

**Health Sciences North
Board Meeting Minutes – Open Session
March 28, 2023**

Voting Members Present:	Daniel Giroux Helen Bobiwash Tom Laughren Stéphan Plante	Daniel Giroux Angèle Dmytruk Chantal Makela Lyse-Anne Papineau	Dr. Catherine Cervin Rosella Kinoshameg Kati McCartney
Voting Members Excused:		Roger Gauthier	Francesca Grosso
Non-Voting Members Present:	Dominic Giroux Julie Trpkovski	Dominic Giroux Dr. Stephen Morris	Dr. John Fenton Dr. Sanjiv Mathur
Staff:	Mark Hartman Jessica Diplock Debbie McQuarrie	Max Liedke Dr. Natalie Aubin Dr. Robert Ohle	Anthony Keating Kelli-Ann Lemieux Jessica Lopatka
Guest:	Dr. Ravinder Singh		
Recorder:	Rebecca Ducharme		

1.0 Call to Order

The meeting was called to order at 5:30 p.m. with Daniel Giroux at the chair. A land acknowledgement was provided by Tom Laughren. No conflicts of interest were declared.

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

Da. Giroux noted that the Board had approved a recommendation by the Governance and Nominating Committee to adopt, on a trial basis, the practice of Board members beginning Board meetings in camera to have a brief discussion about the agenda in the absence of staff.

Da. Giroux asked for a motion to move in camera at 5:35 p.m.

MOTION: T. Laughren / C. Makela

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

CARRIED

See closed session meeting minutes for discussion points.

Da. Giroux asked for a motion to move out of camera at 5:39 p.m.

MOTION: Dr. C. Cervin / L. Papineau

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

CARRIED

3.0 Approval of Consent Agenda

Approval of the consent agenda by the Board constitutes approval of each item listed under the Consent Agenda portion of the meeting.

A correction to the minutes of the January 31st open session Board meeting was requested. It was noted that the minutes regarding certain aspects of Dr. Sarita Verma's presentation to the Board, and in particular, the commentary on new residency programs at NOSM University, was not entirely accurate. The Board member in question will contact the Corporate Affairs Liaison with the correct information.

Da. Giroux asked for a motion to approve the consent agenda as presented, noting the friendly amendment above.

MOTION: H. Bobiwash / G. Alcaide Janicas

BE IT RESOLVED THAT the consent agenda for the Open Session of the March 28, 2023 Board of Directors meeting be adopted as presented.

CARRIED

8.1 Minutes of January 31, 2023 Open Session Board Meeting

BE IT RESOLVED THAT the minutes of the Board of Directors open session meeting held on January 31, 2023 be approved as amended.

8.2 Review of Policies V-B-14, V-B-15, V-B-16 and IV-1

BE IT RESOLVED THAT the Board of Directors approve the following revised Board policies, as recommended by the Governance and Nominating Committee at its meeting of March 27,

2023:

Policy V-B-14	Media Policy
Policy V-B-15	Consent Agenda
Policy V-B-16	Procedure for Votes by Email
Policy IV-1	Financial Objectives, Planning and Performance

8.3 **Semi-Annual Report on Utilization Management**
BE IT RESOLVED that the Board of Directors receive the Semi-Annual Report on Utilization Management, as recommended by the Quality Committee at its meeting of March 16, 2023.

8.4 **Accreditation Readiness**
BE IT RESOLVED THAT the Board of Directors receive the Accreditation Readiness update, as recommended by the Quality Committee at its meeting of March 16, 2023.

4.0 Approval of Agenda

Da. Giroux asked for a motion to approve the agenda as presented.

MOTION: Dr. C. Cervin / C. Makela

BE IT RESOLVED THAT the agenda for the Open Session of the March 28, 2023 Board of Directors meeting be adopted as amended.

CARRIED

5.0 New Business

5.1 Update: Key Goal – Strengthen Our Academic and Research Impact

Dr. Robert Ohle, Vice President, Academic and Research Impact began by articulating the three goals of his presentation: (1) to show how research and academics do not exist in isolation, but rather front and centre with patient care; (2) to explain the machinery that allows us to strengthen academic and research impact; and (3) to highlight the tools that we are using right now to strengthen academic and research impact.

Dr. Ohle shared a patient story about “John”, an individual who presented to the Emergency Department after several days of not feeling well. Ultimately, after various scans and a biopsy, John was diagnosed with lung cancer. And while he had been booked for surgery, it was later determined that the cancer was too far spread, and symptom management was recommended instead.

Dr. Ohle indicated that the four key strategic levers to affect change within the existing infrastructure are people, solutions, connections and foundations. When work brings people joy, there is an increase in productivity; solutions promote positivity and hope in the ability to move forward; connections between individuals result in an exponential increase in individual potential; and foundations provide for efficiency in our core business, allowing us to rise to new heights.

Dr. Ohle further indicated that there are three mechanisms to affect change and amplify the work being done: people, culture and formal organizations. These domains establish the conditions that allow research to be conducted.

Dr. Ohle noted that with respect to research and academics, the goal is not only to conduct research and teach people, but to create value for those we serve. The impact relates to the results of the “doing”.

Dr. Ohle then returned to the patient story. He indicated that John received a palliative care consultation and an oncology consultation, and at the time, the oncologist was working with a group of students. One student performed a physical exam and made an observation that ultimately led to a change in John’s diagnosis, from lung cancer to testicular cancer, which is often curable.

Dr. Ohle noted that through the patient story, it is easy to see the connection between academics and patient care. Learners provide care on a daily basis.

Dr. Ohle indicated that John’s next step was to undergo four cycles of chemotherapy. However, the only way to access many of the drugs required by the clinical practice guidelines is to participate in a clinical trial. Fortunately, there is an oncology research program at HSN. Accordingly, the patient story also provides an example of how research can also equate to patient care.

Dr. Ohle then opened the floor to questions. Board members were content with the information provided.

Quality Committee

5.2 Patient Story

Lyse-Anne Papineau, Chair of the Quality Committee, called upon Board member Tom Laughren to present the Patient Story to the Board.

T. Laughren noted that the story provides an excellent example of HSN staff demonstrating the Key Goal of

being Patient and Family-Focused. He then opened the floor to questions and/or comments.

Board members were content with the information provided.

5.3 January Monitoring of QIP Targets

L. Papineau noted that the Quality Improvement Plan (QIP) targets are monitored at every meeting of the Quality Committee. She then highlighted the following updates on the three QIP indicators:

- Time to Inpatient Bed (TTIB) – The TTIB 90th percentile for January was above target at 41 hours, which is an increase from December and higher than the provincial comparator at 36 hours. However, in the current fiscal year, HSN has performed better than the province by almost five hours on the time to a disposition decision 90th percentile, which contributes to an overall Emergency Department 90th percentile length of stay that is better than the province.
- Workplace Violence (WPV) Prevention – WPV incidents continue to experience a net reduction, with 90 cases reported from April 2022 to December 2022. However, November and December 2022 saw the highest reported number of incidents in this period. There are a number of factors that can contribute to the increase. The WPV Prevention Committee reviews all cases for improvement opportunities.
- Increase Surgical Activity – Surgical activity is below the target volume. HSN achieved 92% of planned activity and remains at 92% compared to 2019-2020. HSN's ability to achieve the target volume has been constrained by Health Human Resources capacity in the Operating Room and Surgical Inpatient Units. Therefore, a key focus for improving access to surgery has been to shift to a higher proportion of outpatient surgery.

L. Papineau noted that at its meeting of March 16th, the Quality Committee requested that the next report include data regarding the Alternate Level of Care (ALC) reduction strategies put into place to decrease the wait times for Home and Community Care services.

Board members were content with the information provided.

MOTION: L. Papineau / S. Plante

BE IT RESOLVED THAT the Board of Directors receive the January Quality Improvement Plan target update, as recommended by the Quality Committee at its meeting of March 16, 2023 and as presented at the Board meeting of March 28, 2023.

CARRIED

5.4 Approval of 2023-2024 Quality Improvement Plan

L. Papineau indicated that management had developed the 2023-2024 QIP based on the Board's January approval of the QIP indicators: TTIB, securing and maintaining appropriate Health Human Resources, medication reconciliation at discharge and WPV prevention.

L. Papineau noted that the briefing note included in the meeting package provides a detailed outline of the target, target rationale and action plan for each of the four indicators. She further noted that at its meeting of March 16th, the Quality Committee had reviewed in detail the three components of the QIP, including a 10-page narrative, a 7-page progress report detailing the improvement work completed in 2022-2023, and a 15-page work plan for 2023-2024.

The CEO noted that at the annual Board orientation session, new Board members often ask how they can have a positive influence on the organization. The approval of the QIP indicators and the QIP itself are great opportunities for the Board to make an impact, along with the appointment of the CEO, the Chief of Staff and the Chief Nursing Executive, and the approval of policies, performance goals, the budget and the audit plan, just to name a few. The CEO indicated that the QIP in particular is a document that is lived in every part of the organization.

Board members were content with the information provided.

MOTION: L. Papineau / C. Makela

BE IT RESOLVED THAT the Board of Directors approve the 2023-2024 Quality Improvement Plan, as recommended by the Quality Committee at its meeting of March 16, 2023 and as presented at the Board meeting of March 28, 2023.

CARRIED

6.0 Other

6.1 CEO Report

The CEO confirmed that Board members had read the briefing note provided in the meeting package and highlighted the following items:

- In follow-up to a request for information regarding whether HSN tracks diversity metrics for staff, pages 18 and 19 of the meeting package provide a first glimpse at the availability of data related to staff

- proficiency in French, as well as how staff identify in terms of gender, race, citizenship and disability.
- This month, HSN is hosting the inaugural meeting of its Indigenous Health Advisory Council.
- Board members were encouraged to visit the Addictions Medicine Unit (AMU) should they have the opportunity to do so. The AMU was recently recognized as a health standards organization “Leading Practice” for its innovative, people-centered, evidence-informed practice.

The CEO then spoke to the provincial budget, as summarized by the Ontario Hospital Association (OHA). He outlined the current fiscal outlook as compared to the 2022 budget, and indicated that the province now predicts a balanced budget as of 2024-2025, which was not the case last year.

The CEO noted that a 6% expense increase is expected for the Ministry of Health, while a 27% expense increase is expected for the Ministry of Long-Term Care. The CEO further noted that the only reference specific to hospital funding is an assumption for annual growth of 4%, although there is no further detail on what that entails. The CEO then detailed other significant health investments with respect to community surgical diagnostic centres, home care, primary care, mental health, paediatric health, and hospital infrastructure.

The CEO also referenced the investments to Health Human Resources, which is the number one pressure in the health care sector. He indicated that the province has budgeted for a range of targeted initiatives, which are largely a renewal of existing programs.

The CEO indicated that the OHA will be working closely with the Ministry of Health and Ontario Health to better understand the implications of the provincial budget.

The CEO ended his comments by highlighting for the Board his five expected areas of focus before his departure from HSN:

- The transition to the Interim CEO, as well as to a new Board Chair, Vice Chair, Treasurer, and Senior Vice President and Chief Operating Officer;
- The Annual Meeting on June 13th, which will have a theme of social accountability with a research twist, as recommended by the Governance and Nominating Committee;
- Accreditation readiness for early June;
- From a financial perspective, the completion of the 2022-2023 audited financial statements, and securing as many funding letters as possible; and
- Efforts to secure a briefing with the Minister of Health and Ontario Health on the capital redevelopment.

It was asked whether any COVID funding is reflected in the provincial budget. The CEO indicated that in the tabled provincial budget, the budget line formerly shown as “health response for COVID-19” has been completely eliminated, although it is unclear what had been included in that category. Accordingly, management has assumed no COVID funding in the 2023-2024 budget, except where HSN has contractual arrangements with Ontario Health (e.g., testing).

7.0 Adjournment of Open Session

Da. Giroux asked for a motion to adjourn the open session meeting at 6:17 p.m.

MOTION: S. Plante / H. Bobiwash

THERE BEING no further business to discuss, that the Open Session of the March 28, 2023 Board of Directors meeting be adjourned.

CARRIED