Hamilton Health Sciences Board of Directors OPEN SESSION

Minutes

DATE: December 6, 2023

TIME: 4:00 PM to 8:00 PM

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

IN ATTENDANCE: Keith Monrose (Chair) Farah Alexis, Robert Galaski, Paul Gibson, Bill Laidlaw, Dave Lazzarato, Andrea McKinney, Shirley Thomas-Weir, Debbie Zimmerman, Hila Taraky, Amit Kapur, Jane Milanetti, Dr. Allison Sekuler, Rasha Kisswani, Dr. Anthony Crocco, Dr. Paul O'Byrne, Dr. Thom VanHelder, Rob MacIsaac, Sharon Pierson, Janet Ozembloski (General Counsel), Jillian Morton (Recording Secretary)

GUESTS: Debbie Bedini, Kelly Campbell, Tim Dietrich, Leslie Gauthier, Leslie Gillies, Dr. Marc Jeschke, Neil Johnson, Dr. Stephen Kelly, Donna LaForce, Michelle Leafloor, Dave McCaig, Rochelle Reid, Dr. Ted Scott, Bruce Squires, Dr. Tamar Packer, Pearl Veenema, Dr. Khalid Azzam, Aaron Levo, Amit Bansal, Danielle Petruccelli (partial), Tina Petrelli (partial), Sinisa Medic (partial)

REGRETS:

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 Bill Laidlaw and seconded by Rob Galaski 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 5, 2023 meeting

It was moved by Dave Lazzarato and seconded by Debbie Zimmerman that the minutes from the October 5, 2023 Board Meeting open session be approved, as distributed.

CARRIED

1.5 Chair Remarks

The Chair congratulated Tim Dietrich and his team on the outstanding work done on Accreditation, which resulted in HHS being accredited with exemplary standing.

The chair invited Leslie Gillies to provide the education session highlighting quality work within Leslie's portfolio.

2. Education Session

Leslie Gillies provided an overview of the Lower-Limb Preservation (LLP) Integrated Care Program. Leslie shared that there was an opportunity with Ontario Health Teams (OHT) that became available to focus on reducing lower limb amputations paticularly within the Hamilton region. Ontario has had significantly high rates of lower limb amputations in comparison to some other countries. Leslie shared a video of a story of a patient ambassador who helps promote the word of how to prevent lower limb amputations. Leslie turned the meeting over to Dr. Packer to share on the outreach work that has been completed.

Dr. Packer shared information related to the Lower Limb Preservation Integrated Care Demonstration Program Socks Off Campaign. Dr. Packer reported that Dr. McKenna and she created a series of videos. The videos detailed the steps that a patient would go through at the initial exam and then along the referral pathway. It was highlighted that Leslie's team, along with Danielle, have created a referral network to reduce time that can be wasted with rejected referrals.

Danielle Petruccelli advised that the program model focuses on optimizing the existing resources in the community and connecting care among those resources. A foot care assessment and management model was implemented that focuses on prevention to ensure timely and equitable access to care. The timeline for this project is current FY 2023/24 with the project ending on March 31, 2024.

The Board heard that some assessment tools were developed for the program including the Inlow Foot Screen assessment tool. A pilot health equity data capture within the LLP project will capture data elements such as racial group, gender identity and ability to pay for basic needs, and these will help to provide more culturally and socio-demographically appropriate care. Rochelle Reid noted that a fulsome report on the data collection will be coming to the Quality committee in February and then it will come to the full Board.

Leslie was thanked for the interesting and informative presentation.

3. CEO Report

Rob MacIsaac provided the CEO update. Rob acknowledged and congratulated Janet Ozembloski on being appointed Vice President Legal Services, General Counsel & Corporate Secretary. Rob also celebrated and thanked Pearl Veenema, the CEO of the HHS Foundation who is retiring after 47 years' in health care. On November 27, 2023, Sylvia Jones, the Minister of Health and Deputy Premier, visited McMaster Children's Hospital (MCH) where she made an announcement of the significant new funding that the province is investing in pediatric healthcare. Sylvia reiterated the government's \$30M investment in MCH, which is part of the larger \$330M investment for the province. For LeaderSHIFT, 300 leaders attended a 3-hour session on November 14. This marked a theme in psychological health and safety that the People, Culture, and Communications department is going to be promoting as part of a broader approach to the People Plan, a corporate project for 2023-24.

An overview of Strategy was provided. Rob advised that with regard to the strategy deployment work plan, the various projects have been constituted, the teams are assigned leaders and the leaders are developing scope. Rob provided highlights on several transformation projects that are currently underway including that for the workforce planning/care transformation, previously this was one project and going forward there will be 2 separate projects: one under Aaron Levo where he will be working to develop the new People plan and the second a project aimed at care transformation led by Leslie Gillies. For EDI, processes and tools are in place to put the EDI plan into action. Resources are needed to implement the strategy, but until the VOR is complete and the province makes a decision on the funding for inflation, those will be key determinants on how quickly the EDI strategy can be implemented.

Rob provided updates on various corporate projects, some of which included the Environmental Management Plan. It was noted that Kelly Campbell is leading the project, and the work is well underway and should be completed this year. This will give us a roadmap to get to completing or longer-term goals around emissions and HHS' environmental footprint. For the physician feedback project, excellent progress has been made and it should be completed by next spring.

Rob MacIsaac highlighted that Dr. Packer received the Greater Hamilton Health Network Leadership award and HHS was recognized as one of Hamilton-Niagara's top employers in 2024.

4. COO Update

Sharon Pierson provided the Operations Report. Sharon highlighted that occupancy is around 115-120% at the HHS' adult acute sites. This is not unexpected as it is respiratory season, but this is more impactful because of the challenges we have in community services with outflow. Planning is in place to mitigate the pressures, including corporate IMS.

Sharon provided some key operational highlights, including that for the Burn program, critical burns needed to be redirected, which was accomplished with the help of Dr. Jeschke. Lots of works has been done to repatriate that activity back to HHS and we are now accepting 65% total surface area burns along with larger burns. There is a plan to resume care of all burns within the catchment area on January 15, 2024. In terms of surgical recovery, there is a lot of work underway to mitigate the

pressures. By April we hope to be above pre-Covid numbers. Work is continuing with external partners on what might be an opportunity with private health facilities. Sharon noted that the intent is to pilot a model to see how it works with an independent health facility. For the Satellite Health Facility, 199 AHF beds are approved to operate until March 31, 2024 – request to continue operating for FY 24/25 and 25/26. It was noted it has been made very clear that if we have to repatriate the patients that it will be at the cost of HHS' elective surgeries.

The Board members were reminded that they can attend CQI huddles. Board members can email Jillian Morton if they would like to sign up to attend a CQI huddle and this will be arranged for them.

5. Corporate Project Closing

5.1 Corporate Closing Projects- 2023 12 BD-015

Rob MacIsaac provided a brief overview of Corporate Closing Projects.

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

THAT the Board of Directors receives for information a summary of 2022-23 Corporate Projects closing out, as set out in Report 2023 12 BD-015.

COMMITTEE REPORTS

6. Quality Committee Meeting – November 29, 2023

6.1 2022/23 2023/24 Monitor Indicators 2023-24 September YTD - 2023 11 QC-027

Shirley Thomas-Weir provided an overview of the 2022/23 2023/24 Monitor Indicators, 2023-24 September YTD report advising that the quality monitor represents driver metrics against targeted performance and it is inline with the IYO for 2023-24. They are the same indicators that are the targets in our QIP. Shirley noted that there is a lot of stability, anything that is unmet as in the Hospital Sepsis rate, is stable or in the Barcode Administration Rate, which is signaling favorably. Efforts in hand hygiene are improving, which resulted in rate increases month over month.

For watch metrics, there were 7 that had statistically significant signals in the September 2023 report.

The following motion was moved by Shirley Thomas-Weir and seconded by Jane Milanetti:

THAT the Board of Directors receives for information the 2023/24 September 2023 YTD Quality Monitor and related interpretations as set out in Report 2023 11 QC-027.

CARRIED

6.2 National Surgical Quality Improvement Program (NSQIP) Reporting – 2023 11 QC-033

Shirley provided an overview of the National Surgical Quality Improvement Program (NSQIP) Report. Shirley advised that the NSQIP is a program that measures and looks at improvements in quality in surgical care. The program currently takes place at the Juravinski and McMaster sites. In general, at both sites, things are performing as expected. Shirley turned the meeting over to Dr. Kelly.

Dr. Kelly noted that the program stopped at the General site because they converted over to T-QIP.

The following motion was moved by Shirley Thomas-Weir and seconded by Allison Sekuler:

THAT the Board of Directors receives for information an overview of the semiannual results of the National Surgical Quality Improvement Program as laid out in Report 2023 11 QC – 033.

CARRIED

6.3 Accreditation-2023 11 QC-031

Shirley Thomas-Weir provided an overview of the Accreditation report advising that HHS made a great accomplishment by receiving an exemplary standing. There were 98.2% criteria met. There was one outlying area of criteria that was unmet around infusion pump training. There will be a follow up required by February 2024. Shirley highlighted the areas of strength that were identified, including investment in leadership development. Areas for development included updating organizational talent management plans and review and evaluation of overall communication plans for the organization.

The following motion was moved by Shirley Thomas-Weir and seconded by Bill Laidlaw:

THAT the Board of Directors receives for information an overview of the semiannual results of the National Surgical Quality Improvement Program as laid out in Report 2023 11 QC – 033.

CARRIED

6.4 2024/25 Quality Improvement Plan- 2023 11 QC-028

Shirley Thomas-Weir provided an overview of the 2024/25 Quality Improvement Plan advising that there are provincial guidelines that are incorporated into the planning for 2024-25, which is underway. The timelines are starting now with a draft of indicators that come to the Quality Committee for approval. Then, the QIP comes to the Board in March 2024 and gets published on April 1, 2024.

The following motion was moved by Shirley Thomas-Weir and seconded by Rasha Kisswani:

THAT the Board of Directors accepts for information the update on the 2024-25 Quality Improvement Plan (QIP) as outlined in this Report 2023 11 QC-028.

CARRIED

7. Audit Committee Meeting – November 29, 2023

7.1 Terms of Reference, Audit Committee, 2023 11 AC-021

Rob Galaski advised that the Audit Committee reviewed its Terms of Reference and shared that there were no revisions.

The following motion was moved by Rob Galaski and seconded by Jane Milanetti:

THAT the Board of Directors approves the Audit Committee's Terms of Reference as set out in Report 2023 11 AC-021.

CARRIED

8. Medical Advisory Committee Meetings

8.1 and 8.2 MAC Board Reports – October 2023 and November 2023

Dr. Anthony Croccco provided an overview of the items brought forward at the October 11, 2023 and November 8, 2023 MAC meetings. Anthony reported that there are some changes being made and as a result the minutes will evolve over time. One of the changes includes the addition of Brag and Steal.

The following motion was moved by Jane Milanetti and seconded by Rasha Kisswani:

THAT that the Board accepts receipt of the MAC Board Reports for October 11 and November 8, 2023.

CARRIED

8.3 Credentialing Process Presentation

Dr. Crocco acknowledged the work that Crystal Zdriluk and the credentialling team do to create the documents for review.

Anthony highlighted that credentialing is a lot of work, but it is important because it determines which professional staff HHS is employing and ensures that they are of the highest quality.

Anthony provided an overview of the credentialling process advising that it is similar to human resource process, in that applications are submitted within HHS.

Discussion took place regarding the Board and potential conflicts of interest with regards to the applicants. It was suggested that Janet Ozembloski look into this further and provide some information to the Board.

Jane Milanetti suggested that it would be helpful to have an update/review of the credentialing process for the Board annually.

9. Foundation Report to the Board

Pearl Veenema advised that increasingly the donor community is responding to the hospitals' request to support patients through patient assistance programs. Pearl shared the highlights of a letter from a donor.

The following motion was moved by Allison Sekuler and seconded by Bill Laidlaw:

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

CARRIED

10. Executive Compensation

At the request of the Chair, the meeting moved in-camera. All Management and guests departed the meeting and the Independent Directors and CEO remained to discuss the Compensation Subcommittee Reports.

Refer to in-camera minutes

After business related to the Compensation Subcommittee reports was completed, the meeting moved out of in-camera session.

11. Adjournment

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

CARRIED

The meeting adjourned at 8:01 pm.

12. Independent Directors Session and CEO

12.1 Independent Directors Session

13.	Board Meeting Evaluation	
Koith	Monrose	 Janet Ozembloski
Chair		Corporate Secretary