

SASKATCHEWAN HEALTH AUTHORITY (SHA) PUBLIC BOARD MEETING

DATE OF MEETING: November 21, 2018

TIME: 2:50 p.m.

LOCATION: Saskatoon City Hospital Boardroom (701 Queen Street, Saskatoon)

Authority Members: R.W. (Dick) Carter (Chairperson), Grant Kook (Vice-Chairperson), Brenda Abrametz, Judy Davis, Rob Pletch- via telephone, Dr. Preston Smith- via telephone, Rosalena Smith, Dr. Janet Tootoosis, Tom Zurowski.

Administrative Staff: Suann Laurent (Chief Operating Officer), Dr. Susan Shaw (Chief Medical Officer), Robbie Peters (VP Finance & Chief Financial Officer), Beth Vachon (VP Quality, Safety & Strategy), Lori Frank (Executive Director Governance & Policy), Kim McKechney (Executive Director Community Engagement & Communications), Heather Gilkinson (Recorder).

Guests: Mike Northcott (Chief Human Resources Officer), Leanne Ashdown (Chief Audit Officer), Mike Benallick (Director Organizational Effectiveness and Leadership), Liddy Hilderman (Communications Consultant).

Regrets: Scott Livingstone (Chief Executive Officer), Marilyn Charlton (Board Member), Max Hendricks (Deputy Minister of Health).

1.0 Call to Order

- Chairperson R.W. (Dick) Carter, called the public meeting of the Saskatchewan Health Authority (SHA) to order at 2:50 p.m.
- No members of the public were in attendance.

2.0 Approval of Agenda and Consent Items

SHA #62-18 [Carried]. Moved by J. Davis and seconded by J. Tootoosis that: the Agenda and Consent Item of Previous Public Meeting Minutes from July 25, 2018, and Business Arising from the July 25, 2018 minutes be approved.

3.0 Conflict of Interest Declaration

- No conflicts of interest were declared.

4.0 Ethical Decision Making Checklist

- The Board was reminded of the Ethical Decision Making Checklist.

5.0 Accreditation Canada Presentation

- B. Vachon provided the Accreditation Canada presentation for information.
- She advised that Accreditation Canada provides a 3rd party review of health care facilities to ensure that they meet national standards.

- As the 1st year of Accreditation Canada's four year cycle focuses on Governance, B. Vachon advised that Board members will be required to complete a Governance Functioning Tool, an online survey that measures four areas of governance functioning (membership and structure, roles and responsibilities, meetings and decision making processes and evaluation processes).

Action: H. Gilkinson to provide Board members with a link to the Governance Functioning Tool online survey for completion by December 15, 2018.

Action: The Governance & Human Resources Committee will discuss the Governance Standards at the December 6, 2018 Committee meeting.

6.0 Reports

6.1 Chairperson's Report

- Chairperson R.W. (Dick) Carter tabled the Chairperson's Report.

6.2 Chief Executive Officer's (CEO's) Report

- S. Laurent tabled the CEO's Report that included updates on the Saskatchewan Hospital (North Battleford) project, Memorandums of Understanding (MOUs) that have been signed with the Métis Nation of Saskatchewan and the All Nations Healing Hospital and the new Community Health Centre in Regina.
- Board members were also provided with copies and a brief overview of SHA's Community Report.

6.2.1 Provincial Successes

- S. Laurent provided an overview of SHA's Provincial Successes since December 4, 2017.

6.3 Chief Medical Officer's (CMO's) Report

- The CMO's Report was received for information.

6.3.1 Practitioner Staff Review Panel Membership

- 20 Practitioner nominees and five Non-Practitioner nominees were recommended for appointment to the Practitioner Staff Review Panel.

SHA #63-18 [Carried]. Moved by T. Zurowski and seconded by B. Abrametz that: the SHA Board approve the 20 Practitioner members for the Practitioner Staff Review Panel as follows: Dr. Brian Ulmer, Chair; Dr. Darcie McGonigle; Dr. Bertram Neethling; Dr. Aimee Seguin; Dr. Brenda Cholin; Dr. Jeffrey Irvine; Dr. Holly Wells; Dr. Okezie Nweze; Dr. Jakobus Steenkamp; Dr. Edward (Ted) Krickan; Dr. Khalid Sheikh; Dr. Janet Ferguson; Dr. Hennike Rees; Dr. Maurice Ogaick; Dr. Rahul Mainra; Dr. Chantal Ansell; Dr. George Carson; Dr. Amy Goodday; Dr. Angus Kirby and Dr. Jayalakshmi Bodani, as well as five Non-Practitioner members: Les Oystryk; Lydia Gauthier; Deb Schmidt; Dr. Jaris Swidrovich, and Gerald Tegart, with Vice Chairperson to be confirmed from the Non-Practitioner members.

7.0 Advisory Panel Report

- In December 2016, the Saskatchewan Advisory Panel on Health System Structure Report was released with detailed recommendations.
- S. Laurent advised that five of the recommendations have been completed, and nine are in progress.
- The Board will continue to receive Advisory Panel Report updates at quarterly meetings.

Action: Future updates to the document should be redlined to more clearly display progress and new information.

8.0 Quality Update

8.1 Board Monitoring- Visibility Wall Update

- The Board will continue to work with Management on the development of the performance measures.

9.0 Strategy Update

9.1 Saskatchewan Health Authority's Core Values

- M. Northcott and K. McKechny acknowledged the efforts of M. Benallick and L. Hilderman, co-leaders of the SHA's Organizational Values Working Group.
- The working group received input from 45 communities across the province. Based on this consultation, the following Core Values were selected: Safety, Accountability, Respect, Collaboration and Compassion.
- M. Northcott advised the Board that the Core Values will be actively put into practice.

SHA #64-18 [Carried]. Moved by J. Tootosis and seconded by J. Davis that: the SHA Board approve the five core values of Safety, Accountability, Respect, Collaboration and Compassion and the commitment to a philosophy of patient and family centred care for the Saskatchewan Health Authority.

10.0 Committee and Board Member Reports

10.1 Audit, Finance & Risk Committee (AFRC)

10.1.1 Report from October 25, 2018

- The October 25, 2018 AFRC meeting included presentations from Saskatchewan Healthcare Employees' Pension Plan (SHEPP) and 3sHealth regarding Employee Benefit Plans.

10.1.2 Report from November 8, 2018

- The November 8, 2018 AFRC meeting included updates on the following: Administrative Information Management System (AIMS); Financial status; Audit Planning and Internal Audit.

SHA #65-18 [Carried]. Moved by J. Davis, seconded by T. Zurowski that: the Audit, Finance & Risk Committee Reports from October 25, 2018 and November 8, 2018 be approved.

10.1.3 Internal Audit Charter Approval

- The Internal Audit Charter was provided for approval. It was informed by auditing best practices.

SHA #66-18 [Carried]. Moved by J. Davis, seconded by T. Zurowski that: the November 2018 Internal Audit Charter be approved.

10.1.4 Internal Audit Work Plan Approval

- The Internal Audit Work Plan was provided for approval. It is informed by best practice and included Executive Leadership Team (ELT) input. The Internal Audit proposed organizational structure and corresponding budget is referenced within the work plan.

SHA #67-18 [Carried]. Moved by J. Davis, seconded by T. Zurowski that: the Internal Audit Work Plan for the sixteen months ending March 31, 2020 be approved.

10.2 Quality & Safety Committee (QSC)

10.2.1 Report from October 2, 2018

- B. Abrametz provided a brief overview of the Report from October 2, 2018. Topics included stakeholder representation on Board Committees, the Public Health Appeals Process, the Board's Visibility Wall, and the Canadian Patient Safety Institute Safety Improvement Project.

10.2.2 Report from November 5, 2018

- B. Abrametz provided a brief overview of the report including an update on the Patient and Family Advisory Committee (PFAC).

SHA #68-18 [Carried]. Moved by B. Abrametz, seconded by R. Smith that: the Quality & Safety Committee Reports from October 2 and November 5, 2018 be approved.

10.2.3 Patient and Family Advisory Committee Process Update

- Discussion related to the draft PFAC Terms of Reference and the reporting relationship occurred. It was noted that PFACs in other jurisdictions are typically considered operational and link in to the QSC through the appropriate Executive Leadership member(s). In the case of the SHA, that is Beth Vachon, VP – Quality, Safety & Strategy and Dr. Susan Shaw, CMO.

10.3 Governance & Human Resources Committee

10.3.1 Minutes/Report from September 26, 2018

- The report included updates on Labour Relations and the proposed 3sHealth Bylaw amendments.

10.3.2 Board Committee Terms of Reference- Governance & Human Resources

- R. Pletch provided an update on the Board Committees' Terms of Reference. The GHRC Terms of Reference is ready for approval.

10.3.3 CEO Performance Review Process

- M. Northcott provided an overview of the CEO Performance Review Process.

SHA #69-18 [Carried]. Moved by R. Pletch, seconded by J. Davis that: the Governance & Human Resources Committee September 26, 2018 Report; Governance & Human Resources Committee Terms of Reference, and CEO Performance Review Process be approved.

11.0 Next Public Meeting

- The next SHA Public Board Meeting will occur on February 20, 2019, Saskatoon City Hospital Room 1911.

12.0 Motion to Adjourn

SHA #70-18 [Carried]. Moved by J. Tootoosis that the public meeting of the Saskatchewan Health Authority be adjourned at 3:13 p.m.

13.0 Questions from the Public in Attendance

- There were no further questions, as members of the public were not in attendance.