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HEALTH SCIENCES NORTH
ANNUAL GENERAL MEETING 2018

Report from the President & CEO

Dominic Giroux



Health Sciences North
Horizon Santé-Nord

Report of the President and CEO Dominic Giroux AGM - June 21, 2018

Hello, bonjour, Boozyoo, Aanii, Kwe Kwe.

This is my first report to you as President and CEO of HSN and HSNRI. The theme for this year's AGM is ***Your Voice, Your Vision***.

That theme has been guiding me since my arrival as President and CEO. When I joined in October, I knew I needed to first hear from staff and physicians, who are the experts in health care delivery, to find out what was happening at HSN, and how they thought we could make things better.

Between the announcement of my appointment in April 2017 and the beginning of my term in October 2017, I had already reached out individually to the 24 other hospital CEOs in Northeastern Ontario and sat down with approximately 60 external stakeholders.

As of October, I spent the first 100 days listening to what my new colleagues had to say about what HSN excelled at, and about opportunities for improvement.

I took part in over 330 unit huddles and department meetings. My questions were systematic. What should I know about HSN? What are you proud of? What would you like to brag about? What's on your mind? The most popular question was: if you had a magic wand, what would you do? What have you seen other CEOs do well that you think I should be doing? What have you seen other CEOs do not so well – without giving names? What should vice-presidents stop doing, start doing or continue doing.

I also chatted with staff, volunteers, patients and their families while doing my rounds on the floors, while in line at Tim Horton's or often walking to my car at the end of the day.

Internally, I heard tremendous pride in the work of colleagues, in the quality of care we provide and in the evolution of HSN in the past decade. Staff told me to "make Lean leaner". They felt that we were increasingly "top heavy" while we were cutting the front-line. They emphasized the need to reinvest in staff professional development and training. They told me that a digital transformation is a must, and that such a transformation needs to be clinically-led.

Externally, I heard that either our reputation is very good, or if some people had misconceptions before, their view was that our reputation was improving. People told me to listen to patients. They commented that HSN had put a lot of focus on teaching and research these last few years, and they encouraged me to speak more about our performance as to the quality of care. Partners told me that we need a strong voice for the North in health and that HSN needs to provide it. Finally, I was advised to partner more with other health providers, to "walk the talk" and "lead from behind".

In addition to this outreach with external partners and attending those 330 unit huddles and department meetings, my focus in the last six months of the 2017-2018 fiscal year was on these six areas.

- **Number 1:** getting the alignment right between the Boards of HSN and of the Health Sciences North Research Institute and senior management;
- **Number 2:** enhancing the collaborative effort with the North East LHIN, as described by our Chair, to better serve ALC patients;
- **Number 3:** re-introducing an annual budget based on the April to March fiscal year and containing the deficit.
- **Number 4:** advancing our capital projects at the Ministry of Health and Long-Term Care;
- **Number 5:** streamlining senior management by 29% and removing a layer of management between the CEO and most departments so that we be positioned for future success;
- **Number 6:** getting ready for our 2019-2024 strategic plan.

With regards to HSN's financial situation, on my very first day at HSN on October 2nd, senior management was reporting a deficit of \$5.3 million for the first five months alone of the fiscal year. Mathematically, we were on track to have a deficit exceeding at least \$12.7 million for a 12-month period. Later tonight, our Treasurer will report that our 2017-2018 deficit was \$11.1 million, including \$2.7 million for one-time restructuring costs following the elimination of 46 management and non-unionized positions since January, which will yield savings permanent savings in 2018-2019 and beyond. Without these one-time costs, our deficit in 2017-2018 would have been \$8.4 million, one third less than what it was on track to be as of March 31, 2018.

From a clinical stand point, I am proud to report that HSN ranked this year in the top 10% of 680 North American hospitals on the National Surgical Quality Improvement Program administered by the American College of Surgeons. This is a commendable outcome for surgical patient care.

HSN has again this year met or surpassed provincial targets for patients visiting our Emergency Department. Provincially, urgent non admitted patients were triaged and out of the Emergency Department within 7 hours. At HSN, the average was 5.7 hours. Non urgent admitted patients also averaged shorter wait times at HSN than the provincial average.

The Northeast Cancer Centre, in partnership with Cancer Care Ontario, was selected as one of three sites in Ontario to launch the Lung Cancer Screening for People at High Risk, the first of its kind in Canada.

We have made significant in-roads in our mental health service delivery model. We want to ensure those struggling with mental illness and addictions are getting the right care, in the right place, at the right time. With the opening of a Rapid Access Addiction (RAAM) Clinic on Pine Street, patients that are generally more difficult to reach can access specialty care in the community. They have an opportunity to take part in early intervention programs and move toward long-term treatment programs.

As the health care leader in the Northeast, HSN continued to provide clinical expertise to remote Indigenous communities to assist with primary and mental health care. HSN's Northern Outreach Program provided this much needed nursing support and patients accessed the care they needed, when and where they needed it most.

A new Chronic Pain Management Clinic has been launched. And for the fourth year in a row, HSN was ranked among Canada's Top 40 Research Hospitals by Research Infosource Inc.

Mary Jane Scott and Nicole Everest already spoke to other important achievements, and Dr. Fenton will do so shortly from a medical standpoint.

So what's ahead?

Our Chair indicated that the Board had approved seven goals for 2018-2019. Let me review them briefly.

- 1 – A new strategic plan.** We need to secure approval of the HSN and HSNRI Boards of Directors by January 2019 of a 2019-2024 Strategic Plan compliant with Board-approved parameters.
- 2 – Financial Viability.** We need to contain the annual deficit at HSN in 2018-2019 to 1% of the total budget.
- 3 – Accreditation.** We need to be ready for the June 2019 surveyors' visit by Accreditation Canada. This includes meeting governance and risk management standards.
- 4 – Quality.** We need to achieve the three targets set in the 2018-2019 Quality Improvement Plan (QIP) approved by the Board.

Those three targets are:
 - Containing the total number of Alternative Level of Care (ALC) patients below 75;
 - Ensuring an immediate response within an hour by our Critical Events Resource Team for 80% of critical workplace violence incidents;
 - By the fourth quarter, ensuring that 50% of admitted patients have medication reconciliation completed on admission.
- 5 – Digital Health.** We will present to the HSN Board by March 2019 a plan to implement an Electronic Medical Record that improves patient care and is aligned with regional and provincial partners' health care information systems.
- 6 – Teaching and Research Partnerships.** We will provide evidence to the HSN and HSNRI Boards of Directors by March 2019 of tangible improvements in the teaching and research collaborations between HSN, HSNRI, Laurentian University, the Northern Ontario School of Medicine, the Thunder Bay Regional Health Sciences Centre and the Thunder Bay Regional Health Research Institute, including broader engagement of medical staff and Indigenous scholars in those collaborations.
- 7 – Capital.** We will present to the Board by May 2019 an updated Master Plan to address HSN's future capital needs in Greater Sudbury, including requirements for the Stage 1 submission for the expansion of the Ramsey Lake Health Centre to accommodate eventual new programs and services for NEO Kids. We will also ensure that the Learners' Centre and PET-CT capital projects remain on time and on budget.

I have had the opportunity and honour to get to know the leadership team since my arrival last Fall. One of these valued members will be retiring on August 31st after a very distinguished 35 years in healthcare.

Our Senior Vice President and Chief Operating Officer, Joe Pilon, has been an integral part of HSN's growth and his experience and knowledge have been important to me over the past year.

I want to thank you Joe for your 14 years of exceptional service at HSN and for the open and compassionate leadership you have demonstrated. We wish you well in retirement.

I want to acknowledge the hard work of all HSN staff, medical staff, learners, volunteers and partners. And I want to thank colleagues who served on the Senior Leadership Committee during the 2017-2018 fiscal year: Debbie Barnard, Dr. Chris Bourdon, Dr. John Fenton, Mark Hartman, Viviane Lapointe, Dr. Janet McElhaney, Maureen McLelland, Dr. David McNeil, Joe Pilon, Dr. Denis Roy, Gaston Roy, Lisa Smith, Paul St. George, Grace St. Jean and Rhonda Watson.

Thank you to everyone for joining us here this evening for HSN's Annual General Meeting.

It is a privilege to work with all of you in leading Northeastern Ontario's the academic health science centre.