

# Health Sciences North Board Meeting Minutes – Open Session January 30, 2024

Voting Members	<b>Present:</b> Kati McCartney Marc Despatie Chantal Makela Shayne Wisniewski	Stéphan Plante Helen Bobiwash Angèle Dmytruk Dr. William McCready	Tom Laughren Dr. Catherine Cervin Francesca Grosso Michel Paulin
Voting Members	s Excused:	Grace Alcaide Janicas	Pamela Williamson
Non-Voting Members Present:		David McNeil Julie Trpkovski	Dr. Pankaj Bhatia Dr. Stephen Morris
Non-Voting Members Excused:		Dr. Sanjiv Mathur	
Staff:	Mark Hartman Jessica Diplock Anthony Keating Jason	Paul Truscott Kelli-Ann Lemieux Turnbull	Natalie Aubin Dr. Robert Ohle
Guests:	Dr. Grace Ma Dr. Sarita Verma, President, Vice Chancellor, Dean and CEO, NOSM University Jacalyn Cop-Rasmussen, Manager, Academic Health Sciences Network, NOSM University Dr. Owen Prowse, incoming Vice-President, Clinical Partnerships and Clinical Relations, NOSM University		
Recorder:	Rebecca Ducharme		
provided. No 2.0 In Camera F S. Plante asl MOTION: M	was called to order at 5 conflicts of interest were Review of Agendas (Oper ked for a motion to move i Despatie / C. Makela DLVED THAT the Board	declared. <b>n and Closed Sessions)</b> n camera at 5:33 p.m.	nte at the chair. A land acknowledgement was ve in camera to review the open and closed CARRIED
See closed session meeting minutes for discussion points.			
S. Plante asked for a motion to move out of camera at 5:40 p.m.			
	C. Cervin / H. Bobiwas LVED THAT the Board o	h f Directors meeting move	e out of camera. CARRIED
3.0 Approval of Agenda Approval of the agenda by the Board constitutes approval of each item listed under the Consent Agenda port of the meeting.			
BE IT RESC	Grosso / K. McCartney DLVED THAT the agend adopted as presented.	a for the Open Session	of the January 30, 2024 Board of Directors
			CARRIED
7.1	Minutes of November 28, 2023 Open Session Board Meeting BE IT RESOLVED THAT the minutes of the Board of Directors open session meeting held on November 28, 2023 be approved as circulated.		
7.2	Approval of 2023-2024 Audit Plan BE IT RESOLVED that the Board of Directors approve the 2023-2024 Audit Plan, as recommended by the Audit Committee at its meeting of January 16, 2024.		

7.3 Review of Policies IV-6, II-1, II-1a and II-2 BE IT RESOLVED THAT the Board of Directors approve revised Board policy II-2 "Global Executive Limitations", as recommended by the Governance and Nominating Committee at its meeting of December 14, 2023.

7.4 Review of Policies II-3, II-5, II-7 and II-8 BE IT RESOLVED THAT the Board of Directors approve the following revised Board policy, as recommended by the Governance and Nominating Committee at its meeting of December 14, 2023:

Policy V-A-4 Annual Director's Acknowledgement and Consent

AND THAT the following Board policy be rescinded:

Policy II-8 Annual Declarations Policy

7.5 Board Education Plan BE IT RESOLVED THAT the Board of Directors approve the amended 2023-2024 Board Education Program, as recommended by the Governance and Nominating Committee at its meeting of December 14, 2023.

### 4.0 New Business

### 4.1 Update: NOSM University

S. Plante introduced Dr. Sarita Verma, President, Vice Chancellor, Dean and CEO of NOSM University.

Dr. Verma began her presentation by noting that NOSM University's mission and vision have not changed since it became a standalone university. She further noted that NOSM's strategic plan has not changed either, except for the added element of becoming a university.

Dr. Verma reviewed NOSM's five strategic directions and four strategic enablers, as well as the University's new bicameral system and leadership organizational structure.

Dr. Verma noted that while NOSM began with 56 MD students, that number is expected to increase to 108 by 2028. Overall, the medical school is expected to double over the next few years, and the size of the residency program is expected to double as well. Dr. Verma highlighted the importance of expanding NOSM's medical and residency programs, because if students are unable to train in Northern Ontario, they will leave.

Dr. Verma indicated that at a minimum, Northern Ontario needs 360 full-time equivalent physicians. We also need specialists in psychiatry, general internal medicine, pediatrics, emergency medicine, anaesthesia, and obstetrics and gynecology. Dr. Verma noted that NOSM needs HSN's help to expand residency training, and education is part of the academic mission associated with being an academic health sciences centre.

Dr. Verma highlighted the health challenges in Northern Ontario, as well as the challenges of finding a family physician. She indicated that three new graduates are required to replace one retiring full-time physician, and Canada is still not training enough new doctors to maintain the physician-to-population ratio at its current level, let alone increase it.

Dr. Verma noted that NOSM has the best residency match in the country, as well as the highest pass rate on exams, the highest percentage of Indigenous students, and the highest rate of graduating family physicians.

Dr. Verma then spoke to the impact of inflation on per learning funding, which has not been adjusted since 2004. She noted that universities, like hospitals, are underfunded, and NOSM and HSN need to focus on strong government relations and strategy to convey the message that Northern Ontario needs special attention.

Dr. Verma concluded her presentation by noting that NOSM and HSN need to strengthen their partnership to ensure that HSN is operating as an academic health sciences centre truly should. Similarly, she shared NOSM's goal of developing an academic health sciences network involving HSN and the Thundery Bay Regional Health Sciences Centre. She then opened the floor to questions.

It was noted that some academic health sciences centres have a designated seat on their Board of Directors for the Dean of the affiliated medical school, although that is not the case for HSN. It was asked whether such a seat on the HSN Board would promote the linkages required to strengthen HSN's mandate as an academic health sciences centre. Dr. Verma noted that many hospital Boards have a seat for the university – not necessarily the medical school – and such a seat could offer more cohesion than simply having an academic affiliation agreement in place.

The CEO thanked Dr. Verma for her presentation and noted that he looks forward to having further conversations with NOSM about an academic health sciences network for Northern Ontario.

The Chief of Staff asked how HSN could get over the hurdle of convincing our physicians that engaging in mentorship and education is an integral part of their overall practice. Dr. Verma noted that the strategy starts

with good role models – champions who can show other physicians that this work is doable and very enriching. The focus should not be on money, but about the renewal and sustainability of the profession. Dr. Verma further noted that a robust and rich environment in which to practice is also very important.

S. Plante thanked Dr. Verma for her insightful presentation.

### **Quality Committee**

### 4.2 Patient Story

Dr. Stephen Morris, member of the Quality Committee, presented the Patient Story to the Board. The story was prepared by Patient Relations and relates to written physician orders being misplaced.

Dr. Morris noted that the implementation of the Electronic Medical Record (EMR) will help rectify the issue of written physician orders being misplaced in many instances. The EMR will also improve communication between staff at shift change to reduce communication gaps.

Dr. Morris also noted that many people in the region do not have a family doctor, and accordingly, physicians in HSN's Emergency Department are often managing conditions that could have otherwise been managed in the community. This observation is in line with Dr. Verma's comments regarding the lack of family physicians in the North.

## 4.3 2024-2025 Quality Improvement Plan Indicators

Francesca Grosso, Chair of the Quality Committee, noted that Ontario hospitals are expected to develop an annual Quality Improvement Plan (QIP) and to make the QIP available to the public. QIP indicators can be proposed by Ontario Health and can be mandatory or optional, but individual hospitals also have the ability to identify their own unique indicators.

F. Grosso noted that the QIP indicators for HSN are being recommended following consultations with the Patient and Family Advisory Council (PFAC), the Medical Advisory Committee (MAC), Medical and Administrative Directors, and Senior Leadership, and include the following:

- Safety: Rate of Medication Reconciliation on Discharge.
- Patient Experience: Did patients feel they received adequate information about their health and their care at discharge?
- Access to Care: Time to inpatient bed (TTIB). This will serve as a primary indicator, although there will also be a process indicator related to length of stay.
- Adequate Health Human Resources: Staff Turnover Rate. This will focus on recruitment, retention and safety. Worker safety will be included in this section, inclusive of workplace violence.
- F. Grosso then opened the floor to questions.

It was asked whether the four noted indicators are the only indicators the Board will be monitoring. F. Grosso noted that some of the indicators have multiple components. Furthermore, the Board also regularly monitor several other key performance indicators, data for which is collected on a monthly basis and conveyed to the Board through the Quality and Patient Safety Indicator Scorecard.

## MOTION: F. Grosso / M. Paulin

BE IT RESOLVED THAT the Board of Directors approve the inclusion of the indicators of Medication Reconciliation at Discharge, "Did patients feel they received adequate information about their health and their care at discharge?", Time to Inpatient Bed and Adequate Health Human Resources in the 2024-2025 Quality Improvement Plan, as recommended by the Quality Committee at its meeting of January 18, 2024 and as presented at the Board meeting of January 30, 2025.

CARRIED

### 5.0 Board Chair and CEO Reports

### 5.1 Board Chair Report

S. Plante provided a brief verbal report. He took a moment to acknowledge the passing of James "Jim" Smith, who was a member of the Hôpital régional de Sudbury Regional Hospital's first Board of Directors over 25 years ago, and the organization's first Board Chair. S. Plante acknowledged Jim Smith's dedication and contributions to the Hospital and to the community at large.

### 5.2 CEO Report

The CEO confirmed that Board members had read the briefing note provided in the meeting package. He began by acknowledging Mark Hartman, Senior Vice President, Patient Experience and Digital Transformation, who recently announced his plans to retire on August 31<sup>st</sup>. M. Hartman has served as a steady hand at HSN, and he will continue to guide the organization as we undergo one of the biggest transformations in our history with the EMR implementation.

The CEO then highlighted the following items:

- A summary blog will be issued in the coming weeks to relay his reflections following his first 90 days in the role.
- HSN is a gem and something we should hold precious in our community. It is important to celebrate the great work that happens at HSN on a daily basis. This is a message that the CEO intends to take to the community.
- The "soft launch" of the strategic planning process is already underway. In addition to ad-hoc CEO meetings with individual staff and managers, the Strategic Planning Lead is organizing group consultation sessions for up to 10 participants to get a feel for what we need to work on over the next five years. Tonight, the Board will consider a motion to approve the membership of the Strategic Planning Steering Committee.
- In the first 90 days, there have been many wonderful opportunities to interact with the community and various local associations. It is important to interact with the community as much as possible.
- M. Hartman will be providing a detailed report on the implementation of the EMR.
- HSN is working on forming stronger partnerships with the medical school and other academic institutions in the region. Furthermore, there is an agreement among North East hospital CEOs to move ahead with a CEO forum regarding the concept of an academic health sciences network.

The CEO then opened the floor to questions. Board members were content with the information provided.

# 6.0 Adjournment of Open Session

S. Plante asked for a motion to adjourn the open session meeting at 6:31 p.m.

# MOTION: M. Despatie / H. Bobiwash

THERE BEING no further business to discuss, that the Open Session of the January 30, 2024 Board of Directors meeting be adjourned.

CARRIED