

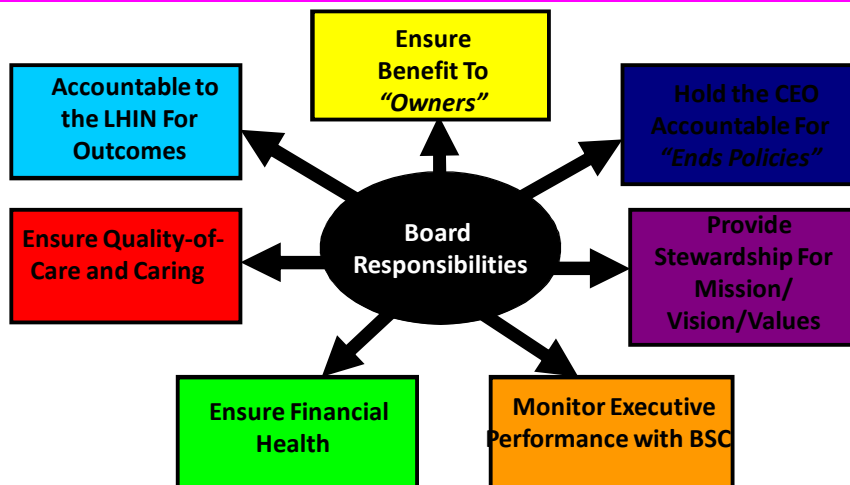
Healthcare Leaders' Dialogue Conference

"The Owners"

Hon. Elinor Caplan
Canada Strategies Inc.



Board Responsibilities



SHOULD BOARDS SURVIVE?

- Is there a “*value-added*” role that local Hospital Boards can/should provide?

Why do we need Hospital Boards?

- Is there really a need for a local Hospital Board?



Some Answers:

- ***Business Corporations Act*** requires Boards.
- ***Public Hospitals Act*** requires Boards and give them the mandate for “Quality & Management”
- Board employs only two staff:
 - Chief Executive Officer
 - Chief of Staff

Is there really a need for a local Hospital Board?

- Whose interests do they represent?
 - a) The Owners.
 - b) The Government.
 - c) The local community.
 - d) The people/patients who use the hospital.
 - e) The doctors and staff.

The Answer:

- a) **The Owners.**
- b) The Government.
- c) The local community.
- d) The people/patients who use the hospital.
- e) The doctors and staff.

Why do we need Hospital Boards?

- Who are the **owners**?
 - a) The members of the Corporation
 - b) The local community
 - c) The Government
 - d) Taxpayers
 - e) The Canadian Public

The Answer:

- a) The members of the Corporation.
- b) The local community.
- c) The Government
- d) Taxpayers**
- e) The Canadian Public**

Is there really a need for a local Hospital Board?

- What do the owners want/expect?
 - a) Access
 - b) Timely access
 - c) Timely access to quality care.
 - d) Timely access to safe, quality care.

The Answer:

- a) Access
- b) Timely access
- c) Timely access to quality care.
- d) Timely access to safe, quality care.**

SHOULD BOARDS SURVIVE?

- Why have other provinces disbanded local boards?

SHOULD BOARDS SURVIVE?

- What has been the historic role of the local Hospital Board.
 - a) **Advocate for the Institution**
 - b) **Fundraising**
 - c) Strategic Planning
 - d) Oversight
 - e) Fiscal Responsibility
 - f) Communications with the Public & MOHLTC

SHOULD BOARDS SURVIVE?

- How has their Role changed now that we have LHINS?
 - a) Advocate for the Institution
 - b) Fundraising
 - c) Strategic Planning
 - d) Oversight
 - e) Fiscal Responsibility
 - f) Communications with the Public & MOHLTC

The Answer:

- a) Advocate for the Institution
- b) Fundraising
- c) **Strategic Planning**
- d) **Oversight**
- e) **Fiscal Responsibility**
- f) **Communications with the Public & MOHLTC**

SHOULD BOARDS SURVIVE?

- Could the LHIN do the Hospital Board functions?
- Should the LHINS do the Hospital Board functions?

The Answer:

- Only if/when the LHIN becomes a Regional Health Authority and Regional Systems Manager.
- The *Made-In-Ontario Opportunity* will fail because Ontario Hospital Boards don't understand and can't or won't undertake the value-added role that only a Hospital Boards can accomplish.

Is there a "value-added" role that local Hospital Boards can/should provide?

- What should be a Hospital Board's top priority?

AIRLINE SECTOR:

- Your safety is our number one priority
- Result is Nine Sigma+

HOSPITAL SECTOR:

- We HARM 1 out of 13 who use our hospitals
- We KILL about 28,000 in our hospitals in Canada (40% in Ontario)
- Most Hospital Boards have delegated safety & quality to the Medical and Administration Staff
- Most Hospital Boards don't ask the tough or difficult questions and DO NOT MEASURE RESULTS.

Is there a “value-added” role that local Hospital Boards can/should provide?

- WHAT YOU MEASURE WILL IMPROVE
- WHAT YOU MEASURE WILL GET DONE
- THEREFORE QUALITY AND SAFETY MUST NOT/CANNOT BE DELEGATED

Is there a “value-added” role that local Governance Boards can/should provide?

- OUR OVERSIGHT RESPONSIBILITY IS CLEAR**
 - Our number one priority is your Safety & the Quality of Care you receive.
 - We are partners in planning with the LHIN. We want you to receive the right service at the right time in the location where you will receive safe, quality and cost effective care.

Is there a “value-added” role that local Governance Boards can/should provide?

- We will always be advocates for the owners
- We understand that staff satisfaction and patient satisfaction go together
- We will ensure human resource best practices
- We will be fiscally prudent

Is there a “value-added” role that local Hospital Boards can/should provide?

- Our Board Members will be diverse.
- Our Board Members will be selected because of their skills.
- We will ensure that our CEO and COS work together and are accountable for creating a continuous improvement environment.

Is there a “value added” role that local Governance Boards can/should provide?

- We will be transparent with our community, the LHIN and the MOHLTC.
- We will be active partners as an evidence-based, patient outcome-focused integrated health system is created in Ontario.

IF OUR BOARDS BECOME MODELS OF BEST PRACTICE IN HEALTH SECTOR GOVERNANCE

THEN WILL THE ANSWER BE:

“YES”

Local Governance will survive, and thrive and the People of Ontario will be well served.

Exercise #2: Table Dialogue

- Review the adjacent questionnaire on stakeholders in the system (10 min @ tables).
- Debrief (10 min).

(20 min)

See Stakeholder Analysis