MEETING MINUTES
OF THE
BOARD OF DIRECTORS

Held, Wednesday, September 30, 2020 @ 1500 hours
By videoconference and teleconference

Board Members Present by Teleconference:
Mr. J. Brock, Ms. L. Conley, Ms. K. Haines, Mr. L. McBride, Mr. K. Ross, Ms. A. Walby (Chair), Mr. B. Woods, Ms. C. Young-Ritchie (xo), Dr. S. McKay (xo), Ms. R. Choja, Mr. T. Marcus, Mr. M. Wilson, Mrs. R. Robinson, Dr. Woods (xo), Ms. P. Retty, Mr. M. Hodgson, Mr. J. Wright, Dr. S. Pandey

Board Member Regrets:

Healthcare Partners: R. Mikula, E. Johnson, J. Batch, G. Kernaghan, Dr. Yoo

Resource: T. Eskildsen

R- Regrets

1.0 CALL TO ORDER

The meeting was called to order at 3:00 p.m.

The Chair brought the group's attention to the conflict of Interest policy and reviewed that if members felt that they or someone else was in conflict to raise it now or at the time of the item. The values-based decision-making tool is on every agenda and is meant to assist as the Board deliberates on decisions.

1.1 Patient Experience

The Chair provided an overview of the patient experience that was shared. The Board remains deeply interested in patient experiences as they often prompt process changes, learning and allows the Board of Directors to reflect on their role within the organization.

2.0 REVIEW of AGENDA

2.1 Review of Agenda

The agenda was review and APPROVED by GENERAL CONSENT.

3.0 PRIORITY AGENDA

3.1 Q1 Balanced Scorecard

Dr. Woods provided an overview of the Quarter 1 Performance indicators, highlighting that it is difficult to tell in quarter one the success factors as the response to the pandemic did have some effect on some initiatives during that time. Dr. Woods further highlighted the people dimensions that the organization is now collecting data on different wellness indicators. The discharge summaries were identified as improving noting that some processes have been implemented to remove any barriers to meeting the indicator. It is expected that the result may exceed the target by the end of the fiscal period. Length of stay discussion ensued on false belief about readmission increases when patients are discharged before or at 72 hours. Work has been ongoing to assess if readmissions can be prevented

by ensuring that patients are prepared and feel prepared return home. There was further discussion on the need for the continuum of care to be fluid (care supports, navigators, etc)

3.2 Strategic Planning 2020/21 Q1 Reporting

Dr. Woods provided a summary on the strategic initiative report highlighting some of the initiatives that were put on hold due to the hospital's response to the pandemic and others that did continue. It was highlighted that as individuals that were deployed are now returned to their regular roles clinical documentation and data collection will be back on track.

It was highlighted that Governance Committee will be looking at how the Board currently engages in strategic planning and will be looking at ways to improve governance effectiveness.

4.0 RECOMMENDATIONS/REPORTS

4.1 Chair's Report

The Chair welcomed the Board to the new term. The Chair of the Board acknowledged September 30th as 'Orange Shirt Day". Orange Shirt Day is an event, created in 2013, designed to educate people and promote awareness in Canada about the Indian residential school system and the impact it has had on Indigenous communities for over a century.

The chair highlighted that the Staff Memorial is planned for October 7, 2020 and has requested a volunteer to make a small presentation on behalf of the organization in her place. Please let Amy or Tammy know if you are available.

Paul Woods facilitated Phase II Orientation and Finance and Audit Phase III due to the amount of content have been recorded and are available on the Governance website under resources for those that were unable to attend or wish to go back and review a portion of orientation.

4.2 CEO Report

Dr. Woods submitted his report into record and provided an overview as to where the organization is and the issues being addressed by Leadership currently. It was highlighted that the organization and its people performed in an exemplary fashion during the height of the response to the pandemic but it was recognized that the level of resilience and toughness does take its toll and LHSC's people are being encouraged to take some time where they can to recharge. The structure of the organization has matured through the pandemic preparedness and Dr. Woods feels that it will run well for Wave II.

The triple and quintuple aim of an organization leading to health system transformation through leadership was discussed briefly. Dr. Woods highlighted health system news and regional updates.

There was a brief update on Strategic Planning and that new approaches moving forward under an iterative agile methodology which follows a lean approach to the work.

4.3 Finance and Audit Committee

Mr. Hodgson highlighted the September meeting including that the organization is currently running a deficit of $26 million as of June 30, 2020. Main reasons highlighted included QBPs revenue reduction, other revenue reduction and increased expenses of the response to COVID. It was further reported that the pandemic has put pressure on many areas of the organization. In response to a question on the Government continuing to flow funding to the hospitals and concerns raised about our professional staff partners, it was noted that physicians under the fee for service approach did experience a reduction of income, but resources did flow in advance for future billings to support them. There was no noticeable change to physicians on an alternate funding mechanism. Dr. Yoo, did highlight that the physicians did carry on with taking call, continuing the teaching assignments and it was acknowledged that there needs to be an alternate way to pay physicians.

4.4 Children's Hospital Committee
Mr. Ross highlighted that September was also first meeting of the Board term for the Children's Hospital Committee and provided highlights to the work of the committee including review of indicators and an update on pandemic preparedness and work to look at process-based changes as a permanent situation. Mr. Ross highlighted an attached performance report as a compelling document that the Board of Directors should take time to review.

4.5 Medical Advisory Committee
Dr. Scott McKay provided a brief overview of the work ongoing for Medical Advisory Committee highlighting the discussions at the last meeting including virtual care, influenza campaign and a new physician lead.

4.5.1 *Credentialing Orientation*
Dr. Sischek reported that the slide deck was in the package and spoke to the process that the two organizations undergo to credential the 1300 physicians, midwives, dentists in the city that make up the Professional Staff of the two organizations. There was a brief overview into the aspect of disciplinary action.

4.5.2 New Appointments to Professional Staff
The Board of Directors APPROVED by GENERAL CONSENT the Professional Staff new appointment to the London Health Sciences Centre.

4.5.3 *Changes to Professional Staff Appointments*
The Board of Directors APPROVED by GENERAL CONSENT the Changes to the Professional Staff appointments.

4.5.4 *Clinical Fellow Appointments*
The Board of Directors APPROVED by GENERAL CONSENT the new Clinical Fellow Appointments.

4.5.5 *Reappointment Professional Staff*
The Board of Directors APPROVED by GENERAL CONSENT that the September 2020 Professional Staff application for re-appointment.

4.5.6 *Recommendation Interim Chief, Oncology*
The Board of Directors APPROVED by GENERAL CONSENT that upon receipt of a signed letter of offer, the appointment of Dr. Karin Hahn as the Interim City-Wide Chief of Oncology effective October 1,2020 to March 31, 2021 or until such time as a new chief is appointed, whichever comes first.

4.5.7 *Expedited Credentialing Process Update*
Dr. McKay highlighted that as part of the activation of the expedited credentialing process, it was required to be reviewed every 90 days. At the MAC, it was maintained that while it is currently not being used for regular credentialing process, that it may be required to bring professional staff on board in an expedited manner.

4.6 People and Culture Committee
Ms. Choja provided an update on Ms. Robinson's behalf noting that orientation occurred. People and Culture's pandemic update was reflective of the wellness survey activities as well as leadership carefully watching and encouraging staff to recharge. A discussion on the continued work on staffing to align approaches to scheduling staff to work to ensure that staff were taking time to recharge. There were other items of discussion with respect to the Governments approach to pandemic pay and the search for a Chief communication Officer for within Susan Nickle's portfolio.

There was a review of the corporate communication plan which is in the Board of Director's package today for review.

4.7 Governance Committee

Ms. Retty provided an overview of the Governance Committee work highlighting the new work to online learning. We did the usual the workplan. The committee also had a preview the phase I orientation on line that was developed by Ruthe Anne Conyngham to develop some resource materials to support the current restrictions on the learning environment.

4.7.1 *Vice Chair, Children's Committee*

The Board of Directors APPROVED by GENERAL CONSENT that Lisa Conley be appointed as Vice Chair of the Children's Hospital Committee.

4.7.2 *Affiliation agreement LHSC/Western*

Ms. Retty reviewed the discussions of the committee with respect to the Affiliation Agreement between LHSC and Western, reporting that it is a one-year agreement and that additional work on the research elements and further amendments to be considered will be ongoing over the next 12 months. This agreement will be before the Board again in 2021. The small amendments that were made to this agreement were discussed and it was noted that the Committee members supported this recommendation.

The Board of Directors APPROVED by GENERAL CONSENT the London Health Sciences Centre/Western University Affiliation Agreement for the period of one year beginning October 1, 2020 and ending September 30, 2021 with amendments as noted.

4.8 Quality and Performance Monitoring Committee

Mr. McBride highlighted the components of the QPMC meeting and noted that members of the committee shared their patient experiences both one that was positive and one where there were opportunities to improve in approach based on the new systems of communication during the pandemic.

Ms. Young Ritchie provided a robust orientation and there was a focused discussion on never events and critical incidents at the meeting.

5.0 HEALTHCARE PARTNERS/BOARD REPORTS

5.1 Professional Staff Organization

Dr. Pandey briefly highlighted that clinical care continues at an unrelenting pace and there is nothing to report from the Professional Staff Organization as they have only just started to meet this term. However, it was noted that the awards that the PSO sponsor sends physicians around the world were initially limited but that there have been in recent weeks virtual offerings where there weren't any offerings previously have come to the attention of the PSO and there may be some opportunities for our colleagues to further their careers in a virtual environment.

5.2 Western University

Dr. Yoo provided an overview of the anti-racism work group and a recent retreat. The newly developed Research and Education council of LHSC was acknowledged. Schulich School of Medicine and Dentistry have created a new decanal structure to achieve excellence and differentiation by creating an enhanced leadership structure that supports and emphasizes the things that matter to the University. Two new Vice Dean roles have been created. Education Strategy and Scholarship and Education Strategy and Scholarship.

5.3 St. Joseph's Health Care, London

Mr. Batch provided an overview of the work of St. Joseph's noting that their first meeting of the new term occurred recently. The approach to meeting in the new virtual platform and the work ongoing for members to participate in an open and generative manner was discussed. The importance of being

able to support the new members has been a focus and highlighted that the content of their first meeting was similar to LHSC's meeting.

The St. Joseph's Board of Directors is very proud of the work of leadership in a VUCA environment (volatility, uncertainty, complexity and ambiguity).

Western University and St. Joseph's have partnered to establish the William and Lynne Gray Research Chair in Mobility & Activity within Western's Faculty of Health Sciences supported by the St. Joseph's Foundation. The Chair is the first of its kind in Canada. It will play a central role in the Faculty's signature research theme of Mobility and Aging, which aims to understand, improve, restore and manage mobility outcomes that affect people throughout all stages of life.

The approval of the voluntary integration of Adolescent mental Health beds and looking forward to creating a new collaborative mode for our region.

Research as resumed and it was noted that over forty new COVID related research projects underway.

5.4 Lawson Health Research Institute

Mr. Wright discussed that the report was in the package and that Lawson had their first meeting on September 29, 2020 and there was discussion at the Board meeting about the impacts of COVID on the hospital and research.

5.5 London Health Sciences Foundation

Mr. Mikula noted that while some events have been cancelled others have continued to do well (ie Showdown in Downtown and Dream Lottery). It was highlighted that the Dream Lottery was able to raise $2.7 million.

5.6 Children's Health Foundation

Ms. Johnson provided highlights of the Children's Health Foundation noting that it was heartening to see how the community has been trying and continues to try to bring their support to the hospital through the Foundation. The Stand by Me initiative did very well and provided a rallying point for donors in this unprecedented environment. Many customer facing campaigns (Miracle Treat Day, Sobeys donnations, etc.) have been very successful. Many of Children's Health Events have also been deferred to the fall of 2021 or cancelled. The Foundation staff and Board continue to explore new opportunities to supporting that critical and excellent work of the hospital.

6.0 CONSENT AGENDA

The chair opened the floor for any Director to consider any of the approvals under a separate item. There were no requests to move an item to open session noted.

The Board of Directors APPROVED by GENERAL CONSENT the items within the Consent Agenda found on page 197 to 202.

6.I Board of Directors Minutes—September 30, 2020.

6.2 Finance and Audit

6.2.1 Audited Ministry of Health and Long-Term Care Reports

6.2.2 2019/20 Ministry of Children and Youth Services Emergency Child Psychiatry on Call Transfer payment

7.0 ADJOURNMENT

The meeting was ADJOURNED by GENERAL CONSENT.

Recorded by
T. Eskildsen

_____
A. Walby, Chair
Board of Directors