RECOGNITION OF THE REVEREND RIP KIRBY AWARD OF EXCELLENCE RECIPIENTS:
The Board recognized the following employees on receiving the Reverend Rip Kirby Award of Excellence: Lorie Schmitz, Clinical Aid; Colleen Machado, Lab Technician; Stacey Gallo, Nuclear Medicine Technologist.

1. CALL TO ORDER: 4:05 p.m.

2. OPENING PRAYER/REFLECTION
Mr. Kaluzny provided the opening reflection.

3. APPROVAL OF THE AGENDA

Motion: That the Board of Trustees approve the open meeting agenda for October 31, 2018 as written.

Moved by Tom Motz, Seconded by Stan Nahrgang, VOTED AND CARRIED.

4. DECLARATION OF CONFLICT OF INTEREST: Tim Rollins declared a conflict of interest.

5. MEETING EVALUATION REMINDER
The meeting evaluation form was circulated with the agenda package for Board members to complete.

6. BOARD HUDDLE AND ACTION TRACKER
The information posted on the huddle board was circulated with the meeting package. The Board reviewed the 2018-2019 corporate goals and improvement ideas on the huddle board.
The items listed on the action tracker were also discussed.

7. **Presentations/Updates**

7.1 **Cardiac Program Update**
A briefing note and implementation plan update for the Waterloo Wellington Regional Cardiac Program as well as a quality report for the Cardiac Program was circulated with the meeting package. Ms. Andrea Lemberg, Director, Cardiac Program, was present to speak to the information provided.

**Discussion:**
- In looking one-year ahead, how would this plan be characterized as a success and, alternately, a failure? Success would be seen as the morale in the program is high with everyone working together, cardiac hubs are up and running in the community, and staffing is stabilized. We are struggling to meet the demand at present and the plan would fail if we do not find the infrastructure to accept this additional demand.
- Approximately 87% of patients seen are from within our region and we have additional volume that comes from outside of our Local Health Integration Network (LHIN) area.
- The measures for the plan are expected to be in place by the end of this fiscal year. It was noted that there are other broader measures that could affect this. A simple draft of these measures could be brought forward to the Board in January. Part of the struggle is that our innovative procurement process is based on metrics that will be very specific so we are asking the group working on this to develop measures around their vision and then look at the measures related to the innovative procurement outcome.
- Two years ago the cardiac physicians came to a board meeting to voice their concerns about the Cardiac Program and, at the time, the Board instructed the leadership and made a commitment to the cardiac team to be collaborative, move the strategic plan ahead, build trust and communicate better. There is a lot of pressure which essentially comes down to the infrastructure. The structure of the Cardiac Program is different than what it was a few years ago but there is still a disconnect with the flow of information to the physicians. The avenues to learn and work with physicians to develop the programs is slowly correcting and we are actively working on building trust within these relationships and trying to fix the broken communication process.

7.2 **CLEAR Research Project Update**
A briefing note and accompanying documents on the CLEAR (Center for Lean Engagement and Research in Healthcare) Research Project that St. Mary’s is involved in was distributed with the meeting package. It was asked if additional resources might be needed as we move into the next phase of this project. These projects fit nicely with our Lean 2.0 system. With Lean 2.0 we can see what our staff and providers are saying, adjust what we are doing and evaluate it again for success. We will take a current state baseline and then develop countermeasures for 2.0 which will give us validated research to determine if we can move the dial. St. Mary’s did participate in the U.S. survey and compared well, keeping in mind the differences between Canadian and U.S. hospitals.

8. **The Quality/Patient Safety Report**
The Quality Committee Report was circulated with the Board meeting package. Ms. Thomson Howell highlighted the patient story and noted that information on improvements from a previous case were discussed.
The quality risk report that was attached is a direct result of a patient story. Tracking and reporting on types of complaint has begun and they are trying more and more to include the patient voice in what is brought forward to the Board. It is expected that the report will grow over time to make sure the Board is being given the information they need.

Motion: That the Board of Trustees approve the Quality Committee report.

Moved by Marion Thomson Howell, Seconded by Jim Stirtzinger, VOTED AND CARRIED.

9. CONSENT AGENDA
The minutes of the Open Board meeting held September 26, 2018, the Volunteer Association Report and the President’s report were distributed with the agenda package.

Motion: That the Board of Trustees approves the following:
- Minutes of the Open meeting – September 26, 2018
- Volunteer Association Report
- President’s Report

Moved by Tom Motz, Seconded by Terry O’Sullivan, VOTED AND CARRIED.

10. REPORTS

10.1 President / SJHS CEO
Dr. Stewart mentioned that the St. Joseph’s Health System is available to help with questions around quality, governance and human resources. They are also looking forward to coming up with some System-wide opportunities that we can work together on with our member organizations. He also congratulated the Site President Search Committee for completing the recruitment process for the new president.

10.2 Board Chair
Mr. Motz remarked that the Board of Trustees held a special meeting by teleconference on October 24th to endorse the hiring of Dr. Andrew Falconer as the new site president for St. Mary’s.

11. ADJOURNMENT: 5:25 p.m.

Motion: To adjourn the open Board meeting.

Moved by Don Kaluzny, Seconded by Jim Stirtzinger, VOTED AND CARRIED.