

## Meeting of the Board of Directors

Monday, March 25, 2024

3:30 pm start time

St. Joseph's Hospital – Adams Boardroom A2-041 and via MS Teams video-conference

# MINUTES

Call to Order – Nawaz Tahir

The reflection was provided by Brandon de Vries.

## Education Session

Capital Master Plan, Part 1: Clinical Services Plan

R. Butler shared that J. Younger is Vice-President sponsor for this work. He then welcomed and introduced M. Pavia and T. Reynolds (internal) along with guests from KPMG, Stantec, PSG and RPG.

A. Berk stated the Board's engagement and support of the clinical services plan is requested. He then led Members through a presentation outlining the project's overview and timelines. A key piece to the project has been broad stakeholder engagement and the use of data analytics and modelling about the future needs of the community. Members were educated on how data, social determinants of health, were used to project the needs of the community. In St. Joseph's catchment, there is a high social determinant of health gradient with a growing and aging population.

Members were then provided with an overview of St. Joseph's strengths, the key opportunities uncovered through clinical services planning and the vision for further services at St. Joseph's. It was noted that while many hospitals are making many asks for renewal in capital for structure, the strategic narrative is what is compelling and confirms to the Ministry hospitals are thoughtful and purposeful behind their asks.

Commentary was provided on areas of strategic importance to St. Joseph's and where there are opportunities to collaborate with LHSC's planning. For example, mental health is an area where St. Joseph's sees opportunity for greater integration and this would be an area requiring further discussion with LHSC. As such, St. Joseph's has raised this with LHSC along with reconfirming its commitment to work together as the Ministry does expect a coordinated plan between the two organizations.



## 2023/24 Membership

### VOTING

Nawaz Tahir (Chair)  
 Donna Ladouceur (Vice-Chair)  
 Jonathan Batch (Past Chair)  
 Peter Cassidy  
 Lesley Cornelius, ICD.D  
 Brandon de Vries  
 Joan Hubert  
 Mary Gillett, FCPA, FCA  
 Don MacDonald, FCPA, FCA  
 Stephanie Marentette  
 Fr. Frank O'Connor (R)  
 Robert Raymond  
 Howard Rundle, PhD  
 Victoria Smye, PhD (R)  
 Janet Tufts

### NON-VOTING

\*Abhijit Biswas, MD (V)  
 \*Lulu Bursztyn, MD  
 \*Roy Butler, PhD  
 \*Richard Corneil, C.Dir.  
 Jayne Garland, PhD  
 \*Sandra Northcott, MD  
 \*Karen Perkin, RN, MScN  
 \*John Yoo, MD  
 \*ex-officio

### Guests

Theresa Mikula  
 St. Joseph's Senior Leaders  
 Aaron Berk, KPMG  
 Tim Eastwood, Stantec (V)  
 Carrie Jeffreys, KPMG  
 Trent Hunter, Stantec (V)  
 Manny Paiva  
 Maria Proulx, KPMG (V)  
 Theresa Reynolds  
 Gavin Wardle, PSG (V)  
 Chuck Wertheimer, RPG (V)

### Recorder

Terri-Lynn Cook  
 A = absent  
 R = regrets  
 V = virtual

Discussion was held and the following comments/questions arose:

- There is more talk about a Campus of Care model for long term care;
- What St. Joseph's offers as compared to private long term care facilities is its focus on caring for the most vulnerable, plus offerings of specialized services;
- It is suspected that in the future will there be an overlap of private v. public services and a need to look at how to partner, or not, with them;
- The need for physical spaces continues to persist;
- In the years ahead, there will be more planning exercises to build on what is presented today. It is a phased approach and uses the best information available at this time, with demonstrated due diligence to the Ministry;
- It is interesting to consider where problems truly lie. For example, is there a need to expand to a second Urgent Care Centre (UCC) or is there an opportunity to invest in more primary care physicians so that patients see their physician first and therefore the default is not UCC;
- It was confirmed that other forms of primary care providers (extended nurse practitioner, etc.) are explored in the plan that could help meet future needs;
- LHSC's plan was submitted last summer. The staggered timing is less than ideal and St. Joseph's has flagged this to Ministry representatives. Even though a submission is made, it is months if not years in negotiations as to what gets approved. As such, there is still opportunity for discussions with LHSC. LHSC and St. Joseph's have a meeting scheduled to identify where the two plans are not aligned;
- Health human resources (HHR), not just physicians, are a challenge in thinking about the future and this is a consideration to the plan. There are shifts in discussions about how to leverage other providers differently, i.e. pharmacists being able to prescribe;
- It was discussed if there was a downside to clumping surgical specialty and rehabilitation into one ambulatory care bucket versus naming them as separate areas of strength. St. Joseph's Senior Leadership Team (SLT) asked the same question when it received. This is an area for further discussion.

A. Berk confirmed the next step is for the Clinical Service Plan to be presented to the Ministry on April 26<sup>th</sup>. During the Summer months there will be work on Master Plan development and in the Fall work on Facility Development planning. A stage 1.2 Submission to the Ministry is planned for Spring 2025. He highlighted that there may be a need to establish a Board ad hoc committee to review and approve the Stage 1.2 submission.

N. Tahir confirmed the Board's endorsement of the work done to date and using the assumptions presented to continue with this work. He thanked all guests for their work and presentation.

M. Pavia, T. Reynolds and other guests from KPMG, Stantec, PSG and RPG left the meeting at 4:33 p.m.

## 1. Full Agenda / Consent Agenda

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### 1.1 Adoption of Full Agenda

Request was made to add an item to the agenda to affirm the Board's intentions as it relates to collaboration of the Medical Advisory Committees of each organization: LHSC and St. Joseph's. The Chair added this as agenda item #2.3.5

Further request was made for agenda items #2.2(c) "HMMS extension" and #2.2(d) "PaLM extension" to be moved to in-camera.

**It was MOVED and SECONDED the agenda be adopted with the addition of item #2.3.5 "St. Joseph's-LHSC Medical Advisory Committees Collaboration" and moving of items #2.2(c) "HMMS extension" and #2.2(d) "PaLM extension" to the in-camera agenda. CARRIED.**

1.2 Approval of Consent Agenda

**It was MOVED and SECONDED that the Consent Agenda for the March 25, 2024 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.**

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**2. Reports**

2.1 Board Chair Remarks

(a) Sisters of St. Joseph Awards

N. Tahir attended the Sisters of St. Joseph Awards for Excellence held March 19<sup>th</sup>. It is a nomination and selection process that recognizes staff who go above and beyond. This year, there were three award recipients and the celebration ceremony was well-attended. He thanked those Board Directors who were able to attend.

(b) Board Retreat / Leadership in Mission Course

N. Tahir informed the Board that Governance Committee has determined to forgo a formal Board Retreat in the Spring of 2024 so that Board Members can be invited to participate in the June 10<sup>th</sup> Mission Leadership course, which is a full day relaunch of this anchor program for leaders. The retreat is also foregone due to the fact that Board Members will be participating in Mission, Vision, Values/strategic plan work in early Fall. He confirmed that T. Cook will send a "Save the Date" appointment to Directors' for June 10<sup>th</sup> and more details will be shared as they are developed.

(c) St. Joseph's Board participation in the OHA Board Evaluation Tool

The Board Chair announced that in accordance with the Board Evaluations policy, the Board participates in the Ontario Hospital Association's (OHA) Board Evaluation Tool on non-accreditation years which allows St. Joseph's Board to be compared against peer Boards in peer organizations. The OHA has put out the call to participate in the Spring offering of the evaluation and St. Joseph's has confirmed its participation. The survey is open March 25 to April 26<sup>th</sup> following which the OHA will provide participants with their results. T. Cook will circulate the link to the evaluation and instructions via email. N. Tahir encouraged Members to take the time to complete this evaluation.

N. Tahir concluded his update by informing Members there continue to be more meetings between LHSC and St. Joseph's Board Chairs and CEOs. The last meeting centered on a discussion around the structure of Medical Advisory Committees (MAC(s)), and a commitment to look at collaborations around this.

2.2 President and Chief Executive Officer

(a) Monthly report to Board

R. Butler responded to questions raised from the written report that had been pre-circulated. In addition, he highlighted areas of current developments and issues, which included the following:

- On February 29<sup>th</sup>, Royal Assent was received to delay expanding MAiD to those with mental disorder as their sole underlying condition until March 17, 2027;
- The first phase of National Pharmacare was announced;
- On March 4<sup>th</sup> St. Joseph's hosted MP Lindsay Mathyssen around advocacy for federal investment in research;

- The government and the Ontario Medical Association reached an agreement regarding the final year (2023/24) of the current Physician Services Agreement;
- On March 14<sup>th</sup>, St. Joseph's had a visit from the Ministry of Long Term Care, Stan Cho, regarding advocacy for long term care funding;
- The Provincial Budget will be released March 26<sup>th</sup> and the OHA is hosting a Member's call to debrief on the budget;
- It is the time of year for Public Service Salary Disclosure. It is expected that ~807 St. Joseph's employees will appear on the list, up from 454 in 2022, which is mostly due to Bill 124. This increase will be seen across the sector. St. Joseph's Communications Department is preparing key messages for media inquiries.

R. Butler concluded by highlighting a number of corporate events that have taken place since last Board meeting: Sisters of St. Joseph Awards for Excellence, Corporate Huddle about the capital services planning work, DocTalks which was held in-person with guest speaker Dr. Narinder Paul and saw over 200 registered to attend and SLT met with a number of Fanshawe leaders at Innovation Village and discussed areas where together they can strategically start to partner.

(b) Strategic Plan Objectives 2024/25

R. Butler referenced the proposed 2024/25 strategic plan objectives scorecard which is one way in which the Board maintains accountability and oversight of the strategic plan and a mechanism to evaluate progress toward achievement of the strategic plan. He highlighted this is the last year of the current strategic plan.

**It was MOVED and SECONDED that St. Joseph's Board of Directors approve and 2024/25 Strategic Plan Objectives. CARRIED.**

2.3 Medical Advisory Committee (MAC) Chair

S. Northcott commented on St. Joseph's Medical Affairs going through its first credentialing cycle which is the first time of not requiring a co-term appointment for Professional Staff (i.e. Professional Staff can choose to be with one organization or the other). St. Joseph's is currently sitting at a 90% completion rate and LHSC is at 88%. What Medical Affairs is seeking is that Professional Staff in Paediatrics and Midwifery are no longer applying to St. Joseph's as there is no service here; however, Professional Staff in departments such as Anesthesia, Psychiatry, Surgery and Emergency Medicine are choosing to remain credentialed at both sites.

The Chair of MAC explained that the meeting structure of the MAC's are evolving; LHSC and St. Joseph's will hold separate meetings on the same date with a collaborative section in between. The April collaborative session will be used to get feedback from clinical leads about what they would see as valuable to discuss during the collaborative sessions (i.e. operational and quality of care matters). Board Members are welcome to attend the collaborative sessions.

2.3.5 St. Joseph's-LHSC Medical Advisory Committees Collaboration

The Chair invited Members to share their view on the need for ongoing collaboration between LHSC and St. Joseph's MACs. Discussion was held and it was expressed that formalizing St. Joseph's Board's view will aid in providing direction to the MAC Chair and Board Chair in their interactions with counterparts at LHSC. There was unanimous agreement for the MACs to work collaboratively to the extent it is possible.

**It was MOVED and SECONDED that St. Joseph's Board of Directors affirms the Board of Directors' desire to ensure the highest level of collaboration between the LHSC and St. Joseph's Health Care MACs to ensure ongoing quality patient care and supporting our learners and credentialed professional staff in a collaborative fashion, including collaborative meetings that focus on items including, but not limited to education, quality of care and operational topics. CARRIED.**

## 2.4 Quality Report

### (a) Patient, Resident, Caregiver story

As part of the Board's focus on Quality, the Board has been receiving updates/stories from the senior leaders at St. Joseph's. K. Perkin, Vice-President Patient Care and Chief Nurse Executive shared a patient harm story from perioperative services and detailed the assessments and opportunities that have evolved from this incident.

### (b) Quality Improvement Plan (QIP)

L. Cornelius, Chair of Quality Committee, presented both the hospital and long term care indicators. She explained the new equity indicator is recommended for both plans. She further stated that on the hospital plan the access and flow target was set by St. Joseph's – it is not a Ministry target and although it is much higher than current performance it is expected to be achievable.

L. Cornelius then outlined the approval path being that Quality Council drafts the QIP which is then presented to SLT for endorsement and separately presented to the Quality Committee of the Board who will make a final recommendation to the Board for approval. Upon approval, the QIP is due to be submitted to the Ontario Health portal by April 1<sup>st</sup>.

Members engaged in discussion and it was confirmed there was no science behind setting the equity, diversity, inclusion and belonging indicator; it is simply an ever-growing area for leadership understanding.

**It was MOVED and SECONDED that St. Joseph's Board of Directors approves the 2024/25 Quality Improvement Plan for St. Joseph's Health Care London and Mount Hope Centre for Long Term Care. CARRIED.**

J. Yoo left the meeting at 5:33 p.m.

## 3. Business Arising

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Standing agenda item, no business arose.

## 4. New Business

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### 4.1 Executive Committee Recommendation – 2024/25 Executive compensation tied to the Quality Improvement Plan

Annually the Board is to approve which of the indicators in the QIP are tied to executive compensation for the CEO and Vice-Presidents of St. Joseph's. Reference was made to the briefing note outlining the four proposed indicators. R. Butler stated a goal in setting the indicators is to choose ones that give

a mix of dimensions (i.e. equity, safety, quality, etc.) and ones that span all of St. Joseph's which is why there is no one indicator specific to long term care.

**It was MOVED and SECONDED that St. Joseph's Board of Directors approve the 2024/25 Quality Improvement Plan metrics tied to executive compensation, as presented. CARRIED.**

4.2 Governance Committee Recommendation - Western-St. Joseph's Health Care London Affiliation Agreement extension

R. Butler informed that Western has been working to LHSC to finalize their Agreement before focusing on Western's Agreement with St. Joseph's and while there has been continued work on the Agreement, it is not yet in a finalized position and therefore a further extension is being sought for both LHSC and St. Joseph's.

**It was MOVED and SECONDED that St. Joseph's Board of Directors approve an extension of the of the current Western-St. Joseph's Health Care London Affiliation Agreement until June 30, 2024 or until such a time as a revised Agreement is achieved and approved, whichever comes first. CARRIED.**

4.3 Medical Advisory Committee Recommendations

(a) Credentialed Professional Staff Rules & Regulations

S. Northcott informed the Board that the Rules & Regulations were last updated in 2016 and therefore a significant number of updates were required. She further informed that when the Credentialed Professional Staff By-Law (CPS By-Law) was brought to the Board, it was flagged that some of the material removed from the CPS By-Law would be added into the Rules & Regulations. This has been accomplished and the language in the Rules & Regulations has been further updated to reflect changes already made in By-Law. A. Dukelow confirmed there has been a lot of stakeholder involvement / engagement and showed appreciation to the Professional Staff Organization Executive and Department Chiefs who engaged in this process.

It was confirmed there was a slight misstep in that the document did not get airtime at the last Governance Committee meeting however Governance Committee Members had an opportunity to review it ahead of today's presentation. The reason for the misstep is so that the CSP By-Law and Rules & Regulations could have the same effective date of April 1<sup>st</sup> as the CPS By-Law is scheduled to be approved by St. Joseph's Health Care Society this week. No questions arose.

**It was MOVED and SECONDED that St. Joseph's Board of Directors approve the revised Credentialed Professional Staff Rules & Regulations. CARRIED.**

(b) Interim Chief of Midwifery

S. Northcott highlighted that the appointment of an Interim Chief of Midwifery to June 30<sup>th</sup> aligns with current credentialing cycle. While the proposed incumbent will remain Chief longer than that, their term with St. Joseph's end June 30<sup>th</sup> as this service is not provided at St. Joseph's.

**It was MOVED and SECONDED that St. Joseph's Board of Directors approve, upon receipt of a signed letter of offer, the appointment of Rebecca Thompson as the Interim Chief of the Department of Midwifery from March 28, 2024 to June 30, 2024. CARRIED.**



- 4.4 Chair updates - Standing Committees of the Board  
(a) Stoplight Report from Quality Committee of the Board  
No questions arose.

## **5. In-Camera Meeting**

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**It was MOVED and SECONDED the meeting of the Board of Directors move in-camera at 5:44 pm.  
CARRIED.**

The regular meeting of the Board of Directors resumed at 6:25 pm.

Rising from the in-camera meeting, the Chair reported the Board approved:

- the CEO's performance goals for 2024/25;
- an extension to the HMMS Joint Venture agreement; and
- an extension to the PaLM Joint Venture agreement.

## **6. Termination of Meeting**

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There being no further business, the Chair declared the meeting terminated at 6:26 pm.

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Nawaz Tahir, Chair

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Roy Butler, Secretary