

BOARD OF DIRECTORS

June 15, 2022

<p>Due to the COVID-19 pandemic, the Wednesday, June 15, 2022 Board Meeting was held via WebEX.</p> <p>N. Abotossaway, P. Bouchard, Bp. F. Colli, Dr. P. de Bakker, S. Fraser, B. Jarvela, J. Lawrance, S. McAllister, K. O'Brien, D. O'Donnell, G. Postans, F. Pottinger, R. Simpson, F. Zanatta</p> <p>J. Black, K. Callaghan, C. Fox, C. Milks.</p> <p>B. Ball, P. Francis, C. Freitag, A. Shaen</p>	<p>Attendance</p> <p>Regrets</p> <p>Staff Resource</p>
BOARD EDUCATION SESSION	
<p>P. Francis, Director of Indigenous Health Services referenced the <i>Walking with Humility: Looking to the Southern Direction</i> report, as found within the meeting package. Paul presented an on-screen presentation for same which outlined Acknowledging Our History & Continuing On Our Journey and the four Actions planned as next steps. Paul noted a public release of the Report is scheduled for June 30th at Sister Margaret Smith Centre.</p>	<p>Wiidosem Dabasendizowin – Walking with Humility</p>
CALL TO ORDER	
<p>B. Jarvela led the opening prayer.</p> <p>S. Fraser called the meeting to order at 1703 hours and acknowledged being present on the traditional territory of the Anishinaabe in the Robinson Superior Treaty of 1850.</p>	
CONFLICT OF INTEREST DECLARATIONS	
<p>None.</p>	
DECLARATIONS TO THE BOARD	
<p>There were no declarations to the Board.</p>	
CONSENT MOTION FOR AGENDA/MINUTES	
<p>Moved by: P. Bouchard Seconded by: B. Jarvela</p> <p>THAT THE AGENDA OF JUNE 15, 2022 AND THE MINUTES OF THE BOARD OF DIRECTORS MEETING OF MAY 18, 2022 BE APPROVED.</p> <p style="text-align: right;">CARRIED</p>	
BUSINESS ARISING/STANDING AGENDA ITEMS	
<p>The Workplan was included within the meeting package for information.</p>	<p>Annual Workplan</p>
<p>Nil.</p>	<p>Regional Services Committee – Update</p>
REPORT OF THE CHIEF OF MEDICAL STAFF	

BOARD OF DIRECTORS

June 15, 2022

<p>Dr. de Bakker presented the report of the Chief of Medical Staff of June 2, 2022.</p> <p>Moved by: <i>Dr. de Bakker</i> Seconded by: <i>R. Simpson</i></p> <p>THAT THE BOARD OF DIRECTORS APPROVE THE REPORT OF THE CHIEF OF MEDICAL STAFF FOR JUNE 2, 2022.</p> <p style="text-align: right;">CARRIED</p>	<p>Chief of Staff Report</p>
LEADERSHIP TEAM REPORT	
<p>K. O'Brien presented the Leadership Team Report to the Board for June 2022 and added the following items outside of the report:</p> <ul style="list-style-type: none"> • Governor General's Canadian Leadership Conference Northern Study Tour members came to Thunder Bay and met with representatives from the Isolation Shelter. Participants shared very positive feedback. As well one of our Addictions and Mental Health staff members was chosen as a participant of the Governor General's Canadian Leadership Conference and is currently on the Saskatchewan Study Tour. We are looking forward to learning about their experience. • Board members were reminded of the invitation to participate in the upcoming public launch scheduled for June 30th at SM CSC for the Walking with Humility report. Minister Hajdu and Chief Peter Collins, as well as other partners have also been invited • Despite the mask mandate being lifted, SJCG will continue to enforce masks at all sites which is in line with other healthcare organizations. <p>Moved by: <i>K. O'Brien</i> Seconded by: <i>R. Simpson</i></p> <p>THAT THE BOARD OF DIRECTORS APPROVE THE LEADERSHIP TEAM REPORT FOR JUNE 2022.</p> <p style="text-align: right;">CARRIED</p>	<p>Leadership Team Report</p>
REPORT OF THE FOUNDATION	
<p>F. Zanatta presented the report from the Foundation for June 2022</p> <p>Moved by: <i>F. Zanatta</i> Seconded by: <i>G. Postans</i></p> <p>THAT THE BOARD OF DIRECTORS APPROVE THE ST. JOSEPH'S FOUNDATION REPORT FOR JUNE 2022.</p> <p style="text-align: right;">CARRIED</p>	<p>St. Joseph's Foundation Report</p>
COMMITTEE REPORTS - CONSENT MOTION	
<p>An error was noted on the recorded attendance for the Committee; D. Tycholas was not in attendance. F. Zanatta was not included on the listing but was present.</p> <p>Moved by: <i>F. Pottinger</i> Seconded by: <i>R. Simpson</i></p>	<p>Finance and Audit Committee</p>

BOARD OF DIRECTORS

June 15, 2022

<p>THAT THE BOARD APPROVE THE FOLLOWING AMENDED REPORT AND ANY MOTIONS CONTAINED THEREIN:</p> <p>i) Finance and Audit Committee – June 2, 2022</p> <p style="text-align: right;">CARRIED</p>	
COMMITTEE REPORTS HELD FROM CONSENT MOTION	
<p>B) COMMITTEE REPORTS HELD FROM CONSENT MOTION</p> <p>A. Shaen referenced the Ethics Annual Report found within the meeting package. Adam noted over the period of the report identifies substantial ethics engagement with majority of ethical consultations being clinically focused.</p> <p>Adam noted the revised MAID policy found in the package that the Board Quality, Safety and Risk Committee is recommending for Board approval. No significant changes were made with some changes to the names in the policy and a definition added for clarity. Further changes may be required with the pending legislative changes for those with mental health conditions which is expected next year.</p> <p>K. O'Brien noted the narrative for the QIP 2022-23 can be found in the package. Kelli referenced changes to the earlier version of QIP 2022-23 document approved by BQSR Committee as follows: An additional indicator was included: How often does staff listen to you based on feedback from the Client and Family Council;</p> <p>The target for St. Joseph's Hospital for proportion of hospitalizations where patients with a progressive, life-limiting illness, are identified to benefit from palliative care, and subsequently (within the episode of care) have their palliative care needs assessed using a comprehensive and holistic assessment has been changed from 100% to 80%.</p> <p>The baseline for the indicator of workplace violence incidents reported by workers (as defined by OHS) within a 12 month period was inaccurate and has been corrected for the hospital and LTC sites.</p> <p>The baseline for the indicator of workplace violence incidents reported by workers (as defined by OHS) within a 12 month period was inaccurate and has been corrected for the hospital and LTC sites.</p> <p>The difference in the indicator targets across Bethammi Nursing Home and Hogarth River Manor for the proportion of residents with a progressive, life-limiting illness, that are identified to benefit from palliative care, who subsequently have their palliative care needs assessed using a comprehensive and holistic assessment was questioned. The targets were based on a percentage of improvement expected with change processes planned. This item will be brought forward to Board Quality, Safety and Risk Committee for further discussion regarding the assessment in LTC and specifically CHES scores.</p>	<p>Board Quality, Safety and Risk Committee</p>

BOARD OF DIRECTORS

June 15, 2022

<p>i) Board Quality, Safety & Risk Committee – May 17, 2022</p> <p>THAT THE BOARD APPROVE THE BOARD QUALITY, SAFETY AND RISK COMMITTEE REPORT, DATED MAY 17, 2022, AND FOLLOWING MOTIONS CONTAINED THEREIN:</p> <p>THAT THE BOARD APPROVE POLICY CL 2-137 MEDICAL ASSISTANCE IN DYING AS ATTACHED TO THE MINUTES;</p> <p>THAT THE BOARD OF DIRECTORS APPROVE ST. JOSEPH'S CARE GROUP 2022-2023 HOSPITAL AND LONG TERM CARE QUALITY IMPROVEMENT PLANS AS FOUND WITHIN THE MEETING PACKAGE;</p> <p style="text-align: right;">CARRIED</p>	
<p>B. Ball referenced the 2020 - 2024 Strategic Plan March, 31, 2022 Performance Report found in the meeting package. Byron highlighted various successes and risks.</p> <p>ii) Executive Committee – June 1, 2022 >Strategic Plan 2020-24 Progress Report</p> <p>THAT THE BOARD APPROVE THE EXECUTIVE COMMITTEE REPORT, DATED JUNE 1, 2022 AND FOLLOWING MOTIONS THEREIN:</p> <p>THAT THE BOARD GRANT THE EXECUTIVE COMMITTEE THE POWER TO ACT FROM THE LAST REGULAR BOARD MEETING IN JUNE THROUGH TO THE FIRST REGULAR BOARD MEETING IN SEPTEMBER 2022 AND THAT EVERY ACTION TAKEN BE REPORTED AT THE BOARD MEETING IN SEPTEMBER 2022;</p> <p>And THE BOARD AUTHORIZE THE CHAIR TO SIGN THE OHN H-SAA DECLARATION OF COMPLIANCE, FOR THE PERIOD OF APRIL 1, 2021– MARCH 31, 2022;</p> <p>And THAT THE BOARD APPROVE THE FOLLOWING RESEARCH ETHICS BOARD APPOINTMENTS, EACH FOR A THREE YEAR TERM, EXPIRING ON MAY 31, 2025:</p> <ul style="list-style-type: none"> • Kathleen Romano • Hillary Maxwell <p style="text-align: right;">CARRIED</p>	Executive Committee
NEW BUSINESS	
<p>An electronic motion was sent to the Governance Committee, via email, to move and carry the Slate of Officers for 2022-23.</p> <p>Moved by: <i>F. Pottinger</i> Seconded by: <i>G. Postans</i></p> <p>THAT THE BOARD RECOMMEND TO THE CATHOLIC HEALTH SPONSORS OF ONTARIO THE FOLLOWING SLATE OF OFFICERS FOR ST. JOSEPH'S CARE GROUP FOR THE YEAR 2022-2023:</p>	<p>Electronic Motions</p> <p>Governance Committee</p>

BOARD OF DIRECTORS

June 15, 2022

<ul style="list-style-type: none"> • SUSAN FRASER – CHAIR • JENNIFER LAWRENCE - VICE CHAIR • BISHOP FRED COLLI - PAST CHAIR • ROBERTA SIMPSON – TREASURER • KELLI O'BRIEN - SECRETARY (PRESIDENT & CEO) <p style="text-align: right;">CARRIED</p>	
<p>An electronic motions was sent to the Board Quality, Safety and Risk Committee, via email, to move and carry amendments to the Quality Improvement Plan:</p> <p>Moved by: <i>P. Bouchard</i> Seconded by: <i>R. Simpson</i></p> <p>THAT THE BOARD OF DIRECTORS APPROVE TWO AMENDMENTS TO THE 2022-2023 QUALITY IMPROVEMENT PLAN. THAT THE TARGET FOR PROPORTION OF HOSPITALIZATIONS WHERE PATIENTS WITH A PROGRESSIVE, LIFE-LIMITING ILLNESS ARE IDENTIFIED TO BENEFIT FROM PALLIATIVE CARE, AND SUBSEQUENTLY (WITHIN THE EPISODE OF CARE) HAVE THEIR PALLIATIVE CARE NEEDS ASSESSED USING A COMPREHENSIVE AND HOLISTIC ASSESSMENT BE CHANGED TO 80% FROM 100% AND THAT THE INDICATOR HOW OFTEN DID STAFF LISTEN CAREFULLY TO YOU ALWAYS BE ADDED TO THE QUALITY IMPROVEMENT PLAN.</p> <p style="text-align: right;">CARRIED</p>	<p>Board Quality, Safety and Risk Committee</p>
FOR INFORMATION	
<p>Minutes from the Annual Professional Staff meeting, March 1, 2022, were included within the package for information.</p>	
MOVE TO IN CAMERA	
<p>Moved by: <i>B. Jarvela</i> Seconded by <i>R. Simpson</i></p> <p>THAT THE BOARD OF DIRECTORS MOVE TO AN IN-CAMERA (CLOSED) SESSION AT 1818 HOURS.</p> <p style="text-align: right;">CARRIED</p>	<p>Move to In Camera Session</p>
RISE AND REPORT FROM IN CAMERA	
<p>The open session of the meeting resumed at 1831 hours with the following rise and report from in-camera session - The Board of Directors approved the physician privileges as delineated in the Credentialing Report, dated June 2, 2022 and approved the reinstatement of the 2021-22 "at risk" portion of salaries of the Chief of Staff, President & CEO and Leadership Team and approved indicators tied to at risk pay for 2022-23 for the Chief of Staff, President & CEO and Leadership Team.</p>	
ADJOURNMENT/NEXT MEETING AND BOARD EVALUATION	
<p>Next meeting: September 21, 2022</p> <p>The Chair asked staff to exit the meeting and a round table discussion with board members was conducted. The meeting adjourned at 1832 hours.</p>	

BOARD OF DIRECTORS

June 15, 2022



Chair, Board of Directors



Recording Secretary

September 21, 2022

Date