyranne Martin	
Joanne Read	Tracy Wrong				
Guests					
Claudia Hampel	Maxime Le	Martin Peterson			

AGENDA ITEMS (The minutes are recorded in the order of the agenda rather than the order in which items were dealt with at the meeting.)

1. Call to Order

Katherine Cotton, Chair, called the meeting to order at 4:00pm.

2. Opening Remarks

K Cotton, Chair welcomed all attendees to the meeting and opened with the following statement:

The Ottawa Hospital acknowledges it is located upon the traditional and unceded territory of the Algonquin people. We have the privilege and responsibility to serve First Nations, Métis and Inuit of many backgrounds and from many treaty lands and to demonstrate respect for Indigenous people's contributions and culture. We also acknowledge traditional knowledge and healing developed over countless generations.

AGENDA ITEMS (The minutes are recorded in the order of the agenda rather than the order in which items were dealt with at the meeting.)

2.1 Disclosure of Conflicts of Interest

A call for declarations of conflicts of interest was made. No conflicts were declared.

3. Consent Agenda

PBG – 2019 –573: Consent Agenda

On a motion duly moved, seconded and carried, the Board of Governors approved the Consent Agenda for the Public Board of Governors Meeting of April 3, 2019.

4. Consent Agenda Items

The Consent Agenda Items are:

- Agenda of the Public Meeting of April 3, 2019;
- Consent Minutes of the Public Meeting of November 7, 2018;
- Chief Executive Officer Report;
- Chief Nursing Executive Report;
- Quality Committee Report; and
- Quarterly Quality Report.

5. Items Moved from the Consent Agenda

The Quarterly Quality Report was removed for discussion under Item 6.

6. Senior Management Round Table

Dr Jack Kitts, CEO provided an update regarding the creation of Ontario Health Teams (OHT) and the application process. This new structure will support system integration and support improved patient experience. The governors discussed the transition process from the local health integration network structure to the OHT structure and how an appropriate governance model will be established.

4:10pm – Patricia Kosseim joined the meeting.

The metrics from Quality Improvement Plan's quarterly results were discussed, and Staff Incidents quarterly results explained, including how the metric is tracked. A refresher on QIP metrics was requested.

7. Committee Round Up

7.1 Finance & Audit Committee

Allan Smith, committee vice chair, provided a summary of the committee's recent meeting.

7.2 Quality Committee

Lillian Thomsen, committee chair, provided a summary of the committee's recent meeting.

AGENDA ITEMS (The minutes are recorded in the order of the agenda rather than the order in which items were dealt with at the meeting.)

8. Presentation: Patient and Family Experience and Engagement Update

Debra Bournes, Chief Nursing Executive was invited to present the Patient and Family Experience and Engagement Update. She began by thanking the Board of this opportunity and recognized the contributions of staff across the organization, including Dr Virginia Roth, Dr Kathleen Gartke and Bernie Etzinger. Engagement and support across the breadth of the organization, from the Board of Governors to Physicians and Nurses to Senior Management supports the development of a strong patient and family engagement program. TOH's program continues to mature and when compared to our peers, TOH ranks first for overall rating of experience.

There are four interprofessional areas of focus: communications, physician engagement, patient and family engagement framework and acceleration initiatives. The last has been paused until the EPIC implementation is completed later this year.

Today's presentation will focus on the patient and family engagement framework. There are five areas of focus: decision-making related to strategic direction impacting clinical care, staff education and training, patient and family education material, engagement in clinical and non-clinical processes, and research activities. TOH's patient and family engagement program provides multiple ways for patients and their families to become involved, from completing surveys to participating in focus groups or committees through to program co-design.

Claudia Hampel, Patient and Family Engagement Lead introduced Martin Petersons, Patient Advisor and a member of the Corporate Patient and Family Advisory Committee (PFAC), the Campus Engagement Group and participant in a research project.

M Peterson provided insights on his experiences as a Patient Advisor. He values the opportunity to express his experiences and opinions, knowing that he is being heard. With his professional experience, he represents the PFAC on the Campus Engagement Group (CEG). The CEG brings together community groups to discuss the issues related to the development of the new Civic Campus. He noted that this is an excellent opportunity for diverse interests to discuss and deliberate issues of importance knowing that the outcomes can contribute to decision making process.

Patients are also contributing to staff education and training by sharing their stories and experiences. A storytelling curriculum is now in development by the Education Department, using patient stories to teach CanMEDS roles. (CanMEDS is a framework that identifies and describes abilities physicians require to effectively meet the healthcare needs of the populations they serve. Examples include medical expert, communicator, and health advocate.)

Central to patient engagement is involving patients in their own care. Access to easy to understand information is a priority for patients and in collaboration with the Communications Department, a standardized process for creating or revising documentation so they meet health literacy criteria has been established. Over thirty patient advisors are involved, and twenty-four presentations and workshops completed. Patient advisors are also engagement in the EPIC implementation, most notably the MyChart functionality and communications.

Patients are also engaging in research projects at TOH. TOH has an excellent relationship with the OHRI that supports patient engagement in research. Maxime Le, Patient Advisory was involved in the OR Black Box Project and he shared his experiences. He explained that he wanted to be involved in a non-traditional and this project gave him the opportunity to be involved in the grant proposal process and communications. He was able to bring the patient perspective providing insights as to what information patients might want to know. He also

AGENDA ITEMS (The minutes are recorded in the order of the agenda rather than the order in which items were dealt with at the meeting.)
--

reached out to other patients to get their perspectives as well. This information contributed to the project's communications tools.
--

C Hampel noted that the patients value the quality of opportunities they are provided, and staff feel the patient input is invaluable. Going forward, the team will continue to develop patient engagement process, enhancing and expanding the opportunities available.
--

K Cotton thanked the team for their presentation and their contributions to TOH.
--

9. Adjournment

The meeting was adjourned without a motion or vote at 5:10pm.
