

**Hamilton Health Sciences
Board of Directors
OPEN SESSION**

Minutes

DATE: December 9, 2022

TIME: 8:30 AM to 12:30 PM

LOCATION: King West, Boardroom 23-009/10 / Via Zoom

IN ATTENDANCE: Farah Alexis, Robert Galaski (via Zoom), Paul Gibson, Bill Laidlaw, Dave Lazzarato (Chair), Andrea McKinney, Keith Monrose, Shirley Thomas-Weir (via Zoom), Debbie Zimmerman (via Zoom), Dr. Paul Miller, Dr. Paul O'Byrne, Rob MacIsaac, Sharon Pierson, Michael Campbell (General Counsel), Tanya Cunliffe (Recording Secretary)

GUESTS: Debbie Bedini (via Zoom), Kelly Campbell, Tim Dietrich, Leslie Gauthier (via Zoom), Leslie Gillies (via Zoom), Dr. Marc Jeschke (via Zoom), Neil Johnson, Dr. Stephen Kelly (via Zoom), Donna LaForce, Michelle Leafloor (via Zoom), Dave McCaig, Rochelle Reid, Dr. Ted Scott (via Zoom), Bruce Squires, Dr. Michael Stacey, Pearl Veenema (via Zoom)

REGRETS: David Collie, Catherine Gaulton, Jane Milanetti, Dr. Allison Sekuler, Hila Taraky, Dr. Deepak Dath

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 Andrea McKinney and seconded by Bill Laidlaw that the Board adopt the Agenda for the open portion of the meeting as distributed.

CARRIED

1.4 Approval of the Minutes from the October 17, 2022 meeting

It was moved by Bill Laidlaw and seconded by Farah Alexis that the minutes from the October 17, 2022 Board meeting open session be approved, as distributed.

CARRIED

1.5 Chair Remarks

The Chair invited Neil Johnson to present the VPs Quality Presentation on the Role of Cancer Care Ontario and Regional Cancer Programs. Dave advised that Neil is the Vice President Oncology, Site Executive Juravinski Hospital, Hamilton Health Sciences and the Regional Vice President, Hamilton, Niagara, Haldimand, Brant Regional Cancer Program.

2. Education Session

VP's Quality Presentations to Board Highlighting Quality Work within VP's Portfolio – Neil Johnson

Neil Johnson provided an overview of Ontario Health-Cancer Care Ontario (OH-CCO) and of HHS's lead agency role in OH-CCO. An overview of OH-CCO's planning, measurement, quality improvement, and performance management within the cancer system was provided and Neil demonstrated the types of metrics and improvement activities facilitated by the Regional Cancer Program and how they might link to HHS's quality mission.

Neil was thanked for his interesting and informative presentation and for his efforts at HHS and on behalf of the region.

3. CEO Report

Rob MacIsaac acknowledged that the hospital system continues to be very strained. Extraordinary pressures have been put on McMaster Children's Hospital (MCH) in particular. The three viruses that have been contributing to high occupancy have either peaked or are currently stable. System pressures and high capacity have kept HHS, and MCH in particular, in the media and Rob acknowledged Bruce Squires for representing HHS in the media very well. Highlights were provided in regards to community updates and emerging issues and news including a discussion on the HHS' Operating Room Assistant (ORA) initiative. The Board discussed the controversy and concerns surrounding the ORA role and Rob reported that Management continues to have confidence that this is an appropriate decision based on how well those positions are already performing in the Operating Room. This is also not extraordinary in terms of what is happening across jurisdictions in North America and HHS feels they can utilize ORAs safely.

An overview of funding was provided including the renewed funding for the HHS burns program. Rob shared information on LeaderSHIFT, a new quarterly interactive and educational forum for HHS leaders. Celebrations at HHS were highlighted including service milestones and the Pat Mandy Inclusion Award presentation.

An overview of Strategy was provided. Despite pressures, HHS continues to make progress on the Corporate Strategic Plan and Corporate Projects. Rob shared that he has communicated the updates to the corporate strategy across the Organization and the Leadership Program was very focused on corporate strategy as well. An overview of the strategy deployment plan was provided including the strategic plan update and communication as well as governance structures established in the steering committee membership approval and the working group initiation. 8 of the 10 corporate projects have commenced and 2 remaining projects are currently launching.

Rob invited Tim Dietrich, Interim Vice President, Quality and Performance to address initiatives, projects and in-year objectives performance updates.

Tim provided an overview of the four in-year objectives, advising that many of the targets surrounding performance were aimed for the last quarters of the year to allow for the implementation of EPIC. The Continuous Quality Improvement Management System and the tools within the system were used to assist in addressing in-year objective challenges and to deploy the targets to the units.

4. COO Update

Sharon Pierson provided the Operations Report, discussing the impact of the triple wave of viruses on the staff and hospital. Sharon advised that ED visits for influenza-like and respiratory illness have peaked and are now dropping in kids in Ontario, and have recently increased but is currently stable for adults. An update on alternative long-term care pressures and activity as surgical ramp up continues, was provided. Sharon spoke to ED volumes and acuity levels. An overview of operational areas of focus in Pediatrics was provided and Sharon advised that frontline staff from across HHS have been requested to pick up shifts at MCH and to volunteer for temporary reassignment amongst other mitigating strategies. Further efforts are being made including in surgical and procedural ramp ups with activity at 80-85% of pre-COVID activity, the Satellite Health Facility is at full complement of 120 beds, and HHS is resuming critical burn service this fiscal year.

The Chair thanked Sharon and her team for their extraordinary efforts.

COMMITTEE REPORTS

5. Quality Committee Meeting – November 22, 2022

Andrea McKinney provided an update on the November 22, 2022 Quality Committee Meeting advising that an overview of the Quality Monitor report for 2022/23 FYTD (September) Performance had been presented. Highlights of driver metrics against targeted performance as aligned with the In Year Objectives of the 2022-23 Corporate Strategic Plan was given. The current In Year Objectives/Quality Improvement Plan indicators are: sepsis rate, pressure injuries, hospital deaths following major surgery and lost time injury rate.

Andrea shared that the Committee had heard the National Surgical Quality Improvement Program (NSQIP) overview of the July 2022 results which reviews approximately 1680 patients at each site and collects data points for each patient. The National Surgical Program has provided some critical information to inform and support quality improvement for surgical care.

CQI updates were provided on the implementation, sustainability and maturation of the Continuous Quality Improvement (CQI) Management System with updates on the implementation status and acknowledgement of more than 6,000 improvements implemented since 2016.

5.1 2022/23 Monitor Indicators/Targets – 2022 11 QC-024

The following motion was moved by Andrea McKinney and seconded by Bill Laidlaw:

THAT the Board of Directors receives for information the 2022/23 September 2022 YTD Quality Monitor and related interpretations as set out in Report 2022 11 QC-024.

CARRIED

5.2 2022/23 National Surgical Quality Improvement Program (NSQIP) Reporting – 2022 11 QC-026

The following motion was moved by Andrea McKinney and seconded by Paul Gibson:

THAT the Board of Directors receives for information an overview of the July 2022 results of the National Surgical Quality Improvement Program as laid out in Report 2022 11 QC-026.

CARRIED

5.3 CQI Updates – 2022 11 QC-028

The following motion was moved by Andrea McKinney and seconded by Farah Alexis:

THAT the Board of Directors receives for information an update on the implementation, sustainability and maturation of the Continuous Quality Improvement (CQI) Management System.

CARRIED

6. Audit Committee Meeting – November 24, 2022

6.1 Terms of Reference, Audit Committee, 2022 11 AC-022

Dave Lazzarato advised that the Audit Committee reviewed its Terms of Reference and shared that they have been amended to reflect responsibility to monitor issues related to information/cyber security in alignment with the Board's ongoing strategy.

The following motion was moved by Dave Lazzarato and seconded by Andrea McKinney:

THAT the Board of Directors approves the Audit Committee's Terms of Reference as set out in Report 2022 11 AC-022.

CARRIED

7. Medical Advisory Committee Meetings

7.1 MAC Board Reports – October 2022 and November 2022

Dr. Paul Miller provided an overview of the items brought forward at the October 12, 2022 and November 9, 2022 MAC meetings. Paul acknowledged the work currently being performed by the MAC, due to the implementation of EPIC and as a result of the pandemic, has necessarily been surrounding credentialing and approvals. Dr. Miller suggested that, as recruitment for the new MAC Chair is underway, perhaps a needs assessment of the Committee and feedback from the Board, pertaining to where they would like to see the Committee go, would be helpful.

The following motion was moved by Bill Laidlaw and seconded by Keith Monroe:

THAT the Board of Directors receives for information the October 12, 2022 and the November 9, 2022 MAC Board Reports.

CARRIED

8. Foundation Report to the Board

Pearl Veenema advised that there was no further information to report beyond what was provided in the package.

The following motion was moved by Shirley Thomas-Weir and seconded by Keith Monroe:

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

CARRIED

9. Adjournment

It was moved by Bill Laidlaw and seconded by Paul Gibson that the meeting be adjourned.

CARRIED

The meeting adjourned at 11:50 am.

10. Independent Directors Session and CEO

10.1 Independent Directors Session

11. Board Meeting Evaluation

Dave Lazzarato
Chair

Michael Campbell
Corporate Secretary