

DRAFT

LHSC Board of Directors Meeting
Minutes of Meeting- June 28, 2023

Held in-person Boardroom C3-401 3:45 pm – 5:00 pm

PRESENT: Dr. A. Barron, Ms. T. Brown, Ms. L. Conley, Ms. A. Dean, Ms. L. Harrison, Mr. J. Leitch, Ms. H. Lokko, Mr. T. Marcus, Ms. P. Retty (Chair), Dr. J. Schleifer Taylor (CEO), Ms. K. Sernikwa, Mr. S. Smith, Ms. H. Wade, Mr. M. Wallace, Mr. M. Wilson

REGRETS: Dr. T. Mele, Mr. B. Morrill

GOVERNANCE RESOURCES: Ms. L. Shanahan

GUESTS:

1.0 CALL TO ORDER/REVIEW OF AGENDA

The meeting was called to order. The Chair welcomed everyone and brought the committee's attention to the Conflict of Interest Policy. Members were encouraged to declare any conflicts either now or at the time of the item. It was also acknowledged that decisions are made using the Ethical Decision Framework which can be found on the back of the agenda for reference.

1.1 Patient Experience

A video was presented to the Board highlighting the stroke program. A patient described her stroke experience, starting with falling at home through to her hospital stay. She recalled her procedure and then afterwards receiving care from physical therapy, occupational therapy, a speech-language pathologist and a social worker. There were no deficits following her stroke and she felt reassured by the constant attention paid to her by all the health care providers.

2.0 REVIEW OF AGENDA

The Full Agenda for the June 28, 2023 Board of Directors meeting was APPROVED by GENERAL CONSENT as written.

3.0 PRIORITY AGENDA

3.1 Mental Health Services

Mr. Syed presented an update on Child and Adolescent Mental Health services at LHSC. Mental health overall is a challenge to the system with the need for services being higher than LHSC's current capacity. Inpatient Units have seen a 23% increase in occupancy over the last 5 years. Children's Hospital is actively responding to the growing demands within the Emergency Department. A partnership is in place with community partners such as the Vanier Children's Services Tandem program. Where Tandem employees are within the Children's Hospital Emergency Department to help provide support. The Children's Hospital has received funding to support a psychiatry diversion model within the Emergency Department as well as plans for the emergency department expansion specifically for the Children's Hospital.

The number one challenge is space. The reputational risk is that LHSC must demonstrate that it is capable of accepting the population in safe, efficient and productive spaces.

The floor was open for questions, comments and concerns with the following highlighted:

- Do you monitor any metrics to show the quality of health care? Leadership responded that the most acute patients have increased 32% over the past year and LHSC needs to do a better job of monitoring outcomes and experiences. The performance metrics will focus on readmitting patients along with quality.
- What are the goals of partnering with services within the community? Leadership replied that the primary focus right now is access and then there will be a focus on quality of care.

4.0 RECOMMENDATIONS/REPORTS

4.1 Chair's Report

Ms. Retty expressed her thanks to Ms. Tammy Eskildsen for her years of exceptional service to the Board. Ms. Eskildsen worked with many Boards and CEOs and provided great counsel and support in everything she has done. The Chair wished to thank Ms. Eskildsen for her dedicated service and acknowledge appreciation for her time and efforts. Ms. Retty wanted to give Ms. Eskildsen a huge shout-out and wish her all the best in her retirement.

The Chair activity report was within the package and highlighted two events on June 15th, first, a meeting with the Ontario Health West Region and Ontario Health's President and CEO and second, the annual Wine Women and Shoes fundraising event. On June 19th the Chair attended the Fiscal Advisory Committee meeting and on June 21st attended a tour of the University Hospital Medical Imaging department with executives and board members. The Board made the approvals for the purchase of equipment in the Imaging department. Witnessing the excitement of the staff speaking about and engaging with the new equipment gave the Chair a sense of pride and joy.

4.2 CEO Report

Dr. Schleifer Taylor called upon three executives to speak about recent initiatives within their departments.

Mr. Jerry Plastino reported on the electronic intensive care unit (e-ICU). E-ICU is a way to monitor patients through a control centre using video, audio and vital sign monitoring, all staffed by critical care physicians and nurses. What staff saw during the pandemic was the need for patients to have a high level of support. The e-ICU is a complementary service that enhances the model of care. LHSC can partner with other hospitals locally or beyond and there are opportunities to leverage wider. Dr. Schleifer Taylor said 744 patients were admitted to the intensive care unit and greater than half of them had less than a 24-hour stay. The process would be a formal support system with patients' health data and metrics.

Mr. John French reported that an investment in equipment is an investment in people. One such investment in the fall is a "magnetic resonance imaging in the box". It's a new to Canada technology that will sit outside of the building and provide care to a wider community. It could also help provide care to remote communities such as Northern Ontario. It will be the first in Canada.

Mr. Andrew Mes spoke about LHSC taking on a regional role in cybersecurity. At the same time, LHSC is also having conversations with Huron Perth Health Alliance and Bluewater Health about joining LHSC's instance of Cerner. LHSC could complete referrals on a single service. Patient care records could be connected and for additional cost-sharing efficiencies. LHSC has recently created a connection through a health information exchange through Cerner, specific to sharing from acute care to long-term care. Live productive information can be seen in the information moving into the long-term care environment.

Dr. Schleifer Taylor extended her thanks to Ms. Retty and thanked the Board for all of their great questions and great advice. The ramp-up of activity has been extraordinary. Dr. Schleifer Taylor said that Ms. Retty has been a leader to look up to and an integrity-driven individual.

4.3 Quality and Culture Committee

Mr. Smith provided an overview of the recent committee meeting activities and highlighted the following items:

- Team LHSC survey results
- The physician dyad report on Clinical Neurological Sciences specifically mentioned the award-winning Door-to-Needle program that reduced from 39-minutes to 32-minutes

4.4 Children's Hospital Committee

Ms. Conley submitted the Children's Hospital Committee chair's report into record and highlighted the following items:

- Quality Performance indicators for Children's Hospital that align with the strategic plan
- Semi-annual report from the Chair, Medical Advisory Committee
- Patient Survey for Children's Hospital and broader coverage of patients
- Paediatric Annual Mortality Review Process
- Update from the Ethics portfolio

4.5 Resource and Audit Committee

Mr. Marcus submitted the Resource and Audit Committee chair's report into record and highlighted the discussions that took place during the committee meeting:

- Team LHSC survey and monthly snapshot
- Hospital Service Accountability agreement
- Information Technology Semi-annual report
- Internal Audit update and planning considerations.

4.5.1 2023/24 Operating Plan and Budget Recommendation

Mr. Marcus presented the operating plan and budget. Not including the amortization of the buildings and equipment, the deficit would be \$58.9M. It is crucial to focus on areas to ensure that LHSC is driving down costs and making operations more efficient and effective. The budget is based on costs where inflationary pressures are expected for this year

There are risks in terms of health human resources and the risk of overtime charges but LHSC is also looking for optimization of the best care in right place and patient flow and trying to drive down hours per patient. Some initiatives are being put in place to help drive down costs. The biggest risk is not following through on the strategic plan and having the motivation for efficiencies at all levels of the organization.

The floor was open for questions, comments and concerns with the following highlighted:

- Is this an optimistic or conservative budget? Mr. Marcus responded that it is both, with the realization that LHSC may not receive all the funding for which it applies. The funder may possibly help out with Bill 124. Keeping in mind the saying “you can’t manage what you can’t measure” is important, along with empowering people to be accountable for achieving the results or better.

There are plans for budget-specific learning during the orientation of the Boards for LHSC and for LHSCRI.

The Board of Directors APPROVED by GENERAL CONSENT, the 2023/24 Operating Plan along with the Operating Budget that projects a year-end Generally Accepted Accounting Principles (GAAP) deficit of \$75.5M. This deficit is aligned with the Hospital Accountability Planning Submission and is consistent with the Hospital Service Accountability Agreement along with the Balanced Budget Waiver approved by Ontario Health.

4.6 Medical Advisory Committee

New appointments to the Professional Staff, Changes to Professional Staff, Clinical Fellows Professional Staff Reappointment and Interim and contract Physician Executive Lead appointments are within the package. The City-Wide Joint MAC has reviewed the recommendations and there are no concerns moving forward.

4.6.1 New Appointments to the Professional Staff

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

4.6.2 Changes to Professional Staff Appointments

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

4.6.3 Clinical Fellow Appointments

Dr. Barron shared an update on start dates. Start dates do not align with the approvals of the Board. In a provincial comparison, both Ottawa and Kingston have the same process of not aligning start dates with Board approval dates. The reality is that the start date is the date on which Clinical Fellows have completed all their requirements to take on positions at LHSC. However, LHSC has been out of process because the Clinical Fellows are not captured in the by-law. The new by-law will consider these matters. There will be two options going forward for consideration in the new by-law.

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

4.6.4 Professional Staff Reappointment

It was MOVED and SECONDED that there be an amendment to the motion to strike the name of Dr. Brian Lyttle from the list.

With the amendment to the list approved, the Board of Directors APPROVED by GENERAL CONSENT the Professional Staff reappointment to the London Health Sciences Centre for June.

The floor was open for questions, comments and concerns with the following highlighted:

- What is the number of deferrals of renewals? Dr. Barron responded that there are four individuals who have been deferred for not completing their i-Learn modules.
- Are there exit interviews for credentialed staff? Dr. Barron was not aware if exit interviews take place. Many of the departures are retirements and some departures for which LHSC is not aware of the reason.

4.7 Professional Staff Organization

No report at this time.

4.8 Governance and Transition Committee

Mr. Wilson submitted the Governance and Transition Chair's report to the record.

4.8.1 Renewal of Elected Directors

The Board of Directors APPROVED by GENERAL CONSENT to ENDORSE and RECOMMEND to the Corporation the nomination of the following individuals for re-appointment to the Board of Directors for terms as noted: J. Leitch, three-year term.

4.8.2 Elected Directors Nominations

The Board of Directors APPROVED by GENERAL CONSENT to APPROVE and RECOMMEND to the Corporation the nomination of the following individuals for appointment to the Board of Directors for terms as noted: Andrea Dean, three-year term; Tony Mallette, three-year term; Joy Warkentin, two-year term.

4.8.3 Renewal and Extension via Exceptional Circumstance

Mr. Marcus brought forward the recommendation for re-appointment of Board member Mr. Matthew Wilson.

The Board of Directors APPROVED by GENERAL CONSENT to ENDORSE and RECOMMEND to the Corporation the nomination of the following individuals for re-appointment to the Board of Directors for terms as noted which includes a one-year extension for extenuating circumstances to complete his role as Chair of the Board: M. Wilson, three-year term.

5.0 HEALTH CARE PARTNER UPDATE

5.1 London Health Sciences Foundation

Ms. Brown gave a financial update which included gifts from grateful patients. An update on all the projects that have been going on through LHSF including the Dash for Dad event and the dream lottery.

A patient story was shared regarding a bond of two patients while spending time in the hospital.

5.2 Children's Health Foundation

No report at this time.

6.0 CONSENT AGENDA

The Board of Directors **APPROVED** by **GENERAL CONSENT** the Consent Agenda for the June 28, 2023 Board meeting, consisting of the recommendation found in Section 6:

6.1 Minutes, May 31, 2023

6.2 Resource and Audit

6.2.1 2023/24 Hospital Service Accountability Agreement

6.3 Quality and Culture

6.3.1 Base Hospital Terms of Reference Amendments

7.0 WRITTEN UPDATES

The following documents were entered into the record:

- 7.1 Lawson Board Monthly Report
- 7.2 Information Technology Semi-Annual Report
- 7.3 Non-board Committee Members
- 7.4 2023/24 Officer Recommendations
- 7.5 2023/24 Committee Chair/Vice Chair
- 7.6 MAC Professional Staff Departure Report
- 7.7 2023/24 Committee Assignment
- 7.8 2023/24 Multi-Sector Service Accountability Agreement
- 7.9 Board Transparency to Public

8.0 ADJOURNMENT

The meeting was **ADJOURNED** by **GENERAL CONSENT**.

Recorded by:
K. Dubois