Health Sciences North
Horizon Santé-Nord

Health Sciences North
Board Meeting Minutes – Open Session
January 28, 2025

Voting Members Present:		Stéphan Plante	Michel Paulin
	Grace Alcaide Janicas	Helen Bobiwash	Dr .Catherine Cervin
	Marc Despatie	Tammy Eger	Francesca Grosso
	Chris Leduc	Chantal Makela	Louise Paquette
	Pamela Williamson	Shayne Wisniewski	
Voting Members Excused:		Tom Laughren	
Non-Voting Members Present:		David McNeil	Dr. Pankaj Bhatia
		Lisa Smith	Dr. Matthew Cavanagh
		Dr. Ravi Singh	
Staff:	Natalie Aubin	Jessica Diplock	Mark Hartman
	Steve Volpini	Russell Landry	Corissa Vande Weghe-Hackett
	Dr. Rob Ohle	Jason Turnbull	
Guest(s):	Dr. Grace Ma, Member, Senior Leadership Committee		
Recorder:	Rebecca Ducharme		

1.0 Call to Order
The meeting was called to order at 5:02 p.m. with Stéphan Plante at the chair. He subsequently provided a land acknowledgement. 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 5:05 p.m.

MOTION: T. Eger / F. Grosso
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 5:16 p.m.

MOTION: M. Paulin / Dr. C. Cervin
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.

MOTION: L. Paquette / T. Eger
BE IT RESOLVED THAT the agenda for the Open Session of the January 28, 2025 Board of Directors meeting be approved as circulated.

CARRIED

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

7.2 Approval of 2024-2025 Audit Plan
BE IT RESOLVED THAT the Board of Directors approve of the 2024-2025 Audit Plan, as recommended by the Audit Committee at its meeting of January 14, 2025.

7.3 Review of Policies V-A-3 to V-A-6
BE IT RESOLVED THAT the Board of Directors approve that the review of the following Board policies be deferred to a date to be determined to allow for the said policies to be reincorporated into the regular review process / schedule:

Policy V-A-3 Roles & Responsibilities of Individual Directors
Policy V-A-4 Annual Directors' Acknowledgment and Consent

Policy V-A-5 Guidelines for the Selection of Directors
Policy V-A-6 Board Size and Composition

7.5 Review of Policy VI-5 "Board Commitment to Integration with Other Health Care Providers
BE IT RESOLVED THAT the Board of Directors approve revised Board policy VI-5 "Board Commitment to Integration with Other Health Care Providers" (to become "Board Commitment to the Connecting Care Act, 2019"), as recommended by the Governance and Nominating Committee at its meeting of December 19, 2024.

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 positive story highlights the exceptional care provided by the health care workers at HSN, including surgeons, nurses, physicians and supporting teams and units.

At its recent meeting, the Committee asked that the Board chair kindly share the positive feedback with the various departments. The Committee wanted to ensure that all of the relevant healthcare workers were properly thanked.

4.2 Approval of 2025-2026 Quality Improvement Plan (QIP) Indicators

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

- Medication Reconciliation at Discharge and Staff Turnover will no longer form part of the Quality Improvement Plan (QIP), although they will continue to be monitored elsewhere.
- The three indicators recommended for the 2025-2026 QIP are the 90th percentile Emergency Department wait time to inpatient bed (TTIB), the 90th percentile Emergency Department wait to to physician initial assessment (PIA), and Patient Experience: Did patients receive enough information at discharge?

F. Grosso then opened the floor to questions.

The CEO confirmed that the QIP is a plan that is approved on an annual basis, and outlines improvement work that we are going to engage in as an organization. While the QIP focuses on those items that will be associated with specific improvement work, and progress will continue to be regularly reported to the Board, there are also the Quality and Patient Safety (QPS) indicators, for which the Board will also continue to receive regular monitoring reports. Furthermore, the QIP is publicly posted in accordance with legislative requirements, while the QPS indicators are not.

It was asked whether the data for surgical wait times could be unbundled to consider specific procedures (e.g., hips, knees, cardiac, etc.). The CEO noted that surgical wait times are not included in the QIP at this time, but form part of the QPS monitoring data. He further noted that the CEO Report does speak broadly to surgical wait times, but management can certainly look into reporting by surgical sub-specialty as we do have that data.

MOTION: T. Eger / G. Alcaide Janicas
BE IT RESOLVED THAT the Board of Directors approve that the indicators of "90th percentile Emergency Department wait time to inpatient bed", 90th percentile Emergency Department wait time to physician initial assessment", and "Patient Experience: Did patients receive enough information at discharge?" be included in the 2025-2026 Quality Improvement Plan, as recommended by the Quality Committee at its meeting of January 16, 2025 and as presented at the Board meeting of January 28, 2025.

CARRIED

5.0 Board Chair and CEO Reports

5.1 Board Chair Report

S. Plante indicated that he had planned to hand over the floor to Tom Laughren, Vice Chair and Chair Elect, to debrief on the Ontario Hospital Association "Board Chair Brief" that he attended on January 13th. However, as T. Laughren is not present at today's meeting, we will defer that update to next Board meeting.

5.2 CEO Report

The CEO confirmed that Board members had read the report included in the meeting package, and provided the following highlights:

- Excellent progress has been made on the 2025-2030 Strategic Plan. Next steps include having the plan endorsed by the Strategic Planning Steering Committee for approval by the HSN and HSNRI Boards on March 25th and 27th, respectively, with the launch scheduled for the last week of April.
  - Russell Landry, the Special Advisor to the CEO for Strategic Planning, and Communications have

worked very hard to make the language used in the Strategic Plan accessible.
    - Senior Leadership has been reviewing the draft plan and outcomes, and making recommendations regarding the staging of the work.
- Jessica Diplock, Vice President, People and Culture, and her team, and Dr. Grace Ma, Medical Staff Wellness and Engagement Lead, and Dr. Pankaj Bhatia, Chief of Staff, continue to lead excellent wellness work in the organization. In many ways, that work is making a noticeable difference in HSN's culture.
- With respect to HSN and HSNRI's academic mission, we are conducting pulse surveys to engage learners. This baseline data will be insightful in terms of gaging the learner experience, including learner safety and culture.
- With respect to the Foundation's goal and desire to get contributions and participation from the associated Boards of Directors and Senior Leadership, we are very close to 100% participation. Anthony Keating, President and CEO of the Foundation, extends his sincere gratitude.
- At the recent Medical Staff Association quarterly meeting, there was some good discussion about the electronic medical record (EMR). At this time, as we move closer to optimization, those discussions include how to leverage the EMR in a positive way to make positive contributions to the organization and the patient experience. A five-year digital health strategy is in the works.
- With respect to data quality, a goal for next fiscal year will include bringing in assistance so the organization can begin to recover its data capacity.
- With respect to "Other Noteworthy Accomplishments", Natalie Aubin, Vice President, Social Accountability, and her team warrant recognition for their efforts towards fostering inclusive, accessible and culturally safe care. The Association canadienne-française de l'Ontario (ACFO) du grand Sudbury recently recognized HSN's significant efforts in improving French Language Services during its 2024 Annual General Assembly.

The CEO then opened the floor to questions.

A newer Board member expressed their appreciation for the contents of the CEO Reports, finding them helpful in getting oriented to the organization and informative in providing updates on the areas where improvements are occurring.

With respect to the reports that are being rewritten in Expanse, it was asked whether those reports will be congruent with previous reports. The CEO noted that the teams are doing their best to align the reports. Corissa Vande Weghe-Hackett, Chief Financial Officer, noted that we are looking at how we want our reports written, and the overall goal is to keep them relatively the same. While we are aiming to keep the reports congruent, we also want to make improvements where possible.

6.0 Adjournment of Open Session

S. Plante asked for a motion to adjourn the open session meeting at 5:41 p.m.

MOTION: P. Williamson / L. Paquette
THERE BEING no further business to discuss, that the Open Session of the January 28, 2025 Board of Directors meeting be adjourned.

CARRIED