

Meeting of the Board of Directors

Monday, October 26, 2020

3:30 pm start time

Via WebEx Video/Tele-conference

MINUTES

Call to Order – Howard Rundle

The reflection was provided by Father Frank O'Connor.

Education Session

Understanding our Business Relationships

L. Higgs, Vice President Clinical Support Services and Chief Financial Officer, explained the hospital's key Joint Venture Agreements: Lawson Health Research Institute (Lawson), Healthcare Materials Management Services (HMMS) and Pathology and Laboratory Medicine (PaLM). Reference was made to the briefing note circulated as background to the presentation.

D. Drosdowech joined the meeting at 3:56 pm.

Subsequent to the presentation, the following questions/comments were provided:

- HMMS and PaLM governance is overseen by the Joint Venture Oversight Committee (as delegated by both hospital Boards);
- The hospitals have already been considering other governance models for HMMS and PaLM but this work was put on pause due to COVID. It is hoped this work will resume and will also include a greater understanding of the opportunities for regional growth;
- It was clarified that the Agreements are in place for five years and automatically roll into a further five years unless one of the parties brings forward a need for change;
- Question arose related to whether there are current risks the Board needs to be aware of related to the joint ventures. A document outlining the regional responsibilities and risks was provided to the Board in September regarding HMMS and PaLM;
- As the province goes through significant change in the health system are there other things that might be better served by joint venture arrangements? This type of conversation would start at Joint Senior Leadership, a committee comprised of leaders at both hospitals;
- The introduction of Ontario Health Teams have spurred the discussion around shared service models for greater efficiencies. Exploring the centralization of Information Technology or Pharmacy Services are two possible areas;
- It was clarified there are different ways in which organizations can collaborate and that a joint venture is only one structure for integration - a more formal structure. St. Joseph's and LHSC have informal arrangements, purchase service agreements and shared service agreements for example. These types of arrangements are described in the briefing note.



2020/21 Membership

VOTING

Howard Rundle, PhD (Chair)
Jonathan Batch (Vice-Chair)
Michael Cooney
Lesley Cornelius
*Paul Dugsin, MBA (R)
Mary Gillett
Phil Griffin, CPA, CA
Hanny Hassan
Margaret Kellow, PhD
Maria Knowles
Donna Ladouceur
Don MacDonald, FCPA, FCA
Stephanie Marentette – di Battista
Fr. Frank O'Connor
Nawaz Tahir
Gary West, CPA (A)

NON-VOTING

*Lulu Bursztyn, MD
*Richard Corneil
*Darren Drosdowech, MD
*Gillian Kernaghan, MD
*Karen Perkin
*Brian Rotenberg, MD
*John Yoo, MD
*ex-officios

Guests

St. Joseph's Senior Leaders
Brad Campbell

LHSC

Paul Woods, MD, President & CEO
Matthew Wilson, Vice-Chair
Jeff Wright, Lawson Board Chair

Recorder

Terri-Lynn Cook
R = regrets

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 October 26, 2020 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

H. Rundle commented on the recent communication to the Board regarding the CBC Marketplace media story about Long Term Care (LTC) Homes. G. Kernaghan confirmed R. Butler will be invited to speak to this further under the CEO's report.

2.2 President and Chief Executive Officer

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

- The Long-Term Care COVID-19 Commission is advocating around funding levels. They are not due to give their final report until next spring however have communicated interim recommendations now such as increased daily minimum staffing for residents; introducing more full-time positions for Personal Support Workers and creating a new model of staffing and for infection prevention and control;
- There are no COVID-positive cases at St. Joseph's at present;
- There are a number of LTC homes within our region with COVID outbreaks. An outbreak is defined as 1 case of a resident or staff member;
- An expected challenge in Wave 2 of the pandemic is the lack of human resources available to redeploy to support other organizations. Continued innovative solutions are being explored;
- Looking at transitional LTC space funded through home and community care. Staffing of the space may prove challenging.

G. Kernaghan invited R. Butler, Vice President Patient Care and Risk Management, to give update on the CBC Market Place media story about LTC homes. R. Butler stated the media story broke last Friday reporting on 30 LTC Homes with the most Written Notifications from 2015-2019 combined. The written article had nothing directly related to Mount Hope, but other long-term care homes in London were mentioned. St. Joseph's proactively responded by launching its communication strategy and R. Butler was participated in a live interview Friday afternoon. St. Joseph's has been transparent about its challenges five years ago and emphasized its efforts toward improvement. Unfortunately, the media story did not capture the substantial improvements LTC Homes have made. R. Butler reminded the Board that in October 2019 St. Joseph's achieved the highest award possible from Accreditation Canada (Accreditation with Exemplary Standing) with Mount Hope meeting all the required Accreditation standards and required organizational practices for Long Term Care.

G. Kernaghan recalled for Members the Board provided direction to explore a strategic plan refresh as it was in agreement the Mission, Vision, Values and high level goals still resonate. This has been initiated and a plan has been drafted from the consulting firm. It will require a small strategic committee with board participation to start with an abbreviated engagement strategy. Detailed discussion will be held at Governance Committee and recommendations will come back to the Board.

2.3 Medical Advisory Committee Chair

B. Rotenberg drew attention to the draft Minutes of the October 14th MAC meeting and highlighted item #7 which was the MAC's approval of a revised influenza vaccination policy for Professional Staff. After about a year and a

half of working on the policy, MAC unanimously approved influenza vaccination be mandatory for all Professional Staff and as a condition of reappointment. This is a groundbreaking step to protect the health of patients, residents, staff and Professional Staff.

He further informed MAC is working on processes to re-enacting physician redeployment in response to COVID. He reminded the Board this was not required in Wave 1 of the pandemic and stressed it is not yet needed in Wave 2; however, planning is in place. He cautioned that the capability to move physicians around in Wave 2 may not exist as well as it did in Wave 1.

B. Rotenberg concluded by acknowledging the tremendous work done by Professional Staff to respond to patient needs both virtually and in-person.

B. Rotenberg left the meeting at 4:44 pm.

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. R. Butler, Vice President Patient Care and Risk Management, shared the story of a complex care/brain injury patient who now recovered needs accessible housing and how many community partners have come together to assist this patient in preparation for their discharge early November.

(b) 2020/21 Q1 Corporate Scorecard

D. Ladouceur, Chair of Quality Committee provided the following comments in response to the first quarter results:

- Medication reconciliation has been impacted by the pandemic. New workflows had to be determined and implemented to conduct medication reconciliation virtually. St. Joseph's continues to explore mitigation strategies to improve this indicator in the pandemic environment;
- MRI wait times is also something being closely monitored;
- On the plus side, the reporting of workplace violence has been sustained during the pandemic.

R. Corneil joined the meeting at 4:50 pm.

2.5 Lawson Health Research Institute

J. Wright, Chair of Lawson Board, introduced Brad Campbell as the Interim Chief Operations Officer (COO). He also advised there are two new interim Research Directors to support the Interim COO. This change was the first step in advancing the recommendations from the operational review.

Lawson Board held its first meeting on October 21st and its focus was on accountability. It approved a new signing authority for the interim leaders and the first quarter results were reviewed. It was confirmed Lawson does not have an approved budget for this fiscal but expects to receive a proposed budget at its next meeting.

J. Wright commented the provincial government continues to support research amidst the pandemic and the majority of research at Lawson is back up and running.

2.6 London Health Sciences Centre

M. Wilson reported when LHSC Board met September 30th, it too approved the extension of the Affiliation Agreement with Western in step with St. Joseph's Board. He stated LHSC Board is monitoring closely the financial realities of the pandemic environment. The next LHSC Board meeting is this coming Wednesday where it will begin discussing strategic planning.

P. Woods announced LHSC has appointed a Chief Diversity Officer. He also shared LHSC is close to opening their new Indigenous Healing Space created in partnership with Atlohsa Family Healing Services. Related to LHSC's clinical/operation strategy the pandemic has increased concerns about "our people" and as such LHSC is

responding to the needs of “our people”. LHSC is maintain 90% occupancy and adhering to other directives from Ontario Health West.

2.7 Western University

J. Yoo shared the qualifying exam for medical students, which was to be hosted by St. Joseph’s last week, was cancelled due to the increasing rates of COVID in our region. Schulich in collaboration with St. Joseph’s cancelled the exams because they were going to take place in a hospital setting and students would be coming into St. Joseph’s from other areas of Ontario. Shortly after making this decision, the Council that oversees the qualifying exams for all of Canada announced the cancelation of all qualifying exams across the country. This has caused some anxiety as there is an entire cohort of students not able to continue on their medical pathway.

In response to the frustration, anxiety and stress felt by many faculty, Schulich has created a new position - Assistant Dean, Faculty Wellbeing. Dr. Laura Foxcroft has been appointed to this position. This is only one way in which Schulich is support its faculty in response to the pandemic.

3. New Business / Recommendations

3.1 Resource Planning & Audit Committee Recommendation – Authorizations and Approvals Policy

D. MacDonald informed this is a refresh of an existing policy which provides a framework to govern authorizations and approvals of financial and non-financial contracts, agreements, payments and other functions at St. Joseph’s. Enhancements to the policy included added definitions for easier review and understanding, appendix updates and a number of approval/authorization pathways clarified. It provides consistency of the approvals within the hospital while allowing things to get done on a timely basis. He highlighted the notable change impacting the Board is that currently anything over \$3M requires Board approval and the refreshed policy recommends changing that threshold to \$5M. This is consistent with our peers.

It was MOVED and SECONDED St. Joseph’s Board of Directors approve the Authorization and Approvals policy, as presented, with an implementation date of January 1, 2021. CARRIED.

4. Other Business Arising

4.1 Chair updates - Standing Committees of the Board

(a) Stoplight Report from Quality Committee of the Board

D. Ladouceur referenced the stoplight report from Quality Committee which shows the Committee is monitoring and evaluating the models of virtual care to ensure the patients are provided the right model of care as they go through their healthcare journey.

5. In-Camera Meeting

It was MOVED and SECONDED the meeting of the Board of Directors move in-camera at 5:18 pm. CARRIED.

The regular meeting of the Board of Directors resumed at 6:28 pm.

Rising from the in-camera meeting, there was nothing to report.

6. Adjournment

The Chair declared the meeting adjourned at 6.29 pm.

Howard Rundle, PhD, Chair

Dr. Gillian Kernaghan, Secretary