



## Huron Perth Healthcare Alliance Board of Directors Meeting

Thursday, September 12, 2019  
Conference Room  
Seaforth Community Hospital Site  
*(with videoconferencing)*

### MINUTES

Present: Ron Lavoie, Chair  
Jack Alblas, Gary Austin, Dick Burgess, Anne Campbell, Dr. Chuck Gatfield (v-conf), Joani Gerber, Barry Hutton, Dr. Kevin Lefebvre (v-conf), Joe Looby, Kerri Ann O'Rourke, Kim Ross Jones, Dr. Tyler Rouse (v-conf), Rena Spevack, Andrew Williams  
Mary Cardinal, Ken Haworth  
Sue Davey, Recorder

Regrets: Steve Hearn, Dr. Kyle Armstrong, Dr. Laurel Moore, Dr. Heather Percival, Dr. Loretta Seeveratnam

---

**1. Call to Order**

The Chair called the meeting to order and quorum was confirmed. Joani Gerber was welcomed as our Patient Partner to her first meeting.

**2. Approval of Agenda**

It was moved by Jack Alblas, seconded by Rena Spevack:

**THAT the Huron Perth Healthcare Alliance Board of Directors approves the September 12, 2019 meeting agenda circulated.**

**CARRIED**

**3. Declaration of Conflict of Interest**

There was no conflict of interest declared by any members.

**4. Approval of Minutes**

**4.1 HPHA Board of Directors Meeting – July 31, 2019**

It was moved by Dick Burgess, seconded by Joe Looby:

**THAT the Huron Perth Healthcare Alliance Board of Directors approves the minutes from the meeting held July 31, 2019.**

**CARRIED**

**5. In-Camera Session**

**5.1 Motion to Move to In-Camera Session**

It was moved by Gary Austin, seconded by Kim Ross Jones:

**THAT the Huron Perth Healthcare Alliance move in-camera at 7:03 p.m.**

**CARRIED**

**5.2 Motion to Move out of In-Camera session**

It was moved by Kerri Ann O'Rourke, seconded by Kim Ross Jones:

**THAT the Huron Perth Healthcare Alliance move out of the in-camera session at 7:35 p.m.**

**CARRIED**

**5.3 Report from In-Camera Session**

During the In-Camera Session, the Board discussed Board member recruitment and received a report from the Stratford Local Advisory Committee.

Barry Hutton joined our meeting and was welcomed to the Board as a member from the catchment area served by the Clinton Public Hospital to complete the term of Olga Palmer to June 2020.

**6. Patient Story**

Julie Houben, Manager of the District Stroke Program presented the patient story related to the success of the Patient Oriented Discharge Summary (PODS) project and the stroke specific tool that has been developed for patients and their caregivers to support their transition from hospital to home. Feedback regarding this tool was positive and patients and their caregivers appreciate the support they receive. PODS complements the Connecting the Dots for Caregivers project. This tool has been brought to the Southwestern Ontario Stroke Network for adoption by other organizations. Julie reported that a poster presentation is being done on this tool at the Canadian Stroke Congress being held in Ottawa in October.

There was discussion and it was noted that the PODS is scanned into the patient's electronic health record and although MyChart does not include the PODS at this time, it is being considered.

**7. Approval of Consent Agenda**

It was moved by John Wolfe, seconded by Dick Burgess:

**THAT the Huron Perth Healthcare Alliance Board of Directors approves the September 12, 2019 Consent Agenda that included reports from the:**

- **Alliance Chief of Staff**
- **Chief Nursing Executive**
- **President & Chief Executive Officer**

**CARRIED**

**8. Focussed Discussion****➤ Huron Perth Sub-Region Accreditation**

Debbie Turner, Director Quality &amp; Risk

Trina Cooper, Accreditation Coordinator

Debbie Turner and Trina Cooper provided an overview and update on the Huron Perth Sub-Region Accreditation Survey that is taking place October 21-25, 2019, highlighting preparations that are taking place across all organizations involved (Alzheimer Society of Huron County, Alzheimer Society of Perth County, Clinton Family Health Team, Huron Perth Healthcare Alliance, Knollcrest Lodge, North Perth Family Health Team and Ritz Lutheran Villa/Mitchell Nursing Home). The slide deck is attached to the minutes. Standardization across organizations is a priority to include harmonization of common standards and policies. The role of the Board was discussed. Rena Spevack was involved in a Mock Governance Survey recently, prepping governors to meet with the Survey Team during the onsite survey. The results of the governance surveys completed were discussed earlier this year at Governance & Stakeholder Relations Committee meetings and will be circulated again as a refresher and for the benefit of our new Board members who have not experienced accreditation. It was noted that Accreditation Canada will present one award to all participating organizations at the end of the survey.

**9. Recess**

The Board deferred the recess

**10. Governance****10.1 Board Committee Reports****10.1.1 Local Advisory Committee**Clinton Public Hospital

Dick Burgess presented the report from the meeting held on July 22<sup>nd</sup> for informational purposes. He highlighted our hard-working foundations and their fundraising efforts that support our hospitals.

St. Marys Memorial Hospital

The St. Marys Local Advisory Committee met on August 13<sup>th</sup> and Kim Ross Jones shared the pre-circulated report. Barb Fewster who is well-known as one of our patient partners was welcomed as a new member. The patient room refresh project supported by the Foundation has moved to tender. The River Road Run fundraising event is being held on September 29<sup>th</sup>.

Seaforth Community Hospital

Kerri Ann O'Rourke presented the report of the meeting held August 20<sup>th</sup> for information purposes. The site experienced a flood on August 5<sup>th</sup> and an update from staff was provided at the meeting and included in the report.

Stratford General Hospital

Jack Alblas presented the detailed report from the meeting held August 14<sup>th</sup> for information purposes.

### 10.1.2 Fiscal Advisory Committee

The Fiscal Advisory Committee meets quarterly and is a mandated committee where our organization reviews fiscal and operational plans with union representatives. The Committee met on September 10<sup>th</sup> and Andrew Williams provided an update. The Committee received the 2018/2019 year-end and 2019/2020 quarter 1 fiscal overview and 2019/2020 planning updates, along with an update on the activity of the Huron Perth & Area Ontario Health Team. Andrew noted a recent article about the Ontario Council of Hospital Unions linking government strategies to bed closures. The Huron Perth Healthcare Alliance was not consulted to provide a statement and Andrew noted that any bed changes at HPHA reflect current needs and decisions are not currently influenced by our fiscal situation.

## 11. New Business

### 11.1 Huron Perth Sub-Region Accreditation Harmonized Policies

The Huron Perth Sub-Region Accreditation Governance Working Group is working on harmonizing policies that will be linked to individual organization's core policies. Normally, policies are reviewed and recommended to the Board through the Governance and Stakeholder Relations Committee, but due to timing with our upcoming onsite survey, they have been brought directly to the Board for consideration.

#### 11.1.1 Effective Governance – Evaluation

This policy was reviewed and feedback provided. It was suggested that this harmonized policy be revised, keeping it very brief to explain the intent and removing the procedure, linking the policy to the Huron Perth Healthcare Alliance's core Governance Policy.

It was moved by Rena Spevack, seconded by John Wolfe:

**THAT the Huron Perth Healthcare Alliance Board of Directors approve the Huron-Perth Sub-Region Accreditation Team Effective Governance – Evaluation Policy with revisions suggested for the Policy to be linked to the HPHA Board of Directors Governance Policy entitled “Board Evaluation” and to be reviewed by the HPHA Governance & Stakeholder Relations Committee.**

**CARRIED**

#### 11.1.2 Framework for Supporting Ethical Practice

The current Huron Perth Healthcare Alliance Ethical Framework has not been fully implemented and Mary Cardinal presented the harmonized Framework for Supporting Ethical Practice. This framework adopts the IDEAS Framework which is frequently used, is superior to what is currently in place and will be easier for staff to adopt and put into practice. This Framework has been developed for adoption by all of the Huron Perth Sub-Region Accreditation partner organizations. Mary presented a scenario related to challenges experienced by small rural Emergency Department, using this Framework.

It was moved by Rena Spevack, seconded by Kerri Ann O'Rourke:

**THAT the Huron Perth Healthcare Alliance Board of Directors approve in principle the IDEAS Framework for Supporting Ethical Practice and that the Framework undergo further review/approval by the HPHA Ethics and Quality Committee to be implemented by HPHA.**

**CARRIED**

**11.1.3 Workplace Violence & Harassment**

This harmonized staff policy was shared for informational purposes.

**11.1.4 Incident Management Policy**

This harmonized staff policy was shared for informational purposes.

**12. Huron Perth & Area Ontario Health Team Update**

Andrew Williams provided background information on the provincial governments' introduction of Ontario Health and Ontario Health Teams, aimed at promoting integration across healthcare providers. The Huron Perth & Area Ontario Health Team (HP&A OHT), comprised of over 50 provider organizations, submitted a self-assessment in May and received notification in July that they were 1 of 31 applicants invited to complete a full application with a deadline of October 9<sup>th</sup>. Andrew provided an update on the work of the HP&A OHT, and the slide deck was pre-circulated in the agenda package.

Highlights included:

- Team will continue to provide full care to 140,000 residents in their catchment area, working together to strengthen efforts around three target populations:
  - Mental Health & Addictions
  - Palliative
  - Complex
- Draft directional strategies include the development of a draft Vision and Commitments.
- Draft priority performance improvement opportunities include coordinated care, navigation and communication that if improved will impact access to care, re-admissions to the Emergency Department, service integration and transitions of care.
- Keys to success/principles include:
  - OHT governance will include Clinical/Physician leadership
  - OHT governance will have Patient / Family / Community involvement
  - OHT governance / membership will ensure consideration for: skills, geography and sector representation
  - OHT will have a unified digital health plan that works from current state
  - OHT will allow organizational fundraising to remain in the community
  - OHT will maintain status quo funding in Year 1 as the team establishes strong decision making, conflict resolution, resource allocation, etc.
  - OHT will have a strong communications plan for Year 1+ to ensure all organizations are aware of substantive changes across organizations and geographies
  - OHT will include a focus on population health management
  - OHT will be evidence based and data driven
- Draft Governance Structure presented noting that this does not replace local boards but includes a Board to Board Reference Group.
- All organizations are accountable for integrity of the system

There was discussion and it was noted that planning is being done with limited provincial direction. In regards to governance, Andrew indicated that the OHT will recommend system goals to Partner Boards, and where approved, Boards will be accountable for implementation, along with internal goals. Information received regarding funding in future years is that one funding stream will be provided for a Team and assumptions are

that the Team would work together, identify efficiencies, free up resources and reinvest in the system. Discussion about potential risks and the assumptions on worst case scenario include the Team being tasked with decisions on the reallocation of resources.

Timelines and next steps were discussed. The final full application will be shared with the Board prior to submission with an opportunity for members to receive clarification and further information.

It was moved by John Wolfe, seconded by Gary Austin:

**That the HPHA Board of Directors approves that the HPHA Board Chair sign off on the Huron Perth & Area Ontario Health Team Full Application on behalf of the HPHA and the full application will be shared with the Board for an opportunity to receive further information/clarification prior to submission**

**CARRIED**

**13. Directors Comments/Roundtable**

There was nothing to report.

**14. Next Meeting**

The next meeting of the Huron Perth Healthcare Alliance Board of Directors will be held on Thursday, November 7, 2019.

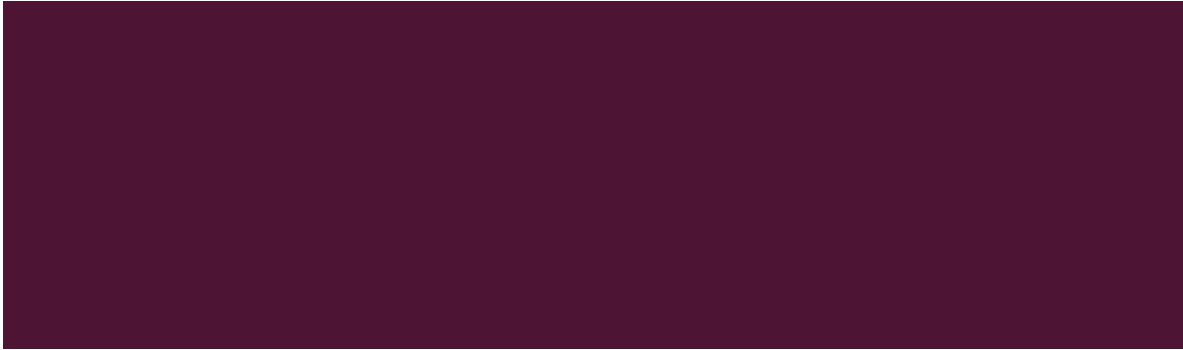
**15. Adjournment**

The meeting was adjourned on a MOTION by Kim Ross Jones 10:58 p.m.

# HURON PERTH SUB-REGION ACCREDITATION

DEBBIE TURNER - DIRECTOR QUALITY AND RISK

TRINA COOPER – ACCREDITATION COORDINATOR HPHA



## ONSITE SURVEY OCTOBER 21 – 25, 2019



Alzheimer Society of Huron County  
Alzheimer Society of Perth County  
Clinton Family Health Team

Huron Perth Healthcare Alliance  
Clinton Public Hospital  
St. Marys Memorial Hospital  
Seaforth Community Hospital  
Stratford General Hospital

Knollcrest Lodge  
Mitchell Nursing Home  
North Perth Family Health Team  
Ritz Lutheran Villa

11 organizations each with their own Governing body

4 DAYS



## WHO ARE OUR SURVEYORS?



**Eileen Goudy,  
Team Leader**  
Healthcare consultant  
with her own company  
with Anaesthesia /  
Surgical background.



**Dr. Kevin Gough**  
Head of the Division of  
Infectious Diseases and  
Medical Director of the  
HIV Service at the St.  
Michael's Hospital



**Dr. Susan Gillam**  
President and Chief  
Executive Officer with  
the Western Regional  
Health Authority with  
strong Integration  
experience.



**Anita Harris**  
Senior Clinical  
Consultant for  
Providence Place.



**Sheldon Wolfson**  
Healthcare Consultant,  
specializing in the area of  
Long-Term Care.



**ACCREDITATION  
CANADA**

## SURVEY INSTRUMENTS

- \*Worklife Pulse
  - 2 Red flags
    - Senior managers act on staff feedback
    - Overall how would you rate your organization as a place to work
- \* Canadian Patient Safety Culture Survey Tool
  - 3 Red flags
    - Making a serious error may cause a staff member to lose his/her job
    - If I make a serious error, I fear that I may face disciplinary action from management
    - Making a serious error would limit my career opportunities around here
- Governance Functioning Tool
  - 2 Red flags
- Physician Worklife
  - 4 Red flags



## ACTION PLANS

- Canadian Patient Safety Culture Survey Tool
  - Goal: To raise awareness that learning from incidents allows for system improvements
  - Goal: To communicate to staff that the organization supports staff
  
- Worklife Pulse
  - Goal: Initiatives to promote a workplace where staff feel they are valuable contributors
  - Goal: Create opportunities for staff to provide feedback

## SURVEY PREPARATION

- Service Excellence Standards
  - Clinically based and specific to care areas (i.e. Critical Care, Emergency, Surgical, Long-Term Care, Community Based etc.)
  
- Required Organizational Practices (ROP)
  - Essential practices that organizations must have in place to enhance patient/client safety and minimize risk
  - 31 Applicable
  
- Priority Processes
  - Systems or processes that have been identified as having a significant impact on patient/client safety and quality of care or service and do not have unique Service Excellence Standards (i.e. Human Capital, Emergency Preparedness, Communication, Integrated Quality Management etc.)

**Collaborative approach applied to common standards (i.e. Infection Control, Medication Management), ROP's and Priority Processes**

# PERSON CENTERED CARE

Person-Centered  
Care Priority  
Process/Tracer



HPSRAT  
Steering Committee

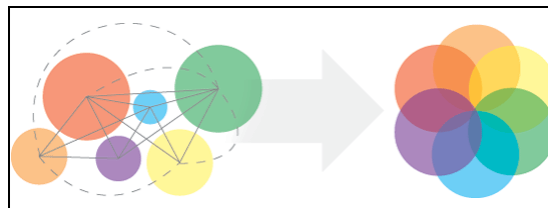
Person-Centred  
Care Criteria  
Woven into  
Standards

Accreditation  
Canada  
Survey Team

# HPSRAT HARMONIZATION

Common Standards

- Governance
- Leadership
- Infection Control
- Medication Management



Shared vision for  
system wide  
transformation

Future Ontario  
Health Team  
Opportunities

Shared Policies

- Effective governance
- Framework for Supporting Ethical Practice
- Workplace Violence & Harassment
- Incident Management

**Collaborative Quality  
Improvement Plan - HQO**

## ON THE GROUND HPSRAT SUPPORT

INFECTION CONTROL & MEDICATION MANAGEMENT FOCUS

Road Trip to partner organizations

Sharing of policies to not “reinvent the wheel”

Shared knowledge and experience



Develops meaningful relationships

Supports cross sector Quality Improvements

Supports seamless transitions across the care continuum

Creates the foundation required to support an Ontario Health Team survey in 2023!

## AROUND HPHA



Congratulations!!! Our MDRD team achieved a whopping 74% staff completion rate of Accreditation Canada’s Reprocessing Self-Assessment survey. Further recognition of the MDRD is in order, given their commitment to achieving excellence as a collaborative team. The MDRD enjoyed a complementary lunch to celebrate their achievement!!

## AROUND HPHA



Staff across the Alliance are utilizing one-page information posters to engage staff in Accreditation

Staff will have the opportunity to engage in a number of games to test their knowledge and give them an opportunity to win an iPad.



## WHAT'S HAPPENING WITH OUR PARTNERS...

### Ritz Lutheran Villa & Mitchell Nursing Home Accreditation BBQ



Early this summer, staff from Ritz Lutheran Villa and our Accreditation Partners came out to test their skills and learn more about the Accreditation process.

#### **Games of Chance:**

-Pitch in for Quality Contest,  
-the Scavenger Hunt/Bingo Challenge, AND...

*The Designer PPE Fashion Contest!*

