

BOARD MEETING

Minutes of the meeting of the Board (the “**Board**”) of Alberta Health Services (“**AHS**”) held at the Alberta Hospital Edmonton, Dorran Auditorium, Building #3, Helen Hunley Pavilion, 17480 Fort Road, Edmonton on February 2, 2012.

Present:

Board Members: Ms. Catherine Roozen (Interim Chair)
Mr. Don Sieben (Interim Vice Chair)
Ms. Teri Lynn Bougie
Dr. Ruth Collins-Nakai
Dr. Kamalesh Gangopadhyay
Mr. Don Johnson
Mr. John Lehnert
Ms. Irene Lewis
Mr. Stephen Lockwood
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 & Corporate Secretary

Regrets: Dr. Ray Block

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

Ms. Roozen 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 for the meeting of the Board held on February 2, 2012, which was provided to the Board in advance of the meeting.

2. Conflict of Interest

Ms. Roozen 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 December 8, 2011, in substantially the form before them, and the Chair of the Board and the Corporate Secretary were authorized and directed to sign the minutes in the form so approved and the Corporate Secretary was directed to file them in the corporate records of AHS 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 Ms. Roozen', Interim Board Chair, remarks at the meeting. It is not an official transcript:

Good afternoon.

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 Alberta Hospital Edmonton.

We move our meetings to different locations to help us stay in touch with communities across the province.

As a governance Board, our public meetings are an important aspect of being transparent and accountable. The decisions are voted on publicly and recorded as public record.

We have had a great couple of days here at Alberta Hospital Edmonton. Earlier today, we toured the facility, which cares for more than 1,000 Albertans each year. I would like to personally acknowledge and thank the staff of Alberta Hospital Edmonton for hosting us, and for all the care they provide.

I would like to take a moment to publicly acknowledge the contributions of our former Chair, Ken Hughes. His efforts, alongside the dedication of the men and women of Alberta Health Services, brought us to a state where stable funding and a 5-Year Health Action Plan now guide our hand. We thank Mr. Hughes for his leadership and wish him the best in his future endeavours.

As Alberta Health Services embarks on a new year, it is always good to reflect on our successes to date and also the challenges at hand. Since our inception, we have had one clear goal in mind – to create a strong and sustainable health system that is accessible to all Albertans.

Over the last year, we have opened new points of access to our system, such as adding 1,155 new continuing care beds across the province. We continue to launch major initiatives to address access and wait times, and we are focusing on the targets outlined in our 5-Year Health Action Plan.

We have also worked to encourage stronger local decision making and accountability, and to have decisions made closest to where care is provided. We have re-iterated our support of physicians and staff, and we have underscored that we support, and expect, patient advocacy at all levels of the organization. We also continue to work closely with our partners, such as the associations representing

our staff and physicians, our foundations, our partner care organizations, and our post-secondary institutions.

We look to the coming year with great anticipation. We are moving towards positive outcomes in five key areas: improving access and reducing wait times, providing more choice for continuing care, strengthening primary health care, providing Albertans the support they need to be healthy and stay healthy, and building one, completely integrated health system that meets the needs of all Albertans.

As we look toward the coming months, we anticipate success and challenges alike. Yet, we are firm in our commitment to building a stronger, more integrated provincial health system and we will continue to work with our partners and with Albertans to build the system our patients need.

With that in mind, I now turn to business.

Today, the Board will review and approve amendments to the Investment Bylaw and Policy, and hear reports from the Audit and Finance, Governance, Health Advisory, and Quality and Safety Committees.

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

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, Madame Chair.

It is really great to be here at Alberta Hospital Edmonton. There is a great amount of work that is done at this facility that aids the health of Albertans.

This morning, the Board heard some ambitious plans for improving Alberta's mental health services using Alberta Hospital Edmonton as a basis for that growth. AHS will certainly factor those ideas into our planning as we work towards developing the Addiction and Mental Health Strategy.

We are embarking on a new year of opportunity for AHS, as we bring forward a lot of momentum from 2011 into 2012.

We have a lot of passion and commitment at the clinical level to make significant improvements in the way we deliver care. Our momentum really is thanks to the hard work and dedication of many of the individuals in this room and people across the province, who provide and support front line care every day.

In 2011, we placed greater emphasis on performance measures and targets. We realigned our organization to emphasize local decision making and accountability, and we created more effective partnerships with our communities and foundations. We opened new patient care beds across the province, reduced wait times for radiation therapy and surgical care, and introduced Strategic Clinical Networks, which will equal a positive shift in patient care.

Yet, perhaps one of the most meaningful accomplishments of 2011 was the introduction of a province wide Addiction and Mental Health Strategy. Simply stated, this strategy is the first step in the right

direction to helping Albertans suffering from addiction and mental health issues where and when they need it most. The fact is, at any point in time, 1 in 5 people are experiencing a mental health illness, and the other 4 people will have a family member, friend or co-worker who will be affected. This is a very broad issue for Albertans and for society as a whole.

While there is a strong foundation of services to care for people suffering with addiction and mental health issues, we recognize there is more that needs to be done. The provincial strategy represents creating thinking and collaboration in dealing with these truly complex health issues. Our bottom line is driving tangible results that will positively impact care in this area.

The Addiction and Mental Health Strategy has five key directions. First, to build healthy and resilient communities by focusing on health promotion and illness prevention, and improving access to primary care. Second, to foster the development of healthy children, youth and families by improving access to a full range of services. Third, we will enhance community based services, capacity and supports, including addressing housing and rural capacity. Fourth, we will ensure Albertans with complex care needs, who require specialized or coordinated care, have access to a full range of appropriate addiction and mental health services. We want to ensure that these patients are safely and successfully housed and cared for in a good environment. Finally, we will develop the policies, structures and initiatives to ensure safe, sustainable and quality care is provided to all Albertans.

Let me be clear that we are not reinventing the wheel. As I have said, there is a solid foundation of addiction and mental health services in Alberta, including urban and rural police crisis teams, and alcohol and drug reduction programs in schools and communities. We are building on this foundation to create stronger service delivery and to increase emphasis on promotion and prevention.

We are moving forward with implementing the strategy this year, and we have several initiatives that are in early development that support our efforts. First, we are in the process of establishing a province-wide Adult Depression Clinical Pathway, which will standardize how we care for our clients and ensure we are delivering the full continuum of care needed. Second, we are taking steps to help those suffering with both addiction and mental health issues with the right services, at the right time. This initiative embraces a guiding principle of the provincial strategy - that is, that any door is the right door, and we will ensure those that walk through it get the care and support they need. Third, we are in the early stages of developing an Addiction and Mental Health Tertiary Care Framework. This means we will begin working with physicians and staff to develop a framework that ensures Albertans requiring longer term or complex treatment will have equitable access to the specialized care that they require.

The Addiction and Mental Health Strategy is a collective, collaborative effort that will result in improved access to health services and community supports.

Perhaps more importantly, this strategy is a direct and critical means to bring mental health and addictions out of the shadows and into the forefront of health delivery. And, quite frankly, to transform how we collectively think about and care for Albertans with these particular health concerns.

In partnership with Alberta Health and Wellness, we have already set up the working groups and the leaders to identify priorities and put this plan into action over the next two years.

Every accomplishment from last year that I have mentioned today exemplifies our commitment to transforming strategy into action. Strategy by itself is nothing without an implementation and action plan. This year will be no different. We will continue to apply the same level of energy and creative thinking to the systems and people that support our strategies. 2012 is the third year of our five year funding agreement with the Government of Alberta. This funding agreement has provided AHS a sense of stability and the ability to focus our attention on improving patient care.

Everything we do is about patient care. That is why we are here. That is why we continue to push ourselves to achieve our very ambitious targets and that is why we will continue to work together to achieve those targets.

Thank you very much.

5. Audit and Finance Committee

Mr. Don Sieben, Chair of the Audit and Finance Committee, advised that the last two meetings of the Audit and Finance Committee were consumed by planning for the 2012/2013 budget. He commented that the Board will be reviewing an expense budget of greater than \$12B for the 2012/2013 fiscal year. Mr. Sieben stressed that the patient is always the first priority when developing the budget.

a. [AFC12-03] AHS Investment Bylaw and Policy Amendments

Mr. Sieben spoke to the recommendation before the Board to amend the AHS Investment Bylaw and the AHS Investment Policy. He advised that the purpose of these amendments are to make these documents as clear as possible and to maximize investment opportunities for the organization. He also advised that the amendments have been reviewed by management, the Corporate Policy group, and AHS' Investment Manager, Philips Hager & North Investment Management Ltd.

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

- (a) approved the amended AHS Investment Policy in the form reviewed by the Committee of the Whole, with such non-substantive changes that management of AHS considers necessary or advisable;**
- (b) approved the amended AHS Investment Bylaw in the form reviewed by the Committee of the Whole, with such non-substantive changes that management of AHS considers necessary or advisable, and subject to approval by the Minister of Health and Wellness; and**
- (c) authorized and directed management of AHS to request that the Minister of Health and Wellness approve the amended AHS Investment Bylaw. Mr. Sieben noted that AHS receives compliance certificates from the investment manager and AHS' treasury portfolio to ensure compliance with the AHS Investment Bylaw.**

Mr. Sieben commented that the Audit and Finance Committee reviews various documents that impact AHS, both from a financial point of view and a risk point of view. He further commented that the Audit and Finance Committee reviews AHS' internal audit reports, which demonstrate if there are any issues within the organization or if there are areas which need improvement. Mr. Sieben advised that

management has always been agreeable to making the changes in processes recommended by internal audit.

Mr. Sieben spoke to the Enterprise Risk Management reports, which are also reviewed by the Audit and Finance Committee. He advised that these reports include the mitigation strategies in place to address any issues and areas of concern which arise across the organization.

6. Governance Committee

Mr. Stephen Lockwood, Chair of the Governance Committee, provided an update on the items discussed at the recent Governance Committee meetings.

Mr. Lockwood spoke to the AHS Strategic Direction 2012-2015 report and advised that the Board and the Governance Committee have reviewed this report and are pleased with the content. He advised that this report will be provided to the Board for approval in Spring 2012.

Mr. Lockwood advised that the Governance Committee reviewed the annual evaluations of Board members, committees of the Board, and the operations of the Board, in general. He commented that the Governance Committee has discussed the findings of these evaluations and ways to ensure that the Board is operating effectively and meeting the expectations of Board members. Mr. Lockwood commented that due to numerous comments with respect to the Board orientation process, the Governance Committee will work with management to further develop this program.

Mr. Lockwood advised that the Governance Committee has been provided updates on the status of AHS' subsidiary review. He spoke to AHS' governance of its subsidiaries, benefit plans, pension plans, and foundations.

Mr. Lockwood advised that the Governance Committee reviews reports from the Ethics and Compliance Officer on a quarterly basis. He spoke to these reports and the issues dealt with by the Ethics and Compliance Office.

Mr. Lockwood advised that the Governance Committee also reviews the Enterprise Risk Management report on a quarterly basis. He noted that the Governance Committee focuses on reviewing the risks related to health and safety, public confidence, long term needs, policies, emergency preparedness, and regulatory compliance. He commented that the Governance Committee is comfortable with the mitigation strategies in place to address these risks.

7. Health Advisory Committee

Mr. Lehnert, Chair of the Health Advisory Committee, thanked Dr. Barbara Lacey, Chair of the Oldman River Health Advisory Council, who attended the Committee of the Whole meeting and provided the Board with input with respect to issues that are occurring in that region.

Mr. Lehnert advised that two of the consistent issues raised by the Health Advisory Councils are with respect to the recruitment and retention of physicians in rural Alberta and Emergency Medical Services.

He commented that the Board and management are discussing these issues and that AHS is seeing progress in these areas.

Mr. Lehnert spoke to the Community & Rural Health Planning Framework, which is a process that supports consistent and sustainable planning for rural health services, and advised that AHS will be working with the Health Advisory Councils to implement this framework.

Mr. Lehnert thanked the Health Advisory Councils for the work they are doing across the province.

8. Quality and Safety Committee

Mr. Gord Winkel, Chair of the Quality and Safety Committee, provided a summary of the items discussed by the Quality and Safety Committee at its recent meetings.

Mr. Winkel advised that the Quality and Safety Committee is very pleased with the strategic and innovative planning AHS is undertaking to build health care platforms for the future.

Mr. Winkel spoke to the Patient Safety and Patient Relations reports, which the Quality and Safety Committee reviews on a quarterly basis. He advised that there has been an increase in reporting of these events, which is a positive thing for AHS, as it demonstrates that a culture of quality and safety is becoming more widespread throughout the organization.

Mr. Winkel commented that the Board is very impressed with the time they have spent at Alberta Hospital Edmonton. He thanked the staff of Alberta Hospital Edmonton for their passion, the respect they show, the care they demonstrate, and the great job they do every day.

Mr. Winkel commented that the Quality and Safety Committee has reviewed the Community & Rural Health Planning Framework, and advised that this framework includes a “needs assessment”, which matches health service needs in rural communities with appropriate service.

Mr. Winkel spoke to the Enterprise Risk Management quarterly report, which was reviewed by the Quality and Safety Committee, and advised that such report tracks various metrics related to risks to the organization.

Mr. Don Johnson expressed his appreciation to Mr. Winkel for his great enthusiasm for safety and the good work he does in conveying this message.

Ms. Catherine Roozen thanked all Board members, in particular the Committee Chairs, for the hard work that they all do.

9. Adjournment of Meeting

There being no further business, the meeting was adjourned at 1:50 p.m.

Catherine Roozen
Chair

Patti Grier
Corporate Secretary