

MINUTES ROYAL OTTAWA HEALTH CARE GROUP BOARD OF TRUSTEES June 21, 2022 Regular Meeting at 3:30 p.m. (AGM and New Officers' Meeting following Regular Meeting) Zoom Meeting

		REGULAR MEETING	Action Required
1.	WELCOME & CALL TO ORDER	The meeting was opened by acknowledging that the land on which we gather is the traditional and unceded territory of the Algonquin nation. Additional remarks were made in recognition of National Indigenous Peoples' Day.	
		Meeting participants were welcomed and special guests acknowledged.	
		A. Graham, Chair, called the meeting to order at 3:36 p.m. and declared it to have been regularly called and properly constituted for the transaction of business.	
		A confidentiality statement from the ROHCG Board By-laws was read and conflict of interest requirements were noted. The Royal's Ethics Framework for Decision Making, and the Public, Non-Public Excluded Meeting and Conflict of Interest Policies were included in the meeting package.	
		S. Squire, Incoming Chair, recognized and thanked A. Graham for the years she served on the Board. She will now become the Past Chair. S. Filion was also thanked for her time on the Board, as this will be her last meeting.	
2.	AGENDA AND MINUTES	A motion was moved, seconded and carried to accept the agenda of June 21, 2022 as presented, and to approve the previous minutes of March 31, 2022 as presented.	
3.	INFORMATION ITEMS	 a. President & CEO and Chair Oral Reports – J. Bezzubetz, A. Graham 	
		Oral reports were provided by the President & CEO and the Chair of the Board. A written report from President & CEO was also included in the meeting package under the Consent Agenda.	
		b. Annual Report of the Chief of Staff – R. Bhatla	
		A copy of the Chief of Staff's annual report was included in the meeting package. R. Bhatla was thanked for his report.	

		c. Building a Framework for Supporting Meaningful Family Caregiver Engagement: A Collaborative and Family-led Research Project - C. Clark, F. Dzierszinski	
		F. Dzierszinski provided opening remarks. C. Clark then provided an overview of the webpage using the link that was provided with the agenda <u>https://engagecaregivers.ca/</u>	
		The Board was encouraged to see that resources like this are being made available to support people in the community, and wanted to know if there were any plans to promote this. C. Clark will be making arrangements for a media blitz to be done She noted that The Royal is ahead on so many levels when it comes to engagement with caregivers with family and clients.	
		The Chair congratulated the team on this accomplishment and all the hard work that went into it.	
		d. Year in Review (Annual Report) – A. Tomkins	
		A copy of the Year in Review (Annual Report) was included in the meeting package with a link to the annual report.	
		This is a more modern on-line reading experience and includes videos. Another benefit of this method is we are able to direct people to The Royal's website and social media channels.	
		The Board was impressed with the report and noted how inspirational the individual stories were. The Annual Report is an opportunity to reflect on all the things that we accomplished.	
		e. Update on Foundation Campaign – C. Ide	
		A written report was included in the Consent Agenda. C. Ide acknowledge and thanked J. Duschner for her continued leadership and contribution to the campaign to support the highest priority needs.	
4.	COMMITTEE REPORTS & DECISION ITEMS	a. Governance Committee Report – C. Coulter	
		The Governance Committee minutes from June 14, 2022 were included in the meeting package in the Consent Agenda.	
		 Nomination of ROHCG Member for Atlas Institute for Veterans and Families Board – J. Bezzubetz 	
		J. Bezzubetz provided an update on the nomination process for the Atlas Institute for Veterans and Families Board. C. Crocker and J. Bezzubetz are available to any Trustees who would like	

additional information on what the Atlas group has achieved and what work is going forward.	
 ii. 2022-2023 Slate of Trustees (Membership Terms) – C. Coulter 	
A copy of the 2022-2023 Slate of Trustees, along with the membership terms, was included in the meeting package.	
A motion was moved, seconded and carried to approve the nominations for membership, the renewal of Board members' terms and the 2022-2023 Slate of Candidates as presented. These motions were forwarded to the Annual General Meeting for approval.	
iii. 2022-2023 Committee Membership – C. Coulter	
The 2022-2023 Committee Membership organization chart was sent separately to the Board. A motion was moved, seconded and carried to approve the organizational chart as presented. This motion was forwarded to the New Officers' Meeting for approval.	
iv. 2022-2023 Board/Committee Meeting Schedule – C. Coulter	
The 2022-2023 Board/Committee meeting schedule was included in the meeting package for the information of the Board.	
v. OHA Board Assessment Results/Chair Assessment Survey Results – C. Coulter	
The OHA Board Assessment Results will be available after June 30, 2022. Trustees were reminded to complete the survey by June 24.	
The Chair Assessment Survey Results are currently available, but the Governance Committee agreed that both should be shared at the September 2022 meeting as the Board begins its new year.	
vi. Terms of Reference – C. Coulter - Innovation Committee - Finance Committee - Audit Committee - Compensation & Succession Planning Committee	
 The Governance Committee is responsible for recommending changes to the Committee Terms of Reference. The following motions were moved, seconded and carried as presented: Innovation Committee Terms of Reference Finance Committee Terms of Reference Audit Committee Terms of Reference People, Talent and Culture Terms of Reference 	

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When the Governance Committee next meets in October 2022, they will be looking at the details in the People, Talent and Culture Committee's Terms of Reference. They are not only changing the title of this Committee, but looking at what the Committee should be looking at as well.	
vii. Annual Trustee Declaration, Consent and Statement of Confidentiality form	
The Annual Trustee Declaration, Consent and Statement of Confidentiality form was sent separately to the Board. A motion was moved, seconded and carried to approve this as presented.	
viii. Annual Non-Trustee Declaration and Statement of Confidentiality form	
The Annual Non-Trustee Declaration and Statement of Confidentiality form was sent separately to the Board. A motion was moved, seconded and carried to approve this as presented.	
b. Quality Committee Report – L. Gillen	
L. Gillen reported on behalf of L. Leikin who sent his regrets. The MAP team presented at the June 6, 2022 Quality Committee meeting. Wait times is an ongoing issue. The minutes from the June 6 meeting were included in the meeting package.	
 French Language Services Annual Report – L. Gillen, C. Crocker 	
A copy of the French Language Services Annual Report was included in the meeting package. This is an annual requirement by the LHIN. A motion was moved, seconded and carried to approve this as presented.	
ii. Corporate Patient Safety Report – L. Gillen	
A copy of the Corporate Patient Safety Report was included in the meeting package for the information of the Board. It was accepted by the Quality Committee and brought forward to the Board for information.	
iii. Annual Quality Improvement Plan – L. Gillen	
The Annual Quality Improvement Plan was included in the meeting package. There is now a suicide prevention indicator on the Quality Improvement Plan, and the organization is going to implement a standardized suicide risk assessment for inpatients. A motion was moved, seconded and carried to approve this as presented.	
iv. Integrated Risk Management Framework – L. Gillen, C. Crocker	
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 The Integrated Risk Management Framework (IRMF) is included in the meeting package as part of the Finance Committee Report. This document is reviewed by both the Quality and Finance Committees and will be reported under the Finance Committee Report. No changes were made by the Quality Committee. v. CORP VII-iii 100 Patient Incident Reporting and Response Policy – L. Gillen, R. Bhatla A copy of the Patient Incident Reporting and Response Policy was included in the meeting package. There were no major changes to this Policy. A motion was moved, seconded and 	
 carried to approve this as presented. i. Preparing for Accreditation 2023 with the Accreditation Continuous Model – D. Simpson, K. Lepinskie 	
A copy of a one-pager providing a Board update on Accreditation 2023 was included in the meeting package. A presentation was also made to the Board and a background to the Accreditation process was provided.	
The milestones and next steps that we need to hit were reviewed and discussed.	
Following discussion, the Board agreed there are benefits at this time to create a working group from its existing Committees that can be shifted at any time in the future. The Board will complete the governance functioning tool now to help inform the assessment in the fall. The entire Board will complete the assessment.	
Once the working group has walked through everything, D. Simpson and K. Lepinskie will come back to the December Board meeting with the results. The working group will then make a recommendation to the Board whether it should be a working group or a committee.	
In next couple of weeks, the governance functioning tool will be sent to the Board. The self-assessment will be in the fall and will be brought back to this meeting for discussion.	
c. Advocacy Committee Report – R. Anderson	
R. Anderson was not able to attend the meeting. A. Graham and J. Bezzubetz reported as follows. The group is making progress in housing and law enforcement. There was also discussion around metrics for measuring success and how other	

organizations have approached it. It will be the topic in the fall when we reconvene.
d. Innovation Committee Report – N. Bhargava
The Innovation Committee minutes from April 12, 2022 were included in the meeting package.
The mandate of the Innovation Committee was reviewed with the Governance Committee. There was lots of support and encouragement about continuing the Committee.
e. Medical Advisory Committee Report – R. Bhatla
The Medical Advisory Committee Report was included in the Consent Agenda.
i. Annual Appointments/Re-appointments of Medical Staff
A motion to approve the annual appointments/re-appointments of Medical Staff was moved, seconded and carried, as presented.
ii. Medical Staff Privileges
A motion to approve candidates for medical staff privileges was moved, seconded and carried, as presented.
a. Audit Committee Report – J. Gallant
The May 19, 2022 Audit Committee minutes were included in the meeting package.
i. Whistleblower Annual Report – J. Gallant
A copy of the Whistleblower Annual Report was included in the meeting package. There is an annual requirement to make this report.
An anonymous complaint was received and referred to the neutral third party. The third neutral party concluded that no further action needed to be taken and the matter was closed.
ii. Audit Findings Report and Draft Financial Statements – J. Gallant
The Audit Findings Report and Draft Financial Statements were included in the meeting package. This is the most important role of the Audit Committee.
A motion was moved, seconded and carried to approve the Auditors Report and Draft Financial Statements as presented and submitted to the Annual General Meeting for approval.

iii. Re-Appointment of the Auditors – J. Gallant	
At the last meeting, it was noted that KPMG's contract had come up to the conclusion of the extended term. A motion was moved, seconded and carried for the ROHCG Audit Services be awarded to KPMG for a five-year period (2023-2027) with a two- year option. The motion was forwarded to the Annual General Meeting for approval.	
iv. Management Letter – J. Gallant	
There was no management letter, as KPMG had no recommendations for the attention of the Audit Committee or management.	
v. Finance Risk Register	
This was an item covered at the Audit Committee meeting. The Committee reviewed and made sure there was alignment with the integrated management framework.	
b. Finance Committee Report – J. Gallant	
The Interim Financial Statements were made available for the review of the Board on the Board Portal. The May 19, 2022 Finance Committee minutes were included in the meeting package.	
i. Investment Policy – J. Gallant	
There were no changes to the Investment Policy.	
ii. Integrated Risk Management Framework (IRMF) – J. Gallant	
A copy of the IRMF was included in the meeting package. There is joint responsibility for the IRMF between the Quality and Finance Committees. It was reviewed by the Finance Committee on May 19, 2022 with some amendments made, and was subsequently reviewed by the Quality Committee on June 6, 2022 with no further changes.	
The IRMF now includes the IMHR and Foundation risk reports, which was approved by their respective Boards. However, the consolidated report is only being made available to this Board.	
The risks were discussed and questions followed.	
C. Crocker will be meeting with J. Lambley to discuss what to bring to the fall Quality and Finance Committee meetings. He	

		 will also ask him to look into an integrated document for The Royal's Board only. A motion was moved, seconded and carried to approve the Integrated Risk Management Framework as presented. iii. 2021-22 MOH CYMH TPA Amendment – C. Crocker A copy of the 2021-22 MOH CYMH TPA Amendment was included in the meeting package. This item was for the information of the Board to notify them that the Ministry sent documents, which missed the May Finance Committee meeting, and J. Bezzubetz and A. Graham did 	
		sign. The agreement is an amendment to our contracts for youth and is consistent with previous years.	
5.	CONSENT AGENDA	a. Approval of the Consent Agenda – S. Squire	
		There was discussion on a few items in the Consent Agenda.	
		The Board was in favour of having the strategy updates on the regular agenda and not in the Consent Agenda. The strategy should be a steady update for this Board.	
		In the MAC report, there was a comment about the nursing and professional health plan, which is an interesting topic to this Board.	
		Professional Practice is developing an 18-month nursing and allied health education plan related to suicide prevention and implementation and adherence to quality based standards. This has been embedded in the overall framework that is being developed. The training will take anywhere from 18 months to two years to roll out and we will be bringing more detail on the timeframe. This work is being done with Healthtech.	
		The Board was excited to hear this update.	
		 A motion to approve the Consent Agenda and any motions therein was moved, seconded and carried, as presented. The Consent Agenda included the following items: President & CEO's Report IMHR Annual Report Foundation for Mental Health Report Research Ethics Board Report (REB) Strategic Plan Indicators Mental Health Addictions and Quality Initiative (Peer Comparators) (MHAQI) Committee Reports: Quality Committee minutes of June 6, 2022 	

		 Medical Advisory Committee minutes: March 17, 2022 and April 21, 2022 Governance Committee minutes of June 14, 2022 Innovation Committee minutes of April 12, 2022 Finance Committee minutes of May 19, 2022 Audit Committee minutes of May 19, 2022 		
6.	INNOVATION SPEAKER:	What is happening in your work environment or in your community activities of which The Royal should be aware? – L. Gillen		
		L. Gillen leads trade finance for RBC. Her role expanded to include leadership in partnerships and beyond banking. They are innovating with beyond banking through different partnerships and being thoughtful and open minded about tools we have to add additional value to the lives of our clients. This might also be applicable to The Royal.		
		The specific innovation is about using the most valuable resource that RBC has, which is data. They are not selling individual information to anyone. The RBC is able to provide our clients with a tool to give them access to aggregated debit and Visa data. A client could get data on anyone who has ever made a donation by a credit or debit card and it would tell them about the people who use it (what neighbourhoods they live in, the make up of individuals, how they compare to their competitors). This is a way of adding value to our clients to create more loyalty.		
		There was interest around the table. The Royal could possibly apply something similar to data we hold about healthcare and ther is great potential in that. D. Jankowicz noted there are testing proposals from Oxford who look at large scale mental health focus data sets under well-controlled circumstances. If ever pursued control would have to follow for optic as well as legal issues.		
7.	NEW BUSINESS	No new business.		
8.	REPORT ON THE E	THICS FRAMEWORK FOR DECISION MAKING		
	conducted in a transp the agenda. The mee	e ethics report and reported that decisions were fair and equitable, parent manner and the Chair kept the meeting focused on important sting was collaborative, respectful and met the requirements of our There were good discussions in terms of being relevant and transp	t elem accou	ents of ntability
9.	NEXT MEETING(S)	The 2022-2023 meetings will be sent by P. Robb as soon as pos	sible a	after the me
10.	ADJOURNMENT OF REGULAR MEETING	There being no further business, the regular meeting was adjourned at 6:44 p.m.		
11.	EXCLUDED SESSIONS	1. RESTRICTED - Independent Board Members and CEO and Chief of Staff only		

		2. IN-CAMERA – Independent Board Members only
12.	ANNUAL GENERAL MEETING	See separate minutes.
13.	NEW OFFICERS' MEETING	See separate minutes.