



Saskatoon Regional Health Authority - Public

Minutes

Date: Wednesday, January 27, 2016
Time: 1:00 pm – 3:30 pm
Location: Saskatoon City Hospital Boardroom, Level 2 Executive Offices

Our Values
 Respect
 Compassion
 Excellence
 Stewardship
 Collaboration

Strategic Directions
 Better Health
 Better Care
 Better Teams
 Better Value

Our Mission
 We improve health through excellence and innovation in service, education and research, building on the strengths of our people and partnerships.

Our Promise
 Every moment is an opportunity to create a positive experience in the way we treat and care for people, in how we work and interact with each other, and in how we deliver quality service. We promise to seize every opportunity.

SRHA Members:

Mike Stensrud, Chairperson
 Megan Rumbold, Vice Chairperson
 Gary Beaudin
 Michael Couros
 Garry Derenoski
 Randy Donauer
 Malcolm Eaton
 Sophie Ferré
 Frank Lukowich
 Ghislaine McLeod
 Bobbylynn Stewart
 Glenn Wig

SRMA Representative:

Dr. Joel Yelland, President

SHR Administration:

Julie Beres, Executive Assistant (recorder)

SRHA Regrets:

Gary Beaudin
 Sophie Ferré
 Garry Derenoski (part)

Administration and other Regrets:

Jackie Mann, Dr. Cory Neudorf, Dr. Grant Stoneham
 Dr. Joel Yelland

Presenters and other SHR Staff in attendance:

Dr. Susan Shaw, Dept. Head, Adult Critical Care
 Sherri Julé, Manager, Rural Ambulance Services

Public present:

Media - 2
 Public - 0

GENERAL AGENDA ITEMS

1. Call to Order

The meeting was called to order at 1:00 pm by Mike Stensrud, Chairperson, who welcomed those present. Introductions were made.

1.1 Approval of agenda

MOTION:

That the agenda be approved as presented.

Moved by Ghislaine McLeod, seconded by Malcolm Eaton. Carried.

1.2 Approval of Minutes – November 25, 2015

MOTION:

That the November 25th, 2015 meeting notes are hereby approved as presented.

Moved by Mike Couros, seconded by Randy Donauer. Carried.



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1.3 Disclosure of conflicts of interest

- There were none.

2. Report of the Chairperson

Mike Stensrud tabled his written report which was received for information with the following comment:

- The January 21, 2016 Children's Hospital of Saskatchewan Steering Committee meeting was cancelled.

3. Strategy Wall Walk (Dashboard)

(a) Dashboard

Dr. Petrina McGrath, Vice President People, Practice & Quality, reviewed the dashboard portion of the wall walk information.

(b) 90 Days of Innovation – Ready/Safer Every Day – Update

• Patient Flow Hoshin

- Jean Morrison provided this update.
- Work continues on focus for patients and families.
- The physician guiding coalition was established in the fall.
- The structure and on-going hoshin work was outlined.
- The A3 is being updated and will continue to focus on moving patients out of Emergency in a timely manner, acute care capacity and staying aligned with the provincial plan.
- It is important to ensure good evaluation of this hoshin work is being done.

• Safety Hoshin

- Dr. Petrina McGrath and Dr. Susan Shaw provided this update.
- This 90-day hoshin ended on December 19, 2015 and was reported out on January 12, 2016.
- One focus was to build stronger partnerships with physicians, patients and families.
- During this hoshin, the shared leadership model was trialed. Coaching and leadership development allowed teams to grow quickly and feel like they owned the work. The structure allowed for consistent, clear accountability.
- A safety strategy is a priority in the organization for next year.
- The Quality of Care Committee will report on sepsis and will then report to the Authority.
- Over the next 18 months, this group will be building guidelines and procedures and will build accountability into the system. Alignment around quality and safety will be developed and then tested in one area with a view to replicating it across the whole system.
- This hoshin proved to be helpful in engaging physicians and others around safety.

4. Report of the President and CEO

Andrew Will, Interim President and CEO, provided this report with the following highlights:

• Sustainability Plan

- There has been an excellent level of support on this work. Meetings have been held with Unions to address the financial challenges and the mitigation plan.
- This has been a tremendous challenge. There will be further engagement with the Ministry of Health and other partners and then the plan will be brought back to the Authority for approval of the financial plan.



- The use of predictive modeling on a daily basis aids in monitoring volumes and acuity and cascades up from ground level to senior leadership, allowing SHR to respond to challenges.
- Engagement with other stakeholders will occur. SHR is committed to moving this plan forward as quickly as possible.

This report was received for information.

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MONITORING

5. Performance Monitoring

5.1 Approval / Acceptance of financial statements to December 31, 2015

Nilesh Kavia, Vice President Finance and Corporate Services, provided this report.

- The net operating deficit at December 31, 2015 is \$36.9 Million compared to \$14.5 Million at this time last year.
- SHR continues to see pressures with increases in adult and child patient days, as well as neonatal intensive care unit and newborn days.
- Emergency Department shows a decrease in the number of patients seen and there has also been an increase in the number of discharges from hospital. Overtime decreased in December by 37.7%. SHR is currently determining the impact in dollars regarding this data.

MOTION:
That the Saskatoon Regional Health Authority accepts the financial statements to December 31, 2015, as presented.
Moved by Bobbylynn Stewart, seconded by Megan Rumbold. Carried.

OVERSIGHT

6. Credentials Report – November 26, 2016

Dr. Rob Weiler, Interim Vice President Practitioner Staff Affairs, provided this report by phone:

- He recommended that the SRHA approve the Credentials Report as presented.
- No concerns were identified.

MOTION:
That the Saskatoon Regional Health Authority approves the November 26th, 2015 Credentials Committee Report as presented.
Moved by Glenn Wig, seconded by Ghislaine McLeod. Carried.

DIRECTION SETTING

7. Approval of Emergency Measures Services' recommendation on Advanced Life Support Rate

Diane Shendruk, Interim Vice President Integrated Health Services, along with Sherri Julé, Manager of Rural Ambulance Services, provided this report:

- They are seeking approval for advanced life support rates.
- The intent of increasing the rates is to provide an increased skill set to the rural areas and to include an advanced care paramedic.
- The Ministry approved rate increases in November, 2015 and the increases require SRHA approval. The Ministry needs to be notified of that approval.



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MOTION:

That the Saskatoon Regional Health Authority approves designating Humboldt Ambulance an Advance Level Services - Paramedic Level Ambulance Services in accordance with Saskatchewan Health Guidelines and that they are approved to charge the corresponding rate of \$325 per call and \$2.30 per kilometer.

Moved by Megan Rumbold, seconded by Malcolm Eaton. Carried.

MOTION:

That the Saskatoon Regional Health Authority approves designating Wadena Ambulance a Paramedic Level Ambulance Service in accordance with Saskatchewan Health Guidelines and that they are approved to charge the corresponding rate of \$325 per call and \$2.30 per kilometer.

Moved by Michael Couros, seconded by Megan Rumbold. Carried.

COMMITTEE REPORTS:

AUDIT FINANCE AND RISK

- 8. Report on January 26, 2016 Audit, Finance and Risk Committee meeting**
Megan Rumbold, Audit, Finance and Risk Committee Chair, provided the following report:
- The following were discussed at the meeting:
 - The Financial Sustainability Plan and finances.
- This report was received for information.

QUALITY AND SAFETY

- 9. Report on December 10, 2015 and January 14, 2016 Joint Quality and Safety Committee meetings**
Frank Lukowich, Joint Quality and Safety Committee Chair, provided the following report:
- For December 10, 2015:
 - Received a presentation from Emergency and Air Ambulance
 - The triage captain role is to be implemented at Royal University Hospital in January then rolled out to Saskatoon City Hospital and St. Paul’s Hospital.
 - Work continues on patient flow and the predictive model.
 - The Client and Family Centered Care semi-annual report was received. Their policies have been approved by the province and implementation is due March 30, 2016.
 - Received HSMR, CIHI report and sepsis update.
 - For January 14, 2016:
 - Enterprise Risk Management will report to this committee regularly with the first update at the April meeting. This report will differ from the one that goes to the Audit, Finance and Risk committee to avoid duplication.
 - Committee members will take on-line quality and safety training from March to May of 2016 at a cost of about \$400 per person.
 - Received a presentation by Maternal Services. The More Ob program has realized an improvement in safety culture. Looking into ALARM program (Advances in Labour and Risk Management).
 - Challenges – volumes have increased, large staff turnover in the past has left a fairly junior workforce.
 - Work continues on preparation for the Children’s Hospital. An action plan is in place to reduce the risk of infant security with pods in post-partum.



- o Received an update on the Safer Every Day hoshin.
- o It may be beneficial for this committee to receive updates from Mortality and Morbidity Rounds.

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OTHER BUSINESS

10. Community Inquiries

- There were none.

11. Closing of Meeting

- The meeting adjourned at 2:30 pm.

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**Next meeting:
Wednesday, February 24, 2016
Saskatoon City Hospital Boardroom, Level 2 Executive Offices**

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DATE ADOPTED: _____ February 24, 2016 _____

AUTHORITY CHAIRPERSON: _____

AUTHORITY SECRETARY: _____

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