

**Health Sciences North  
Board Meeting Minutes – Open Session  
September 30 2025**

**Voting Members Present:**

Michel Paulin	Stéphan Plante	Tom Laughren
Marc Despatie	Grace Alcaide Janicas	Louise Paquette
Chris Leduc	Tammy Eger	Francesca Grosso (joined @ 5:42 p.m.)
Pamela Williamson	Chantal Makela	Miriam McDonald
	Shayne Wisniewski	

**Non-Voting Members Present:**

David McNeil	Lisa Smith	Dr. Pankaj Bhatia
Dr. Matt Cavanagh	Dr. Ravi Singh	

**Non-Voting Members Excused:**

**Staff:**

Natalie Aubin	Jessica Diplock	Mark Hartman
Steve Volpini	Anthony Keating	Debbie McQuarrie
Dr. Rob Ohle	Stephanie Winn	
Jason Turnbull	Anne Gauthier	

**Recorder:** Christine Hryciw

**Declined:**

**1.0 Call to Order**

The meeting was called to order at 5:06 p.m. with T. Laughren at the chair. He subsequently provided a land acknowledgement. No conflicts of interest were declared.

**2.0 In Camera Review of Agendas (Open and Closed Sessions)**

T. Laughren requested a motion to move in camera at 5:05 p.m.

There was discussion regarding whether patient complaints should appear as a standalone agenda item rather than under the consent agenda. F. Grosso requested that items be flagged earlier to allow sufficient time for review. L. Paquette suggested that the full Board discuss this approach together. It was agreed that this will be considered for future agendas. Dr. Bhatia noted that if a complaint reviewed at the Quality Committee warrants further discussion, it could be brought forward to the Board.

The CEO requested time on the agenda to discuss organizational changes.

**MOTION: Francesca Grosso / Stéphan Plante**

**BE IT RESOLVED THAT the Board of Directors meeting move in camera to review the open and closed session agendas.**

**CARRIED**

**MOTION: Marc Despatie / Tammy Eger**

**BE IT RESOLVED THAT the Board of Directors meeting move out of camera.**

**CARRIED**

**3.0 Approval of Agenda**

Adoption of the agenda by the Board constitutes approval of each item listed under the Consent Agenda Matters portion of the agenda, and in particular, items 7.1, 7.2, 7.3, 7.4 and 7.5.

**MOTION:**

**BE IT RESOLVED THAT the agenda of the Open Session of the September 30, 2025 Board of Directors meeting be approved as circulated.**

**CARRIED**

**7.1 Minutes of May 27, 2025 Open Session Board Meeting**

**BE IT RESOLVED THAT the minutes of the Board of Directors open session meeting held on May 27, 2025 be approved as circulated.**

**7.2 Report from Finance Committee**

## **Board Delegation of Signing Authority and Review of Banking**

### **7.3 Reports from Governance and Nominating Committee Accreditation Canada Governance Standard and Proposed Oversight Process**

## **4.0 New Business**

### **Presentation**

#### **4.1 Accreditation Canada Governance Standard Gap Analysis Results**

J. Diplock presented the Governance Standard Gap Analysis results, as included in the Board package. She noted that some governance standards overlap with elements in the Board Education Plan, providing an opportunity to identify and align any areas of cross-connection. She also highlighted the importance of increasing engagement across Board committees.

Next steps include coordinating the required reviews and ensuring completion of the assessment by September 30, 2026, and developing an action plan for any standards requiring attention. It was asked whether Accreditation Canada will be interviewing the Board or individual committees as part of the oversight process; J. Diplock will inform the Accreditation Committee accordingly.

M. Paulin commended the approach and encouraged diversity of review methods. He referenced Section 3 related to committee mandates, particularly the Finance Committee, and noted the value of cross-accountability. He suggested that policies might benefit from review by more than one committee, emphasizing that multiple perspectives would strengthen oversight.

### **Quality Committee**

#### **4.2 Patient Story**

F. Grosso provided an overview of the patient story included in the Board package. The Quality Committee issued a letter of recognition to all individuals named in the story. T. Eger echoed the sentiments expressed, noting that the story reflects a strong team-based approach to patient care.

#### **4.3 Monitoring of QIP Targets**

F. Grosso reported that Time to Inpatient Bed continues to track well. She reviewed the QIP targets with the Board, as outlined in the Board package. Dr. Cavanagh inquired about ER cutbacks in Sault Ste. Marie and whether similar pressures might affect HSN, noting concerns about meeting metrics. The CEO responded that the situations in Sault Ste. Marie, North Bay, and HSN differ. He referenced the ONA agreement and physician coverage hours, noting that Sault Ste. Marie lost two physicians per shift but that HSN appears to be managing effectively. Dr. Bhatia confirmed that HSN has not experienced a decrease in the number of ER physicians. There was a comment added that some challenges are being linked to decreased funding; however, HSN is advancing an initiative through Ontario Health, which is guiding the coordinated process. It was further emphasized that the inquiry was to ensure HSN remains in good standing. It was noted that current provincial funding ranks HSN 20th out of 74 hospitals. The CEO expressed pride in the excellent work underway in the ER.

#### **4.4 Annual Report from the Chief Nursing Executive**

L. Smith presented the annual report for the Chief Nursing Executive (CNE) role. She outlined the key responsibilities of the CNE, including strategic planning, organizational decision-making, professional accountability, and collaboration. Key actions highlighted included governance, leadership, and practice. The most recent nursing data was shared, noting a current total of 2,088 nurses. The Clinical Extern Program was emphasized as one of HSN's most successful initiatives in recent years, which provides three months of shoulder-to-shoulder guidance and support for new nurses. Since its inception, 638 nurses have been hired through this program. Additionally, the Nurse Graduate Guarantee (NGG) program supports novice nurses with workshops to aid their transition to practice, enhancing competency and confidence.

Particular areas of focus were presented: human health resources recruitment and retention, building and enhancing competencies, health and wellness initiatives, and workplace violence and prevention.

Board members thanked the CNE and noted that while significant progress has been made, there is still work to be done. T. Eger acknowledged the recruitment efforts and inquired about human

resources (HR) support; it was confirmed that HR has been restructured to support these initiatives effectively. Regarding nursing departures (page 28), it was indicated that there is no detailed breakdown, but contributing factors include position changes, shift preferences (e.g., Monday-to-Friday), relocation, and decisions to leave acute care settings post-COVID while remaining in healthcare. Congratulations were offered and questions arose regarding future political or economic challenges. The CNE highlighted ongoing financial support but expressed concern about retaining nurses in Northern Ontario, particularly in the northeast. It was noted that family considerations, such as childcare and scheduling, are significant factors for nurses and emphasized the importance of supporting both experienced and new nurses.

## **5.0 Board Chair and CEO Reports**

### **5.1 Board Chair Report**

The Chair expressed appreciation to Past Chair S. Plante for his contributions and welcomed the new member to the Board. He also thanked the senior leadership team for their ongoing efforts. Additionally, he thanked former Board

### **5.2 CEO Report**

D. McQuarrie was acknowledged for stepping in to fill the Chief Financial Officer role, as was N. Aubin, who will be departing HSN to become CEO of the French Language Health Planning Centre.

The CEO highlighted the organizational scorecard, noting opportunities for improvement, with particular focus on Length of Stay. It was noted that Dr. J. Fenton has been retained to support utilization improvement. Sick time and overtime remain above target, though year-over-year progress has been made. Progress was also noted on social accountability targets.

#### **CEO Update:**

CEO goals and organizational initiatives updates were provided:

*Strategic Plan:* The strategic plan has been launched.

*Capital Projects:* The Long-Range Planning Committee will review completed work, including the potential financing agreement for the Idylwyld Golf & Country Club land purchase. The CEO highlighted collaboration with key stakeholders, including the President and CEO of the Health Sciences North Foundation, the Director of Communications, community partners, the Minister of Colleges and Universities, and the President of the Treasury Board. Work is ongoing with the Foundation on the capital campaign, with a proposed deadline extension to March 31, 2026, from December 2025.

*Academic Initiatives:* Dr. Ohle has led foundational work with academic partners. NOSM is developing nursing programs. Goal 9 submission to HSSP has been completed.

*Digital Strategy:* Goal 10 includes EMR and OneHits initiatives. Congratulations were extended to S. Volpini on the successful OneHits launch, which has relieved pressure on staff.

*Central Intake and Coordinated Access:* HSN is one of nine hospitals participating in this Ontario Health-driven initiative, including e-referral and taking a primary role in central access initiatives.

*Quality Improvement Plan (QIP):* The QIP was reviewed as part of ongoing performance monitoring.

## **6.0 Adjournment of Open Session**

**MOTION: M. Paulin/G. Alcaide Janicas**

**THERE BEING no further business, that the Open Session of the September 30, 2025 Board of Directors meeting be adjourned.**

**CARRIED**