

**Report from the Board Chair and CEO of Pembroke Regional Hospital to the
Catholic Health Corporation of Ontario / Meeting of the Members of PRH
June 23, 2015
Report for Fiscal Year 2014 – 2015**

Governance and Board Development

We received the CHCO's *Signals of Organizational Performance* core document in December 2014. The tool was discussed in detail at the Board Governance Committee's meeting in early January 2015 and brought forward to the full Board at the end of January. Throughout our discussions, it was clear that our current practices are well aligned with this important *core* document.

It is interesting to note that our existing Board committee structure mirrors the elements of the Signals of Organizational Performance Scorecard: Our Board Ethics Committee has responsibility for ensuring that our organization is functioning in a manner consistent with our Catholic tradition and that the Catholic Health Ethics Guide is integrated into our daily activities; our Board Patient Care, Quality and Risk Management Committee has responsibility for the oversight of quality, risk management and our patients' experience; Our Board Resource and Audit Committee provides stewardship of our human and financial resources; and our Board Governance Committee, in concert with our Executive Compensation and Evaluation Committee, concerns itself with employing sound governance and leadership practices.

The *Signals of Organizational Performance* core document will be included in the manual we provide to all Board members, which is updated annually, and will be highlighted in the orientation session for new Board members.

The Board of Directors of the Pembroke Regional Hospital prides itself on its dedication to sound strategic planning, broad organizational oversight, financial stewardship, governance best practices and on providing ongoing continuing education opportunities for our Board members.

With respect to the latter, it is our practice to provide education sessions for our directors at each Board meeting. We also strive for certification by all of our directors in the "Essentials" and the "Advanced" certificates in governance from the OHA's Governance Centre of Excellence. PRH regularly sends a small delegation of directors to the CHAO annual convention and to the OHA's HealthAchieve and to various other learning opportunities.

In 2014-2015 we have also:

- Conducted an audit by our Board Governance Committee of our Board policies and practices, using tools available in the OHA Guide to Good Governance (April/May 2014). We documented reviews and updates to our library of policies. One of the adjustments arising from this exercise led to our including an attendance record in our monthly Board packages.
- Implemented the newly developed OHA Board self-assessment tool in June 2014. Previously, we conducted our own internally developed surveys annually but we did not have performance benchmarks to compare ourselves against. This standardized OHA tool will provide us with a better understanding of our Board's performance over time and relative to our peers across the province.

- Underwent a survey by Accreditation Canada (September 2014). Their team of surveyors with the Qmentum program reviewed our Board committee structures, balanced scorecards and reports and noted the following:

- 100% of the 78 Governance standards and criteria met expectations.
- The surveyors highlighted our commitment to cascading the strategic plan and mission, vision and values throughout the organization. They further noted that “the mission resonates with the leaders and staff members of the organization and demonstrates a commitment to the PRH community, social responsibility and faith.”
- All criteria for ‘Resource Management Priority Process’ were met and the surveyors noted that they were impressed and envious of the solid financial management and position of the organization. They also offered encouragement to the Board and leaders to coach, support and mentor other organizations during the change in the new funding formula in Ontario.
- Our organizational ethics framework was identified as being one of our strengths as was the functioning of our Board Ethics Committee. The surveyors noted that there is evidence of the framework being employed throughout the organization and commended us on the resources we have in place including our access to a renowned bioethicist and the strength of the CHAC’s health ethics guide.
- Community feedback during the community partnership meeting was complimentary of the PRH’s collaborative relationships and there was evidence that there is a focus on putting the community and our patients’ needs first. The surveyors also noted that there is always a positive desire from the PRH leaders and teams to participate, take action and collaborate, and to proactively implement best practices in order to address gaps in community care.

- Held a joint weekend retreat in October 2014 with the PRH and Marianhill boards and senior leadership teams which was facilitated by Hazel Markwell to work through all three modules in the CHAO “Mission Leadership: Governing in Catholic Health Care Organizations” program. Our Board found this to be a valuable exercise that also addressed the recommendations of Accreditation Canada that we explore discernment practices for the ethical implications of business decisions in the current fiscal climate. The program objectives included:

- Supporting the ability of boards to make decisions that take into consideration the value-added contribution of Catholic health care.
- Highlighting the values upon which Catholic health care institutions were built.
- Considering the ways in which these essential elements of Catholic health care are integrated into daily decisions and actions of CHAO members.

- Held an education session on our fiduciary duties by Josh Liswood, senior partner with Miller Thompson LLP (November 2014).

- Took on the role of lead agency for the implementation of the North Renfrew Health Link as well as a leadership role in its Collaborative Governance Committee which partners with more than 30

other agencies in this region for an improved patient experience along the continuum of care (January 2015).

Sponsorship, Mission and Quality

Our Board Members and Senior Leadership Team Understand What It Means to be a Catholic Healthcare Organization

The care provided at the Pembroke Regional Hospital is understood by our leaders to be a continuation of the healing ministry of Jesus Christ. Our leaders promote a culture that supports Catholic ethics, values and beliefs as we strive to provide wholistic care for our patients... body, mind and spirit.

To be considered for a position as a director on our Board, applicants must commit to respect the mission, vision and values of the Pembroke Regional Hospital and to adhere to the policies of the Board and the Hospital. Those applying or re-applying to the Board must sign a Board application form which asks them to confirm that they are able to commit to our mission, vision and values. This is also reconfirmed and explored in more depth in face to face interviews. New Board members also receive an orientation to Catholic sponsorship and to the Catholic Health Ethics Guide at an in-depth orientation session prior to them commencing their work with us.

Our Chief of Staff has a role to ensure that all Chiefs of Departments are fully aware of their responsibilities as physicians to the mission, ethics and values of the Hospital. All management and supervisory staff are assessed through the performance appraisal process on mission and values integration. The CEO and Senior Leadership Team are assessed on their living and modeling the mission as well as on key leadership competencies.

Continuous reflection on our mission, vision and values is fostered and encouraged at the Pembroke Regional Hospital, at all times and across all levels of the organization.

Any potential partnerships are also considered in light of our mission and values. For example, all affiliation agreements and service agreements are reviewed and signed by the CEO or delegate and, prior to signature, a review is conducted for any conflicts with our mission and values.

Our Pastoral Care program provides spiritual support to a diverse population and offers a variety of services to meet the spiritual needs of all. We continually strive to understand and respect the cultural and spiritual beliefs of those who come through our doors. To this end, we have held a series of sessions for our staff on the beliefs of Catholics and people of various Christian faiths, the Jewish and Islamic faiths and of our local First Nations community, with a particular focus on care at the end of life.

How We Tell Our Story as a Catholic Healthcare Organization

Our history and the legacy of the Grey Sisters of the Immaculate Conception and their foundress Sister Marguerite d'Youville are very much a part of the care we provide.

We share our founding story at our orientation sessions for new staff in order that our new employees develop a sense of context for their work and its importance. This, along with an

overview of our mission, vision and values, is conducted by the President and CEO at each session.

The Hospital's mission statement is forthright about our delivery of care in the Catholic tradition. Our mission, vision and values are prominently displayed throughout our facilities, are included on our website, and are highlighted in our Annual Report to the Community and in advertisements for Board new members.

Other ways in which we tell our story as a Catholic healthcare organization include:

- A portrait of our foundress is featured in our Tower A Rotunda.
- A large cross is present on the outside of our building.
- A grotto is present on our grounds.
- We celebrate Mass every Wednesday from September to June.
- Special prayer services are held for special feast days, Advent and Lent.
- We have a very strong Pastoral Care program which features:
 - Availability of a Chapel for official ceremonies, private prayer and celebrations of Mass or other liturgies. Patients, families and staff of all denominations are encouraged to use this sacred space.
 - A strong pastoral care volunteer visiting program.
 - Bi-annual Ecumenical Memorial Services for the family and friends of those who have died in our care.
 - Comprehensive orientation programs for pastoral volunteers, on-call clergy and area clergy.
 - A 10-week Pastoral Care Volunteer Visitors' Education Program.
 - Oversight of Christmas decorating in common areas to ensure that the religious aspect is the main focus.
 - A Christmas program for patients and staff.
 - Sacred writings for patients including various Bible versions in English, some in French, the Qur'an in English, French and Arabic, the Book of Psalms – A Translation According to the Hebrew Text, The Book of Mormon, prayer books, religious reading and also meditative and music tapes.
 - Multifaith symbols are available to patients at their bedside including rosaries, medals, scapulars, crucifixes, Holy Water, dream catchers and prayer mats.

We also have a strong Organizational Ethics Framework based on Catholic social teaching (see attached appendix A)

Quality Improvement

The Hospital has made further progress in using LEAN as a performance improvement system and all of our quality improvement indicators are aligned with the strategic priorities of the Board and the "driver metrics" of the organization. The nine organizational units that have now adopted LEAN management are driving performance improvement on those driver metrics. Our balanced

scorecard aligns with those drivers as do the priority indicators of our annual Quality Improvement Plan (QIP).

Achieving improved patient flow through a reduction in acute length of stay and focusing on appropriate admissions and readmissions continues to be a priority for PRH. The work we have done in 2014/15 further shortened the wait time for admitted patients in the ED and we have been consistently below 20 hours in the last 5 months of fiscal 2014/15. In addition, we have been successful in decreasing our acute length of stay on our medical units from 7.4 days in 2013/14 to 6.5 in December 2014. All of this has been contributing to wait time reductions in the ED.

We will continue to work on the 90th percentile Length of Stay for admitted patients in ED to ensure it stays under 20 hours. We believe our work on length of stay for admitted patients in the Medical Program should help to successfully address this. Freeing up inpatient beds will allow us to move patients out of the ED to a bed more quickly upon admission.

Another significant quality initiative has been our successful effort in reducing the rate of hospital-acquired C-difficile.

We continue to be very successful with our “Home First” implementation and our “ALC to Long Term Care” rate is the lowest in the Champlain LHIN.

PRH is leading the Health Links initiative in our geographic area and, along with a group of health care partners, has worked on the development of a business plan for addressing the most high-needs/complex patients who contribute to both ALC days and high readmission rates. Clearly the health care system is not adequately addressing the needs of our most complex patient populations and we are working to find a care model that will allow these patients to live in their home environment without hospitalization for as long as possible.

The collaboration among our regional partners, including primary care providers, has been very encouraging. We believe that Health Links, together with the hospital-based quality improvement initiatives that we are undertaking will serve to significantly improve both the quality of care and the patient journey for people in our community.

Financial Stewardship

In terms of the financial challenges, the Hospital is currently entering our fourth fiscal year without receiving any inflationary funding from the Ministry of Health and Long-Term Care. At the same time, our collective agreements for unionized staff continue to have an inflationary element built into them which puts our inflationary wage pressures at approximately \$1.2 to \$1.5 million dollars per year. To date we have been able to manage these inflationary pressures within our current funding allocation without service reductions to the community.

We are in a somewhat unique position in that the elements of Health System Funding Reform have netted us more funding than we would have received in the previous global funding environment. As a result, at this point, there are no significant short-term financial risks.

At this time, the Pembroke Regional Hospital has no anticipated capital purchases which would require CHCO approval.