

**Health Sciences North
Board Meeting Minutes – Open Session
January 25, 2022**

Voting Members Present:

Daniel Giroux	Lynne Dupuis	Floyd Laughren
Dr. Catherine Cervin	Roger Gauthier	Helen Bobiwash
Francesca Grosso	Tom Laughren	Angèle Dmytruk
Rosella Kinoshameg	Stéphan Plante	

Voting Members Excused:

Don Duval	Lyse-Anne Papineau
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Non-Voting Members Present:

Dominic Giroux	Dr. John Fenton	Lisa Smith
Dr. Stephen Morris	Dr. Dominique Ansell	

Staff:

Mark Hartman	Max Liedke	Jennifer Witty
Anthony Keating	Maureen McLelland	Jason Turnbull
Kelli-Ann Lemieux	Dr. Greg Ross	

Guests:

Dr. Sarita Verma, Dean, President and CEO, Northern Ontario School of Medicine (NOSM)
John VanDerRydt, Chair, Health Sciences North Volunteer Association (HSNVA)

Recorder:

Rebecca Ducharme

1.0 Call to Order

The meeting was called to order at 5:30 p.m. with Da. Giroux at the chair. A land acknowledgement was provided, and no conflicts of interest were declared.

2.0 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.

Da. Giroux asked for a motion to approve the consent agenda.

MOTION: Dr. C. Cervin / S. Plante

BE IT RESOLVED THAT the consent agenda of the January 25, 2022 Board of Directors meeting be adopted as presented.

CARRIED

7.1 Minutes of November 30, 2021 Open Board Meeting

BE IT RESOLVED THAT the minutes of the Board of Directors open session meeting held on November 30, 2021 be approved as circulated.

7.2 Approval of 2021-2022 Audit Plan

BE IT RESOLVED THAT the Board of Directors approve the 2021-2022 Audit Plan, as recommended by the Audit Committee at its meeting of January 11, 2022.

7.4 Annual Report on Emergency Preparedness and Security Services

BE IT RESOLVED THAT the Board of Directors receive the Annual Report on Emergency Preparedness and Security Services, as recommended by the Quality Committee at its meeting of January 13, 2022.

3.0 Approval of Agenda

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

MOTION: L. Dupuis / H. Bobiwash

BE IT RESOLVED THAT the agenda of the January 25, 2022 Board of Directors meeting be adopted as presented.

CARRIED

4.0 New Business

4.1 Presentation – Northern Ontario School of Medicine

Dr. Sarita Verma, Dean, President and CEO of NOSM, began by encouraging Board members to visit the link included in the meeting package to gain access to a variety of updates on NOSM initiatives.

Dr. Verma indicated that HSN and NOSM share the common mission of providing healthcare resources to the community, although NOSM has an emphasis on the physician workforce.

NOSM has been highly successful, with nearly 14 graduating classes and 10 years of post-graduate studies, which have resulted in quite a bit of input of graduates into the Sudbury job market.

Dr. Verma noted that through its partnership with HSN, NOSM has had more than 600 learners complete 3,600 rotations over the last three years. Furthermore, a number of NOSM's senior leaders come from HSN. In short, there are many links, showing that NOSM and HSN are in this together.

Dr. Verma then provided an update on research initiatives at NOSM. The school is looking to further its research agenda, and has actively grown in the last few years in terms of research grants. Dr. Verma indicated that in line with its Strategic Plan, NOSM has begun to identify a number of research priorities for the coming years.

Dr. Verma indicated that NOSM will soon be taking a big step to becoming a full medical university with its own degree granting opportunities. This will occur once the Lieutenant Governor proclaims the *NOSM University Act* into force. Expansion of the medical school is coming.

Dr. Verma finished off her presentation by referring back to the relationship between NOSM and HSN. With HSN (as well as the Thunder Bay hospital) being an academic health sciences centre, what is the value of the affiliation with NOSM? What is the problem we are trying to solve together? Dr. Verma indicated that NOSM intends to work with HSN towards research excellence, building a sustainable regional academic model for Northern Ontario, and to continue working on addressing the urgent need for physicians in the region.

Da. Giroux thanked Dr. Verma for her presentation.

4.2 Presentation – Health Sciences North Volunteer Association

Anthony Keating, President and Chief Development Officer of the Foundations & Volunteer Groups, introduced the new Chair of the HSNVA Board, John VanDerRydt. A. Keating noted that the Chair is an incredible volunteer, and a long standing member of the HSNVA Board.

J. VanDerRydt indicated that the HSNVA is a not-for-profit corporation operating two distinct businesses within the walls of HSN, namely the boutique and the lottery kiosk. These two ventures form the major source of revenue for the HSNVA. Another major source of revenue is the onsite Tim Hortons, with which the HSNVA has a profit sharing agreement. Proceeds from the HSN 50/50 Cash Lottery have also allowed the HSNVA to contribute towards the purchase of much-needed equipment, such as defibrillators, for the hospital. The HSNVA continues to contribute to a variety of department needs and initiatives at HSN and HSNRI.

J. VanDerRydt explained that once the pandemic has improved, the HSNVA is planning to review and refresh its vision and mission to more closely align its operations to help HSN achieve its goals.

It was asked what impact the pandemic has had on the HSNVA. J. VanDerRydt indicated that operations have been substantially impacted by COVID. First, the boutique and lottery kiosk had to be closed for a number of months. Both are now back in operation, although not at full capacity. It has been difficult to buy for the boutique, as in the past, there has typically been a variety of travel-related merchandise. That said, the Managing Director and Manager of the boutique have done a wonderful job. While the HSNVA has experienced a decrease in revenue, the situation could have been worse. The boutique has managed to sell some product, and the HSNVA was able to keep all staff through various grants and loans. The HSNVA is eager to get back to full operations.

A. Keating thanked J. VanDerRydt and the HSNVA for their incredible work.

Quality Committee

4.3 Patient Story

Tom Laughren, member of the Quality Committee, noted that this meeting's Patient Story relates to communication at discharge, which was lacking in this case. He further noted that in addressing the matter, the Emergency Department physician in question wrote a letter of apology, which was very well done and very candid. The wife of the patient was pleased with the response and was impressed with the physician's candor.

T. Laughren indicated that the resolution of this matter aligns with our Strategic Plan goals of being accountable and family focused.

4.4 November Monitoring of QIP Targets

T. Laughren summarized the most recent results of the two indicators covered in the report, namely time to inpatient bed (TTIB) and workplace violence (WPV).

With respect to TTIB, performance for the month of November was 33 hours, which is higher than the target of 25 hours. A number of recommendations have been implemented in an effort to ease the pressures that are contributing to the higher TTIB.

With respect to WPV, T. Laughren noted that the number of WPV events involving the exercise of physical force has been greater than 10 per month for six of the past eight months. Over the period in question, the average number of such events was 12 per month. T. Laughren indicated that these figures were very concerning for the Quality Committee, which expressed the importance of highlighting this information for the Board as a whole. Initiatives remain underway to address WPV.

It was asked why reported cases of WPV had increased to an average of 12 per month, and whether this might be the result of an improved culture of reporting or patients being more violent. T. Laughren indicated that it is likely a mix of both. There is definitely increased patient frustration as a result of the pandemic, a frustration that many of us and many sectors are feeling. That said, there have also been improvements in reporting.

MOTION: T. Laughren / S. Plante

BE IT RESOLVED THAT the Board of Directors receive the November Quality Improvement Plan targets, as recommended by the Quality Committee at its meeting of January 13, 2022 and as presented at the Board meeting of January 25, 2022.

CARRIED

4.5 2022-2023 Quality Improvement Plan Indicators

T. Laughren noted that the briefing note provided in the meeting package was very thorough. The Quality Committee supported the recommendation to proceed with a QIP work plan that focuses on the three indicators of workplace violence, time to inpatient bed, and improvement in the surgical waitlist.

MOTION: T. Laughren / A. Dmytruk

BE IT RESOLVED THAT the Board of Directors approve the indicators of Workplace Violence, Time to Inpatient Bed and Improvement in Surgical Waitlist to be included in the 2022-2023 Quality Improvement Plan, as recommended by the Quality Committee at its meeting January 13, 2022 and as presented at the Board meeting of January 25, 2022.

CARRIED

Governance and Nominating Committee

4.6 Review of Policies V-A-2 to V-A-5

Da. Giroux, member of the Governance and Nominating Committee, highlighted the one substantive edit proposed to policy V-A-5, namely to increase the Board composition from “at least one (1) member of the Indigenous community” to “at least two (2) members of the Indigenous community”. The Board was in full support of this change.

It was asked whether the Board office maintains a skills and diversity matrix. Roger Gauthier, Chair of the Governance and Nominating Committee, indicated that such a matrix does exist and is updated as new members join the Board. Currently, the Board is lacking a member with legal experience, as well as experience with mental health and addictions and/or with vulnerable populations.

It was noted that the diversity of the overall community extends beyond the need for Indigenous and francophone Board members, and it was asked whether the Committee takes that into consideration when recruiting new members. The CEO noted that the Committee is mindful of gender balance, linguistic balance, geography, and Indigenous representation on the Board. Currently, the Board has a good balance with respect to those characteristics. The most recent call for expressions of interest also included specific language encouraging “persons of ethnic diversity, individuals who identify as First Nations, Inuit and Métis, persons who identify as 2SLGBTQ+, or from vulnerable populations” to apply. Once submissions have closed, the Committee will shortlist applicants based on the profile approved by the Executive Committee.

The CEO asked the Corporate Affairs Liaison to forward the recent Board ad and expression of interest form to the Board, as well as to add an update to the skills matrix to the Board Work Plan.

MOTION: R. Gauthier / R. Kinoshameg

BE IT RESOLVED THAT the Board of Directors approve the revisions to the following Board policies, as recommended by the Governance and Nominating Committee at its meeting of December 16, 2021 and as presented at the Board meeting of January 25, 2022:

**Policy V-A-2
Policy V-A-3
Policy V-A-4
Policy V-A-5**

**Roles and Responsibilities of the Board of Directors
Roles and Responsibilities of Individual Directors
Director's Acknowledgement
Guidelines for the Selection of Directors**

CARRIED

5.0 Other

5.1 CEO Report

The CEO confirmed that Board members had read the briefing note provided in the meeting package. He then provided additional commentary on a number of matters, as follows:

- Workplace Violence (WPV) – The ultimate goal is to get WPV events down to zero. Mathematically speaking, with increased occupancy and more staff, there may be more WPV events. And with the pandemic, although not an excuse, we are seeing more events due to the associated stress and frustration. That said, there is also an increased atmosphere of reporting.
- Board Plenary – The CEO thanked Board members for their engagement at the January 15th session. The Senior Leadership Committee (SLC) reviewed the notes from the breakout sessions and will be identifying what each individual member needs to work on in the next fiscal year.
- Evolution of Ontario Health Teams (OHTs) – The Ministry of Health has a goal of 100% OHT coverage across the province by March 31st. At present, most of the North is not yet covered. Some conversations took place in the fall with representatives of some of the unapproved OHTs to brainstorm a map for the North. The situation is fluid and organic, and the Ministry is reluctant to set a path. Facilitated discussions are expected to occur in the coming weeks to see what one or more OHTs could look like in the North.
- COVID-19 Pandemic – The rate of increase of hospital admissions has stabilized, although the numbers in the Intensive Care Unit (ICU) continue to increase. Furthermore, the number of deaths continues to increase. The positive rate for PCR testing sits at 18.8%. The demands of the pandemic on HSN's people continue to be significant. Hospitalizations this week are at the highest level we have seen, and admissions at HSN were at a peak this week. COVID admissions in Northern ICUs are also the highest we have seen. Approximately 4% of the HSN team is isolating at home, which is lower than the proportion reported by some Southern Ontario hospitals where it can exceed 10%. HSN has not ramped down surgeries as quickly as other hospitals in the province, but we are generally limited to urgent and emergent procedures. HSN is one of seven sites in the province to have introduced monoclonal antibody therapy. Approximately 116 staff have been redeployed to different units, tasks and shifts, and there are currently seven outbreaks within the hospital. The CEO indicated his desire to make visible to the Board all of the current demands and the significant amount of work that is being done. HSN's teams are going above and beyond to meet the needs of the community.

The CEO then opened the floor to questions.

One Board member expressed their hope that frontline staff, through Senior Leadership, recognize how much the Board admires and appreciates their dedication. The CEO indicated that SLC would brainstorm additional ways to convey the appreciation of the Board to frontline staff.

It was asked whether patient lengths of stay have been shorter, despite higher admissions. Mark Hartman, Senior Vice President, Patient Experience and Digital Transformation, indicated that the proportion of patients with the Omicron variant who require intensive care is much lower than with previous strains of the virus. The length of stay for COVID patients in an acute care setting has decreased. The total number of COVID patients is staying relatively stable, which is a good indicator that close to as many people are being discharged as are being admitted. The CEO clarified that the overall acute length of stay at HSN has increased in light of COVID. Currently, the median patient days for COVID patients in the ICU is approximately nine days.

6.0 Adjournment of Open Session

The Chair asked for a motion to adjourn the open session meeting at 6:37 p.m.

MOTION: S. Plante / Dr. C. Cervin

THERE BEING no further business to discuss, that the open session meeting of the Board of Directors be adjourned.

CARRIED