

Meeting of the Board of Directors

Monday, April 29, 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 Abhijit Biswas.

Education Session

Disaster Exercise

R. Bullas, Director Patient Relations and Chief Privacy Risk Officer, presented to the Board how St. Joseph's participates in disaster exercise scenarios with the City of London and other region partners in response to the requirement in the Emergency Management and Civil Protection Act, R.S.O. 1990 which stipulates:

- that every municipality shall develop and implement an emergency management program;
- Every municipality must create an emergency plan governing the provision of necessary services during an emergency;
- Procedures under, and the manner in which employees of the municipality and other persons will respond to the emergency must also be established;
- Every municipality shall conduct training programs and exercises to ensure the readiness of employees of the municipality and other persons to act under the emergency plan; and,
- Every municipality shall review and, if necessary, revise its emergency plan every year.

Since 2017, St. Joseph's has been a participant in exercises such as:

- A tornado touchdown during a high school track and field meet and also affecting a high-rise retirement living facility;
- A train derailment with a car carrying toxic substances;
- An ice storm resulting in multiple car accidents, downed hydro poles, infrastructure failures and a roof collapse.

R. Bullas then shared the learnings and opportunities realized from the exercises and introduced the disaster exercise being planned for 2024.



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 (R)
 Stephanie Marentette
 Fr. Frank O'Connor
 Robert Raymond (V)
 Howard Rundle, PhD
 Victoria Smye, PhD
 Janet Tufts

NON-VOTING

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

Guests

St. Joseph's Senior Leaders

Recorder

Terri-Lynn Cook

A = absent

R = regrets

V = virtual

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 April 29, 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.

2. Reports

2.1 Board Chair Remarks

N. Tahir recalled that St. Joseph's Board is participating in the Ontario Hospital Association's (OHA) offering of the Board Evaluation Tool which allows St. Joseph's Board to be compared against peer Boards in peer organizations and that the survey was to run March 25th to April 26th. He informed the deadline has been extended by the OHA to May 10th and encouraged Members to take the time to complete this survey.

In response to a comment made in last month's meeting's evaluation, N. Tahir stated that Members of the Board are here as a result of a purposeful and robust nomination process and together provide diversity of thought. He encouraged Members to ask "the question", no matter how big or small. Everyone one around the table has different life experiences and sees things through a different lens and it is important not to miss the opportunity to ask the question or share your experience/lens. He further informed that speaking to your mentor, T. Cook or himself pre and/or post meetings are also an option.

N. Tahir informed that Governance Cte has begun planning for Board Orientation early September. It will be a half day, in-person event held Monday September 9th. T. Cook will send a save the date calendar appointment which will be updated as the location and other details of the day are finalized.

R. Butler and N. Tahir are participating in the OHA's Board Chair/CEO Leadership Summit early May and N. Tahir will report back to the Board on those learnings.

2.2 President and Chief Executive Officer

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:

- Federal budget – there have been recent announcements for significant investment into tri-council funding/core research grant funding; also a shift to increase the annual value of master's and doctoral student scholarships and post-doctoral fellowships; \$30 million over three years, starting in 2024-25, to support Indigenous participation in research, with \$10 million each for First Nation, Métis, and Inuit partners; an increase in targeted artificial intelligence support of \$2.4 billion and the initiation of a new Advisory Council on Science and Innovation which is one matter St. Joseph's has been advocating for;
- L. Higgs provided an update related to the provincial budget released March 26th which now forecasts a \$9.8M deficit for the 2024/25 year. In the budget announcement, the Ministry did release some nuggets of information (i.e. 4% increase to hospital budgets), however hospitals have not yet received their funding letters;
- L. Higgs shared some statistics from the Financial Accountability Office report showing how Ontario compares the rest of Canada: Ontario has the lowest per capita revenue; Ontario also

received the lowest federal transfers and collected the lowest other non-tax revenues per capita; and Ontario's health program spending per capita is the lowest in Canada. Although this data is based on fiscal 2023, this is good information and will assist in advocacy with the OHA. The Resource Planning & Audit Committee will dive into the detailed report at its next meeting;

- St. Joseph's presented its Clinical Services Plan to Ontario Health and the Ministry of Health which included highlighting the areas St. Joseph's needs to continue to work with LHSC on. The presentation was well-received;
- Volunteer Recognition was the week of April 14th. A number of events occurred to thank all of St. Joseph's volunteers. R. Butler further extended gratitude to Board Members for their volunteer service;
- The latest edition of London Inc. magazine featured Patricia Hoffer, Vice President (VP) External Relations and Chief Communications Officer, among three other females leading and elevating the city's communications and public relations;
- Lori Higgs, VP Clinical Support and Chief Financial Officer, was nominated and selected to receive an honorary diploma from Fanshawe College; and
- The Senior Leadership Team celebrated Dr. Sandra Northcott and her career at St. Joseph's as she embarks on a new leadership role in Ottawa.

(a) Enterprise Risk Management update

S. Jansen welcomed three members from KPMG Enterprise Risk Management (ERM) practice who joined virtually. She then explained the process St. Joseph's undertook to further refine the organization's ERM program which started with identifying all risks that may arise called a "risk universe". From this, four key risk categories were determined: strategic, financial, regulatory compliance and operational. St. Joseph's prioritized all of the risks within these categories and floated the ones of highest priority to the top (top 10). Risk owners were assigned to the top 10 and led deep dives into their risk to analyze key risk attributes (risk drivers, consequences and current mitigations).

As the Board's oversight of risk is a key accountability, the Board has been receiving semi-annual risk assessments on the top 10 risks (April/May and Oct/Nov). Members were invited to provide comment on the risks identified, to reconfirm the semi-annual reporting cycle, and to provide direction on the level of detail to be received for each risk:

- It was confirmed this report comes directly to the Board and does not go through a Committee of the Board;
- There is still work being done on the non-top 10 risks;
- Health privatization did arise as a risk and is under access to care;
- Equity, Diversity, Inclusion and Belonging (EDIB) is incorporated into two risks: access to care and people, wellbeing and health & safety;
- The Board is supportive of the current top 10 risks;
- It was confirmed the Board would only see detail on the top 10 for the next three years unless another risk bubbled up in which case it would be reported on. The ERM itself may not change, but the focus within the ERM could alter on what is reported;
- It is felt that three years is the appropriate time frame for a risk assessment overhaul as SLT meets frequently enough and there is a process to bring in new risks as may be needed;
- The Board would like to see ERM reported the same way it sees strategic performance metrics (i.e. stoplight report). It would also like to see trends/progression over time. Further request was made to have one risk example with detail so there is an understanding of the depth of the work.

In summary, the Board of Directors confirmed the proposed ERM, current top 10 risks, reporting cadence of twice in a meeting cycle and the level of detail to be reported.

R. Bullas and the KPMG guests left the meeting at 4:47 p.m.

(b) Dashboard for Reporting Compliance update

R. Butler 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 April 2024 and is brought forward for information purposes. No questions arose.

2.3 Medical Advisory Committee (MAC) Chair

S. Northcott reported that LHSC MAC and St. Joseph's MAC held their first collaborative session and discussed how best to use the time together in order to provide value and ensure the MACs are meeting their mandate of overseeing the delivery of quality of care provided by Credentialed Professional Staff (CPS). Both a Board member from St. Joseph's and LHSC were present and emphasized the importance of collaboration in order to support the CPS who move between the two organizations in order to create an environment of efficacy and effectiveness.

The next two collaborative sessions will be led by Patrick Hoskins, lawyer with Borden Ladner Gervais who will review the role and responsibility of the MAC to the Board and the role and responsibilities of Department Chiefs/Heads of Departments to the MAC and ultimately the Board. After a few collaborative sessions, the MACs will revisit whether the model is working or not.

On behalf of the Board, N. Tahir recognized and thanked S. Northcott as she concludes her role as MAC Chair and wished her well in her new role in Ottawa.

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. Adam Dukelow, Vice President Medical & Academic Affairs, shared a story of a particular scope used in flexible ureteroscopy becoming trapped and how through raising concerns with the manufacturer it led to discovering a potential issue with the scope sheath. Since the identification of this problem, new disposable flexible ureteroscopes have become available and St. Joseph's has invested in having this alternative type of scope available for surgeons and patients. Additionally, a manuscript was prepared and published a peer-reviewed journal to raise international awareness of this problem to fellow colleagues.

2.5 St. Joseph's Health Care Foundation

T. Mikula announced there is much excitement about the upcoming Breakfast of Champions event being held May 7th. The event is sold out and has 45 sponsors.

She announced the Tribute dinner will be held October 9 and showcase theranostic oncology. The guest speaker is Canadian Women's Hockey Olympic gold medalist and Family/ER physician Hayley Wickenheiser. The Honourees for Tribute have also been selected.

She concluded by sharing the following upcoming donor dedication events:

- The Smibert Family Library at Parkwood's Veterans Wing – May;
- The Charabin Family Waiting Area at Ivey Eye – May; and,
- The Ken Fleet Sound Garden at Parkwood's Veterans Wing – June.

2.6 St. Joseph's Professional Staff Organization (PSO)

L. Bursztyn, President St. Joseph's PSO, informed that the PSOs are dedicated to trying to stay together so as to eliminate any to duplicate work for CPS. St. Joseph's PSO is feeling very supported by St. Joseph's Medical Affairs.

She announced that elections for PSO leadership positions will be initiated shortly with results being announced at the annual meeting on Monday June 10th. The annual meeting will be held at Museum London and L. Bursztyn extended an invitation to Board Members to attend.

2.7 Lawson Research Institute

M. Gillett referred to the monthly report circulated in the agenda package and added that the Management Committee continues to meet. September 30th is still the expected dissolution date with many milestones to be met. There is discussion happening related to assets as at September 30th and suggestion to keep current assets joint, as there will be a shared back-office function, and to determine a strategy for new assets.

2.8 Western University

J. Garland, Dean Faculty of Health Sciences reported a teaching assistant strike was ongoing however there has been a tentative deal. It is not yet ratified however there is optimism the strike will be over. J. Garland announced she is retiring and has given Western approximately a year's notice.

3. Business Arising

Standing agenda item, no business arose.

4. New Business

4.1 Health Care Ethics Committee Recommendation – revised policy “Responding to a Request for Intentional Termination of Life (assisted suicide and/or euthanasia, also known as Medical Assistance in Dying, “MAiD”)

V. Smye, Chair of Health Care Ethics Committee (HCEC), emphasized that these amendments do not include the possibility for eligibility expansion to those with a mental disorder as their sole underlying medical condition as this has been delayed by the federal government until March 2027. She then provided an overview of the key amendments as follows:

- A reconsideration of frailty in the broadest sense including transporting of a Patient/Resident to an out-patient appointment where there may not be adequate supports to meet their needs; and,
- Allowing the Most Responsible Provider (MRP) to be able to make the decision about granting a MAiD on-site assessment on their own (currently the decision lies with the Chair/Chief of the MRP's Department and Vice President of the relevant program). Further to this amendment at

HCE's meeting, it requested the addition of the consultation with the clinical ethicist to paragraph 2.7 to assist in reducing any bias of the MRP.

Further to the policy changes, the final recommendation is to disband the MAiD Advisory Group.

K. Perkin added that the undertaking to bringing about the proposed policy amendments was extensive. There were multiple stakeholder discussions and consultations with the Bishop and the Bishop's representatives on HCEC and the Board.

Discussion ensued and one Board Member has found a few minor grammar/ sentence structure pieces that could be cleaned up offline as they do not impact the essence of the policy. Board Members agreed.

It was clarified that if a physician has privileges at both St. Joseph's and LHSC, they could not provide an on-site assessment of the patient for eligibility if they are the MRP or a member of the care team supporting the Patient/Resident.

F. O'Connor shared he has reservations with respect to the proposed changes and requested they be recorded in the minutes:

- HCEC reviewed the proposed amendments with compassion and competence;
- Care, excellence and compassion does continue to flow through the entire document;
- The proposed amendments remove the checks and balances and leaves St. Joseph's considerably more vulnerable;
- The MRP is the sole decision maker and must only "consult" with the clinical ethicist; it is not a "we" decision;
- Concern the policy does not speak to any mechanism if the MRP and clinical ethicist disagree;
- Concern about bias of the MRP;
- By amending paragraph 2.7 (concept of frailty), when put it into context it will almost always then allow for on-site eligibility assessment by a third party rather than be the exception.

In response to the concern about resolving disagreements, St. Joseph's does have a policy and processes in place to allow for the elevation of concerns about treatment plans/care plans for Patients/Residents in any situation, not just MAiD.

It was MOVED and SECONDED St. Joseph's Board of Directors approve the revised corporate policy titled "Responding to a Request for Intentional Termination of Life (assisted suicide and/or euthanasia, also known as Medical Assistance in Dying, "MAiD")", as presented.

CARRIED.

4.2 Chair updates - Standing Committees of the Board

(a) Stoplight Report from Nominating Subcommittee of the Board
Reference was made to the report. No questions arose.

(b) Stoplight Report from Quality Committee of the Board
Reference was made to the report. No questions arose.

5. In-Camera Meeting

It was **MOVED** and **SECONDED** the meeting of the Board of Directors move in-camera at 5:35 pm.
CARRIED.

The regular meeting of the Board of Directors resumed at 6:48 p.m.

6. Termination of Meeting

There being no further business, the Chair declared the meeting terminated at 6:48 p.m.

Nawaz Tahir, Chair

Roy Butler, Secretary