

MEETING MINUTES

OF THE BOARD

Minutes of the meeting of the Board (Board) of Alberta Health Services (AHS) held at the Peter Lougheed Hospital, 3500 - 26 Avenue NE, Calgary, Alberta, on January 27, 2011 at 1:15 p.m., Mountain Standard Time.

Present:

Board Members: Mr. Ken Hughes (Chair)
Ms. Catherine Roozen (Vice Chair)
Ms. Teri Lynn Bougie
Mr. Strater Crowfoot
Dr. Kamallesh Gangopadhyay
Mr. John Lehnert
Ms. Irene Lewis
Mr. Stephen Lockwood
Mr. Don Sieben
Mr. Gord Winkel

Management: Dr. Chris Eagle, Acting President & Chief Executive Officer
Ms. Tamara Shawa, Corporate Secretary

Mr. Hughes acted as Chair of the meeting and Ms. Shawa acted as Secretary.

Mr. Hughes called the meeting to order at approximately 1:15 p.m. Notice of the meeting had been properly given and quorum was met.

1. Review of Agenda

UPON MOTION duly moved, seconded and unanimously carried, the Board approved the agenda in relation to the January 27, 2011 meeting of the Alberta Health Services Board.

2. Conflict of Interest

Mr. Hughes requested that any conflicts of interest, other than those previously declared, relevant to the meeting or items noted on the agenda be declared. None were declared.

3. Approval of Minutes

UPON MOTION duly moved, seconded and unanimously carried, the Board approved the minutes of the meeting of the Alberta Health Services Board dated December 2, 2010, in substantially the form before them; and directed the Chair of the Alberta Health Services Board and the Corporate Secretary to sign the minutes in substantially this form and deliver a copy to the Minister of Health and Wellness.

4. **Comments to the Board**

a) **Chair's Report**

The following is an abstract of Mr. Ken Hughes', Board Chair, remarks at the meeting. It is not an official transcript:

Mr. Ken Hughes, Board Chair, welcomed everyone to the Peter Lougheed Centre. He said that the public board meetings are moved to locations around the province, videotaped for posting on the website and telecast to staff and physicians in order to be as accessible as possible.

He said that the Board also tours facilities and meets with local health care providers in order to learn firsthand about the challenges, opportunities, and successes in each community. He emphasized the importance of making decisions in a public meeting in order to be transparent and accountable, and so that the decisions can be recorded as a matter of the public record.

He stated that he would like to start the first Board meeting of the New Year by reflecting on two milestones in 2010, and what they mean going forward for quality, access and patient care.

He advised Alberta Health Services has started 2010 with the announcement of an unprecedented five-year funding agreement with the Government of Alberta. He said the announcement was closely followed by a series of initiatives directly linked to reducing wait times and increasing access. It included ramp-up in surgical services and an increase in cataract surgeries, which he advised Dr. Eagle would speak to.

Mr. Hughes noted that 2010 culminated with the announcement of a Five-Year Health Action Plan, building on that momentum and driving us forward.

He advised that 2011 would accelerate these and other initiatives toward Alberta Health Services' goal of becoming the best-performing, publicly funded health system in Canada.

Highlights of the Five-Year Health Action Plan include: reducing wait times for hip surgery, quicker access to radiation oncologists for patients, and greater emphasis on wellness to keep Albertans healthy.

He further advised that the Five-Year Health Action Plan has both long and short-term targets. They are backstopped by \$1.3 billion in long-term capital commitments, including, for example, as was announced in December, \$208 million in funding for the Tom Baker Cancer Centre in Calgary and the Cross Cancer Institute in Edmonton. The cancer corridor includes the addition of two more radiation therapy centres, one in Red Deer and one in Grande Prairie, in addition to the centre we opened in Lethbridge last summer.

Mr. Hughes stated that Alberta Health Services will meet and exceed this year's commitment to open at least 1,000 new continuing care beds in each of the next three years. These beds allow

us to grow where seniors tell us the need is greatest – new designated assisted living beds that give seniors the greatest degree of independence AHS can provide.

Importantly, this also provides much greater choices for seniors, with respect to the types of accommodations they can choose. He said all of these advances can be directly linked to stable, long-term funding that enabled us to set a new course in 2010 and drive forward in 2011 and beyond. These advances are also directly related to the decision to amalgamate the former regions and other health entities, because we are freeing up administration costs and redirecting them into health care. I would like to thank Premier Ed Stelmach for his courage and determination in creating Alberta Health Services. His personal intervention was also critical in providing the five-year funding stability. I would also like to thank Finance Minister Ted Morton for the five-year funding commitment he delivered in the provincial budget in early 2010.

Mr. Hughes provided the Board with an example of the impact of amalgamation. He advised the Board was provided with a table that illustrated the cost savings realized by reducing management costs across the system. Prior to regionalization, the former health entities spent \$57.5 million for remuneration for the Presidents and CEOs, their direct reports and other direct managers. Today that figure is \$16.5 million. The number of Vice-Presidents was effectively cut in half, from 144 before amalgamation to 77 today, leading Canada's largest health system with 90,000 employees.

He commented that the bottom line was that AHS is now spending 29 percent of what was used to spend on senior administration, or in other words, a 71 percent cut in these costs.

Mr. Hughes spoke about community engagement and advised that at the last Board meeting the Board spoke about an expanding role for the 12 Health Advisory Councils around the province. He advised that since then, Dr. Eagle, the Board Health Advisory Council Committee Chair John Lehnern, and I have spoken with the council chairs and he was pleased to advise that they are keen to work more closely with AHS and an action plan was being developed that invites the HACs to participate in community engagement with respect to the Five-Year Health Action Plan.

Mr. Hughes noted that on the staff engagement front, Board members today were proudly wearing **Be Part of It** buttons – hot off the press so to speak just yesterday – marking the launch of a staff-led engagement initiative here at the PLC. This is the “brand” they have developed for the engagement projects that are unique to PLC and if you're interested get yours quickly as I'm told they're going fast. He advised that Dr. Eagle would provide further comments that staff engagement is fundamental to achieving the ambitious goals AHS have set.

Mr. Hughes provided two examples that illustrate the link between what AHS does at a strategic level here on the Board in partnership with senior administration, and how it makes a difference

in the quality of care for Albertans. I've come across these examples in my own travels in Alberta, meeting with frontline health providers.

He stated the first was the Renfrew Recovery Centre, Southern Alberta's only medically supported detox centre and a partnership between Calgary's Renfrew Recovery Centre and an AHS mental health team based at the Sheldon M. Chumir Health Centre in Calgary.

Since 2007, a mental health therapist from the Active Treatment Team at the Chumir has been going to the Renfrew Centre once a week to work with clients. The therapist, Marilyn Arcand, meets them one-on-one if they choose and also provides group sessions in conjunction with the addiction counselor. The partnership involves an addictions counselor from the Renfrew Centre going to the Sheldon Chumir clinic once a week to meet with clients who may have addiction issues. Mr. Hughes advised that this is a cost effective, mutually supportive, partnership-oriented approach for both centres, recognizing that addictions and mental health issues often go hand-in-hand.

He advised the second example is from High River, where three family doctors have recently committed to practising there over the next five years at a new medical centre designed to improve access to primary care and reduce emergency department pressures in that community.

The three, recruited from Alberta, Newfoundland and Ontario, will open practices at the Charles Clark Medical Centre when the facility opens next fall. They are all also providing services at the High River General Hospital, joined and mentored by established local doctors also moving into the Centre.

He commented though that is not where the story begins or ends, and a group of 18 High River physicians are the driving force behind the medical centre project. They are spearheading this project by investing their own money to fund construction of the medical centre, and to that end they have forged partnerships with the Town of High River for land and the municipal district for financing, along with the local hospital foundation and the local Rotary club.

The centre offers new physicians lower rents, zero start-up costs and valuable mentoring partnerships in exchange for a long-term commitment to practice in High River. When we talk about a commitment to access and quality, this is what it means on the front lines of health care. Charles Clark would have been very proud of this very important and innovative community improvement.

Mr. Hughes stated that the Board's responsibility is to work with administration and Alberta Health and Wellness to set the big-picture vision and overarching targets and it is people on the ground, in and outside of AHS, our partners in health care, who are helping us to achieve our goals.

Mr. Hughes thanked them, and as always the men and women of Alberta Health Services, for their tireless dedication.

Mr. Hughes advised that the Deans of the medical school of the University of Alberta and the University of Calgary were appointed as members to the Quality and Safety Committee. Dr. Philip Baker, Dean of the Faculty of Medicine & Dentistry at the University of Alberta and Dr. Tom Feasby, Dean of the Faculty of Medicine at the University of Calgary, will begin their two-year appointments immediately.

He commented that although the role of the Board's committees is to make recommendations to the Board, the Quality and Safety Committee has responsibility to provide input to the Board on the delivery, efficiency and safety of patient care at AHS. He advised that Dr. Baker and Dr. Feasby are the first members of the public to join a Board committee in this fashion. Their experience and involvement in the medical community will add an invaluable perspective to the Committee and in turn, to the Board of AHS. The appointments will bolster the committee's clinical and research expertise and help AHS continue to provide a safe, high quality and accessible health care system, while underscoring AHS' commitment to research and teaching. The Quality and Safety Committee helps the board to make clinical decisions that ensure the quality and safety of health services, helps build a culture of trust for patients and health care providers and provides equitable access to provincial health services for all Albertans.

Mr. Hughes finalized by advising that at today's meeting, the Board would receive a report and update on the Transformational Improvement Program known as *Enabling Our People*, an update on the Health Advisory Committee and request for approvals with respect to Health Trust bylaws appointments, and a request for approval of a Tobacco and Smoke Free Environments policy.

b) Acting President & CEO's Report

The following is an abstract of Dr. Chris Eagle's, Acting President and Chief Executive Officer, remarks at the meeting. It is not an official transcript:

Dr. Chris Eagle, Acting President and Chief Executive Officer, advised that in his opening remarks he would like to provide updates on wait-time reduction initiatives announced since the Board's December meeting.

He stated the five-year health funding agreement made it possible to accelerate access and delivery improvements on a number of fronts. He stated that AHS has shifted gears, so to speak, with much greater emphasis on clinical initiatives. In the early days following the creation of AHS, it was necessary to tackle the foundational administrative work of amalgamation. Last year and going forward, we have redirected much of our organizational energy to advancing clinical priorities. As you heard, at the end of 2010 we announced a permanent increase of 5,000

additional surgeries to be performed across the province this year. This initiative actually began with two campaigns in 2010, originally designed to be one-time blitzes, as they were known at the time. The advice from our clinical leaders was that a sustained increase in surgeries would ensure better resource and wait-time management and have a greater longer-term impact.

These surgeries include urgent cancer, heart, gynaecology, neurosurgery, ophthalmic and orthopaedic surgeries, at a cost of about \$16.7 million per year.

The first six-week campaign last year included more MRI and CT scans. Last week, it was announced an additional 9,000 MRIs will be performed by March 31st this year, a five percent increase over the 166,000 MRIs performed annually by AHS. The total cost of the additional MRIs is about \$3.6 million.

A couple of other examples from the past eight weeks underscore the breadth of this commitment to improve quality and expand capacity and last week AHS announced the start of the installation of new X-ray equipment in Coaldale, Raymond, Fort Macleod, Magrath and Picture Butte in Southern Alberta.

Also in Southern Alberta, Extendicare Fairmont Park, a 140-bed supportive living facility in Lethbridge, opened its doors on January 6th. Fairmount Park will initially open 70 beds, including 46 supportive living and 24 supportive living dementia beds. An additional 24 dementia beds will open next month and the remainder of the facility will open as needed.

Supportive living provides 24-hour support from an on-site licensed practical nurse and health care aide, as well as 24-hour on-call support from a home care registered nurse.

Dr. Eagle further advised that earlier this week AHS announced a partnership with the Fort McMurray public school district to improve mental health services for children ages 3 to 17 in the city's 12 public schools. The *Removing Barriers* project is funded by a \$500,000, three-year grant to add mental-health resources, including a psychologist with school-based expertise, to help students with a mental health disorder experiencing severe symptoms that affect their ability to be successful in school.

He advised that earlier today, at the Peter Lougheed Centre the media was invited to an update with the leaders of an \$11.6 million expansion of obstetrical services and associated programs for women served at the PLC. That work is underway now and is part of the \$1.3 billion Health Capital Plan Phase 2. This redevelopment will take place across most of the third floor of this hospital, involving more than 32,000 square feet of space. It includes redeveloping the neonatal intensive care unit, including the creation of new NICU beds; adding a new designated operating room and five more labour and delivery rooms. We expect detailed planning to be completed within six to nine months and construction to begin by the end of year.

Dr. Eagle closed by saying, since he took on the role of Acting CEO, he has made it a priority to talk with staff and physicians about this transition and how they see themselves being part of it in the weeks and months ahead.

He advised that he provided a note to staff and physicians earlier this month, "our fundamental purpose has always been pretty clear: promoting and protecting the health of citizens, setting priorities, creating access to quality health services, and creating opportunities for individuals and communities to be part of designing the health system."

He asked the Board, "What does that mean for each of us as individuals, and for our patients?" and then commented that he has been asking people to think about – and to be personally part of – creating new "roadmaps", patient navigators, clinical pathways and clinical networks that help guide our patients and our actions in serving them.

He continued by saying that it is clear that this work cannot and should not be directed from the top down. Engagement is more than just discussion and exchanging ideas – it's the hands-on design and decision-making, it's giving responsibility to our local leaders and teams, while ensuring that they are connected with their colleagues across Alberta.

Dr. Eagle also implored all people at Alberta Health Services, wherever we are in the health system, to think about engagement from a patient perspective and appreciate that Albertans want us to respond to their concerns and understand what is important to them. What they expect from us is really quite reasonable. Our patients and their families want us to help them through a crisis; support them in being and staying well; act on their concerns and anticipate their health needs.

Dr. Eagle concluded his remarks by saying that he has been tremendously encouraged by what he is seeing and hearing.

5. Audit and Finance Committee - Report to the Board

Mr. Don Sieben, Chair, Audit and Finance Committee, advised the Board that AHS is on budget for the 2010/11 fiscal year and in addition, the budget for next fiscal year is expected to be a balanced one. He added that the Audit and Finance Committee anticipates that the 2011/12 budget will be brought forward to the Board for approval at its March 2011 meeting. Mr. Sieben also advised that the Audit and Finance Committee had received the findings of an interim audit and that they were contemplating the receipt of a clear audit opinion on March 31, 2011.

6. Human Resources Committee - Report to the Board

Ms. Irene Lewis, Chair of the Human Resources Committee, advised that no Human Resources Committee motions were being brought forward and she provided an update with respect to

Transformational Improvement Program (TIP) 4 – *Enabling our People*, which focuses on ensuring that staff, physicians, and volunteers have educational opportunities, the required tools and competencies, a safe work environment and work opportunities necessary to provide high quality and safe care.

Ms. Lewis further commented that workforce planning and performance measurement initiatives which are being undertaken and implemented at AHS will ensure AHS has an appropriately skilled and adequate workforce in the future. Ms. Lewis provided an example by mentioning that a TIP 4 team is developing an employee value proposition to clearly articulate reasons as to why AHS is a workplace of choice as well as what employees can expect as part of the employment relationship and AHS' expectations of them. She also added that work is underway to enhance a 'just and trusting culture' within AHS.

7. Governance Committee - Report to the Board

Mr. Stephen Lockwood, Chair of the Governance Committee, reported that the Mandate and Roles Document was executed by the Minister of Health and Wellness and by Mr. Ken Hughes, on behalf of AHS, on December 2, 2010. Mr. Lockwood explained that the document outlines the roles and responsibilities of Alberta Health and Wellness and Alberta Health Services and that this document replaces the memorandum of understanding that was previously in place.

Mr. Lockwood advised the Board that the Governance Committee will be utilizing the Mandate and Roles Document to thoroughly review all the terms of reference for the various Board committees and will seek the Board's approval of any suggested changes to these documents. He further advised that the Mandate and Roles Document can be accessed on the Alberta Health Services website.

8. Health Advisory Committee

a) Report to the Board

Mr. John Lehnert, Chair of the Health Advisory Committee, provided an update with respect to the meeting held among Health Advisory Council Chairs on December 14, 2010 and advised that discussions occurred with respect to new initiatives to increase community engagement and finding new ways to enable the Councils to ensure they are able to make an positive impact in their communities.

b) Foundations and Health Trusts Bylaws and Appointments

i. Approval of Bylaws and Appointments of Trustees to Lacombe Hospital and Care Centre Foundation

Mr. Lehnert advised that members of the community in Lacombe and surrounding areas have made a commitment to work with both the hospital and care centre to support their

prioritized initiatives, where possible, through fundraising initiatives. The Alberta Health Services Board was pleased to support this community commitment and reviewed the establishing bylaws and appointments.

UPON MOTION duly moved, seconded and unanimously carried, the Board:

1. approved the Establishing Bylaws of the Lacombe Hospital and Care Centre Foundation in substantially the form tabled; and
2. appointed certain individuals as trustees to the Foundation, for the term length indicated, with all such appointments to be effective on the day the Minister of Alberta Health and Wellness approves the Establishing Bylaws of the Foundation:

Name	Term Length
Mary Gish	Three Year Term
Marianne Gustafson	Three Year Term
Pauline Prins	Three Year Term
Jim Kimmel	Three Year Term
Kenneth Cruickshank	One Year Term
Bonny Snihur	Two Year Term
Stephen Christie	Two Year Term
Jim Dixon	Three Year Term
Harley Blaine Lindquist	Three Year Term

ii. Approval of Amended Bylaws and Appointments of Trustees to Peace River Community Health Centre Foundation

Mr. Lehnert advised that members of the Peace River Community Health Centre Foundation (Foundation) was established in 2003. Although the Foundation has not been active since that time, they are members of the community who wish to activate the Foundation to support health care in their area. The Alberta Health Services Board reviewed their updated bylaws which better reflect their updated objectives and was pleased to support this Foundation.

UPON MOTION duly moved, seconded and unanimously carried, the Board:

1. approved the Establishing Bylaws of the Peace River Community Health Centre Foundation in substantially the form now tabled; and
2. appointed certain individuals as trustees to the Foundation, for the term length indicated, with all such appointments to be effective on the day the Minister of Alberta Health and Wellness approves the Establishing Bylaws of the Foundation:

Name	Term Length
Iris Callioux	Three Year Term
Will Petluk	Three Year Term
Peter Clarke	Three Year Term
Wayne George	Three Year Term
Fritz Dijk	Two Year Term - Non-voting
Ray Johnson	One Year Term - Non-voting
Marie Dyck	Two Year Term

iii. Approval of Bylaws and Appointments of Trustees to Ponoka and District Health Foundation

Mr. Lehnert advised that the community in Ponoka and surrounding areas have made a commitment to work with both the hospital and care centre to support their prioritized initiatives where possible through fundraising initiatives. The Alberta Health Services Board was pleased to support this community commitment and has reviewed the establishing bylaws and appointments.

UPON MOTION duly moved, seconded and unanimously carried, the Board:

1. approved the Establishing Bylaws of the Ponoka and District Health Foundation in substantially the form tabled; and
2. appointed certain individuals as trustees to the Ponoka and District Health Foundation, for the term length indicated, with all such appointments to be effective on the day the Minister of Alberta Health and Wellness approves the Establishing Bylaws of the Foundation:

Name	Term Length
Ada Ashton	Two Year Term
Jim Hamilton	Two Year Term
Joanne McMillan	Two Year Term
Linda Steinmann	Two Year Term
Dr. Brendan Bunting	Three Year Term
Sybil Daphne Evans	Three Year Term
Gerry Hildebrand	Three Year Term
Nell Liddle	Three Year Term
Brenda Verhiere	Three Year Term
Howard Rowland	Three Year Term

iv. Approval of Amended Bylaws to Alberta Hospital Edmonton and Community Mental Health Foundation

Mr. Lehnert advised that the Board had reviewed the amended bylaws in June 2010, approving the name change to the Mental Health Foundation. Based on feedback from the Deputy Minister of Alberta Health and Wellness, the Board would like to now specify within the bylaws, that the Foundation will work in the greater Edmonton area.

UPON MOTION duly moved, seconded and unanimously carried, the Board approved the amendment of the Establishing Bylaws of the Alberta Hospital Edmonton and Community Mental Health Foundation by adding the following *italicized* words to Section 4.1(c) of the Bylaw:

To further addiction and mental health education, awareness and research for the residents *of the greater Edmonton area*.

v. Foundations and Health Trusts Appointments

Mr. Lehnert commented that the Board is pleased to support the many members of the communities across Alberta who dedicate themselves to support local health care

facilities and programs. He added that the Board was pleased to appoint additional trustees to these Foundations and Health Trusts and to continue to partner with them.

UPON MOTION duly moved, seconded and unanimously carried, the Board approved the following individuals as trustees to the foundation or trust, for the term length indicated, with effect from January 27, 2011:

Foundation or Trust	Name	Term Length
Brooks and District Health Foundation	Sherri Halsted	Two Year Term (non-voting)
Calgary Health Trust	David Routledge	Three Year Term
	Sandy Edmonstone	Three Year Term
Stettler Health Services Foundation	Greggory Jackson	Three Year term
Oyen & District Health Care Foundation	Maxine Girletz	Three year Term
	Rod Briggs	Three year Term
Fort Saskatchewan Community Hospital Foundation	Ed Coleman	Two Year Term
	Howard Johnson	Two Year Term
	Don Morgan	Two Year Term
	Anne Weir	Two Year Term
	Margaret Wade	Three Year Term
	Tanya Ristoff	Two Year Term
	Len Goodman	Two year Term
	Randy Kjenner	One Year Term

Mr. Hughes acknowledged the importance of involving health advisory councils and thanked those who have expressed an interest in being involved.

Ms. Bougie thanked Mr. Larry Albrecht, Prairie Mountain Health Advisory Council Chair, for meeting with Alberta Health Services Board members earlier in the day. Ms. Bougie advised that there are currently four vacant positions on the Prairie Mountain Health Advisory Council and that it was hoped these vacancies would be filled in the near future.

9. Quality and Safety Committee

a) Report to the Board

Mr. Gord Winkel, Chair of the Quality and Safety Committee, advised that the Quality and Safety Committee is working extensively on all fronts in order to support best practice in clinical care associated with its delivery, ethics and quality and will continue to report on the work they do as they move forward. Mr. Winkel noted that the Quality and Safety Committee appreciates the appointment of Dr. Philip Baker and Dr. Thomas Feasby as members and welcomes their future contribution.

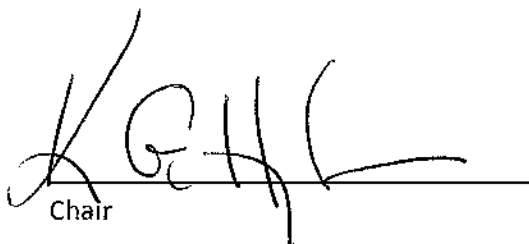
b) Tobacco and Smoke Free Environments Policy

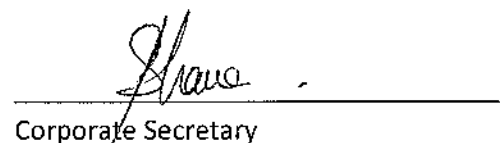
Mr. Winkel advised that in support of its patients, visitors and staff, AHS is consolidating the tobacco and smoke free environments policies of all the former health regions. There will be a phased-in approach to ensure compliance and, where appropriate, there will be flexibility for some patients and clients on compassionate grounds.

UPON MOTION duly moved, seconded and unanimously carried, the Board approved the Tobacco and Smoke Free Environments Policy, in substantially the form tabled.

10. Termination of Meeting

There being no further business, the meeting was terminated at 1:57 p.m.


Chair


Corporate Secretary