#### **KEY FACTS:**

- The McGuinty government is using its extraordinary powers under the Public Hospitals Act with unprecedented frequency to appoint Supervisors to take over community hospitals.
- Hospital Supervisors are appointed by Cabinet and are given Terms of Reference by Cabinet. They report directly to the Minister of Health.
- In three communities recently, these government-appointed Supervisors have re-written or are in the process of re-writing the by laws of the local hospitals to eliminate elected hospital boards and voting rights of hospital members. These communities are: Alliston, Midland-Penetanguishene and Scarborough. This follows an earlier move led by the provincial government to eradicate members' voting rights at Toronto Women's College Hospital.
- In Kingston General Hospital, the Supervisor recently forced the removal of hospital CEO Joe DaMora who had publicly advocated to protect his local hospital services from cuts in the lead-up to the provincial election. The supervisor was sent in and the CEO (essentially) fired after the election.
- The elimination of elected hospital boards means the end of an almost 100 year history of elected hospital boards in Midland and Alliston and the eradication of voting rights for thousands of community members.
- The Ontario Health Coalition is concerned that the province has secretly adopted a policy of eliminating elected hospital boards. The coalition is warning that this move is part of a larger attempt to silence dissent about cuts to hospital services that are underway across Ontario.

The provincial government gave the community the impression that it supported elected community boards before the provincial election in October 2007. George Smitherman, then Minister of Health, said that volunteer-based boards and community representation are "still the best option":

## "Community governance is good for the hospital and health-care sector in Ontario – I believe that strenuously."

Michael Oliviera, Canadian Press, "Community Should Help Govern Hospital, Minister Says" July 20, 2007.

Most took this statement and others like it to mean that the health minister continued to support community elected hospital boards. The moves to eradicate the boards in the three communities that we have found out about (Alliston, Midland and Scarborough) happened after the provincial election.

A summary of events at each of the three hospitals follows.

### **Midland**

Hospital: Huronia District Hospital. Original hospital built by the community in 1905. Estimated 100 year history of an elected hospital board

Supervisor: Kevin Smith

Date Appointed: October 2007

Elimination of elected board: underway now

Number of community members whose voting rights would be eliminated if this goes through: approx. 2,400

Summary:

In the spring 2007, several board members of the Huronia District Hospital (HDH) revealed to the public a secret plan proposed by the board to merge HDH with nearby Catholic hospital Penetanguishene General Hospital. The board members that opposed the plan were concerned about the loss of reproductive health services including abortions and end-of-life services if both hospitals were to be under Catholic governance. Ultimately four board members opposed to the merger resigned from the board. Thousands of community members in Midland and Penetanguishene opposed the merger over concerns about the loss of these services and loss of secular governance. 2,400 people paid for memberships in the hospital and signed petitions, hundreds attended town hall meetings, and the membership organized to hold a general meeting. Before the general meeting could be held, the remaining board members that had created the merger plan resigned forcing the province to appoint a Supervisor.

Kevin Smith was appointed as Hospital Supervisor. He rejected the merger into a faith-based hospital. Instead he arranged for the secular HDH to take over the Catholic Penetanguishene General Hospital and for the Catholic Hospital Association/nuns to take over Penetanguishene's mental health facility instead. Smith also recommended some personnel changes and other operational improvements.

In meetings with the health coalition he said that he personally did not believe in elected hospital boards but that his primary mandate was to get a new board into place, appoint a CEO and deal with the merger proposal and operational issues, and that he would not re-write the by laws.

Despite this, Smith has announced that he is re-writing the by laws. He has arranged for an appointed nominating committee to be put into place. That nominating committee will appoint the board. The board will be unelected hereafter.

In a town hall meeting attended by several hundred community members, the community forged a position that they would support the nomination process as long as the board would ultimately be elected. Community members expressed a strong willingness to make the board work, support for a board with qualifications and skills, and a desire for restored stability as soon as possible, but opposed the removal of voting rights for hospital members. This recommendation has been ignored. The nominating committee has been given terms of reference requiring that all committee members support Kevin Smith's position that the board will not be elected hereafter. The community is appealing to the government to stop the disenfranchisement of the hospital membership.

#### Alliston:

Hospital: Stevenson Memorial Hospital. Original hospital built by community donations in 1928. Estimated 70 year history of elected hospital board.

Supervisor: Mark Rochon

Date Appointed: June 11, 2007

Eradication of Elected Board: started winter 2007

Summary:

In the winter of 2006, the hospital board disclosed plans to close the birthing unit at the hospital. Hundreds of community members flooded public meetings to oppose the cut to services. Ultimately the hospital board resigned in June 2007. The provincial government appointed a Supervisor to take over the hospital.

The supervisor selected a board and put it in place at the end of 2007. The supervisor re-wrote the by laws to eliminate the memberships' voting rights. Under the supervisor's arrangement, the appointed board will essentially become self-selecting thereafter through a board-led nominating committee that will appoint the board. The nominating committee is made up of board members with just two spaces for community members' representatives.

#### **Scarborough**

Hospital: The Scarborough Hospital was formed out of the merger of the Scarborough General Hospital and Scarborough Grace Hospital and includes a number of satellite facilities. Scarborough Hospital opened in 1956 and the Scarborough Grace Hospital opened in 1985.

Supervisor appointed by the McGuinty government to take over the hospital: Robert Devitt

Date he was appointed: July 30, 2007

Elimination of elected board: began spring/summer 2008

Summary:

The Hospital Supervisor was appointed following community unrest and a court challenge. After an attempt to cut services and consolidate them onto one site forcing patients to travel further, the hospital board had attempted to change the hospital's by laws and refused to recognize the voting rights of a significant number of voting members. The community held massive public meetings including one of over 1,500 people and fought the attempt to disenfranchise the membership in court. The members won the court challenge. The province responded by sending in a Supervisor to take over the hospital. The Supervisor has eradicated all members' voting rights.

The supervisor did an operational review regarding workplace and patient safety issues, a high mortality rate, and other issues. The hospital had a problematic merger, was impacted by SARS, and suffered from high turnover of CEOs and the conflict created when the board tried to disenfranchise the membership. However, in addition to implementing procedures and measurements to address the operational issues and appointing a new CEO and board, the supervisor also re-wrote the hospital by laws eliminating the voting rights of the members to elect the board.

The Supervisor acknowledged the legitimate concerns of the community regarding the poor communication by the hospital leadership and processes used to shut out the community. Nonetheless, he has eradicated the elected board and replaced it with an appointed board. He changed the by laws and the governance structure to ensure that the board will hereafter be appointed not elected.

The provincial government gave the Scarborough community the impression that it supported elected community boards before the provincial election in October 2007. George Smitherman, then Minister of Health, said that volunteer-based boards and community representation are "still the best option":

# "Community governance is good for the hospital and health-care sector in Ontario – I believe that strenuously."

Michael Oliviera, Canadian Press, "Community Should Help Govern Hospital, Minister Says" July 20, 2007.

Many took that to mean that he supported the member's rights to elect the board. However, in December, just two months after the provincial election, the government-appointed supervisor began his review of the governance structure and the process to eliminate the members' voting rights.