Health Sciences North
Horizon Santé-Nord

Health Sciences North
Board Meeting Minutes – Open Session
June 4, 2024

Voting Members Present:	Grace Alcaide Janicas	Stéphan Plante	Tom Laughren
	Angèle Dmytruk	Helen Bobiwash	Dr. Catherine Cervin
	Michel Paulin	Francesca Grosso	Chantal Makela
		Pamela Williamson	Shayne Wisniewski
Voting Members Excused:		Marc Despatie	Kati McCartney
		Dr. William McCready	
Non-Voting Members Present:		David McNeil	Crystal Pitfield
		Dr. Stephen Morris	
Non-Voting Members Excused:		Dr. Pankaj Bhatia	Dr. Sanjiv Mathur
Staff:	Paul Truscott	Natalie Aubin	Jessica Diplock
	Jason Turnbull		
Recorder:	Rebecca Ducharme		

1.0 Call to Order
The meeting was called to order at 5:31 p.m. with Stéphan Plante at the chair. A land acknowledgement was provided by Grace Alcaide Janicas. No conflicts of interest were declared.

2.0 In Camera Review of Agendas (Open and Closed Sessions)
S. Plante asked for a motion to move in camera at 5:38 p.m.

MOTION: T. Laughren / M. Paulin
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.

S. Plante asked for a motion to move out of camera at 5:41 p.m.

MOTION: G. Alcaide Janicas / H. Bobiwash
BE IT RESOLVED THAT the Board of Directors meeting move 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 portion of the meeting.

S. Plante welcomed Crystal Pitfield, Interim Vice President, Medicine and Chief Nursing Executive (CNE), to her first Board meeting in that role.

MOTION: T. Laughren / H. Bobiwash
BE IT RESOLVED THAT the agenda for the Open Session of the June 4, 2024 Board of Directors meeting be approved as circulated.

CARRIED

7.1 Minutes of March 26, 2024 Open Session Board Meeting
BE IT RESOLVED THAT the minutes of the Board of Directors open session meeting held on March 26, 2024 be approved as circulated.

7.2 Review of Policy II-1a
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 October 19, 2023 and as approved by the HSNRI Board at its meeting of April 18, 2024:

Policy II-1a Joint Policy for the Selection, Appointment and Termination of the CEO of the Hospital and the CEO of the Research Institute

7.3 Review of Policies I-4 to I-6 and III-1 to III-5
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 April 18,

2024:

Policy I-4	***Research***
Policy III-1	***Quality of Care and Safety***
Policy III-2	***Utilization Management***
Policy III-3	***Patient Relations Process***
Policy III-4	***Quality of Care Committees***
Policy III-5	***Risk Management***

THAT the following Board policy be renewed without amendment:

Policy I-6	***HSN Donor Recognition and Naming***

AND THAT the review of the following Board policy be deferred to a date to be determined to allow for consultation and possible alignment with the Health Sciences North Research Institute:

Policy I-5	***Intellectual Property***

4.0 New Business

Quality Committee

4.1 Patient Story

Francesca Grosso, Chair of the Quality Committee, presented the Patient Story to the Board. The story describes the negative experience of a teenage Indigenous transgender patient in the Emergency Department (ED) at HSN, as told by the patient's mother.

F. Grosso noted that at the Quality Committee meeting of May 16th, staff had discussed a number of improvement initiatives that had been put forward as a result of the patient's experience, including staff education, obtaining patient consent to disclose personal health information to parents, new workflow processes for Indigenous Patient Navigators, etc. There will also be a follow-up meeting with the patient and their mother to see if they feel that the remedies are sufficient.

Board members expressed their concern about the noted events. Some had experienced similar situations with their own family members, and were thankful to learn that there will be a resolution meeting with the family in question. It was noted that staff education should be an ongoing initiative.

The CEO agreed that ongoing education is key. HSN's Indigenous Patient Navigators will play an important role in that area, and the IDEAA Committee is working on related improvement projects as well. HSN will continue to evaluate its progress in this area as those and other projects progress.

It was asked whether the Indigenous Patient Navigators are available in the ED 24/7. Natalie Aubin, Vice President, Social Accountability, indicated that the Indigenous Patient Navigators are currently available Monday to Friday from 8:30 AM to 4:30 PM.

The CEO also noted that patients must self-identify as Indigenous to trigger access the Indigenous Health Team. Voluntary self-identification has resulted in an increase in demand for navigator services, with an average of 400 patients per month self-identifying. This is significant demand for a team of three navigators, and the Indigenous Health Team is doing the best it can with its limited resources. A conversation on capacity will be required.

It was noted that a Patient Story from a couple years ago also addressed the issue of misgendering transgender patients. At that time, the Board was advised that it was not possible to change a patient's gender in the hospital record. It was asked whether the latest hospital record now has that capability. C. Pitfield noted that at the time of the event in question, a manual process was used to highlight a patient's preferred pronouns by writing them on a whiteboard, which could result in members of the patient care team missing the information. She further noted that while Meditech Expense has yet to be optimized, there is a pronouns process that will become available in the future.

It was noted that in future, it may be helpful to invite the relevant manager or director to the Quality Committee meeting to better understand what happened and how concerns are being addressed.

4.2 March Monitoring of QIP Targets (2023-2024 Final Report)

F. Grosso reviewed the briefing note included in the meeting package, highlighting the following:

- We have seen a slight decrease in Time to Inpatient Bed (38.8 hrs on average).
- Medication reconciliation at discharge for the month of March was 68%. This is a decline from the prior 6-month average performance of 73.6%.
- Workplace violence (WPV) events with exercised physical force for March 2024 was 10. WPV incidents continued to trend higher than target through Q4, with March 2024 year-to-date actuals showing 175

reported incidents, exceeding our annual improvement target of 104 incidents.
- The Health Human Resources turnover rate has a projected YTD performance based on cumulative data to February 2024 of 11.63%. Overall, recruitment is outpacing attrition.

F. Grosso then opened the floor to questions. Board members were content with the information provided.

5.0 Board Chair and CEO Reports

5.1 Board Chair Report

S. Plante confirmed that Board members had read the briefing note included in the meeting package. He highlighted that today's Board meeting is the last meeting for a number of individuals – Angèle, Dmytruk, Kati McCartney, Dr. William McCready, Dr. Sanjiv Mathur, Dr. Stephen Morris and Mark Hartman, Senior Vice President, Patient Experience and Digital Transformation – and thanked them for their outstanding service. He also acknowledged the departure of Julie Trpkovski, former Vice President, Medicine and CNE.

5.2 CEO Report

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

- Senior Leadership has been working on pulling together a balanced scorecard that is reflective of their goals. This is a work in progress, as the senior team is still deciding on the most appropriate indicators. Some indicators may take time to develop, particularly those where we have yet to develop a mechanism to collect the required data. As the data builds over time, the scorecard will ideally lead to rich discussion at the Board level, as well as throughout the organization.
- With the launch of the regional electronic medical record (EMR), today is a significant day for HSN and the region. Implementation went well today, although our teams are dealing with one challenging technical issue related to Pharmacy order entries. The CEO thanked HSN staff, volunteers and physicians for their important contributions to go-live.
- There have been considerable government relation interactions over the past six weeks, including visits to HSN by two Assistant Deputy Ministers, resulting in positive connections.
- This month, HSN is ready to make its next submission regarding the capital redevelopment. That information will flow through the Long Range Planning Committee later in the meeting.
- There is good news with respect to finances, as HSN received a number of one-time funding letters between the Finance Committee meeting in March and the Audit Committee meeting in May.
- HSN has provided a detailed letter to the Ministry of Health and Ontario Health providing an overview of HSN's current financial state. The documents provided suggest that HSN is being underfunded by $27M for the additional bedded capacity that has been added, as 101 of our incremental beds are occupied by acute patients but the beds are funded at the Alternate Level of Care (ALC) rate of $600/day rather than the acute rate of $1,400/day. HSN advocated that the beds need to be funded appropriately, and the MOH and OH have indicated that such a reconciliation will need to occur later in the fiscal year. The letter also identified that a $65M deficit at the operating line was a very uncomfortable position for the Board, but that a recovery plan is being developed, targeting 1% savings per year. This is an ambitious but reasonable target. The recovery plan will come to the Board in the fall for approval.

6.0 Adjournment of Open Session

S. Plante asked for a motion to adjourn the open session meeting at 6:28 p.m.

MOTION: T. Laughren / G. Alcaide Janicas
THERE BEING no further business to discuss, that the Open Session of the June 4, 2024 Board of Directors meeting be adjourned.

CARRIED