

**MEETING MINUTES
OF THE
BOARD OF DIRECTORS
Held Wednesday June 24, 2021
By Webex or by Teleconference**

Board Members Present by Webex/Teleconference

Mr. J. Brock (2nd VC), Ms. R. Choja, Ms. L. Conley, Ms. K. Haines, Mr. T. Marcus, Mr. L. McBride, Ms. P. Retty (Chair), Ms. R. Robinson, Mr. K. Ross, Dr. S. McKay(xo), Dr. S. Pandey (xo), Mr. B. Woods, Mr. J. Wright, Mr. M. Wilson (1st VC), Ms. C. Young-Ritchie (xo), Dr. J. Schleifer Taylor (I-CEO)

Board Member Regrets:

Health Care Partners: E. Johnson, T. Brown, G. Kernaghan, N. Tahir, J. Yoo

Resources: T. Eskildsen, RA Conyngham

1.0 CALL TO ORDER

Ms. Retty called the meeting to order. The Conflict of Interest policy was highlighted and members were reminded that should they feel in conflict or if someone else was in conflict to either declare it now or at the time of the item. Welcome was extended to Nawaz Tahir.

1.1 Patient Experience

Patient stories bring their experiences to life and make them accessible to other people. It allows the organization to focus on the patient as a whole person rather than just a clinical condition or an outcome. Patient stories are used in the board meetings of LHSC to allow patients to share their experience using our services with the aim of understanding what the organization needs to do better.

This month's patient experience focused on LHSC's indigenous healing space. The space is what facilitates and cultivates the healing. The space allows everyone that attends an opportunity to sit at a circle where we are all seen as equals on our own journey. The space allows us to feel connected through our culture and what is shared there is honored by each person.

2.0 REVIEW OF AGENDA

2.1 Approval of Agenda

The full agenda for the Board Meeting held on June 24, 2021 was APPROVED by GENERAL CONSENT.

3.0 PRIORITY AGENDA

3.1 LHSC Response to the Pandemic Update

Dr. Dukelow and Ms. Carol Young Ritchie provided a local, regional and provincial update on the response to the pandemic. It was noted that LHSC has experienced an outbreak and it is predicted to be at an end by June 29, 2021. The wellness of the staff and physicians was reviewed and vaccine statistics were shared from a provincial perspective as well as a staff perspective.

4.0 RECOMMENDATIONS/REPORTS

4.1 Chair's Report

Ms. Retty extended appreciation to the leadership, staff and physicians for the work accomplished to date on the response to the pandemic.

4.2 CEO Report

Dr. Schleifer Taylor provided an overview of the recent event of the past week and the impact of not only the Islamic community but the community within the walls of the healthcare system with many members of the staff being personally impacted by this tragedy and leaders were being particularly mindful of the wellness of our staff and physicians. Dr. Schleifer Taylor further discussed the reflections following the recent discovery of the remains of 215 children on the grounds of a former residential school in British Columbia and a subsequent discovery of suspected graves at a former residential school in Manitoba. Work ongoing by the organization to advance Indigenous health equity at LHSC was shared and there was acknowledgement that there is much more work to be done.

There was a virtual meeting held by the Ministry of Health to discuss surgical recovery within the broader approach to health system recovery and share examples of surgical innovation in 2020/21. LHSC was highlighted. The new \$30 million Surgical Innovation Fund is a proposal-based funding opportunity that will support hospitals in all regions of the province to address barriers to surgeries that cannot be addressed by other existing hospital funding streams, including training for more operating room nurses, equipment and technology supports, and small capital projects to leverage existing spaces to provide additional operating room output.

4.3 Quality and Performance Monitoring Committee

Mr. McBride provided an update from the last committee meeting, highlighting the work ongoing in the Mental Health portfolio, specifically the improvements to the new inpatient journeys by redesigning the bed map and advancing specialized mental health and addictions capacity by redesigning emergency department care.

4.3.1 Base Hospital Terms of Reference

Through a consultation process, it was recommended that the meeting structure for regional meetings change. Historically, the Base Hospital Program Committee occurred annually with smaller local meetings occurring more frequently. All stakeholders agreed that the local meetings should be dissolved and the regional meeting increased in frequency to three times per year to allow for more fulsome dialogue and standardization. With this proposed collapse of other committees, it was requested that each Paramedic Service have up to two delegates at the table, resulting in a change to the terms of reference.

The Board of Directors APPROVED by GENERAL CONSENT that the amendments to the Terms of Reference for the Base Hospital Program Committee.

4.4 Children's Hospital Committee

Mr. Ross provided a report on the last meeting content, highlighting the items that fell under the auspices of Quality and Safety from the Children's perspective and the importance of enhancing a culture of safety to support the need for continuous improvement. Work was review on the patient safety plan and publicly reported indicators.

The Provincial Coroner paediatric death review processes were reviewed and how this important responsibility extends to and is carried out by the Children's Hospital of LHSC (CH). This report to the Children's Hospital Committee is an important piece of knowledge transfer and level setting for future Board terms.

Midwifery provided a provided a report on the grant received. The grant was utilized to expand knowledge and expertise of the birth experience, the health and wellbeing of newborns as well as new mothers by supporting the expansion of the role of the Chief of Midwifery. Midwifery is a growing option for birthing persons and their families with excellent outcomes. In the coming year, the department plans to further the relationship with pediatrics as they work to support early discharge of all hospital patients who are eligible with the early discharge clinic.

4.5 Finance and Audit Committee

Mr. Marcus provided an overview of the discussions at the last Finance and Audit Committee highlighting the capital budget and capital expenditures. The importance of maintaining a balance between ensuring a safe environment and financial stability played a major role in table discussions. There will be a three-year budget for capital and operations so that the Board can determine and facilitate payment on the prioritized items, while ensuring that the working capital position is sustainable. A proposal is expected back to the committee at a future meeting.

4.5.1 Authorizations and Approvals Policy

The Board of Directors APPROVED by GENERAL CONSENT the amendments to the Authorizations and Approvals Policy.

4.6 Medical Advisory Committee

Dr. McKay provided an overview to the process to credential staff, noting the level of detail required to meet the guidelines that LHSC sets out for physicians to receive credentials.

4.6.1 New Appointments to Professional Staff

The Board of Directors APPROVED by GENERAL CONSENT the Professional Staff new appointments to the London Health Sciences Centre.

4.6.2 Clinical Fellow Appointments

The Board of Directors APPROVED by GENERAL CONSENT the New Clinical Fellow appointments to the London Health Sciences Centre.

4.6.3 Changes to Professional Staff Appointments

The Board of Directors APPROVED by GENERAL CONSENT the Professional Staff appointment changes to the London Health Sciences Centre.

4.6.4 Reappointments and Departures Report

This particular item is an Annual approval and often the bulk of the June agenda package. The departure report represents individuals that have left the organization or retired and that list is included for your information.

The Board of Directors APPROVED by GENERAL CONSENT the Reappointments and Departures Report.

4.6.5 Chief, Emergency Medicine Recommendation

The Board of Directors APPROVED BY GENERAL CONSENT, upon receipt of a signed letter of offer, the appointment of Dr. Christine Macdonald as the citywide Chief of Emergency Medicine for a five-year term effective July 1, 2021 To June 30, 2026.

4.6.6 Chief Dentistry Recommendation

The Board of Directors APPROVED by GENERAL CONSENT, upon receipt of a signed letter of offer, the appointment of Dr. Michael Shimizu as the Interim City-Wide Chief of Dentistry effective July 1, 2021 to June 30, 2022 or until such a time as a new Chief Is Appointed, whichever comes first.

4.7 Governance Committee

Mr. Wilson provided an overview of the work of the committee including succession planning and the evaluation results are deferred. Mr. Wilson noted that it is very important that individuals provide feedback, so that Governance can effectively assess the opportunities to improve.

4.7.1 Patient Experience Advisory Council Terms Recommendation

The Board of Directors APPROVED by GENERAL CONSENT the revisions to the Patient Experience Advisory Council.

5.0 HEALTHCARE PARTNERS/BOARD REPORTS

5.1 Professional Staff Organization

There was no report available.

5.2 Western University

Dr. Yoo reported fact that Dr. Shepherd has soft launched Western's Strategic plan. Among the other themes, Dr. Yoo highlighted one these focuses on the partnerships and commitments to London and region.

5.3 St. Joseph's Health Care, London

Mr. Tahir highlighted that since the last meeting Mr. Jonathon Batch has stepped into the Chair role and that Dr. Roy Butler will starting as President and CEO starting in August 2021. St. Joseph's Health Care and Western University are partnering to establish Research Chair in Mobility and Activity, which will focus on improving mobility for seniors and understanding and managing mobility issues for all ages.

5.4. Lawson Health Research Institute

Mr. Wright provided a yearend report focused on the completion of the External Audit, identifying that no issues were raised. Lawson presented their 2021/22 capital budget to the Lawson Board and received approval. It was noted that the June monthly report demonstrated the contributions of a few researchers that are advancing work on COVID19 through multiple research studies.

5.5 London Health Sciences Foundation

Mr. John MacFarlane provided an overview of the Annual General Meeting of the Foundation, highlighting income for the fiscal period March 31, 2021 and current year to date results. Ms. Twee Brown was appointed Chair, Board of Directors. Mr. MacFarlane highlighted the current successes of some of the virtual events and lottery success.

5.6 Children's Health Foundation

Ms. Johnson provided an overview that the Children's Health Foundation yearend results and highlighted the major gift efforts that will be coming in the next fiscal period. A door to door campaign has been launched. The Children's Hospital Foundation will continue in their strategic planning process that will take the Foundation through to 2024. Ms. Johnson highlighted that Mr. Bob Morrill will be taking on the Chair role at the Annual meeting in the next week.

6.0 CONSENT AGENDA

The Board of Directors APPROVED by GENERAL CONSENT the Consent Agenda for the June 24, 2021 Board meeting, consisting of the recommendations found in Section 6 starting on page 236.

6.1 Board of Directors Minutes – May 26 2021

6.2 Finance and Audit Recommendations

- Multi Sector Service Schedule G Report Recommendation
- GFT Professor, GFT Secretary Salaries & Benefits & Medical Education Supplies Funding
- Internal Audit Charter Recommendation

6.3 Governance Committee Recommendation

- Appointment to Chair/Chief Selection Committee

7.0 WRITTEN REPORTS

There were no written updates.

8.0 ADJOURNMENT

The meeting was ADJOURNED by GENERAL CONSENT.

Recorded by
T. Eskildsen

P. Retty, Chair
Board of Directors