

## Meeting of the Board of Directors

Monday, September 25, 2023

3:30 pm start time

St. Joseph's Hospital – Adams Boardroom A2-041

Via MS Teams video-conference

# MINUTES

**Minutes to be ratified next meeting**

Call to Order – Nawaz Tahir

Welcome and roundtable introductions occurred. The Board then engaged in a Commissioning Ceremony called “Reflection and Blessing” led by Dale Nikkel.

## 1. Full Agenda / Consent Agenda

### 1.1 Adoption of Full Agenda

**It was MOVED and SECONDED the agenda be adopted as circulated. CARRIED.**

### 1.2 Approval of Consent Agenda

**It was MOVED and SECONDED that the Consent Agenda for the [September 25, 2023] Board meeting, consisting of the recommendations and reports found in Appendix 1, be approved and/or received for information by St. Joseph's Board of Directors. CARRIED.**

## 2. Reports

### 2.1 Board Chair Remarks

#### (a) Schedule for 2023/24 Board Reflections

The Board adopts a reflection schedule so that individuals know in advance when they will be providing the reflection. A reflection is an opportunity to pause and set our minds and intentions to what is before us. Circulated in the agenda package was the proposed schedule for 2023/24. Members were invited to review the schedule and connect with V. Cullen if a conflict arises.

#### (b) Schedule for Board representatives attending 2023/24 MAC meetings

St. Joseph's Board has set a priority to maintain close relationships with the Medical Advisory Committee (MAC) and the Credentialed Professional Staff. Over the last number of years, it has proven useful



## 2023/24 Membership

### VOTING

Nawaz Tahir (Chair)  
 Donna Ladouceur (Vice-Chair)  
 Jonathan Batch (Past Chair)  
 Peter Cassidy  
 Lesley Cornelius, ICD.D  
 Brandon de Vries (R)  
 Joan Hubert (T)  
 Mary Gillett, FCPA, FCA  
 Don MacDonald, FCPA, FCA  
 Stephanie Marentette  
 Fr. Frank O'Connor  
 Robert Raymond  
 Howard Rundle, PhD  
 Victoria Smye, PhD  
 Janet Tufts

### NON-VOTING

\*Abhijit Biswas, MD (R)  
 \*Lulu Bursztyn, MD  
 \*Roy Butler, PhD  
 \*Richard Corneil  
 Jayne Garland, PhD  
 \*Sandra Northcott, MD  
 \*Karen Perkin, RN, MScN  
 \*John Yoo, MD  
 \*ex-officios

### Guests

Dale Nikkel  
 Theresa Mikula  
 St. Joseph's Senior Leaders

### Recorder

Vanessa Cullen

A = absent

R = regrets

T = MS Teams

for Members of the Board to attend MAC meetings, as an observer. It is both an educational opportunity for the Board Member and sends a message to the MAC and Credentialed Professional Staff that the Board is interested and engaged in the work of Medical Affairs. Board Members are requested to review the MAC's meeting schedule and ensure their scheduled date to attend is in their calendars. Any conflicts can be communicated to V. Cullen so a change can be made. It is important to note that other Directors are welcome to attend as well, outside of those scheduled, if interested. It was noted that the MAC meetings are scheduled to be in person. However, MS Teams will remain an option if virtual meetings become a necessity.

N. Tahir acknowledged the work of J. Batch who currently sits on an Ontario Hospital Association (OHA) ad-hoc committee doing work around advocacy for Executive Compensation.

Accreditation progress is going well. N. Tahir noted the Executive Committee was a part of a mock accreditation session earlier in the month and will be part of the accreditation process during the actual survey week as part of the Governance portion.

Education for new Board Members is encouraged as it is a priority to have robust educational offerings for the Board. Members are also asked to bring ideas forward as educational offerings arise.

## 2.2 President and Chief Executive Officer

a) R. Butler highlighted areas of current developments and issues from the summer federally, provincially and locally, which included the following:

- St. Joseph's, London Health Sciences Centre (LHSC), and Lawson hosted tours/meetings with MPs Peter Fragiskatos, Lianne Rood, and Minister of Health, Mark Holland, over the past month. These meetings were part of an OHA and local strategy advocating for increases in research funding.
- Provincially there has been a lot of activity with the repeal of Bill 124, reopens of collective agreements and arbitration decisions. R. Butler informed the Board he recently received a letter from the Deputy Minister of Health acknowledging the need for support within the hospitals but details of what this support will be is to be determined.
- An Ombudsman Report titled "Lessons for the Long Term" was released provincially following an investigation of the Ministry of Long-Term Care's oversight of long-term care homes through inspection and enforcement during the COVID-19 pandemic. There are 76 recommendations focused on the Ministry of Long-Term Care inspection and enforcement processes with no specific recommendations focused on the homes themselves.
- Ontario Health announced they will consolidate their 14 regional Home and Community Care Support Services across the province into one and eventually transition the delivery of services to Ontario Health Teams. There will also be change to the procurement of services and contracts. No additional information is available at this time.
- S. Jansen co-chaired a task force in June, on behalf of the province and as requested by Ontario Health, to create an operational directions document to maximize the capacity and flow from acute care through rehabilitation and complex care. This document was released in September with 28 directions listed most of which are in place at St. Joseph's. Some recommendations would require additional resources. The Ontario Rehabilitation and Complex Care Network (R. Butler chairs) will be reviewing this document in October to identify where provincial advocacy may be required via OHA to achieve the recommendations.
- Locally, negotiations with Western regarding the Affiliation Agreement between St. Joseph's and Western continued. There is a desire to keep a few key areas as aligned as possible with LHSC (i.e. selection of Chair/Chiefs). The expiration of the current affiliation agreement is the end of December 2023. The first draft of this agreement will be brought to the Governance Committee

in October with a goal to bring a final version to Governance in November with a final recommendation to the Board at its November 2023 meeting.

- A. Dukelow and S. Northcott continue to lead the work on the Credentialed Professional Staff By-Laws. The initial draft was brought to the Governance Committee in September with a goal for a final review and recommendation for approval by the Board in January.
- Fall preparedness is underway for COVID, influenza and respiratory syncytial virus.
- Hospital occupancy is expected to peak in the December time frame. Provincially, the goal is to not have a reduction in surgical services this year and reduce alternate level of care (ALC) numbers.
- It is expected the COVID and influenza vaccine will arrive in the next week or so but there is no confirmed date. The COVID vaccine is not being positioned as primary or booster but as a “dose”. All staff are required to have the primary COVID series but this dose will not be mandatory although strongly encouraged and will be provided internally).

b) Dashboard for Reporting Compliance

N. Tahir informed the Board that due to the number of legislative requirements Directors are ultimately accountable for, this dashboard for compliance, modelled after one from an OHA template, allows the Board to confirm its compliance status. The updated dashboard was reviewed by the Senior Leadership Team in September 2023 and is brought forward for information purposes.

c) Enterprise Risk Management

R. Butler advised this is an update of the current Enterprise Risk Management (ERM) with a briefing note listing some notable changes. A request for proposal is under way to procure a third party this fall to lead the organization in a new ERM process.

- It was suggested to include the CEOs of the regional hospitals as part of the CEO engagement in Section 4 of the Planned Key Controls for Partnerships/Collaborations with LHSC.
- Much work has taken place with a third party (PWC) to complete a Business Continuity Plan for St. Joseph’s. There was a ‘table top’ exercise to test the plan this past summer. N. Tahir thanked Ruth Bullas and her team for the work done in completing the ERM report for the Board.

d) 2023/24 Q1 Corporate Scorecard and Strategic Plan Update

*R. Butler provided the following strategic plan updates in alignment with the pillars of the strategic plan:*

*Reaching out to Our Community*

- R. Butler reminded the Board of the approved change in the investment portfolio with a half million dollars to go toward social impact investing. St. Joseph’s, one of the first hospitals in Southwestern Ontario, is one of the lead investors in a Verge Capital Breakthrough Fund with a focus on the most pressing challenges in the community. R. Butler thanked the Board for its approval of this.
- St. Joseph’s and Atlohsa partnered in their submission to create an Indigenous Hub behind Parkwood Institute. Atlohsa’s proposal is being recommended by the review committee for approval.
- Project SEARCH is a partnership with Thames Valley District School Board, Hutton House and St. Joseph’s offering training for high school students with intellectual and developmental disabilities to prepare them for the working world. After a recent graduation for the first cohort, some are now employed with St. Joseph’s. Another eight students are starting in this program this fall.

- Nourish is a national program providing fresh produce for patients and residents. This year 250 kgs of locally grown vegetables will be incorporated into the menus with staff, residents, and patients tending these gardens. In collaboration with Urban Roots, St. Joseph's was selected as one of five organizations, nationally, to be part of the work over the next two years. The focus will be on climate and a commitment to reduce emissions related by food preparation by 25%.

#### *Advancing Excellence in Care*

- Through Clinical Master Planning work, St. Joseph's has successfully procured a consortium of vendors to lead this work. The Board will receive education about this work at the October 30<sup>th</sup> Board Meeting. Directors will also be invited to a half day launch for the clinical planning.
- Parkwood had 32 surge beds funded annually for the past few years where the initial request was for 40 permanently funded beds. Initially, Ontario Health funded only 12 beds but through advocacy, funding was received for 22 beds. The unit has capacity for 40 beds. Through work with LHSC, they have purchased 18 beds from St. Joseph's for 2023/24. This allows for moving ALC patients who are waiting for long-term care or other services out of acute care.
- St. Joseph's also received funding for 12 beds in Mental Health with a specific focus on patients who present in Emergency who can be moved immediately to Parkwood Institute Mental Health Building.
- Ontario Structured Psychotherapy (OSP) is a program delivering free Cognitive Behavioural Therapy (CBT) for individuals, 18 years and older, living with depression and anxiety-related concerns. This program is led by St. Joseph's Health Care, Hamilton and St. Joseph's Health Care London providing clinical quality oversight, data management and administration. Targets have been exceeded for the number of clients screened, assessed and enrolled in OSP which is seen as positive as this is publicly funded care across the community.
- There is continued focus on reducing surgery long-waiters as well as the development of a centralized cataract wait list.

A question was raised regarding the Homelessness Hub and whether the funding is year to year or longer term. Reply was given the initial funding commitment is for two years with a goal of having a total of 15 hubs which will require additional provincial funding support. A further capital commitment from London Community Foundation for renovations through the Movement for Change Fund is forthcoming.

#### *Leading Research & Innovation*

- The recruitment for a Vice President of Research is nearing completion. Eight individuals were vetted for this position which was then narrowed to five candidates. A panel of 12 interviewed these candidates with support from Chair-Chiefs who have now submitted their choice for the top two candidates. R. Butler thanked D. Hill, K. Perkin, A. Dukelow, J. Yoo and J. Garland for their support through this process.
- The Lawson Joint Management Committee transition planning meeting has been moved to October.
- The Board was informed the new PET-CT scanner is now in place. The technology used allowed for the PET-CT to be moved in the elevator however a new temporary floor needed to be built to be able to move it into place. It is now in use for patients.

*Leveraging Technology*

- The One Chart Phase II cost is higher than originally anticipated. The Regional Hospital CEOs are seeking approval from their Boards this month or in October. Cerner negotiations are complete and the contract needs to be signed off by the end of the week.

*Empowering People*

- A new Walking Challenge launched in September with over 500 staff, physician and volunteer participants. There was also excellent turnout for St. Joseph's walk in the Pride Parade in July with at least two to three times the number of participants as last year.

R. Butler provided an overview of the \$5.8M deficit for Q1 which is not seen as favourable at this time. Typically speaking, St. Joseph's generally sees a surplus which will be reviewed and discussed with more detail with the full financial report from RPAC. Human Resource indicators are leveling off. However, there is room for improvement with regards to attendance. Safe and Effective Care continues to be monitored and reviewed by the Quality Committee of the Board. Hospital Service Accountability Agreement (H-SAA) volumes are on target.

2.3 Medical Advisory Committee Chair

S. Northcott reported on the transition from a Joint MAC to an independent St. Joseph's MAC. Along with M. Khang, A. Dukelow and V. Mehta, she is working with LHSC Medical Leadership to stay as closely aligned so they may continue to support the Credentialed Professional Staff (CPS).

The current City-Wide MAC Subcommittees will 'sunset' as of December 31<sup>st</sup> 2023 with the exception of the City-Wide Credentialing Committee which will be ongoing.

During the September 13, 2023 MAC meeting, LHSC brought forward its draft of the CPS By-Law. S. Northcott noted that only LHSC Professional Staff Organization (PSO) were invited to provide input into the LHSC By-Law which has been flagged as a concern as some CPS have primary appointments to one organization but work across both hospitals. St. Joseph's MAC allowed for input on their By-Law from all CPS regardless of their primary appointment. This subsequently led to a letter from Dr. Alex Barron, LHSC MAC Chair, stating that in the spirit of inclusion, the decision was made to invite all LHSC and St. Joseph's PSO to provide input into LHSC's review of its By-Law.

N. Tahir voiced his appreciation for the advocacy work done on this matter.

2.4 Quality Report

(a) Patient, Resident, Caregiver story

J. Younger reminded Directors that as part of its focus on quality, it is equally important to hear 'negative' stories of patients' experiences as it is positive because learnings from negative stories can also greatly impact the way in which the Board and senior staff make decisions. J. Younger, VP Patient Care and Quality, shared a story about patient feedback regarding Food and Nutrition Services demonstrating what some might see as a small service but in fact demonstrate how much this service has a big impact from the patient perspective and how St. Joseph's responds to the needs of patients.

b) 2023/24 Q1 Quality Results

L. Cornelius, Chair of Quality Committee, advised there are two areas being closely monitored by the Committee: MRI and CT Wait Times.

The Quality Committee will 'dig deeper' in the review of 'negative' patient incidents prior to them coming to the Board to understand the cause, the harm that may have been done, as well as solutions that could be put in place.

### 2.5 Western University Report

J. Garland, Dean of Faculty of Health Sciences (FHS), informed the Board on the Compressed Time Frame program at Western. This 19-month program, has grown from an intake of 104 to 250 students in September 2023, 50 of them moving from the RPN to RN pathway, doubling the number since its launch last year. There is work being done to increase the September 2024 intake in Physiotherapy from 80 to 120 and Occupational Therapy from 75 to 92.

She advised Western and St. Joseph's are working together to improve placement offerings to the rehabilitation disciplines for specialized rehabilitation in hand and upper limb services, which have become much too low – a casualty of COVID.

J. Garland informed the recent Homecoming brought some of the 50<sup>th</sup> reunion classes of Nursing 1973 and School of Communication Sciences and Disorders (CSD) 1973 to campus. CSD was particularly special as this was the first graduating class. One of St. Joseph's former RNs, Alexis Smith, received the School of Nursing Alumni of Distinction Rising Star Award at Homecoming.

J. Garland and S. Jansen are working on innovative ways to expand a partnership between FHS' Canadian Center for Activity and Aging and the Regional Geriatric Program to support education and research missions.

V. Smye further explained the compressed program is designed for those who already have university experience and prerequisites required for this program. It is geared towards more mature students as it is an intense program which could lead them to a Masters following completion. There was close to \$1M invested in the creation of this program by the faculty.

## 3. Business Arising

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Standing agenda item, no business arose.

## 4. New Business

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### 4.1 Resource Audit and Planning Committee Recommendation - Q1 Financial Results

David Ross joined the meeting at 4:50 p.m.

M. Gillett, Chair of RPAC shared the budgeted deficit was \$1.8M where the actual deficit sits at \$5.8M. Contributors include:

- Bill 124;
- Rising interest rates;
- Microsoft costs coming in higher than planned;
- Q1 was expected to have a \$15.1M liability for ongoing costs related to Bill 124 but has been revised to \$19.5M (\$15.2M was liability for retroactive pay)

It was noted that every hospital in Ontario is projecting a deficit and are having these same conversations. Mitigation strategies are in place for St. Joseph's.

**It was MOVED and SECONDED St. Joseph's Board of Directors approve the financial statements of St. Joseph's Health Care London for the quarter ended June 30, 2023.**

**CARRIED.**

D. Ross left the meeting at 5:09 p.m.

**4.2 Governance Committee Recommendation – Further Amended to Ontario Not-for-Profit Corporations Act (ONCA) Compliant By-Law**

N. Tahir informed there was an unintentional deletion of wording discovered in the newly approved ONCA-compliant By-Law stating the intent was not to have this language removed. It now requires proper governance process to add the wording back into the By-Law. If this amendment is endorsed by the Board, it goes on to St. Joseph's Health Care Society for final approval following which Borden Ladner Gervais will then carry on with filing of the paperwork with the Ministry.

No questions or concerns arose.

**It was MOVED and SECONDED the St Joseph's Board of Directors endorses a further amendment to the ONCA-Compliant By-Law to add back in as ex-officio Directors of the Board:**

- 1. the Dean of the Schulich School of Medicine & Dentistry at Western University;**
- 2. the Dean of the Faculty of Health Sciences at Western University; and**
- 3. a representative of St. Joseph's Health Care Society, as designated by St. Joseph's Health Care Society.**

**and that this be further presented to St. Joseph's Health Care Society for approval.**

**CARRIED.**

**4.3 Chair updates - Standing Committees of the Board**

**(a) Stoplight Report from Quality Committee of the Board**

L. Cornelius highlighted that MRI and CT scan wait times coupled with reduced funding is putting St. Joseph's in a difficult position however it is anticipated that now that LHSC's PET machine is back online it should help reduce wait times. She further reported that as a Required Organizational Practice (ROP) on Suicide Prevention, screening at Urgent Care is in place and that within the first week of this screening, two individuals were screened positive and offered support. This is a good news story as it is identifying people who may otherwise fall through the cracks. No questions arose.

**(b) Stoplight Report from RPAC Committee of the Board**

M. Gillett referenced the stoplight report which outlined a change in the life projection of St. Joseph's parking garage. Mitigation efforts are in place, continued discussion and documentation review will occur at RPAC and on to the Board when appropriate.

**(c) Stoplight Report from Governance Committee of the Board**

D. Ladouceur, Chair, reported that the Governance Committee will begin the process of appointing a second Vice-Chair. No questions arose.

**5. In-Camera Meeting**

**It was MOVED and SECONDED the meeting of the Board of Directors move in-camera at 5:15 pm.**  
**CARRIED.**

The regular meeting of the Board of Directors resumed at 7:01 pm.

*Rising from the in-camera meeting, the Chair reported the Board provided approval for the revised 23/24 budget, the Lawson Brand, the 23/24 Goals for MAC Chair and Vice Chair, and revised 23/24 CEO goals.*

## **6. Termination of Meeting**

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There being no further business, the Chair declared the meeting terminated at 7:03 p.m.

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Nawaz Tahir, Chair

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Roy Butler, Secretary

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