

# MINUTES OF April 4, 2017 REGULAR BOARD MEETING

9:00 am - 10:15 am

5<sup>th</sup> Floor Boardroom - 505 Doyle Avenue

**Board Members:** Resource Staff:

John O'Fee, Chair Chris Mazurkewich, President & Chief Executive Officer (Ex Officio)

Ken Burrows Debra Brinkman, Board Resource Officer (Recorder)

Debra Cannon
Patricia Dooley
Guests:

Diane Jules Jamie Braman, VP Communications & Public Engagement
Dennis Rounsville Susan Brown, VP & COO, Hospitals & Communities

Tammy Tugnum Dr. Trevor Corneil, VP Population Health & Chief Medical Health Officer

Renee Wasylyk Mal Griffin, VP Human Resources & Organizational Development

Donna Lommer, VP Support Services & CFO Norma Malanowich, VP & Chief Information Officer

Dr. Glenn Fedor, Chair, Health Authority Medical Advisory Committee (T)

Givonna De Bruin, Corporate Director, Internal Audit

**Presenters:** 

Wendy Petillion, Regional Practice Lead, Research & Knowledge Translation Andrew Hughes, Health Services Administrator, Kelowna General Hospital

(R) Regrets (T) Teleconference (V) Videoconference

### I. CALL TO ORDER

Chair O'Fee called the meeting to order and welcomed Board Directors, staff and visitors.

1.1 Acknowledgement of the First Nations and their Territory

Director Jules respectfully acknowledged that the meeting was held on the Okanagan Nation traditional territory.

### 1.2 Approval of Agenda

Director Burrows moved, Director Wasylyk seconded:

Motion: 17-06 MOVED AND CARRIED UNANIMOUSLY THAT the Board approve the agenda as

presented.

# 2. PRESENTATIONS FROM THE PUBLIC

None

### 3. PRESENTATIONS FOR INFORMATION

### 3. I Overdose Prevention and Response Update

Dr. Trevor Corneil provided the Board with an update on the Overdose Public Health Emergency. Current statistics and trends over the last two months were reviewed. Overdose deaths within Interior Health continue to remain high. Non-fatal overdose events for 2016, as reported by Emergency Health Services, were reviewed. Tangible data is being collected and efforts have increased with staff entering emergency departments reaching out to overdose patients to provide treatment options. In Kamloops, Interior Health staff are working within a housing unit alongside residents providing supervised consumption services and offering treatment options. Dr. Corneil reported that overdose prevention service utilization and outcome rates were positive. Interior Health is now the first in the province to offer mobile prevention services with new mobile units to be deployed in both Kamloops and Kelowna. Pathways are being developed to assist clients in accessing the services available in these active mobile prevention sites.

Dr. Corneil answered questions from the Directors.

#### 3.2 Ethics in Interior Health

Wendy Petillion presented revisions to the Ethics Framework for Interior Health. She provided detail related to the Interior Health Ethics Council and its membership, Accreditation Canada Leadership Standards and how the Ethics Framework reflects ethical practice for quality care. Tools and guides are available for staff, physicians and volunteers to assist in the ethics decision-making process. Wendy Petillion noted that this will be the first time Interior Health has participated in the National Health Ethics Week April 3-9, 2017. Directors requested the ethics educational material be provided for inclusion in the new Board Director Orientation package.

### 3.3 Marissa's Story

CEO, Chris Mazurkewich and Andrew Hughes presented a video that highlighted a lifesaving effort of a critically injured patient that arrived at KGH. In 2012, a single donor, Charles A. Fipke, presented the KGH Foundation with a gift of \$1 million to specifically support the needs of KGH's Emergency Department. This incredible gift allowed the hospital to acquire the most advanced trauma suite in the country. The FAST Trauma Suite contains within it state of the art medical equipment and technology available. As a result, the trauma team of physicians, nurses and first responders are capable of a much higher standard of urgent and emergent care than ever before. The young patient's care journey connected seamless care services included EMS, helicopter services, KGH Trauma services and KGH surgical services.

### 4. APPROVAL

### 4.1 Approval – Minutes

Director Jules moved, Director Dooley seconded:

Motion: 17-07 **MOVED AND CARRIED UNANIMOUSLY THAT** the Board approves the minutes of the February 7, 2017 Board Meeting as presented.

### 5. FOLLOW UP ACTIONS FROM PREVIOUS MEETING

Action items from the previous meeting were reviewed.

### 6. COMMITTEE REPORTS

# 6.1 Health Authority Medical Advisory Committee (HAMAC)

Dr. Glenn Fedor provided an overview of the Summary Reports of the Health Authority Medical Advisory Committee meetings that took place on February 17 and March 17, 2017 with the following highlights:

• Violence Prevention Training for physicians is well underway. HAMAC endorsed the requirement of all new applicants to the medical staff complete the Workplace Violence Prevention Training on-line modules as a requirement for the initial application, and those in high risk environments take the

classroom training.

Pharmacy and Therapeutics have been doing extensive work reviewing preprinted orders.

### 6.1.1 HAMAC Recommendation(s) for Action / Discussion / Information

• There were no recommendations from HAMAC at this time.

#### 6.2 Audit and Finance Committee

Director Rounsville reported there were no motions requiring approval at this time.

Director Rounsville reported that:

- Financial Summary for period I Iwas reviewed and noted it was tracking to a balanced budget for 2016-2017. Director Rounsville thanked staff and physicians for the hard work in achieving this result thru this very challenging year.
- Laundry services update was reviewed and is positively progressing.
- Internal Audit report was received highlighting work that is being completed around First Nations and Metis Letters of Understanding (LOU) performance.

## 6.3 Quality Committee

Director Burrows reported there were no motions requiring approval at this time.

Director Burrows reported:

- Quality, Risk and Accreditation Portfolio addressed an objective currently under review
  "Foster an engaged workforce to be leaders in identifying and addressing opportunities for
  improvement in their everyday worklife" noting that collaboration with the Southern Medical
  School is taking place.
- Quality forum was attended by Directors Burrows and Wasylyk with an overall focus on engaging patients and families in care.
- Patient Voices Network speaker was very powerful as she described her journey through the mental health system.

### 6.4 Governance & Human Resources Committee

Director Dooley requested the Board's approval of the following motions:

Director Dooley moved, Director Tugnum seconded:

Motion: 17-08 MOVED AND CARRIED UNANIMOUSLY THAT the Board approve the revised Board Strategic Priorities Committee Terms of Reference as outlined in Appendix I.

Director Dooley moved, Director Tugnum seconded:

Motion: 17-09 MOVED AND CARRIED UNANIMOUSLY THAT the Board approve the 2016/17 Annual Statement of Achievements as amended.

Director Dooley reported that:

- Annual Employee and Labour Relations Annual Report was received.
- Board Annual Statement of Achievements was received. Director Dooley recommended that next year's report be distributed to all Board members prior to approval.
- Upcoming agenda items will include:

- Nurse practitioners update
- Care Aides recruitment plans
- Demo of the ePerformance system

### 6.5 Strategic Priorities Committee

Director Wasylyk requested the Board's approval of the following motion:

Director Wasylyk moved, Director Jules seconded:

Motion: 17-10 MOVED AND CARRIED UNANIMOUSLY THAT the Board approve and publicly post the signed 2017/18 Mandate Letter per Ministry requirement.

Director Wasylyk reported:

- 2017/18 Mandate Letter was received and reviewed.
- Legislative Standing Committee Report was received with a number of valuable recommendations noted.

### 6.6 Stakeholders Relations Committee Report

The Stakeholder Relations Committee Report was received as information.

#### 7. REPORTS

## 7.1 President and CEO Report

The President & CEO Report was received as information.

 Chris Mazurkewich drew attention to Registered Nurse Suzette Lloyd who recently won the Canadian Association of Gastroenterology Scholarship for 2017 and Dr. Kevin Clark of Kelowna General Hospital on winning the 2016 Patricia Clugston Memorial Award in Teaching. The Board will send congratulatory letters to these deserving recipients.

Mr. Mazurkewich answered questions from the Directors.

### 7.2 Chair Report

Chair O'Fee reported that his engagement with of community stakeholders and staff will continue into the Spring and Summer.

#### 8. CORRESPONDENCE

None

# 9. DISCUSSION ITEMS

None

### **10. INFORMATION ITEMS**

None

### **II. NEW BUSINESS**

None

#### 12. FUTURE AGENDA ITEMS

None

### 13. NEXT MEETING

Tuesday, June 6, 2017 – 9:00 a.m. – Kelowna, BC

# 14. ADJOURNMENT

There being no further business, the meeting adjourned at 10:15 am.

John O'Fee, Board Chair

Chris Mazurkewich, President & CEO

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