

BOARD MEETING

Minutes of the meeting of the Board (the “**Board**”) of Alberta Health Services (“**AHS**”) held at the Medicine Hat Regional Hospital – Auxiliary Dining Room, 666 – 5th Street SW on September 15th, 2011.

Present:

Board Members: Mr. Ken Hughes (Chair)
Ms. Catherine Roozen (Vice Chair)
Dr. Ray Block
Ms. Teri Lynn Bougie
Dr. Ruth Collins-Nakai
Dr. Kamallesh Gangopadhyay
Mr. Don Johnson
Mr. John Lehnert
Ms. Irene Lewis
Mr. Stephen Lockwood
Mr. Don Sieben
Dr. Eldon Smith
Ms. Sheila Weatherill
Mr. Gord Winkel

Management: Dr. Chris Eagle, President & Chief Executive Officer
Ms. Patti Grier, Vice President & Chief of Staff

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

Mr. Hughes called the meeting to order at approximately 12:45 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 for the meeting of the Board held on September 15, 2011, which was provided to the Board in advance of the meeting.

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 Board dated June 10, 2011, in substantially the form before them; and directed the Chair of the 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:

I would like to welcome everyone here in person and those watching through Telehealth to the AHS public Board meeting, being held this month at the Medicine Hat Regional Hospital. We move our meetings to different locations to help us stay in touch with communities across the province.

As a governance board, these public meetings are an important aspect of being transparent and accountable. The Boards' decisions are voted on publicly and recorded as the public record.

We have had a couple of very constructive days here in Medicine Hat at the Regional Hospital. This morning, together with Premier Ed Stelmach, Minister Rob Renner and MLA Len Mitzel, we announced that the facility will be undergoing a \$200 million redevelopment. We expect completion of this project by 2015 and we are confident this redevelopment will help the Medicine Hat Regional Hospital meet the health care needs of this community well into the future.

Last night, the Board attended a Community Engagement Reception at the Medicine Hat Lodge. It was a good opportunity to get to know members of the local Health Advisory Councils and Foundations, and community members. It also gave the Board the chance to reflect on the fact that we cannot achieve our ambitious targets over the coming years alone and reinforced that our partners are critical links to our success.

This summer, I had the opportunity to travel to Africa with the Royal Alexandra Hospital Foundation to climb Mt. Kilimanjaro. We raised approximately \$ 1 million in support of hip and knee orthopaedic programs in Alberta. I want to pay special tribute to all of my colleagues who made the climb - it was a tremendous experience for all of us.

AHS works with our partners to move the health system in Alberta forward each day. Over the past ten months, AHS has made tremendous strides as an organization, accomplishing eighteen of the nineteen immediate targets set in the 5-Year Health Action Plan. Immediate progress on this plan was possible because of our partnership with the government of Alberta and the 5-Year Health Funding agreement. It was also possible because of the commitment of all our staff, physicians, volunteers, and partners.

We have come a tremendous distance with Alberta Health Services over the last three and a half years. We have predictable funding, we have predictable and reliable performance measurements, and we are holding ourselves accountable. The 5-Year Health Action Plan sets targets and performance measures and it shows what we need to do to drive AHS towards becoming a high-performing health system. Every target in the plan was designed with patient care, accountability and transparency in mind.

Being accountable means demonstrating measurable improvements. In the past ten months, we have added 360 new beds to improve hospital access, we performed 9,790 additional surgeries compared to the prior year, which is 3,000 more over our original target, and we created a pathway for cancer

patients to more easily navigate through the system and improve their overall care. Also, we are supporting more patients with mental health and addiction issues. We launched an online resource for Albertans to seek information on health and wellness, and just last week, together with the Minister of Health and Wellness, we announced a provincial obesity strategy.

Being accountable also means showing the direct translation between funding and patient care. Our first quarter performance report reflects the progress we have made as an organization in the first part of this year, and further paints the picture of the accomplishments of this organization since its inception three years ago.

Furthermore, being accountable means that we listen to the voices of the people and communities we serve. The past several months has been a period of intense organizational restructuring at AHS as we work together to build a strong foundation for the future. The result of that effort is a renewed focus on clinical priorities to improve patient care. It also resulted in greater local autonomy, responsibility and decision making in the five geographic zones that make up AHS. And, it has encouraged greater engagement, communication and consultation with local communities and partner organizations.

Accountability also means recognizing we have a tremendous amount of work ahead of us. Looking forward, our top priority is to deliver on the performance targets outlined in the 5-Year Health Action Plan and, in particular, the Tier One measures. Our immediate priorities include reducing wait times in emergency rooms, improving access for radiation treatment, increasing high demand surgeries (such as hip and knee replacements, cataract surgeries and cancer surgeries), and reducing wait times for patient placement in continuing care facilities. Above all, the Tier One measures provide the people of this province with a clear sense of what improvements they will see in the health system over the next five years.

To achieve all that I have outlined, it will take the continued commitment of all AHS staff, physicians and partners. We know there may be more changes to come in how we structure and deliver health care in Alberta, yet, we are moving forward with optimism knowing that we have a solid organization, strong performance measures, and a commitment to accountability in place.

By reporting on our progress publicly and transparently, we are demonstrating this commitment. As we continue to move forward with the targets in the 5-Year Health Plan, accountability to Albertans remains in the forefront of our minds. It allows us to not only achieve our goals, but build a platform for health care in the future.

I would now like to turn things over to Dr. Chris Eagle for his comments.

b) President & CEO's Report

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

Thank you, Mr. Chair.

AHS is committed to improving access and being accountable to Albertans by setting high standards and being transparent about our performance and our progress. Today we report positive results in the first quarter of this year. Financially we are on solid ground and we are demonstrating measurable progress in reaching our performance targets.

We are well positioned to achieve a balanced budget this year, which means that we will continue to focus our spending on the 5-Year Health Action Plan priorities, including continuing to reduce Emergency Department wait times, improving access to radiation therapy, and increasing access to a range of surgical procedures. We are on track to reach our commitment to add 1,000 more continuing care beds this year. We will continue to prudently invest our resources while maintaining the momentum created by the 5-Year Health Action Plan and the 5-Year Funding Agreement.

The 5-Year Health Action Plan targets are intentionally ambitious, and in some cases will involve long-term diligence and determination to achieve. They are not easy targets and they were never intended to be. We set the bar high and we will not retreat from those high standards because the goal is not to simply meet the target – the goal is to continuously improve quality and access. We are making progress today and we have every confidence that we will continue to see improvement in future performance reports.

The first quarter financial and performance reports also demonstrate our commitment to transparent and accountable reporting. This is also a standard by which we measure ourselves – the regular, responsible reporting of achievement against target. That is what Albertans expect of us, and that is what we demand of ourselves.

Transparency is the major driver behind our 5-Year Health Action Plan, a means by which we demonstrate, through action and accountability, our focus on the greatest effort and greatest investment toward the greatest need. It is a long-term commitment made by all of us – as individuals and as an organization.

On that note I would like take a moment to recognize the incredible work that has gone into our realignment over the last several months. This major undertaking was possible by the dedication of staff, physicians, volunteers and partners of AHS. AHS now has a new organizational structure in place that will serve as a strong foundation for our future, promote local accountability and decision-making, and increase the engagement of our staff, physicians, volunteers and communities. Ultimately, that will improve our performance and in turn improve quality and access.

A key part of our realignment is the creation of a zone-based leadership model. Simply put, this means both operational and clinical leaders share decision-making. Achieving this realignment in such a short time required an extraordinary effort, but it is already streamlining decision-making and adding a local perspective to health care planning and delivery.

Finally, we will discuss today not only a generous financial gift to health care, but a gift to the entire Medicine Hat community. A major donation has been made towards improving the care of cancer patients in Alberta. This donation means that the people of Medicine Hat and surrounding areas will have better access to cancer treatment. Performance targets are one measure of our success but it is also important to understand and appreciate the growing partnership with our communities and our community leaders – and the impact their direct involvement has on access. I cannot say enough about

the importance and impact of this support on the care of our patients, and I personally look forward to being part of this exciting announcement later today.

5. Audit and Finance Committee

a. [AFC11-39] First Quarter Investment Report (PH&N), 2011/2012

Mr. Don Sieben, Chair of the Audit and Finance Committee, advised that the first quarter investment report was prepared by Phillips, Hager & North Investment Management Ltd. and that this report highlights the performance of AHS' investment portfolio in the first quarter of the 2011/2012 fiscal year.

UPON MOTION duly moved, seconded and unanimously carried, the Board of Alberta Health Services ("AHS") ratified the investment transactions described below, reviewed and recommended by the Committee of the Whole, and made on behalf of AHS by Phillips, Hager & North Investment Management Ltd. ("PH&N"), as follows:

- (a) as of June 30, 2011, AHS held restricted and unrestricted funds totaling \$1.566 billion (the "Funds");**
- (b) AHS has retained the services of PH&N to invest the Funds in accordance with AHS' Investment Bylaw and Investment Policy;**
- (c) both PH&N and management of AHS, have confirmed that all of the Funds invested by PH&N during the quarter ended June 30, 2011, were invested in accordance with the Investment Bylaw and Investment Policy; and**
- (d) the Funds were invested in short term treasury bills, federal, provincial and corporate fixed income bonds and equity funds.**

b. [AFC11-40] Supplemental Pension Plan Investment Manager & Investment Policy Amendments

UPON MOTION duly moved, seconded and unanimously carried, the Board of Alberta Health Services ("AHS") approved the following, as reviewed and recommended by the Committee of the Whole:

- 1. the appointment of Standard Life as AHS' investment manager and plan administrator for the purpose of providing investment management services over the unrestricted funds for AHS' Defined Contribution Supplemental Pension Plan ("DC SPP"); and**
- 2. in connection with AHS' DC SPP, the following amendments to the AHS Investment Policy:**
 - (a) the Target Asset Mix for equities in the "Long Term 5+ Years Balanced Growth" category be revised from 0-15% to 0-30% in Section 4.5 of the Investment Policy; and**
 - (b) the term "Investment Manager" be pluralized throughout the Investment Policy.**

c. [AFC11-41] First Quarter Financial Reports, 2011/2012

Mr. Don Sieben, Chair of the Audit and Finance Committee, advised that the First Quarter Financial Reports and Results indicate that AHS is well positioned to achieve a balanced budget for the 2011/2012 fiscal year.

Mr. Sieben advised that in June 2011, the Board approved an \$11.99 billion expense budget that included priority spending in key areas including emergency department wait times, radiation therapy wait times, growth in continuing care beds and services, and timely access to a range of surgical procedures. He further advised that for the first quarter, total revenues were \$2.847 billion and expenses were \$2.782 billion, resulting in an operational surplus of \$65 million.

Mr. Sieben stated that AHS financial reporting is prepared in accordance with Canadian generally accepted accounting principles and reporting requirements of financial directives issued by Alberta Health & Wellness.

UPON MOTION duly moved, seconded and unanimously carried, the Board of Alberta Health Services (“AHS”):

- (a) approved the Quarterly Financial Report to Alberta Health and Wellness for the quarter ended June 30, 2011 (the “Q1 Financial Report”) in the form reviewed and recommended by the Committee of the Whole, with such non-substantive changes that management of AHS considers necessary or advisable;**
- (b) authorized and directed management of AHS to deliver the Q1 Financial Report to the Minister of Health and Wellness;**
- (c) approved the Quarterly Financial Statements for the quarter ended June 30, 2011 (the “Q1 Financial Statements”) in the form reviewed and recommended by the Committee of the Whole, with such non-substantive changes that management of AHS considers necessary or advisable; and**
- (d) authorized and directed management of AHS to make the Q1 Financial Statements available to the public through the AHS website.**

d. [AFC11-64] K-Bro Linen Systems Inc.

Mr. Don Sieben, Chair of the Audit and Finance Committee, advised that AHS conducted a review as to whether to move linen services for Edmonton and area in-house, or to continue with a third party service provider. He advised that based on this review, AHS issued an open and transparent Request for Proposal to interested vendors in February 2011. He stated that this process aligns with AHS' commitment to providing sustainable, accessible and quality health care to Albertans and also aligns with best business practices.

UPON MOTION duly moved, seconded and unanimously carried, the Board of Alberta Health Services (“AHS”) authorized and directed management of AHS to proceed with final contract negotiations with K-Bro Linen Systems Inc. (“K-Bro”), on substantially the terms and conditions reviewed and recommended by the Committee of the Whole, with respect to AHS outsourcing linen services for Edmonton and area to K-Bro.

6. Governance Committee

Mr. Stephen Lockwood, Chair of the Governance Committee, advised that each year, the Board members complete a skills and competencies matrix in order to summarize the overall skills and competencies of the Board members. He advised that next year’s matrix will expand upon each of the various items to give a clear definition of each skill to assist the board members in completing the matrix.

Mr. Lockwood provided an overview of the governance structure of certain of AHS’ subsidiaries. He advised that AHS management and the Governance Committee will be jointly working to look at each of the subsidiaries, the AHS pension plans, and the AHS insurance plans to make sure that they, as well as the Board and AHS, have the proper and appropriate governance procedures in place. He further advised that this project has started and that it will be ongoing with items brought forward for Board approval as needed.

a. [GOV11-11] Terms of Reference

Mr. Stephen Lockwood, Chair of the Governance Committee, presented, for Board approval, the Terms of Reference for the Governance Committee, the Health Advisory Committee and the Human Resources Committee. He advised that the Board is required to review the Terms of Reference of its committees for matters of consistency and clarification of responsibilities on a periodic basis.

UPON MOTION duly moved, seconded and unanimously carried, the Board of Alberta Health Services (“AHS”):

- (a) approved the Governance Committee, Health Advisory Committee and Human Resources Committee Terms of Reference, in the form reviewed and recommended by the Committee of the Whole, with such non-substantive changes that management of AHS considers necessary or advisable; and**
- (b) authorized and directed management of AHS to make such Terms of Reference available to the public through the AHS website.**

7. Health Advisory Committee

Mr. John Lehnert, Chair of the Health Advisory Committee, spoke to the various events and meetings that Board members have participated in with respect to the Health Advisory Councils and Foundations.

Mr. Lehnert spoke to the consistent themes and issues that the Health Advisory Councils are facing, including those relating to long-term care, obstetrics, mental health and recruitment and retention. He advised that AHS and the Board are developing strategies to address these issues.

a. [HAC11-19] Health Advisory Council – Appointment of Chair and Vice Chair Positions

Mr. John Lehnert, Chair of the Health Advisory Committee, advised that the work of the Health Advisory Councils is fundamental to successfully accomplishing the targets AHS has set. He stated that these councils were established to enhance and develop partnerships between communities and AHS.

Mr. Lehnert commented that Health Advisory Council members work diligently to provide AHS feedback about what is working, and areas for improvement. He advised that these members engage their communities in the health care dialogue and ensure that AHS understands trends, issues and local perspectives. He commented that to date, Health Advisory Councils have proved highly effective in building relationships between communities and the Board and leadership at AHS, and that the Chairs and Vice Chairs of each council played a critical role in this success.

Mr. Lehnert advised that the individuals put forth for Chair and Vice Chair positions will each serve a one-year term.

UPON MOTION duly moved, seconded and unanimously carried, the Board of Alberta Health Services (“AHS”):

- (a) appointed the following individuals as Chairs and Vice Chairs to the Health Advisory Council indicated in the table below for a term ending April 30, 2012; and**
- (b) authorized and directed management of AHS to inform the Minister of Health and Wellness of such appointments.**

HEALTH ADVISORY COUNCIL	CHAIR	VICE CHAIR
True North	Clark McAskile	Gord Burnell
Peace	Theresa Sandul	Michael Ouellette
Lesser Slave Lake	George Keay	Colleen Greer
Wood Buffalo	Iris Kirschner	Jim Moore
Lakeland Communities	Deanna Anderson	Pat Palechuk

Tamarack	Douglas McDermid	Ruth Martin Williams
Greater Edmonton	Kathleen LeClair	Carol Rempel
Yellowhead East	Colleen Vennard	Glenn Thompson
David Thompson	Bruce Buruma	Diana Rowe
Prairie Mountain	Larry Albrecht	Gloria Wilkinson
Palliser Triangle	Kenneth Sauer	Martin Shields
Oldman River	Barbara Lacey	Kerry Milder

b. [HAC11-28 & 32] Foundations/Health Trusts Appointments

Mr. John Lehnert, Chair of the Health Advisory Committee, advised that the Foundations and Health Trusts noted below are established under the *Regional Health Authorities Act* (Alberta), and accordingly, AHS is required to appoint trustees to these Foundations and Health Trusts based on recommendations made by Foundation Board Chairs.

UPON MOTION duly moved, seconded and unanimously carried, the Board of Alberta Health Services appointed the following individuals as trustees to the foundation indicated for the term as set forth in the table below:

Foundation	Name	Period of Appointment
Alberta Cancer Foundation	Heather Culbert	Three year Term (September 2014)
	Katie McLean	Three Year Term (September 2014)
Bow Island & District Health Foundation	Cindy Reynolds	Two Year Term (September 2013)
	Charlaine Brockelsby	Three Year Term (September 2014)
	Myrna Cecchini	Two Year term (September 2013) Non-Voting
Brooks & District Health Foundation	Kimberley Sharkey	Three Year Term (September 2014)
Canmore & Area Health Services Foundation	Marvin Phillips	Three Year Term (September 2014)
Claresholm & District Health Foundation	George Krueger	Three Year term (September 2014)

Medicine Hat & District Health Foundation	Donna Regier	Three Year Term (September 2014)
	Jean Bauer	Three Year Term (September 2014)
	Lynne Sangster	Three Year Term (September 2014)
	Dr. Amelia Corriea	Three Year Term (September 2014)
	Dr. M Talal Alphin	Three Year Term (September 2014)
	Linda Wahl	Three Year Term (September 2014)
Lacombe Hospital & Care Centre Foundation	Suzanne Telford	Three year Term (September 2014) Non-voting
Mental Health Foundation	Carla Madra	Three Year Term (September 2014)
Ponoka & District Health Foundation	Sue Mackenzie	Three year Term (September 2014) Non-voting
Windy Slopes Health Foundation	Dan Crawford	Three Year Term (September 2014)
	Sandra Breckenridge	Three Year Term (September 2014)
	Sandra Lewis	Three Year Term (September 2014)

c. [HAC11-34] Naming Opportunity – Medicine Hat Cancer Centre

Mr. John Lehnert, Chair of the Health Advisory Committee, advised that the Alberta Cancer Foundation has submitted a proposal for the naming of the Medicine Hat Cancer Centre, in recognition of a significant philanthropic contribution to the facility. He stated that the naming is requested in perpetuity and further details regarding the naming would be announced publicly later that day.

UPON MOTION duly moved, seconded and unanimously carried, the Board of Alberta Health Services (“AHS”):

- (a) approved changing the name of the Medicine Hat Cancer Centre to the “Margery E. Yuill Cancer Centre” in recognition of the philanthropic gifts to the Alberta Cancer Foundation from Willard (Bill) H. Yuill and Gerry and Beverly Berkhold; and**
- (b) authorized and directed management of AHS to make all necessary amendments in any documents and matters to give effect to the changed name accordingly.**

d. [HAC11-36] Provincial Advisory Council on Cancer Appointments

Mr. John Lehnert, Chair of the Health Advisory Committee, spoke to the appointment of eight public members and eight expert members to the new Provincial Advisory Council on Cancer. He stated that the objective of this council is to advise AHS on cancer issues and the health interests of Albertans.

UPON MOTION duly moved, seconded and unanimously carried, the Board of Alberta Health Services ("AHS"):

- 1. appointed the following individuals as public members to the Provincial Advisory Council on Cancer for the terms as set forth in the table below:**

Name	Term in Years	Zone Represented
Lorelee Marin	3 (Sept 2014)	Central
Ray Clark	2 (Sept 2013)	Calgary
Lorraine Meneen	3 (Sept 2014)	Edmonton
Christine Ferguson	2 (Sept 2013)	Edmonton
Brian Lowery	3 (Sept 2014)	South
Tricia Antonini	2 (Sept 2013)	Calgary
Kenneth Landry	3 (Sept 2014)	North
Ashley Rose	2 (Sept 2013)	Edmonton

- 2. appointed the following individuals as expert members to the Provincial Advisory Council on Cancer for the terms determined by management of AHS; and**

Name/Title	Agency	Representing
Dr. Heather Bryant	Canadian Partnership Against Cancer	Prevention & Screening
Dr. Margaret Churcher	Provincial Cancer Care Initiative (Co-Chair)	Primary Care
Dr. Kelly Dabbs	Comprehensive Breast Cancer Program	Specialized Acute Care
Dr. Deborah Dudgeon	Queen's University, School of Medicine	Palliative Care
Dr. Anthony Fields, Professor Emeritus of Oncology	University of Alberta	Oncology
Dan Holinda, Executive Director	Canadian Cancer Society	Stakeholder
Patti Morris, Executive Director	Wellspring	Supportive Care
Myka Osinchuk, CEO	Alberta Cancer Foundation	Stakeholder

3. **appointed Dr. Anthony Fields as Chair of the Provincial Advisory Council on Cancer for a term of three years.**

8. Quality and Safety Committee

a. [QS11-32] 2011 AHS Health Status Assessment Report

Mr. Gord Winkel, Chair of the Quality and Safety Committee, advised that the 2011 AHS Health Status Assessment Report provides AHS with a snapshot of the health of Albertans'. He advised that this report details population demographics, socioeconomic and health indicators, as well as health service utilization data across Alberta.

Mr. Winkel stated that monitoring and reporting on the health status of Albertans is one of the action items identified in Alberta's 5-Year Health Action Plan.

Mr. Winkel advised that the Health Status Assessment Report will be forwarded to the Minister of Health & Wellness for review, and released publicly at a later date.

UPON MOTION duly moved, seconded and unanimously carried, the Board of Alberta Health Services ("AHS"):

- (a) approved the "2011 Alberta Health Services Health Status Assessment Report" in the form reviewed and recommended by the Committee of the Whole, with such non-substantive changes that management of AHS considers necessary or advisable; and**
- (b) authorized and directed management of AHS to deliver this report to the Minister of Health and Wellness, and thereafter to make this report available to the public through the AHS website.**

b. [QS11-39] Infection Prevention and Control 2010/2011 Annual Report for AH&W

Mr. Gord Winkel, Chair of the Quality and Safety Committee, advised that in accordance with standards set by Alberta Health and Wellness, AHS is required to submit an annual report on infection prevention and control activities and actions to the Minister of Health and Wellness.

UPON MOTION duly moved, seconded and unanimously carried, the Board (the "Board") of Alberta Health Services ("AHS"):

- (a) approved the "Alberta Health Services 2010-2011 Annual Report on Infection Prevention & Control to Alberta Health and Wellness" in the form reviewed and recommended by the Committee of the Whole, with such non-substantive changes that management of AHS considers necessary or advisable; and**
- (b) authorized the Chair of the Board to deliver this report to the Minister of Health and Wellness.**

c. [QS11-42] AHS Performance Report, Q1 2011/2012

Mr. Gord Winkel, Chair of the Quality and Safety Committee, advised that the AHS Performance Report, Q1 2011/2012 highlights the progress AHS has made towards the annual performance targets outlined in Alberta's 5-Year Health Action Plan. He advised that this report indicates that AHS is performing at, or trending towards, targets regarding wait times for radiation therapy, patients requiring admission to hospital from emergency, and patients requiring cataract surgery. Mr. Winkel stated that this report also highlights areas where AHS is taking immediate action towards improving performance, including access to heart surgery, hip and knee replacement wait times, continuing care, and mental health treatment for children.

Mr. Winkel commented that overall the Board was satisfied with the performance and progress described in the report.

UPON MOTION duly moved, seconded and unanimously carried, the Board of Alberta Health Services ("AHS"):

- (a) approved the "Alberta Health Services Performance Report, Q1 2011/2012" in the form reviewed and recommended by the Committee of the Whole, with such non-substantive changes that management of AHS considers necessary or advisable; and**
- (b) authorized and directed management of AHS to deliver this report to the Minister of Health and Wellness, and thereafter to make this report available to the public through the AHS website.**

d. [QS11-43] Delegation of Appointment of Administrator under the *Hospitals Act*

Mr. Gord Winkel, Chair of the Quality and Safety Committee, spoke to the delegation of appointment of administrator under the *Hospitals Act* (Alberta).

UPON MOTION duly moved, seconded and unanimously carried, the Board of Alberta Health Services ("AHS") made the following delegation:

- 1. the President and Chief Executive Officer be granted the power to appoint a hospital administrator as set out in Section 23 of the *Hospitals Act* (Alberta);**
- 2. pursuant to section 9.3 of the General Bylaws of AHS, the President and Chief Executive Officer may further delegate such power; and**
- 3. any prior delegations respecting the power to appoint a hospital administrator as set out in Section 23 of the *Hospitals Act* (Alberta) are revoked without prejudice to the effectiveness of any lawful exercise, prior to the date of this revocation, of the powers and duties assigned under the prior delegation.**

Mr. Hughes advised that the next public Board meeting is to be held on October 14, 2011 in Fort McMurray.

9. **Adjournment of Meeting**

There being no further business, the meeting was adjourned at 1:10 p.m.

Ken Hughes
Chair

Patti Grier
Corporate Secretary