



Our Values

Respect
Compassion
Excellence
Stewardship
Collaboration

Strategic Directions

Transform the care and service experience

Transform the work experience

Partner to improve health of the community

Build a sustainable integrated system

Our Mission

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

Steering Committee Meeting Minutes

Date: December 17, 2015
Time: 4:15 – 5:30 pm
Location: RUH Telehealth Suite Room 6625
Chair: Jackie Mann, VP Integrated Health Services (SHR)

Attendees: Members: Jackie Mann, VP Integrated Health Services (SHR)
Mike Stensrud, Chairperson (SRHA)
Nilesh Kavia, VP Finance & Corporate Services (SHR)
Adele Riehl, Acting Director Children's Services (SHR)
Leanne Smith, Director Maternal Services (SHR)
Dr. Jocelyne Martel, Physician Dyad/Department Head – Maternal Services (SHR)
Brynn Boback-Lane, President & CEO (CHFS)
Colin Tennent, Associate VP Fac. Mgt. (UoFS)
Rena DeCoursey, Member of the Public

Supports: Craig Ayers, Director CHS Planning (SHR)
Chris Arnold, Project Lead CHS Project (SHR)
Michele Bossaer, Communications Consultant (SHR)
Ken Unger, Interim Director of Financial Planning and Advisory Services (SHR)
Greg Yuel, Board Chairperson (CHFS)
Michelle Mula, Director eHealth Programs (eHealth SK) Director (CHFS)
Susan Antosh, CEO eHealth Saskatchewan
David Henselwood, ZW Project Management Inc.

Advisory Groups: Carol Gregoryk (PAPHR)

Regrets: Karen Lautsch, Assistant Deputy Minister (HEO)
Andrew Will, Interim President & CEO (SHR)
Dr. Laurentiu Givelichian, Department Head Pediatrics (SHR)
Dr. Beth Horsburgh, Associate VP Research - Health (UoFS)
Dr. Roy Chernoff, Dept. Head Family Medicine (SHR)
Dr. Ayaz Ramji (PAPHR)
Charmaine Pyakutch, Member of the Public
Sharon Garratt (RQHR)
Dr. Juliet Soper (RQHR)
Crystal McAra, CHS Program Manager (SHR)
Deborah Jordan, Exec. Director Acute & Emerg (HEO)
Brad Williams, Director Capital Asset Planning (HEO)

Pauline Rousseau, Executive Director Strategy & Innovation (HEO)
David Purdy, Health Facility Planner, Strategy & Innovation (HEO)
Jonathan Harris, Senior Policy Analyst, Strategy & Innovation (HEO)
Wilbour Craddock, Vice President Information Technology (eHealth SK)
Julianne Jack, Director Regional Services, Communications Br. (HEO)
Shirley Xie, Communications Consultant (HEO)
Lynn Redl-Huntington, Communications and Stewardship
Keith Henry, Prime Architect, HDHA/ZGF
Clint Diener, Architect, ZGF

Guests: Lori Chartier, Director eHealth and Health Information (SHR)
Alex Morgun, Director Information Technology Services (SHR)

1. Call to Order

1.1. Approval of Agenda
The agenda was adopted as circulated.

1.2. Approval of Minutes – October 22, 2015
The minutes of October 22, 2015, were approved as circulated.

2. CHS Project Dashboard

2.1. Project Status

- Additional safety measures have been implemented within the Site Safety Plan and include control zones between construction site, hospital and surrounding traffic; plywood placed on ground and main floor RUH

windows facing the construction site; ongoing field level risk assessment updated continually for specific tasks; establishment of Site Safety Committee involving Graham Construction and SHR personnel; and closure of ground level pedestrian pathway along construction site.

- The current major construction emphasis is creation of a permanent, substantial retaining wall along the driveway at Ellis Hall to allow a shift in the roadway to the west, allowing Phase 2 of piling work to be completed on the east side of the roadway.
- The issue of two piles being slightly out of place has been resolved with the installation of four new smaller piles to be integrated with the existing two using a revised pile cap design.
- The contract between Graham Construction and Saskatoon Regional Health Authority has been officially signed.
- A number of items to further reduce the contract price are being reviewed. Pricing adjustments to date total \$1.15 million.

#### Our Values

Respect  
Compassion  
Excellence  
Stewardship  
Collaboration

**Action:** Mike Stensrud expressed interest to be involved when required in the price reduction process.

#### 2.2. Strategic Project Workplan Updates

- Leanne reported on the four milestones with “red” statuses: trials for Single Room Maternal Care simulation scheduled to commence in Q4 will now occur early in the new year; Maternal Services patient flow work has been impacted by an outstanding change order request; Pediatric ED bedside registration is being reassessed to determine go-forward approach for Adult ED; in-room Kanban mockup trials have not been robust enough and the strategy is being revised.
- As well, a few milestones aligning ITS/eHealth workplan deferred to 2016/17 will be removed from this 2015/16 status report as they will be part of the 2016/17 integrated workplan.

#### Strategic Directions

Transform the care and service experience

Transform the work experience

Partner to improve health of the community

Build a sustainable integrated system

#### 2.3. Critical Risks

- CHS Risk Management group meets monthly to identify risks related to CHS, and when necessary, have them referenced within the SHR corporate risk registry. The most current critical risk report reviewed at the Project Executive Team meeting yesterday was distributed ahead of the meeting.
- Operational Funding – a list was submitted June, 2015, but concerns over the amount was raised; the process is being reviewed and a new template being developed; meetings with Directors will take place over January and February to gain their feedback and solidify the list; inclusion in the April budget submissions is the targeted deadline.
- Parkade Repair Work – 1984 parkade repair work is underway; scope and design for 2002 parkade repairs are underway.
- Heating/Cooling and Emergency Power Generation – these two risk items are tied together and work continues around the options.
- IT Capital Funding – the risk is the absence of funding commitment beyond 2015/16; starting next year’s work puts the project in a precarious position.

**Action:** Michele will develop a background document to assist CHFS in fielding questions about ongoing parkade work.

#### Our Mission

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

#### 3. Change Management Overview

- The post-contract contingency would be the funding source for any construction cost scope changes. The contingency approved within CHS construction budget represents approximately 4.5% of the construction cost. This amount is to cover primarily unforeseen conditions and on-going required construction cost adjustments to deliver approved project scope on budget.
- Design change request process was reviewed for the Steering Committee as outlined on the flow diagram distributed for the meeting.
- When a project scope change is identified by an operations director, it is presented to CHS Project Executive Team for approval to proceed with preliminary analysis and estimate of design change impacts. This information is presented again as an SBAR for approval of a detailed analysis; if approved the updated change request is recommended to the Project Executive Team for consensus support, followed by presentation to the CHS Steering Committee, where if supported, will be vetted at the Senior Leadership Team level. If the change request impacts construction, then a construction change request will be implemented.
- In conjunction with design change requests, the construction change request process runs throughout the whole construction period involving the development of a price request which is submitted to the general contractor who will validate the price, and if approved, it goes forward as an official change order to the contract.

#### Our Values

Respect  
Compassion  
Excellence  
Stewardship  
Collaboration

#### Strategic Directions

Transform the care and service experience

Transform the work experience

Partner to improve health of the community

Build a sustainable integrated system

#### Our Mission

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

#### 4. Education Session: IT Planning and Process for CHS

- An education session was presented for the purpose of better understanding the information technology and eHealth planning taking place for the CHS facility. A briefing document, prepared by Lori Chartier and Alex Morgun was distributed with the meeting materials.
- Lori Chartier, Director of eHealth and Health Information, is responsible for the electronic health strategy and clinical application; Alex Morgun, Director of Information Technology Services, oversees networks and infrastructure, and Michelle Mula, Director of eHealth Programs with eHS, works closely with Lori and Alex in reviewing and validating the CHS IT plan, and provides liaison with the Ministry of Health. As well, Wilbour Craddock, Vice President Information Technology with eHS, works closely with Alex in delivery of infrastructure needs.
- The challenge for the CHS IT plan was ensuring the design of the building not only supports today's technology, but also supports the technology in 2025, and beyond.
- Originally the CHS was designed on a vision of being a paperless, digital hospital and clinical work flows were designed around that concept. The reality of what that would cost caused the Region to take a step back and develop a staged approach.
- One key principle prevailed: all necessary information technology infrastructure for the future vision had to be incorporated in the construction, as CHS is designed with no interstitial space.
- The first three lines of the timelines spreadsheet represent the network infrastructure, or the key to everything that needs to be achieved, and can be compared to the structure of a house, or the spine of the body, as a robust wireless network needs to be in place to support all applications.
- In working through a staged approach, all plan processes for information flow were re-examined and critical applications made the list and informed the design development process in 2013. Through this process it became obvious that the physical space had to locate the planned technology as well as the paper. In addition, critical IT upgrades and infrastructure work had to be kept up to date and completed as planned until move-in.
- As a result of this review process, some new applications were requested and a rigorous screening process was applied. The CHS IT Plan list, including infrastructure requirements, was then reviewed through the Project Executive Team using the criteria of patient safety and whether it would be possible to function without it, and resulted in the final list.
- Technology has the power to transform the way care is delivered, and Lori described the future patient experience for an expectant mom in the new hospital, for a child coming for follow-up post-discharge visits, for a child arriving in ED because of a chronic illness, and for a child that was in a car accident and is recovering from surgery in the pediatric unit. The CHS IT plan is a no-frills list that will deliver much of the experience that families and clinicians want to see.
- Lori made the analogy of launching a cruise ship with no rooms. The CHS IT workplan has already launched but faces the immediate critical risk of the lack of multi-year funding. Several Canadian sites with a high level of automation in place have been visited which helped confirm the validity of these numbers. Susan Antosh responded that eHS also does not have the funding, but are working with the Ministry to achieve that funding.
- A regular update on capital funding for IT will be contained in the Dashboard report under the Critical Risk registry.

#### 5. CHFS Update

- The 2015 Gratitude Report has been published, and is available on the Foundation website at [childrenshospitalsask.ca](http://childrenshospitalsask.ca).
- Brynn expressed thanks to the Children's Hospital Foundation of Saskatchewan Board of Directors for working to achieve a new \$25 million commitment towards the Children's Hospital.
- Over 12,000 donors took part in fundraising throughout the province this past year, 300 community fundraiser events were held and 10% were organized by children and exceeded annual budget expectations!
- In addition, \$10 million of these funds were received from one donor and his family in Swift Current, highlighted in the 2015 Gratitude Report.
- The new capital campaign has just been launched: "We Can't Wait!" New materials for the campaign highlight Maternal Services imagery and information, along with Pediatrics.
- Over \$1 million was disbursed towards needs in 2015: 16% for patient care, 43% for research, and 41% for capital equipment and technology.

## Our Values

Respect  
Compassion  
Excellence  
Stewardship  
Collaboration

## Strategic Directions

Transform the care and service experience

Transform the work experience

Partner to improve health of the community

Build a sustainable integrated system

## Our Mission

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

- In Signature events, Regina Radiothon exceeded expectations and raised over \$540,000, Saskatoon Radiothon is taking place on February 4 to 6, followed by the Jeans & Jewels Gala on April 22, which had a record number of attendees this past year.
- The Foundation is ahead of budget on all Children's Miracle Network partners; and a new three-year agreement has just been signed. Children's Hospital Foundation of Saskatchewan is the only charity signed up with CMN in the province, which is vital for providing a national acceptance with corporate entities.
- Members of the Steering Committee will be invited to a donor wall presentation by fd2s on January 21. This will be the first presentation of three different views of concept delivery.
- On behalf of our Board and staff, Brynn expressed thanks in accomplishing all that has happened this past year and how important it is to have everyone's collaboration in achieving these goals.

## 6. Communications Update

- Construction updates have been issued regularly and an update on the RUH parkade will be issued in the near future. It will be a very busy site over the next few weeks beginning in January when the roadway changes.

## 7. Adjournment

### 7.1. Key Messages

- Jackie Mann thanked the CHS Steering Committee and the Children's Hospital Foundation of Saskatchewan for the work that has been accomplished this past year, stating that it was a year full of successes and hurdles.
- Thanks as well to the partners in this Project: Children's Hospital Foundation of Saskatchewan, the University of Saskatchewan and colleagues in the Ministry of Health and the Prince Albert and Regina Qu'Appelle health regions.
- Congratulations to the Children's Hospital Foundation of Saskatchewan for an amazing year!

### Next meeting:

January 21, 2016, 4:15 – 5:30 pm  
RUH Telehealth Suite 6625 / TCD Staff Development Centre