

Present:

Susan Fraser (<i>Chair</i>)	Janine Black*	Bill Bradica	Bishop Alan Campeau
Deb Comuzzi	Dr. Peter de Bakker*	Carolyn Freitag*	Sharon Hollinsworth
Jordan Hudyma	Barbara Jarvela	Stacey Livitski	Regina Mandamin
Emily Phippard	David Pierce	Garth Postans	Ben Raison

By Invitation:

Sheila Brown, *Recording Secretary*
 Adam Shaen, *Vice President, People & Mission*
 Andrea Docherty, *Vice President, Clinical & Community Health*
 Byron Ball, *Vice President, Infrastructure and Planning & CFO*
 Paul Francis, *Vice President, N'doo'owe Binesi*
 Kim Callaghan, *Director, Communications & Government Relations*
 Brenda Mason, *Elder in Council*
 Rosy Brizi, *Partner, Assurance, Doane Grant Thornton*

Regrets:

Dr. Armour Boake*	Paula Bouchard	Chief Melvin Hardy	Fhara Pottinger
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1.0 CALL TO ORDER AND WELCOME

The Chair welcomed Board members, Vice Presidents and guests to the meeting. The meeting was called to order at 6:00 p.m.

1.1 Land Acknowledgment and Opening Prayer

S. Livitski provided the land acknowledgment and opening prayer.

1.2 Declaration of Conflict of Interest – None

1.3 Delegations of the Board – None

1.4 Approval of the Agenda and Minutes of May 20, 2026

Moved by: B. Jarvela

Seconded by: D. Pierce

“That the Board of Directors approves the June 17, 2026 agenda as circulated and the May 20, 2026 Board of Directors Meeting minutes and June 25, 2025 Annual General Meeting minutes as presented.”

CARRIED

2.0 BUSINESS ARISING / STANDING AGENDA ITEMS

2.1 Board of Directors Motion Sheet – Included in the meeting package for information.

2.2 Board of Directors Work Plan

The 2025-2026 work plan was included in the meeting package for information. All activities are on track and complete following today's meeting.

3.0 REPORTS

3.1 Report from the Chair

S. Fraser provided a general update regarding a client complaint addressed to the Board, noting that the matter was addressed in accordance with the established complaints process. S. Fraser noted that this was the final Board meeting as Chair and expressed appreciation to the Board, President & CEO, Chief of Staff, Leadership Team, Executive Coordinator, and Elder Brenda Mason for the support provided. The incoming Board Chair was extended best wishes.

3.2 Report from the President & CEO

The Leadership Team Report was pre-circulated for information. Highlights included embedding Indigenous Cultural Safety in incident and complaint processes, improvements to psychiatric consultation wait times, and opportunities to share St. Joseph's Care Group work locally, provincially, and nationally. Recent media engagement highlighted Indigenous health and quality, including an Ontario Hospital Association Health System News story on [Reimagining Quality and Safety Through a Two-Eyed Seeing Lens](#). The initial Accreditation report was received, noting strong organizational performance and opportunities for continued improvement.

3.3 Report from St. Joseph's Foundation of Thunder Bay (SJFTB)

The President's Report was pre-circulated. Highlights included planned giving and financial planning initiatives, development of a Foundation-specific Land Acknowledgement, enhanced donation visibility, strengthened community partnerships, website redevelopment, and expanded stakeholder engagement. SJFTB is seeking two Board members to participate in a focus group regarding brand evolution. The draft 2026-2030 Strategic Plan Renewal was also pre-circulated. S. Hollinsworth and D. Comuzzi outlined the Foundation's new mission statement and strategic priorities. The Board Chair thanked S. Hollinsworth for her service on the Board during the 2025-2026 term.

3.4 Chief Nursing Executive and Health Professions Annual Report

The Chief Nursing Executive and Health Professions Annual Report was pre-circulated. C. Freitag highlighted workforce engagement, mentorship, recruitment, retention, and professional development initiatives.

4.0 CONSENT MOTION

4.1 Board Quality, Safety & Risk Committee

The May 19, 2026 Board Quality, Safety & Risk Committee meeting minutes were pre-circulated for information. Key items included a presentation on the Annual Long-Term Care Mandatory Quality Committees; a

recommendation for the Board of Directors to approve Kira Wilson as the new Regulated Health Professional Committee Member, commencing her term in September 2026; a presentation on Patient Relations Data, including Compliments and Concerns; and a high-level overview of the 2025-2026 Quality Improvement Plan Progress Report (Q4).

4.2 Board Governance & Nominating Committee

The June 2, 2026 Board Governance & Nominating Committee meeting minutes were pre-circulated for information. Key items included recommendations to approve the new Board Attendance Evaluation Policy, revised Board Evaluation Framework Policy, 2026-2027 Board committee structure and membership, and Board and Committee work plans. The Committee also discussed Board membership changes, including a new member appointed by Maamow Ginaakonigewin (Indigenous Health Committee), removal of one member, and appointment of a new CHSO designate. Key messages from the May 11th Mission & Equity Sub-Committee were received, with a recommendation to transition it to a standing Board committee. Annual meeting changes were also discussed.

4.3 Board Resources Committee

The June 4, 2026 Board Resources Committee meeting minutes were pre-circulated for information. Key items included recommendations to approve the Audit Results Report and Annual Audited Financial Statements for the year ended March 31, 2026, including submission to the Catholic Health Sponsors of Ontario for approval. The Committee recommended authorization for the Board Chair and President & CEO to sign the Annual Attestation on BPSAA Compliance, BPSAA Annual Report on Consultant Use, and H-SAA and M-SAA Declarations of Compliance for the period April 1, 2025 to March 31, 2026. The Committee also reviewed the Human Resources Key Performance Indicator Report and received the Executive and Board Member Expenses Report.

4.4 Medical Advisory Committee

The June 4, 2026 Medical Advisory Committee meeting minutes were pre-circulated for information. Dr. de Bakker highlighted discussions regarding the separation of the Joint Credentials Committee and Professional Staff Association between St. Joseph's Care Group and Thunder Bay Regional Health Sciences Centre, as well as a discussion with B. Ball and M. Farrow regarding organizational use of Artificial Intelligence (AI), with emphasis on best practices, guidelines, quality, and safety.

Moved by: B. Bradica
Seconded by: E. Phippard

"That the Board of Directors approves the following committee reports and any motions contained therein:

- 4.1 Board Quality, Safety & Risk Committee – May 19, 2026;***
- 4.2 Board Governance & Nominating Committee – June 2, 2026;***
- 4.3 Board Resources Committee – June 4, 2026; and***
- 4.4 Medical Advisory Committee – June 4, 2026."***

CARRIED

5.0 COMMITTEE REPORTS HELD FROM CONSENT MOTION

There were no items held from consent motion.

6.0 NEW BUSINESS

6.1 Audit Results Report

Rosy Brizi from Doane Grant Thornton presented the audit results report, confirming an unqualified audit opinion, discussing key financial transactions including the electronic health record project, and addressing audit risks, and no questions raised by Board members.

R. Brizi was excused from the meeting.

6.2 Strategic Plan Annual Progress Update

The Strategic Plan Annual Progress Report was pre-circulated. B. Ball highlighted key performance indicators, progress on priorities such as client experience, staff turnover, regional specialized care, and cultural safety.

6.3 Annual Report 2025-2026

The Annual Report 2025-2026 was pre-circulated. K. Callaghan discussed plans for distributing the annual report, including sharing highlights via social media and stakeholder outreach, with a commitment to report back to the Board on engagement metrics in the fall.

6.4 Research Ethics Board Members Appointments/Re-appointments

Formal requests were received from the Research Ethics Board for recommendations regarding member appointments and reappointments.

Moved by: S. Livitski

Seconded by: B. Raison

“That the Board of Directors approves the Research Ethics Board recommendations dated May 15, 2026 and June 2, 2026 regarding the appointment and re-appointment of its members, as outlined in the corresponding letters”.

CARRIED

6.5 Ceremony for Commitment Statement

The Board discussed holding a ceremony to renew its commitment statement to the Anishinaabek, with support from the Elders Council. The ceremony was proposed for September 30th, in connection with the National Day for Truth and Reconciliation.

7.0 FOR INFORMATION – Nil

8.0 IN CAMERA (CLOSED) SESSION

Moved by: R. Mandamin

Seconded by: B. Jarvela

“That the Board of Directors move to an In Camera closed session.”

CARRIED

9.0 RISE AND REPORT FROM IN CAMERA SESSION

The Board of Directors approved the In Camera Board Executive Committee minutes dated June 3, 2026 and In Camera Medical Advisory Committee minutes dated June 4, 2026, including the physician privileges outlined in the Credentialing report. The Board also received a year-end report from the Chief Nursing Executive.

10.0 BOARD SERVICE APPRECIATION

G. Postans was recognized and thanked for his dedicated service, commitment, and contributions to the Board since September 2020. S. Fraser was also recognized and thanked for her leadership as Board Chair during the 2025-2026 Board year and for her continued service to the Board.

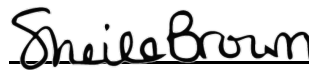
11.0 DATE OF NEXT MEETING – September 2026

12.0 ADJOURNMENT – The meeting adjourned at 7:09 p.m.

13.0 BOARD MEETING EVALUATION – Board of Directors were asked to complete the evaluation via the link provided in the agenda.



Chair, Board of Directors



Recording Secretary

September 16, 2026

Date