

**PRESENT:** A. Barron, J. Mandzia on behalf of M. Bhimani, L. Conley, A. Dean, L. Harrison, J. Leitch, H. Lokko, T. Mallette, T. Marcus, P. Retty, S. Smith, H. Wade, M. Wallace, J. Warkentin, M. Wilson (Chair), T. Brown, F. Rohoman, H. Lokko, K. Serniwka, A.A. Dean

**REGRETS:**

**GUESTS:** R.A. Conyngham

## **1.0 WELCOME AND CALL TO ORDER**

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### **1.1 Land Acknowledgement**

Ms. Conyngham started the meeting off with a land acknowledgment highlighting the significance of the traditional land.

### **1.2 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 that is used to inform the Board's decision-making process, as well as the LHSC Conflict of Interest Policy. Members were asked to declare any known conflicts of interest. None were declared. Members were reminded of the importance of disclosing a conflict or potential conflict immediately prior to any discussion or vote on any items.

### **1.3 Chair Report & Remarks**

Mr. Wilson made a few comments which will be discussed during upcoming agenda items.

## **2.0 APPROVAL OF MEETING AGENDA**

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### **2.1 Approval of Meeting Agenda**

**The Agenda for the 31 January 2024 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 6 of the package for the 31 January 2024 Board Meeting.**

## **3.0 EDUCATION**

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### **3.1 Quality & Culture Patient Experience Story**

Patient Stories bring experiences to life and make them accessible to other people. It allows the organization to focus on the patient as a whole person rather than just a clinical condition or an outcome. Patient stories are used in Quality and Culture Committee meetings, Children's Hospital Committee meetings and the Board of Directors meetings to allow patients to share their

experience using our services with the aim of understanding what the organization needs to do better.

This month a story came forward that highlighted missing items which is not an uncommon story but it shows efforts being made by many teams within the hospital to limit the number of items that go missing. A brief discussion ensued about the need to consider each individual's connection to an item that may go missing, given the various ways in which items hold value – monetary, sentimental, cultural etc.

## **4.0 REPORTS**

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### **4.1 CEO Report**

Dr. Chan deferred his report to the closed section of the board meeting.

### **4.2 Children's Hospital Committee**

Ms. Conley provided the members with a brief update on the December 13<sup>th</sup> Children's Hospital Committee meeting highlighting the patient experience which shows the importance of advocating for Children and making a difference. She also highlighted the development of Children's Hospital Quality Performance Indicators and the Enterprise Risk Management Report with a focus on Mental Health.

### **4.3 Governance & Transition Committee**

Mr. Marcus provided a brief update on the January 10<sup>th</sup> Governance and Transition Committee highlighting:

- Succession and Recruitment planning is well underway to support the identification of potential candidates for three board vacancies. Following a review of the Board Skills Matrix, the following skills were identified as priority areas for recruitment: IT, Community Relations and Public Relations, and Finance.
- It was noted that the committee will bring forward a recommendation to the board regarding the implementation of a Land Acknowledgement at board and board committee meetings, with a focus on passing the honour to each Director of the Board throughout the year.
- Committee is recommending continued use of the OHA Full Board evaluation tool for the upcoming year, in addition to an internal survey to assess board committees. It was noted that an overview of the proposed evaluation plan is contained within the consent agenda.

### **4.4 LHSC Research Committee**

Ms. Harrison provided a brief update on the December 13<sup>th</sup> Research Committee highlighting:

- Each meeting of the committee includes an education session to better understand best practices.
- The investment structure and policies are an area of focus as the committee provided oversight for various components that are connected to external partners. Ms. Harrison acknowledged the leadership contributions of Dr. Hill and Mr. C. Gosnell with the work currently underway to support the transition – noting that early fall is the targeted timeframe for dissolution.

A member brought forward a question about IP ownership. It was noted that this is an area for further discussion given known discrepancies that exist in the policies being used by various stakeholders, and the work being done by LHSC to develop its own policy for staff-led inventions.

#### 4.5 Quality & Culture Committee

Ms. Harrison provided a brief update on the December 13<sup>th</sup> Quality and Culture Committee highlighting the following:

- Each committee meeting includes a patient experience story - the December story was presented during this board meeting.
- The number of serious patient incidents were noted, recognizing a shift in timing of the review process. A member of the board commented on the increase in the number of reports which is also indicative of improved reporting practices among staff.
- Quality Improvement Plan indicators are being discussed and will come forward in March. It was noted that input from Patient Partners (received through various forums held) is an important element in the QIP discussions.
- Ambulance Offload times and the potential impact on patient flow, staffing concerns etc was discussed. Ms. Vandersluis noted that 90% of ambulance are released within 1 hr. of arrival at LHSC, which is in line with the primary goal of ensuring adequate availability of ambulances within the community. Work remains underway to track and monitor other metrics to ensure that the quality of care is maintained and that staffing levels are well aligned with patient flow. L. Harrison commended the team for its work in this area.
- The Chair has encouraged members of the committee to submit questions in advance of the meeting that may arise following a review of the board committee package. It was noted that the questions submitted provide useful information that may be leveraged when developing board orientation sessions. **ACTION**

A member brought forward a concern about the impact of the new ambulance offload performance metrics on other departments on staff workload and the emergency department. Leadership acknowledged the importance of monitoring the load level of care and providing the appropriate level of support to staff, to support the success of the care team and maintain the quality of care. It was noted that quality of care has not been negatively impacted. A process has been implemented to support the flow of patients from the ambulance, to the emergency department or a waiting room location where patients can be closely monitored by nursing staff and triaged appropriately. There is also work being done to ensure that staffing ratios are appropriate and that overtime is not relied upon.

#### 4.6 Resource & Audit Committee

Mr. Leitch provided a brief update on the January 10<sup>th</sup> and January 24<sup>th</sup> Resource and Audit Committee meetings highlighting:

- There were two meetings of the committee this month to better understand the financial position of LHSC at the end of Q3, as well as the process used by leadership to develop the budget. Mr. Leitch recognized leadership and noted that the additional meetings provided an opportunity for the committee to ask questions, and give feedback.
- A Special Resource and Audit Committee meeting will be held in March to review the budgets and bring them forward to the Board of Directors for approval.

- During the January 24<sup>th</sup> meeting an education session brought a better understanding of the challenges of moving patients through the system and the equipment needed to provide care.
- Health Human Resources data was presented; it provided information about vacancies and recruitment costs
- An update was given on the key milestones of the OneChart Phase II project
- Signing Authority Matrix and Travel Policies were discussed, and it was noted that both policies will be coming forward to a future Resource and Audit Committee meeting prior to moving forward for Board review and approval.
- PwC report noted a focus on the landscape of physical assets and deferred maintenance.

#### 4.7 Strategic Redevelopment Committee

Mr. Smith provided a brief update on the January 10<sup>th</sup> Strategic Redevelopment Committee meeting which monitors the Master Plan and Strategic Plan highlighting:

- The Master Plan is proceeding and on track. There have been meetings with the Ministry which is very optimistic.
- A timeline and Gantt chart outlining the strategic plan and how it connects with the operating plans.
- An update on the Health System Transformation came forward to this January 10<sup>th</sup> meeting which described the changes coming up in Ontario to adapt to the world and how it plays into LHSC's master and strategic plan.

#### 4.8 Professional Staff Organization

Dr. Mandzia updated the Board on a recent meeting in which the Credentialing Professional By-laws were discussed, and concerns were brought forward. The PSO is also developing terms of reference for the executive.

### **5.0 HEALTHCARE PARTNER UPDATES**

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#### 5.1 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. An announcement took place on Monday, January 29<sup>th</sup> where a transformational gift of \$5M was donated by Dieter and Lyse Jahnke. The transformational gift will be used to launch the Jahnke Family Paediatric Oncology Centre of Excellence.

#### 5.2 London Health Sciences Foundation

Ms. Brown provided a financial update; noting several gift announcements and community events. A presentation on the findings of the Fundraising Campaign between CHF and LHSF will be presented to stakeholders next month.

A patient story show casing the gratitude expressed by a family was highlighted.

## **6.0 CONSENT AGENDA**

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### **6.1 Minutes of Previous Meeting – 29 November 2023**

### **6.2 Board and Committee Evaluation Plan**

## **7.0 WRITTEN UPDATES**

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The following documents were entered into the record:

7.1 Children’s Hospital Committee Internal Landscape

7.2 LHSC Research Committee Internal Landscape

7.3 Quality & Quality Committee Internal Landscape

7.4 Resource & Audit Committee External Landscape

7.5 Strategic Redevelopment Committee External Landscape

## **9.0 ADJOURNMENT**

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The meeting was ADJOURNED by GENERAL CONSENT.

Recorded by:  
L. Shanahan