

PRESENT: J. Calvin, L. Conley, A. Dean, L. Harrison, J. Leitch, H. Lokko, T. Mallette, T. Marcus, P. Retty, K. Serniwka, S. Smith, H. Wade, M. Wallace, J. Warkentin, M. Wilson (Chair)

REGRETS: M. Bhimani, A. Barron

Ex. Officio Non-Voting: J. Schleifer Taylor, T. Brown, F. Rohoman

GUESTS: M. Watts, R.A. Conyngham

1.0 WELCOME AND CALL TO ORDER

1.1 Declaration of Conflict of Interest

Mr. Wilson welcomed the group and called the meeting to order. The Board members were reminded of the Ethical Decision-Making Framework on the back of the agenda and that LHSC follows a Conflict of Interest Policy. Should any member feel as if they are in conflict, they are asked to please declare it either now or at the time of the item.

1.2 Chair Report & Remarks

Mr. Wilson noted that National Day of Truth and Reconciliation Day is coming up, and encouraged everyone to use this as an opportunity to read, learn and reflect on not just the call to action but generally as a hospital serves many diverse communities throughout this province, which are traditional lands of many different groups.

2.0 APPROVAL OF MEETING AGENDA

2.1 Approval of Meeting Agenda

The Agenda for the 27 September 2023 Board of Directors meeting was APPROVED by GENERAL CONSENT as written.

2.2 Approval of Consent Agenda

The Board of Directors APPROVED by GENERAL CONSENT the Consent Agenda found in section 7 of the package for the 27 September 2023 Board Meeting.

Item 7.12 has been pulled from the Consent Agenda and put on the agenda after section 6.2.

3.0 EDUCATION

3.1 Board Oversight of Medical Staff

Mr. Michael Watts, Partner, Osler Hoskin & Harcourt LLP presented on the Boards Oversight of Medical Staff. This included information on the Director's legal responsibilities, as well as fiduciary duties to act to the best of the corporation.

A discussion ensued around making decisions, which may impact stakeholders in different ways, but the board should always strive to make decisions that are in the best interest of the corporation. It was noted that the Directors should refer to the Corporation's purposes,

mission, vision and strategic plan to guide them in determining what is in the best interest of the Corporation.

A question was asked if it was the Board's responsibility to review every physician credentialing application for (re)appointment. Mr. Michael Watts responded that there is a detailed Professional By-law that sets out the Medical Advisory Committee's responsibilities regarding the credentialing process and the MAC Chair should confirm the credentialing process has been complied with when the MAC Chair recommends the appointment of Professional Staff Members on behalf of the MAC.

3.2 Staff Safety Moment

Staff Safety moment was provided within the package which highlighted an example of how well-integrated Musculoskeletal Injury Prevention Program can work to expedite return to work and to prevent future injuries to staff. LHSC has a robust program for training of safe patient transport both electronic as well as in-person with specific simulations.

4.0 REQUIRED DECISIONS

4.1 Medical Advisory Committee

Reappointment Follow-Up Report, New Appointments to the Professional Staff, Changes to Professional Staff Appointments, and Clinical Fellow Appointment Reports are within the package. The City-Wide Joint Medical Advisory Committee has reviewed the recommendations and there are no concerns moving forward. It was noted that the City-Wide Committee does an intensive review of each file, and will be flagged if needed, the Medical Advisory Committee will do the final review. **ACTION** An orientation on the credentialing process, and auditing

4.1.1 Reappointment Follow-up Report

The Board of Directors APPROVED by GENERAL CONSENT the Professional Staff Reappointment to London Health Sciences Centre for September 2023

4.1.2 New Appointments to the Professional Staff

The Board of Directors APPROVED by GENERAL CONSENT the Professional Staff New Appointments to London Health Sciences Centre for September 2023.

4.1.3 Changes to Professional Staff Appointments

The Board of Directors APPROVED by GENERAL CONSENT the Professional Staff appointment changes to London Health Sciences Centre for September 2023.

4.1.4 Clinical Fellow Appointments

The Board of Directors APPROVED by GENERAL CONSENT the Clinical Fellow appointments to London Health Sciences Centre for September 2023.

5.0 REPORTS

5.1 CEO Report

The Monthly CEO report was pre-circulated within the package. Dr. Schleifer Taylor highlighted:

- London Chambers of Commerce Business Achievement Awards, where LHSC has been nominated
- London city Counsellors visited LHSC on Monday, September 25, 2023
- Special Certificates were received from the House of Commons Canada, and the Elgin London Middlesex member of parliament for the UH 50th Staff Celebration
- Executive Leadership acknowledged Ms. Retty for her incredible tenure

5.2 Resource and Audit Committee

Mr. Leitch provided the members with a brief update on the September 13th Resource and Audit Committee meeting. He noted that this committee is working hard to balance both the human resources and financial obligations.

5.3 Strategic Redevelopment Committee

Ms. Dean provided a brief update on the discussions that took place at the September 13th Strategic Redevelopment Committee. She noted that this committee will be working with Leadership with the oversight of the strategic plan. The Master Plan has been submitted and an update was provided to the committee on the timing and next steps. A current state assessment of Business Development is being worked on and will be moving forward strategies across four areas; internal revenue optimization, international affairs, private sector/commercial collaborations, and health sector partnerships.

5.4 Governance and Transition Committee

Mr. Marcus provided a brief update on the Governance and Transition Committee where orientation and workplans were discussed as well as every committee to be effective and consistent. The Chairs of each committee will be meeting to discuss durations, nature of discussion, questions, making the right difference, mentoring buddies and consistency.

5.5 Professional Staff Organization

There was no report from the Professional Staff Organization this month.

6.0 HEALTHCARE PARTNER UPDATES

6.1 Children's Health Foundation

Ms. Rohoman, brought greetings from the Children's Health Foundation and provided a brief report on the events that are happening in the community. She noted that the CHF Board is working on a strategic plan as the current plan expires at the end of the 2023.

6.2 London Health Sciences Foundation

Ms. Brown provided a financial update and noted some gift announcements and community events. She highlighted a patient story of a grateful family.

7.0 CONSENT AGENDA

7.1 Minutes of Previous Meeting – 27 July 2023

7.2 Terms of Reference and Work Plan: governance & Transition

- 7.3 Board of Directors Work Plan**
- 7.4 Freedom of Information & Protection of Privacy Act Delegation of Duties**
- 7.5 Relationship Enhancement/Implementation Plan**
- 7.6 2023/24 Committee Assignments**
- 7.7 Role Documents: Role and Responsibilities, Chair of the board, Committee Chair, Individual Director, Non-board Committee Member, LHSC Patient Partner, and Family Partner**
- 7.8 Board Policies: Code of Conduct, Confidentiality, Conflict of Interest**
- 7.9 Audited Reconciliation Reports Submitted to Funders – 2021/22 Transfer Payment Annual Reconciliation for the Emergency Child Psychiatry Transfer Payment Agency**
- 7.10 Audited Reconciliation Reports Submitted to Funders – Child and Youth Mental Health Final Report 2022-2023**
- 7.11 Internal Audit Charter for 2023/24**
- 7.12 Internal Audit Work Plan for 2023/24**

Internal Audit Work Plan for 2023/24

A discussion ensued around the scope of the review of quality within the Internal Audit Work Plan. It was noted that Dr. Barron is leading this review with Mr. Katchabaw around physician orders of restraint legislation and the standards of care, but more details could be provided by Mr. Katchabaw. **ACTION:** Mr. Katchabaw will circulate an email to the Board members regarding the scope of this review, and a report out will be given to Quality & Culture and Resource & Audit.

8.0 WRITTEN UPDATES

The following documents were entered into the record:

- 8.1 Children’s Hospital Committee Internal Landscape
- 8.2 Quality & Quality Committee Internal Landscape
- 8.3 Research Committee Internal Landscape

9.0 ADJOURNMENT

The meeting was ADJOURNED by GENERAL CONSENT.

Recorded by:
L. Shanahan