

**Hamilton Health Sciences
Board of Directors**

Minutes

DATE: May 27, 2021

TIME: 4:30 PM

LOCATION: Via Zoom

IN ATTENDANCE: Charles Criminisi (Chair), Indy Butany-DeSouza, David Collie, Richard Koroscil, Catherine Gaulton, Bill Laidlaw, Dave Lazzarato, Robert Galaski, Andrea McKinney, Jane Milanetti, Keith Monroe, Dr. Terry Shields, Shirley Thomas-Weir, Mary Volk, Dr. Smita Halder, Kirsten Krull, Rob MacIsaac, Dr. Catherine Ross, Mike Campbell (General Counsel), Tanya Cunliffe (Recording Secretary)

GUESTS: Michele Beals, Debbie Bedini; Kelly Campbell, Leslie Gauthier, Leslie Gillies; Dr. Stephen Kelly, Donna LaForce, Michelle Leafloor, Aaron Levo, Dr. Barry Lumb (partial joined 3:54pm), Dave McCaig, Dr. Ralph Meyer, Sharon Pierson, Dr. Ted Scott, Bruce Squires, Dr. Michael Stacey, Pearl Veenema

REGRETS: Scott Maki, Dr. Paul O'Byrne, Dr. Khalid Azzam

1. Opening

The Chair called the open portion of the Board meeting to order.

1.1 Quorum

Meeting quorum was established.

1.2 Declarations of Conflict of Interest

There were no conflicts of interest declared.

1.3 Adoption of the Agenda

It was moved by Dave Lazzarato and seconded by Richard Koroscil that the Board adopt the Agenda for the open portion of the meeting as distributed.

CARRIED

1.4 Approval of the Minutes from the March 30, 2021 Board meeting

It was moved by Catherine Gaulton and seconded by Keith Monroe that the minutes from the March 30, 2021 In-Camera meetings be approved, as distributed.

1.5 Chair's Remarks

The Board Chair turned the meeting over to Rob Maclsaac to present the CEO Report.

2. CEO Report

Rob Maclsaac presented his CEO Report to the Board including updates on the ongoing pandemic response and the key work that is underway: potential for incoming Covid patients from Manitoba and HHS support to HNHB and Ontario West; resumption of care for urgent and time sensitive care and for patients who need access to specialized regional programs at HHS; Province wide resumption of surgery; the Mobile Health Unit; the selection of HHS to provide ECMO treatment; HHS work through its vaccine clinic; MES and the scanner installation at WLMH; Project Odyssey; community communication; and the Doctor's Day Celebration, Nursing Week Celebration and Star Month celebration. A fulsome discussion took place regarding the work on the Ontario Health Team, recognition of staff for work performed during the pandemic, learnings from the pandemic and priority relating to the resumption of surgeries and procedures.

The Board Chair thanked Rob for his presentation and highlighted to the Board that Dr. Mertz is the Medical Staff Association President Award winner this year.

3. Strategy

The Board Chair next turned the meeting over to Rob Maclsaac to present the Strategy View Presentation.

3.1 Strategy View – Presentation

Rob Maclsaac provided an overview of the Strategy View highlighting the CQI visual management system review of the vital signs of the organization. He discussed strategy, major projects and operations. He noted that a Hospital Harm Steering Committee is being formed to propose targets.

The Board heard that the pandemic has been handled well and operations have been statistically stable within the upper and lower control limits. Quality Improvement metrics designated as North Star metrics have remained stable over the past year.

An overview of the indicators under the People pillar was provided. The reduction of workplace incidents of violence this past year was reported.

The indicators under the Sustainability pillar were highlighted. HHS has had an extraordinary year in terms of finances and the year ended in a favourable financial position.

An overview of the indicators under the Research pillar was provided. It was noted that due to the creativity and perseverance of the Research Team, HHS should be able to make a comeback in terms of bringing Learners on to our sites and funding.

3.2 Operations View – Presentation

Sharon Pierson presented an overview of the Operation View including high occupancy rates despite the reduction of historical procedure and surgical activity; length of care and the impact on flow; Emergency Department wait times; increase of critical care beds causing shortages of staffing requiring team based care; and repatriating out of region patients. Sharon underscored that the directive to ramp down activity did not apply to pediatrics or the majority of oncology surgical work and as such there was not a huge reduction of occupancy. An overview was provided on mitigation strategies, including the success of virtual care and Smartview work.

The Board heard that a 15% capacity plan was being maintained so that beds remain open in the event of a Covid surge. Sharon provided an overview of management strategies which included the closure of UCC, closures of regional rehab and the impact thereof, ambulatory displacement of staff back to clinical units and critical care units, closure of ORs and addressing other pressures and gaps in staffing models across the organization.

Kirsten Krull added that the Kronos software approved by the Board was instrumental for successfully tracking the deployment of staff. Leslie Gauthier commented that from the deployment perspective, there has been a lot of positive feedback that staff have felt very well supported through the HHS resiliency efforts, education and practice supports and ongoing connecting-back from both the sending and receiving managers.

3.3 Enterprise Project View – Presentation

Rob Maclsaac invited Sharon Pierson to provide the Board with highlights on the SPC initiative.

Sharon Pierson provided an update on the Strategic Performance Collaborative including the alignment with Odyssey and ongoing work on expanding the scope of SPC including virtual and ambulatory care, planning of an executive retreat with GE for the executive leaders, streams of work including the Covid virtual approach and challenges therein, delays due to Covid, changes in project leads and related challenges meeting the \$9 million target. The Board discussed future opportunities with this strategic partnership including expanding the focus on a labour workforce into non clinical, patient care optimization and flow activities, line of site on bigger projects, alignment of GE support with the Odyssey working including a potential command centre.

Rob Maclsaac invited Leslie Gauthier to provide the Board with highlights of MES.

Leslie Gauthier provided an update on the MES Project including the celebration of the one year anniversary of the strategic partnership with Siemens involving a meeting with the senior leaders of Siemens and HHS. Leslie advised that this meeting included discussion with Siemens surrounding the successful and planned equipment installation, procurement process and the partnership with Siemens, and potential future innovations proposed by Siemens. The Board heard that there have not been any risks flagged in relation to MES going forward, cost of turnkey is being monitored and the year has been successful overall.

Rob Maclsaac invited Kirsten Krull to provide the Board with highlights of the CQI-MS.

Kirsten Krull provided an update on the CQI-MS and work done with KPMG focusing on organization priorities and how those priorities span out to the front line staff. Despite delays due to Covid 19, Kirsten advised of the final wave of implementation of CQI in the Fall of this year and initiatives such as virtual training, A3 working groups, capacity planning, communications plans and senior leadership development are now underway.

Rob MacIsaac invited Kelly Campbell to provide the Board with highlights of the Our Healthy Future.

Kelly Campbell provided an update on Our Health Future including the West Lincoln project which is moving forward in the RFP stage and construction/breaking ground is anticipated a year from now. Kelly also provided updates on the Juravinski project and related budget updates from the Ministry.

Rob MacIsaac invited Barry Lumb to provide the Board with highlights on the Odyssey Project.

Barry Lumb provided an update on the Odyssey Project including delays as a result of Covid 19 and redeployment of staff and the fiscal impact on the project. The board heard that Odyssey is working towards getting back on track including completion of most third party contracts, teams receiving support to develop a good working relationship with assistance of backfill staff, resolving financial impact to contingency needs, repatriation of nurses back to the project, settlement of document management gaps and implementation of other mitigation strategies. Barry advised that the current plan remains to aim for a June 4, 2022 go live date which will continue to be evaluated and confirmed by the first or second week of July. Discussion ensued surrounding ensuring that each of these enablers is viewed through various lenses such as climate, EDI, future of remote work and the impact and related challenges of same on the organization.

4. Quality Committee Meeting – May 17, 2021

Keith provided a brief update on the May 17, 2021 Quality Committee Meeting.

4.1 Quality Improvement Plan 2020/21 Q4/YE Performance of Indicators – 2021 05 QC-013

The following motion was moved by Keith Monrose and seconded by David Collie:

THAT the Board of Directors receives for information the 2020/21 March 2021 YTD Quality Monitor and related interpretations as set out in Report 2021 05 QC-013.

CARRIED

5. Medical Advisory Committee Meeting

Smita provided an update on the April 14, 2021 and May 12, 2021 MAC Board Reports including new physician leaders appointed, Odyssey Updates received at MAC meetings, biweekly approvals and acknowledgements and celebrations at MAC meetings.

It was moved by Dave Lazzarato and seconded by Andrea McKinney that the Board accepts receipt of the MAC Board Reports for April 14, 2021 and May 12, 2021.

CARRIED

6. Foundation Report to the Board

The Board received from Pearl Veenema the HHS Foundation Report and update including an overview of an increase of legacy gifts and the activities of the Volunteer Association.

The following motion was moved by Richard Koroscil and seconded by Jane Milanetti:

THAT the Board of Directors receives for information the Foundation Report.

CARRIED

7. Adjournment

It was moved by Dr. Terry Shields and seconded by Andrea McKinney that the meeting be adjourned.

CARRIED

The meeting adjourned at 6:22 pm.

8. Independent Directors Session and CEO

9. Independent Directors Session

9.1 Board Meeting Evaluation

Charles Criminisi
Chair

Michael Campbell
Corporate Secretary