Report from the Pembroke Regional Hospital to the Catholic Health Sponsors of Ontario / Meeting of the Members June 24, 2019 Report for Fiscal Year 2018 – 2019

We are pleased to submit this report from the Pembroke Regional Hospital to the Members of our Corporation and Sponsor, the Catholic Health Sponsors of Ontario, for the fiscal year ending March 31, 2019. As requested, this report, which provides a status report on our Board Formation Program, our organization's response to the Ontario government's healthcare reform legislation and the identification of risks and mitigation strategies, has been reviewed and approved by our Board of Directors at its meeting on May 29, 2019.

1) Board Formation Program: A status report on the work being done to develop an ongoing Board Formation Program.

While we are still early in our journey of developing a more formal Board Formation program, we are eager to continue to move forward with this important endeavor.

We believe that our more formalized Board Formation Program is being built on an incredibly strong foundation that we have in place here at the Pembroke Regional Hospital, including:

- A Mission Statement that explicitly identifies that "following Catholic tradition, we will meet the physical, emotional, and spiritual needs of all."
- Expressed values of Compassion and Caring, Excellence and Innovation, Social and Fiscal Responsibility, Sacredness of Life, Mutual Respect and Community Spirit.
- A Spiritual Care Service which provides for the needs of those with a sacramental faith tradition through pastoral daily visiting supported by a strong volunteer visiting program.
- A Chapel, which is available as a sacred space for private prayer and celebrations of Mass weekly and with various services held on special occasions (e.g. a celebration of our foundress Saint Marguerite d'Youville, a volunteer appreciation service, a celebration of Mission Awareness Week, Ash Wednesday, an advent wreath celebration and mass, etc.)
- A bi-annual ecumenical memorial service for those who have died in our care.
- The dissemination of the Catholic Health Ethics Guide within our facility and its ongoing use as a guide to our Board and our Board Ethics Committee.
- A contract with Dr. Hazel Markwell for ongoing support to the organization on ethical matters directly related to care and educational offerings.

To date, we advanced our Board Formation through:

- Having a focused discussion at our Board on the guidance document "Formation for Boards of Directors in Catholic Health Care".
- Tasking our Board's Governance Committee with the establishment of a Formation Sub Committee which has responsibility for the delivery of a Board Formation Program.
- Sending a delegation to the CHAC's Annual Conference entitled "Towards Formation: Creating the path to strong lay leadership of the healing ministry of Jesus Christ in Canada" in May, 2018.

- Developing a common understanding of the need for "formation" at our Board through the viewing of a video at one of our Board meetings by Fr. Charles Bouchard OP entitled "A Brief Introduction to the Idea of Leadership Formation for Catholic Health Care".
- Organizing a Board presentation on the early work of the Grey Sisters of the Immaculate Conception in order to ground our Board members in their legacy.

We are anxious to learn how some of our other sister facilities within our Catholic family of providers have advanced their own Board formation programs in order to inform our ongoing work. It would be helpful if CHSO could provide a summary of what other sponsored organizations are doing in this regard as we would benefit greatly from this shared learning. As well, we understand that the Catholic Health Association of Ontario has as one of its strategic priorities "the development of a consistent national and provincial formation program" and we are anxious to learn more about this as it develops.

2) The People's Health Care Act, 2019: Pembroke Regional Hospital's early response

The People's Health Care Act, 2019: A short summary of actions our organization is taking in response to the Ontario Government's healthcare reform legislation. In particular, an outline of the health service providers expected to be our organization's partners, and the actions your organization is taking to support the integration of care in your local community and potential impact on your organization's Catholic identity.

On April 3rd the Ministry of Health and Long-Term Care released a call for expressions of interest for the development of Ontario Health Teams (OHTs), including a document entitled "Ontario Health Teams: Guidance for Health Care Providers and Organizations". This document sets out the process involved in becoming an OHT.

It includes:

- the components of the model;
- the expectations for OHTs at maturity;
- readiness criteria to become an OHT; and
- the assessment process to enable all Ontario health providers to improve readiness.

The government recognizes that it will take a number of years for OHTs to be fully operational across the province and they have now initiated this first step of calling for "readiness assessments" by groups of providers who wish to be considered as early adopters.

These readiness assessments were to be submitted by May 15th and those selected to go forward in the first wave are to be notified by June 3rd. The selected proponents will be asked to submit a full proposal by July 12th and the first wave of OHTs will be announced in the fall of 2019.

In our view, the changes being initiated by the provincial government hold much promise for health system improvement and could result in a better patient experience and more seamless and coordinated care for patients; however, there are still many unknowns and the process at this early stage is very much a bottom up solicitation of ideas rather than a top down prescriptive approach.

Despite the unknowns, PRH, given its position in our local health care system, believes that it must respond to this call for leadership in system change and has worked closely with its partners to submit a readiness assessment for an Upper Ottawa Valley OHT by the May 15th deadline.

The Upper Ottawa Valley Ontario Health Team (OHT) is comprised of representatives from the Petawawa Centennial Family Health Centre, the Pembroke Family Medicine Teaching Unit, the West Champlain Family Health Team, the Whitewater Bromley Community Health Centre, the Algonquins of Pikwakanagan, Carefor Health and Community Services, the County of Renfrew Emergency Medical Services, Eastern Ontario Regional Laboratory Association, LHIN Home and Community Care, Marianhill Long Term Care and Community Services, Miramichi Lodge - County of Renfrew Long Term Care, Mental Health Services of Renfrew County, the Phoenix Centre for Children and Families.

The group met on a weekly basis leading up to the submission and are continuing to meet to advance the priorities as established through our collaboration. The partners continue to be engaged, enthusiastic and committed to working together over the long term.

It is important to note that the Health Links initiative that PRH has been leading for Renfrew County has been foundational and has helped to inform and solidify our readiness assessment. Health Links is a powerful example of voluntary collaboration between partners that truly benefits patients which has expanded over time and continues to work extremely well.

It must also be noted that the focus of Ontario Health Teams is on better integration of care for distinct populations at the local level and there has been no information or guidance material released yet on how care delivery for regional specialist care will be integrated across the various Ontario Health Teams. PRH continues to keep the lines of communication open with The Ottawa Hospital, CHEO and other tertiary and speciality providers in Ottawa on this aspect of the emerging model.

With respect to Catholic identify and potential risks to Catholic healthcare, the senior leadership team at PRH initiated a consultation with Father Frank Morrisey, an esteemed canon lawyer, to explore potential points of contention in the establishment of OHTs. Most particularly, advice was sought on the question of whether a Catholic organization, such as PRH, could be a lead agency and fund holder for an OHT for all health services that are delivered within a geographic area by an OHT, which may include those at the beginning and end of life which are problematic for Catholic healthcare. Father Morrisey indicated that he had been exploring this very question on behalf of the CHAO and the Ontario sponsors, and indicated clearly that it was his opinion that a Catholic hospital could be the lead agency and fund holder for an OHT, as being a fund holder would not amount to material cooperation in these acts. As a result of this advice, we proceeded with confidence in the submission of an OHT readiness assessment with our partners.

We believe that we have submitted a strong and compelling readiness assessment for an Upper Ottawa Valley OHT. However, even if we are not chosen to submit a full proposal in the first wave, we believe that it is important to signal our early interest. We also believe that the developmental work involved in preparing a readiness assessment at this time and signaling this early interest will serve us well during the "continuous intake" process of establishing OHTs across the province over time.

3) Identification of Risks and Mitigation: What significant risks are being experienced by the Pembroke Regional Hospital?

The Board of the Pembroke Regional Hospital is of the firm belief that significant risks within our environment are being proactively identified and actively mitigated on an ongoing basis. The Board and the management team are very much aware that when risk issues arise, they have the potential for damage to the organization and by extension, to CHSO as the corporate members and sponsor, and to Catholic health care more generally.

Pembroke Regional Hospital maintains comprehensive Insurance for both liability and property to mitigate any risk that can be covered by insurance.

Significant risks are reported by management either directly to the Board or through the Board's committee structure. Existential risks, should they arise, would be proactively reported to the CHSO, as the Members of our Corporation, and organizational risks of a serious but lesser nature are reported through the regular communication channels established between CHSO and our CHSO Designate.

Under the Excellent Care for All Act (ECFAA) management is required to report any "critical incidences" to the Medical Advisory Committee and to the Board of Directors. There have been five critical incidents reported in fiscal 2018-19 (four of which related to patient falls) resulting in significance patient harm. As a result, patient falls risk continues to be identified as a top risk for PRH and risk mitigation countermeasures have been identified within our Quality Improvement Plan for 2019-20. And, while each of these critical incidents is taken seriously and followed up upon rigorously, these critical incidents, either individually or taken collectively, are not deemed to represent an enterprise risk.

PRH monitors risk on an ongoing basis through the use of an electronic Integrated Risk Management (IRM) system developed by our insurer, the Health Insurance Reciprocal of Canada (HIROC). This system assists us with the identification, assessment, management and reporting of key organizational risks. It is a continuous, proactive, systematic approach to identifying, assessing, understanding, acting upon and communicating risk from an organization-wide perspective.

Significant risks for PRH have been noted on the attached Risk Identification Worksheet in Appendix 1.

Thank you for receiving this Annual Report from the Pembroke Regional Hospital. The Board of Directors of the Pembroke Regional Hospital would like to take this opportunity to thank its Members and staff of CHSO for their support and guidance over the course of the past year. We value our relationship and look forward to our work together in the year ahead.

This report was reviewed and approved by the Pembroke Regional Hospital Board of Directors at the meeting held May 29, 2019.