

Health Sciences North Board Meeting Minutes – Open Session June 7, 2022

Voting Members Present:

Daniel Giroux Lynne Dupuis Dr. Catherine Cervin Helen Bobiwash Francesca Grosso Angèle Dmytruk

Rosella Kinoshameg Lyse-Anne Papineau

Voting Members Excused:

Don Duval Roger Gauthier Tom Laughren

Stéphan Plante

Non-Voting Members Present:

Dominic Giroux Dr. John Fenton Julie Trpkovski

Dr. Stephen Morris Dr. Dominique Ansell

Staff: Mark Hartman Max Liedke Anthony Keating

Dr. Greg Ross Jennifer Witty Dr. Natalie Aubin

Kelli-Ann Lemieux Jason Turnbull

Guests: Richard Spadafora, Chair, NEO Kids Foundation

Grace Alcaide Janicas, incoming Board Member Chantal Makela, incoming Board Member Kati McCartney, incoming Board Member

Dr. Ravinder Singh, member of the Senior Leadership Committee

Recorder: Rebecca Ducharme

1.0 Call to Order

The meeting was called to order at 5:32 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: L. Papineau / R. Kinoshameg

BE IT RESOLVED THAT the consent agenda of the June 7, 2022 Board of Directors meeting be adopted as presented.

CARRIED

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7.1 Minutes of March 29, 2022 Open Board Meeting

BE IT RESOLVED THAT the minutes of the Board of Directors open session meeting held on March 29, 2022 be approved as circulated.

7.2 Public Reporting on Quality of Care Safety Indicators

BE IT RESOLVED THAT the Board of Directors receive the update on Public Reporting on Quality of Care and Safety Indicators, as recommended by the Quality Committee at its meeting of May 12, 2022.

3.0 Approval of Agenda

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

MOTION: A. Dmytruk / L. Papineau

BE IT RESOLVED THAT the agenda of the June 7, 2022 Board of Directors meeting be adopted as presented.

CARRIED

4.0 New Business

4.1 Presentation - NEO Kids Foundation (NKF)

Anthony Keating, President and Chief Development Officer of the Foundations & Volunteer Groups, introduced the Chair of the NKF Board, Richard Spadafora.

- R. Spadafora noted that like HSN, the NKF has just finished its fiscal year-end, and its audited financial statements are expected to be finalized shortly. He further noted that despite the pandemic, the NKF will be celebrating a very successful fiscal year; A. Keating and his team of fundraisers, marketers, community initiative members, etc. certainly deserve recognition for their efforts.
- R. Spadafora indicated that in 2021-2022, the NKF raised \$2.5M, which is a significant increase from the \$1.2M raised in 2020-2021. The 50/50 continues to be successful, having contributed \$1.4M to the NKF alone, although donations also increased by \$300,000.
- R. Spadafora noted that since its inception, the NKF has disbursed over \$1.2M to HSN, including \$660,000 over the last 12 months alone. Some of the larger contributions reflected in this amount are the Children's Treatment Centre (CTC) renovations and the MRI campaign.
- R. Spadafora then reviewed some of the NKF's signature campaigns and events, including Pure for Pediatrics, Pay for Play and the HSN 50/50 Cash Lottery, as well as the Foundation's upcoming initiatives, including the Joint Annual Donor Impact Report, the Spring Donor Mailing Campaign, the Palladino Auto Group Golf Classic for NEO Kids, and the "Summer Days of Winning" for the 50/50. The NKF team is very excited to return to inperson events.
- R. Spadafora concluded his presentation by acknowledging that the collaboration between the Foundations and the Volunteer Association has been great and has increased their overall ability to raise money for HSN. The Foundations are building momentum as a group to get back out into the community.
- A. Keating thanked R. Spadafora and the NKF for their incredible work.

4.2 Presentation – Academic and Research Impact

- Dr. Greg Ross, Vice President, Academic and Research Impact, noted that HSNRI's sources of revenue include HSN, the Foundations, and government partners, among others. Principal investigator initiated grants also represent a source of revenue, and the amount of such grants awarded to HSNRI in recent years is quite impressive. The application process entails a considerable amount of work, and the more lucrative grants are extremely competitive.
- Dr. Ross then gave an overview of the five Research Leads, including Dr. Lacey Pitre (Cancer Solutions), Dr. Deborah Saunders (Cancer Solutions), Dr. Mohammed Shurrab (Cardiovascular Health), Dr. Chris Verschoor (Healthy Aging), and Dr. Robert Ohle (emerging areas of research).
- Dr. Ross indicated that in terms of recruitment, HSNRI will be targeting six Research Chairs, some of which could be in place by the fall. The late Dr. Janet McElhaney was an incredible researcher who was very successful at obtaining grants and leading great research teams, and the hope is to replicate her model. The Foundations are primarily responsible for funding the Research Chairs, and HSNRI will be working with A. Keating to establish key milestones, deliverables, payment schedules and expectations.

In terms of academic highlights, Dr. Ross indicated that NOSM University has been approved for 30 additional undergraduate spots over the next five years and 41 additional post-graduate spots. The impact of the undergraduate students on HSN and HNSNRI will be modest for the first few years; however, the impact of the post-graduate students will be immediate.

Dr. Ross finished his presentation by sharing the highlights of the Academic and Research Impact portfolio, including a predicted increase in research funding, the expansion of educational programs at several of HSN and HSNRI's academic partners, and the outstanding teams at HSN and HSNRI. A new Vice President is expected to be in place later in the summer.

Quality Committee

4.3 Patient Story

Lyse-Anne Papineau, Chair of the Quality Committee, indicated that the story in question was taken from a complaint received by Patient Relations regarding a patient experience while receiving chemotherapy. In this instance, the countermeasures included going back to in-person visits.

L. Papineau noted that the Committee was informed that the patient's death was not related to the wound in question. Nevertheless, several improvement measures were identified and implemented.

This Patient Story is an example of a critical event that would have been reported in the Critical Event Report, and it is a good example of the process used at HSN when critical events are discovered. The overall goal is to identify improvement mechanisms.

It was noted that the Committee had discussed sharing this story with the Ministry of Health to bring awareness regarding the need to strike a balance between virtual and in-person care.

4.4 March Monitoring of QIP Targets (2021-2022 Final Report)

L. Papineau summarized the most recent results of the two indicators covered in the report, namely time to inpatient bed (TTIB) and workplace violence (WPV), and acknowledged that this is the final report for 2021-2022.

With respect to TTIB, L. Papineau noted that the March performance of 33.7 hours is higher than the target of less than 25 hours. This is largely due to occupancy pressures, despite being at only 90% pre-pandemic surgical volumes. L. Papineau further noted that although Amberwood Suites opened 16 beds in Q4 of 2021-2022, HSN's COVID-19 isolation precautions call for blocked beds, as HSN was constructed with only 40% private rooms. Improvement initiatives to reduce length of stay include the Home First Liaison and the Emergency Department Mobility Team.

With respect to WPV, L. Papineau indicated that the number of reported events involving physical force averaged 11 per month from April 2021 to March 2022. There were fewer than 10 incidents per month in four months of the year and overall, WPV trends are showing improved performance.

It was asked whether there are any limitations to the ED Mobility Team's ability to assess patients. Mark Hartman, Senior Vice President, Patient Experience and Digital Transformation, indicated that the Team focuses on patients who are at the highest risk for frailty and further deterioration in hospital. The goal is to identify such individuals with a quick assessment and to get them mobilized quickly as well. In some instances, this could entail having a patient in the ED admitted and set up with physiotherapy and other services from the outset.

MOTION: L. Papineau / L. Dupuis

BE IT RESOLVED THAT the Board of Directors receive the March Quality Improvement Plan targets, as recommended by the Quality Committee at its meeting of May 12, 2022 and as presented at the Board meeting of June 7, 2022.

CARRIED

4.5 Quality and Patient Safety Indicators Selection for 2022-2023

L. Papineau noted that the proposed indicators consider the six dimensions of quality (effective, timely, safe, equitable, efficient and patient-centred), Health Quality Ontario's 2022-2023 Quality Improvement Plan priority indicators, alignment with the Strategic Plan, and core patient safety and staff safety indicators.

L. Papineau indicated that the Quality Committee recommended for monitoring a total of 12 indicators across four of the dimensions of quality. Three indicators were recommended for retirement, two have been added, and 10 retained.

MOTION: L. Papineau / Dr. C. Cervin

BE IT RESOLVED THAT the Board of Directors approve the proposed 2022-2023 Quality and Patient Safety Monitoring Indicators, as recommended by the Quality Committee at its meeting of May 12, 2022 and as presented at the Board meeting of June 7, 2022.

CARRIED

Governance and Nominating Committee

4.6 Review of Policies V-A-10, V-A-11, V-A-12 and V-B-1

Lynne Dupuis, Vice Chair of the Governance and Nominating Committee, highlighted the substantive edits proposed to policy V-B-1 "Nomination Process", and in particular, specifically calling out a need for diversity in the Board recruitment process and adding clarifying language with respect to Board member retirements and voting for a slate of Directors.

Board members were content with the materials provided.

MOTION: L. Dupuis / L. Papineau

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 April 21, 2022 and as presented at the Board meeting of June 7, 2022:

Policy V-A-10 Position Description for the Treasurer Policy V-A-11 Position Description for a Committee Chair

Policy V-B-1 Nomination Process

AND THAT the following Board policy be renewed without amendment:

Policy V-A-12 Membership in the Corporation

CARRIED

5.0 Other

5.1 Board Chair Report

The Chair thanked Board members and members of the Senior Leadership Committee for their participation in the May 2nd plenary session. He encouraged Board members to reflect on their key take-aways from the presentations from Dr. Natalie Aubin on mental health and addictions and from Dr. Brenda Restoule on Indigenous cultural safety and humility.

In follow-up to Dr. Restoule's presentation specifically, the Chair asked Board members to recommend next steps or expectations, keeping in mind the Board's governance role. Feedback can be provided to the Corporate Affairs Liaison for discussion at the next Executive Committee meeting.

5.2 CEO Report

The CEO began by acknowledging the three incoming Board members, Grace Alcaide Janicas, Chantal Makela and Kati McCartney, and by noting that this meeting is Dr. Greg Ross's last Board meeting before he embarks on a new opportunity in the late summer. The CEO also acknowledged the presence of Dr. Ravinder Singh, current member of the Senior Leadership Committee as part of a practice to have, on a rotating basis, representation by a member of the medical staff.

The CEO confirmed that Board members had read the briefing note provided in the meeting package. He then asked Kelli-Ann Lemieux, Vice President, Surgical and Clinical Services, to provide an update on the resumption of surgical activity at HSN.

K. Lemieux reiterated the goal to increase surgical activity to 16,500 cases in 2022-2023, a number that is based on the three-year pre-pandemic average.

K. Lemieux indicated HSN's surgical activity has been steadily improving overt the last two years. However, to date, HSN is slightly below target, while performing slightly better than the provincial average. Furthermore, at HSN, only 41% of patients are waiting longer than the target, as compared to the provincial average of 52%.

K. Lemieux noted that actions over the last year to address long wait times and improve the number of surgical cases able to be completed include an increase in same-day hip and knee surgeries, increasing the number of procedures through the Bariatric Centre of Excellence, growing the endoscopy program, and implementing a process to fill late cancellations. In terms of next steps, HSN has submitted a proposal to the Ministry of Health to continue supporting SeamlessMD, a program that allows for virtual support of patients pre- and post-surgery and allows for some electronic sharing of information to patients. There are also plans in place that will improve efficiency of the preadmission process, whereby a pre-defined algorithm determines pre-operative eligibility for patients, improving cancellation rates and cutting down on consultation time for patients.

K. Lemieux indicated that the surgical target for June is high, but that HSN is tracking well in terms of achieving the monthly target. Additional surgical blocks may be scheduled in the fall if more time is required to catch up.

6.0 Adjournment of Open Session

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

MOTION: L. Papineau / L. Dupuis

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

CARRIED