



**BOARD OF TRUSTEES
OPEN MEETING**

Video conference

MINUTES OF FEBRUARY 22, 2023

PRESENT:	Ms. Marion Thomson Howell (Chair) Mr. Nick Anghel Ms. Jenny Baker Ms. Janine Barry Mr. Greg Brooks Ms. Maria DeBoer Ms. Linda Fabi	Ms. Melinda Gorgenyi (4 – 5 p.m.) Mr. David McKee Ms. Stephanie Ratza Mr. Rick Robertson Mr. Tim Rollins	Ms. Elizabeth Witmer Mr. Mark Fam Ms. Jill Schitka Dr. Peter Potts Dr. Angela Good
RESOURCE:	Ms. Liz Buller (CEO, SJHS) Ms. Carol Lammers (recorder)	Mr. Mike Gourlay Ms. Sarah Farwell	Ms. Nicole Johnson Mr. Gary Higgs
REGRETS:	Ms. Susan Dusick	Ms. Kelly-Anne Salerno	
GUESTS:	Ms. Katrina Graham, SMGH, Indigenous Patient Navigator		

1.0 CALL TO ORDER:

Ms. Thomson Howell called the meeting to order at 4:00 p.m., welcomed everyone to the meeting. Special welcome to Mr. Fam, President, SMGH and Katrina Graham, SMGH Indigenous Patient Navigator.

1.1 Land Acknowledgement

Ms. Ratza provided the land acknowledgement.

1.2 Opening Prayer/Reflection

Mr. Robertson provided an opening reflection.

1.3 Patient Story

Mr. Fam provided some background information on the patient story provided in the meeting materials and shared a note from the family expressing gratitude for the exemplary care provided and the leadership of the team who helped the parents.

2.0 GENERATIVE DISCUSSION

Ms. Graham provided a verbal report on her role at SMGH as the Indigenous Patient Navigator. Discussion, questions, and comments included the following:

- Informal [word of mouth] is the current practice at SMGH to promote the service
- Space for ceremonies is a need & supports to provide service is a requirement that is becoming a larger demand as more people become aware of the service
- Biggest systemic barrier is awareness, importance, and acceptance of the services available to indigenous patients

3.0 CONSENT AGENDA

Motion that the following recommendations, minutes, and reports of SMGH be approved:

- **Approval of the Open Agenda.**
- **Declaration of Conflict of Interest**
- **Approval of Open Meeting Minutes of January 25, 2023**
- **Previous meeting survey results**

Moved, Seconded, VOTED AND CARRIED.

4.0 REPORTS

4.1 Report of the Chair

No report was provided.

4.2 Report of President

The report of the President was circulated in advance of the meeting. Mr. Fam noted the following:

- Thanked Board for the welcome to SMGH
- *Your Health Act* tabled by Ford government yesterday. Highlights include:
 - Integrated community health centers
 - as of right legislation (re certification from international professionals not required)
 - Pharmacist prescribing change
 - Connection of health & social services data

Discussion included:

- Request to provide a roadmap to the Board from KW4 OHT regarding the *Your Health Act*
- Pillar 3 speaks to funds allocated for wage increases for PSW, which will not be available to other health care staff at this time.
- Concern with community health centers negatively affecting hospital staffing & recruitment, specifically wage parameters/discrepancies, etc.
- Checks & balances will be put in place to ensure equitable compensation across hospitals & health centers
- Is surgical nursing staff a priority for recruitment currently at SMGH? With community surgical centers opening up, staff will not be required to work evenings/weekends which will affect hospital staffing/recruitment.
- Does the current Strategic Plan have a good foundation to be able to navigate these changes through the *Your Health Act*?

4.3 Report of the SJHS CEO

Ms. Buller provided a verbal update, noting the following:

- St. Joseph's Hamilton CEO Melissa Farrell moving to Halton Healthcare
- David Wormald retiring from Guelph St. Joes
- Gary Payne also retiring end of April 2023
- Inaugural meeting of the System organizations & Foundation Board Chairs took place. This is a liaison committee, and their next scheduled meeting is in May 2023
- Work ongoing with ONCA (Nov. 2024); Wendy Lawrence (St. Joe's Hamilton) working with Ms. Buller & BLG on the process
- Strategic plan work continues with a soft launch anticipated for May 2023.
- Board Orientation sessions scheduled
- Resuming system day, early May, which will be a half-day meeting of all leaders across member organizations which will include a soft launch of the strategic plan. Official launch of the Strategic Plan to take place during the June 2023 AGM.

4.4 Report of the SMGH Foundation

Documentation was provided in advance of the meeting. Ms. Thomson Howell reminded Trustees of the upcoming Foundation events noted in the documentation and

encourage all to attend/participate as often as possible. Mr. Fam also encouraged Trustees to also view the videos provided in the links in the reports.

4.5 Quality Committee Report

Documentation was provided to the Board in advance of the meeting. Ms. Barry noted the following:

- 87 yr old patient, 1st single day TAVI patient joined the committee meeting to present information on how his experience was at SMGH.
- Indicators in scorecard were affected by the high capacity during the reporting period.
- Additional clarification was provided on the low percentage for scanning wrist bands, that the bands are also used for lab results and medication distributions.
- Data not available currently for patient survey; generally conducted by OHA which is currently in RFP to obtain new provider.
- Appreciation expressed for the excellent cardiac department walkabout led by Mr. Douglas
- Clarification was provided on the new QIP indicators. Mr. Fam noted that we anticipate receiving direction and new targets from Ministry on QIP indicators.
- Updates on the targets for the new indicators were provided by Ms. Schitka, noting that these targets are intended to improve quality of care going forward.
- Concern that the targets figures were not provided to Board as part of the Quality report. Recommend deferring the motion to approve the QIP to the March meeting so that the target percentages and supporting information can be reviewed by Trustees in advance.

Motion that the Board of Trustees accept the Quality Committee Report as presented.

Moved, Seconded, VOTED AND CARRIED.

4.6 Resource, Audit & Finance Committee

4.6.1 Committee Report & Financial Statements

The Committee report and supporting documentation was provided in advance of the meeting. Ms. Baker reviewed the documentation, noting the in-depth discussions by the committee on risk reporting. The discussion included the following:

- Incremental bed funding and how will HHR issues affect additional beds. Clarification was provided that the beds are already included in bed numbers, and this refers to incremental funding and not increasing the number of beds.

Motion that the Board of Trustees accept the Resource, Audit & Finance Committee Report and approve the Financial Statements for the months ending December 2022.

Moved, Seconded, VOTED AND CARRIED.

4.6.2 Capital Report

Mr. Gourlay provided an overview of the documentation provided in advance of the meeting and responded to questions that arose during the discussion which included:

- The MRI is a separate campaign and not included in the \$31M figure
- What was the biggest surprise going thru this process for the first time and what is the biggest risk? Heavy reliance on Foundation; no separate small fund for capital funding as other hospitals have.

Motion that the Board of Trustees approve the 23/24 capital funding amounts as presented.

Moved, Seconded, VOTED AND CARRIED.

4.7 Culture & Human Development Committee Report

Ms. Ratza reviewed the documentation provided in advance of the meeting. No additional questions arose.

Motion that the Board of Trustees accept the Culture & Human Development Committee Report as presented.

Moved, Seconded, VOTED AND CARRIED.

5.0 OTHER BUSINESS

5.1 Strategic Plan Update – Q3

Ms. Farwell reviewed the documentation provided in advance of the meeting, highlighting 2 risk areas and 2 success areas during this reporting cycle. The discussion included the following:

- Patient safety survey response decrease – staff perception of individual capabilities
- Is there a way within the chart to highlight key action items that staff will be focusing on in next quarter?

5.2 Trustee Educational Events

No reports were provided.

6.0 ADJOURNMENT

The open meeting adjourned at 5:31 p.m.

Motion that the Board of Trustees adjourn the open portion and move into the in-camera portion of the meeting.

Moved, Seconded, VOTED AND CARRIED.