

PUBLIC BOARD MEETING

Minutes of the meeting of the Alberta Health Services (“AHS”) Board (the “Board”) held at Boardroom A, Main Floor, Seventh Street Plaza, 10030-107 Street NW, Edmonton, on June 1, 2017.

Attendees:

Board Members: Ms. Linda Hughes (Chair)
Dr. Brenda Hemmelgarn (Vice-Chair)
Mr. Richard Dicerni
Mr. Hugh Sommerville
Ms. Marliss Taylor
Ms. Glenda Yeates

Management: Dr. Verna Yiu, President & Chief Executive Officer
Mr. Todd Gilchrist, Vice President, People, Legal & Privacy
Ms. Deborah Rhodes, Vice President, Corporate Services & Chief Financial Officer
Ms. Colleen Turner, Vice President, Community Engagement & Communications
Ms. Ronda White, Chief Audit Executive, Internal Audit & Enterprise Risk Management
Ms. Catherine MacNeill, Corporate Secretary & Legal Counsel

Regrets: Mr. David Carpenter
Ms. Heather Hirsch

Ms. Hughes acted as Chair of the meeting and Ms. MacNeill acted as Recording Secretary.

Ms. Hughes called the meeting to order at approximately 5:15 p.m. Notice of the meeting had been properly given and quorum was met.

❖ Welcome & Comments from the Chair

The following is an abstract of Ms. Linda Hughes’, Board Chair, remarks at the meeting. It is not an official transcript:

Good afternoon, everyone. My name is Linda Hughes. I am Chair of the Alberta Health Services Board, and I am happy to welcome you to our monthly public board meeting.

We have a full agenda today. But first I would like to take a few minutes to address the Auditor General Report on Integrated Healthcare in Alberta (the “Report”), which was released last week.

The issues raised in the Report are extremely important and, on behalf of the AHS Board, I would like to thank the Office of the Auditor General for its analysis of Alberta’s healthcare system. For those who did not see it, the Report identifies three areas for improvement:

- Structure — and specifically the relationship between AHS, the Department of Health and the medical profession;
- Integration of physicians — and specifically more attention to health results, accountability and integration of physician services and other healthcare providers; and
- Clinical Information Systems, so information generated at all levels is available to patients, physicians, care teams, care programs and health system leadership.

AHS appreciates the Report's analysis and we are already working on shifting our collective thinking and approach to healthcare delivery. Specifically, AHS has three key initiatives underway to improve the integration of health services and to help AHS evolve into a high-performing, sustainable, patient-centred health system.

One initiative, *Enhancing Care in the Community*, focuses on supporting people at home or in the community with enhanced care and supports to keep them healthy and well, and out of hospital as long as possible.

The second initiative, *Primary Health Care Integration*, is enabling primary care teams both within and outside AHS to work more closely together to improve care for patients across Alberta as they move through the health system.

Thirdly, we have started developing the foundation for the *AHS Provincial Clinical Information System*. When that system is up and running, healthcare providers will be able to access comprehensive and consolidated patient information — information that will travel with patients wherever they access the health system. Details of this work, and a way to measure our progress, are outlined in our three-year Health Plan and Business Plan, which is coming to the Board today for approval. Once approved by our Board, the Health Plan and Business Plan will go to the Minister of Health for her review.

I am pleased the Report recognizes many other significant initiatives undertaken by AHS to improve quality and integration of care. Some of those highlighted initiatives include:

- CoACT, our innovative model of collaborative care now used in more than 160 hospital units across the province;
- Our Patient First Strategy, which puts patients, families and clients at the centre of everything we do;
- Our Strategic Clinical Networks, which drive innovation and identify best practices that improve outcomes and experiences; and
- Our Patient Navigators who support patients and families in the areas of cancer care, dementia care and medical assistance in dying.

While good steps have occurred, we know there is still a lot more that must be done to achieve a fully integrated healthcare system. We know we must continue to enhance our healthcare system to be flexible, adaptable and responsive to meet the changing needs of Albertans. And, as Accreditation Canada noted last month, there is a shift and progress is being made to improve integration. We look forward to continuing to work together with our partners, stakeholders and all Albertans to create a high-performing, sustainable, patient-centred healthcare system that supports the health needs of all Albertans.

Now onto today's agenda; and, as I said before, it is a full one.

The Finance Committee is bringing the 2017-2020 Health Plan and Business Plan to the Board for approval. That Committee is also seeking approval for the fourth quarter investment report, preferred accommodation rates and restricted grant agreements.

We will hear from the Community Engagement Committee, which seeks approval for advisory council member appointments, term extensions for Health Advisory Council chairs, appointments of trustees and amended bylaws for some of the province's health foundations.

The Quality and Safety Committee is bringing forth revisions to AHS Quality Assurance Committee templates.

Finally, the Audit & Risk Committee will be seeking approval for the AHS 2016-17 accountability annual report, and the AHS consolidated financial statements ending March 31, 2017.

Before that, we will hear from our President and CEO, Dr. Verna Yiu, about new community engagement efforts from our Emergency Medical Services team. She also has a video for you to enjoy.

❖ **Review of Agenda**

UPON MOTION duly moved, seconded and unanimously carried, the Board approved the agenda for the meeting of the Board held on June 1, 2017, which was provided to the Board in advance of the meeting.

❖ **Declaration of Conflicts of Interest**

Ms. Hughes requested that any conflicts of interest relevant to the meeting or items noted on the agenda be declared. None were declared.

1. **Approval of Minutes – April 27, 2017**

UPON MOTION duly moved, seconded and unanimously carried, the minutes of the AHS Board meeting held on April 27, 2017 were approved and the Chair of the Board and Corporate Secretary were authorized and directed to sign the minutes in the form so approved; and the Corporate Secretary was directed to file them, together with all ancillary documents attached thereto, in the corporate records of AHS and to deliver a copy of these to the Minister of Health.

2. **Comments from the President & Chief Executive Officer**

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

Thank you, Linda, and good afternoon, everyone.

It is a great time of the year and especially if you are a member of our Emergency Medical Services ("EMS") teams. This week is National Paramedic Services Week and it continues until Saturday. During this week, our EMS teams across the province have been meeting with Albertans and raising awareness about the work of EMS personnel and their contributions to the healthcare system. These teams are inviting members of their communities to participate in station tours, ambulance tours and equipment demonstrations — and as you will see in a video coming up, these tours are a lot of fun for Albertans, especially for the children.

I am very proud of our EMS crews and I would like to share some facts and statistics about their work. Every year, about 5,600 EMS professionals respond to more than 320,000 911 calls, 170,000 inter-facility transfers and more than 7,000 fixed-wing medevac flights. AHS EMS currently has 450 ground resources including ambulances, inter-facility transfer vehicles, and non-ambulance transfer vehicles, such as wheelchair accessible vans. We also have 11 fixed wing aircraft and access to three dedicated helicopters through STARS.

AHS' consolidated dispatch system monitors all of these resources in real time, so we always know where every EMS vehicle is. And since EMS operations are no longer restricted by local boundaries, we can always ensure the closest available resource is sent to an emergency no matter where it occurs in the province.

But to fully grasp the measure of EMS work, you have to look beyond the numbers and hear the stories of Albertans who have been helped by paramedics and their colleagues during moments of crisis. I encourage you to visit thankaparamedic.com to read many notes of appreciation from Albertans whose lives have been touched by the work of our hard-working and dedicated EMS personnel. The stories in these notes really underscore why we do what we do in healthcare. We know Albertans respect and value our EMS crews. So, recently, our EMS teams developed several online tools to reach out to Albertans and share details about their work and their colleagues across the province. We have a video about these new tools.

[A video was shown with respect to EMS]

I would like to thank AHS EMS teams for coming to the aid of Albertans throughout the year, and I would like to congratulate them for their National Paramedic Services Week events and for their new suite of online tools. It is always good to keep the lines of communication open with the people that we serve.

Before I close, I would also like to offer congratulations to my colleague, Dr. James Silvius, the AHS Senior Medical Director for Seniors Health. The Canadian Medical Association recently bestowed Dr. Silvius with its Dr. William Marsden Award in Medical Ethics for preparing Alberta for federal legislation dealing with medical assistance in dying. The association recognized the hundreds of hours that Dr. Silvius spent working with the College of Physicians and Surgeons of Alberta and others to consult with physicians and solicit their viewpoints on the issue. Speaking on behalf of AHS, we are grateful to Dr. Silvius for gathering perspectives on the issue from across Canada and around the world to help our organization prepare for the most significant change to medical practice in decades.

Congratulations, Jim, on this prestigious and well-earned honour.

I would like to thank you for your time today, and for your continued interest in Alberta Health Services.

3. Community Engagement Committee

a) Report to the Board

Dr. Brenda Hemmelgarn, Committee Chair, reported on the Community Engagement Committee meeting on May 11, 2017. She noted the Committee was provided an update on community relations with advisory councils and foundations, an update on the work regarding the development of support guidelines for the foundations, and the concept of developing a vision for the foundations.

Dr. Hemmelgarn noted that Ms. Lucille Partington, Chair of the Peace Health Advisory Council, gave a very interesting overview of the work and objectives of that council and the Committee really appreciated her time.

Dr. Hemmelgarn also noted that the Committee reviewed the work plans for the advisory councils and considered five items for recommendation for approval.

b) [CEC17-11] Advisory Council Member Appointments

Dr. Brenda Hemmelgarn, Committee Chair, advised that under the Amended Bylaw for Alberta Health Services Establishing Health Advisory Councils, the Board is required to approve appointments of members to Health Advisory Councils. Under the Amended Bylaw for the Addiction & Mental Health Provincial Advisory Council and the Amended Bylaw for the Cancer Provincial Advisory Council, the Board is required to approve appointments of members to Provincial Advisory Councils.

Dr. Hemmelgarn further advised that the Committee reviewed appointments to certain advisory councils effective June 1, 2017 and recommended that the AHS Board approve such appointments. She noted that AHS is very grateful for the commitment of the volunteers across the province and value their work and appreciate their commitment to health care in the province.

UPON MOTION duly moved, seconded and unanimously carried the Alberta Health Services Board approved the appointment of Deryl Comeau for a three year term to the David Thompson Health Advisory Committee, Lindy Fors for a three year term to the Addiction & Mental Health Provincial Advisory Committee and Michele Zielinski for a two year term to the Cancer Provincial Advisory Committee.

c) [CEC17-12] Health Advisory Council Chair Term Extensions

Dr. Brenda Hemmelgarn, Committee Chair, advised that the Bylaws for Health Advisory Councils provide that an elected Council Chair may only serve for more than six years if so approved by the AHS Board. She noted that four Council Chairs that have been re-elected by their councils require Board approval for the extension of their terms. The Committee reviewed the appointments and recommended that the AHS Board approve the extension of term for the four re-elected Council Chairs, based on long standing commitments.

UPON MOTION duly moved, seconded and unanimously carried the Alberta Health Services Board approved the term extension for four re-elected Health Advisory Council Chairs as follows:

- **Kenneth Sauer, Palliser Triangle, extended from May 2016 to May 2018;**

- **Larry Albrecht, Prairie Mountain, extended from May 2016 to May 2018;**
- **Ken Matthews, Lesser Slave Lake, extended from January 2018 to May 2019; and**
- **Ruth Martin-Williams, Tamarack, extended from May 2018 to May 2019.**

d) [CEC17-13] Amended Bylaws of Mental Health Foundation

Dr. Brenda Hemmelgarn, Committee Chair, advised that the Committee was presented a request to amend the Bylaws of the Mental Health Foundation to change the maximum allowable number of trustees from 14 to 18. Under the *Regional Health Authorities Foundations Regulation* AR28/2007, the amended Bylaws must be reviewed by the AHS Board and forwarded to Alberta Health for Ministerial approval.

The Committee recommended the Board approve the amended Bylaws of the Mental Health Foundation.

UPON MOTION duly moved, seconded and unanimously carried the Alberta Health Services Board approved the amended Bylaws of the Mental Health Foundation in the form reviewed by the Board and directed management to submit the amended Bylaws to Alberta Health for Ministerial approval.

e) [CEC17-14] Amended Bylaws of Strathcona Community Hospital Foundation

Dr. Brenda Hemmelgarn, Committee Chair, advised that the Committee was presented a request to amend the Bylaws of the Strathcona Community Hospital Foundation. The amendments to the Bylaws are mainly for the sole purpose of moving the Bylaws into the current foundation bylaw template form that is agreed to between AHS and Alberta Health. Under the *Regional Health Authorities Foundations Regulation* AR28/2007, amended Bylaws must be reviewed by the AHS Board and forwarded to Alberta Health for Ministerial approval.

The Committee recommended that the Board approve the amended Bylaws of the Strathcona Community Hospital Foundation.

UPON MOTION duly moved, seconded and unanimously carried the Alberta Health Services Board approved the amended Bylaws of the Strathcona Community Hospital Foundation and directed management to submit the Bylaws to Alberta Health for Ministerial approval.

f) [CEC17-15] Q1 Appointment of Trustees to Health Foundations

Dr. Brenda Hemmelgarn, Committee Chair, advised that the AHS Board has the responsibility to appoint Trustees to established Foundations pursuant to the *Regional Health Authorities Foundations Regulation*. The Committee reviewed appointments to certain Foundations effective June 1, 2017 and for the terms specified. The Committee recommends that the AHS Board approve such appointments. Dr. Hemmelgarn noted that AHS is very grateful for the commitment of Foundation volunteers across the province and value their work and appreciate their commitment to health care in the province. Given the number of appointments, the names were not read but will be incorporated into the minutes of the meeting and posted publicly.

UPON MOTION duly moved, seconded and unanimously carried the Alberta Health Services Board approved the trustee appointments or re-appointments to the Foundations effective June 1, 2017 as reviewed by the Committee and the Alberta Health Services Board.

Foundation	Name	Role	Period of Appointment
Calgary Health Trust	Mr. Sandy Edmonstone	Trustee	June 1, 2017 (expiring May 31, 2020)
	Mr. Robert Hawes	Trustee	June 1, 2017 (expiring May 31, 2020)
	Dr. Richard Hu	Trustee	June 1, 2017 (expiring May 31, 2020)
	Mr. David Routledge	Trustee	June 1, 2017 (expiring May 31, 2020)
Fort Saskatchewan Community Hospital Foundation	Mr. Steve Hull	Trustee	June 1, 2017 (expiring May 31, 2019)
	Mr. Wayne Land	Trustee	June 1, 2017 (expiring May 31, 2020)
	Mr. Mike LeBlanc	Trustee	June 1, 2017 (expiring May 31, 2020)
	Mr. David Moon	Trustee	June 1, 2017 (expiring May 31, 2018)
	Ms. Christine Sheasgreen	Trustee	June 1, 2017 (expiring May 31, 2020)
	Ms. Margaret Wade	Trustee	June 1, 2017 (expiring May 31, 2019)
Oyen and District Health Care Foundation	Ms. Dianne Ball	Trustee	June 1, 2017 (expiring May 31, 2020)
	Ms. Beverly Haag	Trustee	June 1, 2017 (expiring May 31, 2020)
	Ms. Joeleen Turner	Trustee	June 1, 2017 (expiring May 31, 2020)
Ponoka and District Health Foundation	Ms. Kelly Sperber	Trustee	June 1, 2017 (expiring May 31, 2020)
	Ms. Dorothy Ungstad	Trustee	June 1, 2017 (expiring May 31, 2020)
Strathcona Community Hospital Foundation	Mr. Ken Lesniak	Trustee	June 1, 2017 (expiring May 31, 2020)

4. Governance Committee

a) Report to the Board

Mr. Hugh Sommerville, Committee Chair, reported on the Governance Committee meeting on May 11, 2017. He noted that the Interim Chief Ethics Officer attended the meeting to provide a quarterly update.

Mr. Sommerville noted that the Committee had an interesting discussion on generalities of the Accreditation Canada work and criteria for governance. It also received a policy report outlining certain corporate and clinical policies. This will be a standard item presented to the Committee on an annual basis.

In addition he noted, the Committee considered its process for identifying and assessing Board Member Skills and Competencies Matrix, as well as discussed ongoing education and orientation opportunities.

There were no items presented at the Committee to be considered for Board approval.

5. Human Resources Committee

a) Report to the Board

Mr. Richard Dicerni, Committee Chair, reported on the Human Resources Committee meeting on May 31, 2017. He noted that the Committee discussed success measures under *Our People Strategy*, received an update on labour relations and essential services, and discussed senior leadership compensation and workplace health and safety.

There were no items that came through the Committee for Board approval.

6. Quality & Safety Committee

a) Report to the Board

Ms. Glenda Yeates, Committee Chair, reported on the Quality & Safety Committee meeting on May 24, 2017.

Ms. Yeates advised that the Committee began the meeting with a discussion on long term care. The Committee also received a very interesting overview of the AHS response to an outbreak of an antibiotic resistant organism. She noted that the Committee discussed the AHS Infection Prevention and Control surveillance program and how this program used the outbreak experience to help strengthen communication, contact tracing, and surveillance processes. The Committee discussed the close working relationship that AHS has with Alberta Health when dealing with outbreaks of this nature.

Ms. Yeates further advised that the Committee discussed the on-site survey by Accreditation Canada in May 2017 during which 30 surveyors visited 129 AHS sites. The Committee discussed the major strengths so far identified by Accreditation Canada including that AHS has made

significant, tangible progress towards a fully integrated health system and that staff are passionate and show pride in their work at AHS. The Committee commended Management on the good work.

The Committee discussed patient safety and received certain quality reports.

b) [QSC17-20] Revisions of Alberta Health Services Quality Assurance Committee Templates

Ms. Glenda Yeates, Committee Chair, advised that the Committee considered an item for approval which involved amendments to the Quality Assurance Committee Local, Complex, Provincial and Subcommittee Terms of Reference templates. The Committee recommended that the Board approve such amendments.

UPON MOTION duly moved, seconded and unanimously carried the Alberta Health Services Board approved changes to the Quality Assurance Committee Local, Complex, Provincial and Subcommittee Terms of Reference templates as reviewed by the Board.

7. Finance Committee

a) Report to the Board

Mr. Richard Dicerni, Committee Vice-Chair, reported on the Finance Committee meeting on May 25, 2017.

The Committee considered three items for recommendation for approval of the Board.

b) [FC17-27] Fourth Quarter Investment Report

Mr. Richard Dicerni, Committee Vice Chair, advised that as mandated by AHS' Investment Bylaw, the Committee is required to review reports prepared by management and investment managers summarizing the activities and performance of AHS' investment portfolio on a quarterly basis. The *Regional Health Authorities Regulation* and the AHS Investment Bylaw describe the requirements for the Board to approve or ratify by resolution AHS' investment decisions. The Committee was presented the March 31, 2017 Fourth Quarter Investment Report and recommended that the Board ratify the transactions.

UPON MOTION duly moved, seconded and unanimously carried the Alberta Health Services Board ratified the investment portfolio and transactions as described below, and as certified by signed investment compliance certificates from AHS and Phillips, Hager & North Investment Management:

(a) as at March 31, 2017, AHS held restricted and unrestricted funds managed by Phillips, Hager & North Investment Management and Manulife Financial totalling \$1.775 billion;

(b) the funds were invested in short term treasury bills, federal, provincial and corporate fixed income bonds, pooled mortgage funds, bond funds, Canadian and Global equity funds; and

- (c) **all of the funds invested during the quarter ended March 31, 2017, were invested in accordance with the Investment Bylaw and Investments Policy as certified by signed investment compliance certificates from AHS and Phillips, Hager & North Investment Management.**

c) [FC17-30] 2017-20 Health Plan & Business Plan

Mr. Richard Dicerni, Committee Vice-Chair, advised that the Committee reviewed a draft of the 2017-20 Health Plan and Business Plan (the "Plan"), including the 2017-18 Consolidated Budgeted Financial Statements (the "Budget"). He noted the Committee recommended the Board approve the Plan and the Budget which included the reserve transactions. Such reserve transactions are in addition to the expenses outlined in the Budget. He also noted that the Plan and the Budget will be submitted to the Minister of Health for approval and that after Ministerial approval is received, the Plan and the Budget will be posted on the AHS public website. The Committee recommended that the Board approve the Plan and the Budget.

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

- (a) **approved the 2017/20 Health Plan & Business Plan (the "Plan") , including the 2017-18 Consolidated Budgeted Financial Statements (the "Budget"), which includes the reserve transactions, in the form reviewed by the Board, with such non-substantive changes that management of Alberta Health Services considers necessary or advisable; and**
- (b) **authorized and directed management of Alberta Health Services to deliver the Plan and the Budget to the Minister of Health for approval, and after receiving such approval, make the Plan and the Budget available to the public through the Alberta Health Services website.**

d) [FC17-31] Preferred Accommodations Rates

Mr. Richard Dicerni, Committee Vice-Chair, advised that with respect to the setting of the preferred accommodation rates, the Board is to approve preferred accommodation charges pursuant to the *Hospitalization Benefits Regulation*. He noted that the Board supported the use of Alberta CPI as basis for rate adjustment. Once every 3 years, AHS will review the applicability of the preferred accommodation rate formulas, and inform the AHS Board of the outcome of this process. He further noted that the Committee recommended that the Board approve the preferred accommodation charges as reviewed by the Committee and delegate the authority to the President & CEO to apply the formula to future years.

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

- (a) **approved the increase in the preferred accommodation rates effective July 3, 2017 based on the 2015 and 2016 increases in the Alberta consumer price index ("CPI") for health care goods and services (herein referred to as "Alberta CPI");**
- (b) **approved the application of the formulas reviewed by the Board for the purpose of adjusting the preferred accommodation rates on April 1 of each subsequent fiscal year.**

- (c) **delegated to the Alberta Health Services President and Chief Executive Officer the authority to approve annually the preferred accommodation rates calculated through the application of the above formulas.**

e) [AHSB17-02] Restricted Grant Agreements Over \$90M – Academic Medicine and Health Services Program Grant Agreements

Mr. Richard Dicerni, Committee Vice-Chair, reported that he was asked to speak to a motion for the Board to approve two restricted grant agreements between Alberta Health and Alberta Health Services – the first with respect to the South Sector Academic Medicine and Health Services Program and the second with respect to the North Sector Academic Medicine and Health Services Program. Both are with respect to the provision of clinical and non-clinical services at universities and AHS facilities by physicians participating in an academic medicine and health services program. He noted that each grant agreement exceeds the approval and signing authority level of the AHS President & CEO and therefore needs to be approved by the Board. He also noted that the Board will approve the grant agreements, the terms of which were reviewed by the Board, and delegate signing authority of the agreements on behalf of AHS to the President & CEO.

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

(a) approved the grant agreements for:

- (i) **the provision of insured medical services and education, research, and leadership/administrative services at the University of Calgary and at AHS facilities by physicians participating in the South Sector Academic Medicine and Health Services Program for the term July 1, 2017 to March 31, 2020; and**
- (ii) **the provision of insured medical services and education, research, and leadership/administrative services of clinical services and non-clinical services at the University of Alberta (U of A) and at AHS facilities by physicians participating in the North Sector Academic Medicine and Health Services Program for the term July 1, 2017 to March 31, 2020; and**

- (b) **delegated authority to execute the two grant agreements on behalf of the Alberta Health Services to the President & Chief Executive Officer.**

8. Audit & Risk Committee

a) Report to the Board

Ms. Glenda Yeates, reported on the Audit & Risk Committee meetings on May 25, 2017 and June 1, 2017. She noted that standard practice is that the Office of the Auditor General and KPMG are guests at the meetings in their role as external auditors of AHS.

Ms. Yeates noted that on May 25th, the Committee reviewed drafts of the Annual Report and the year-end financial statements. In addition, the Committee reviewed the results of an internal audit report and received an overview on the insurance program.

Ms. Yeates also noted that on June 1st, the Committee received the Auditor General Report to the Audit & Risk Committee for the year ended March 31, 2017.

b) [ARC17-34] AHS 2016-17 Annual Report

Ms. Glenda Yeates, advised that the Committee also reviewed a final draft of the AHS 2016-17 Annual Report and recommended that the Alberta Health Services Board approve the Annual Report.

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

- (a) approved the AHS 2016-17 Annual Report in the form reviewed by the Board, with such non-substantive changes that management of Alberta Health Services considers necessary or advisable; and**
- (b) authorized and directed management of Alberta Health Services to deliver the Annual Report to the Minister of Health, and to later make the Annual Report available to the public through the Alberta Health Services website.**

c) [ARC17-35] March 31, 2017, AHS Consolidated Financial Statements & Financial Statement Discussion & Analysis

Ms. Glenda Yeates, reported that the Committee also reviewed a final version of the March 31, 2017 Consolidated Financial Statements, the establishment of internally restricted surplus for future purposes, and the financial statement discussion and analysis. The Committee recommended the Board approve those items.

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

- 1. approved the internal restriction of:**
 - (a) \$714.305 million to represent the amount of unrestricted surplus invested in tangible capital assets as at March 31, 2017 and not available for any other purpose;**
- 2. approved the internally restricted surplus for future purposes as at March 31, 2017 of:**
 - (a) \$112.718 million to represent the amount of unrestricted surplus related to ancillary services;**
 - (b) \$42.224 million to represent the amount of unrestricted surplus related to insurance equity requirements and not available for any other purpose;**

(c) \$39.987 million to represent the amount of unrestricted surplus related to foundations and not available for any other purpose; and

(d) \$30.000 million for other defined initiatives;

3. approved the AHS:

(a) Consolidated Financial Statements for the year ended March 31, 2017 as reviewed by the Board; and

(b) Financial Statement Discussion and Analysis for the year ended March 31, 2017; both for inclusion in the AHS 2016-17 Annual Report and both in substantially the form reviewed by the Board, with such non-substantive changes that management of AHS considers necessary or advisable are hereby approved; and

4. authorized and directed management of AHS to take all such other action as management of AHS considers necessary or advisable in order to give full effect to the foregoing.

❖ **Adjournment**

There being no further business, the meeting was adjourned at 5:50 p.m.

_____/S/
Linda Hughes
Chair

_____/S/
Catherine MacNeill
Corporate Secretary & Legal Counsel