

Meeting held on September 28, 2021 At 1200 hours via Zoom

#### 1.0 WELCOME & INTRODUCTION

John Tobin, Chair of the Board of Directors, welcomed members and invited guests to the meeting and called the meeting to order at 1200H. It was confirmed that there was a quorum. J. Tobin asked whether there were any conflicts and no new conflicts were declared.

# 2.0 Approval of Previous Minutes

The minutes from the Board meeting held on June 22, 2021, regular Board meeting and Purpose of Election meeting were approved as pre-circulated.

#### 3.0 UPDATE FROM BOARD CHAIR

## 3.1. Update from Board Chair

John Tobin made a few introductory comments, outlined the structure of the meeting and provided an overview of the agenda items brought forward for discussion and approval. J. Tobin shared with meeting participants that Board and hospital leadership are considering the possibility on switching back to meetings in person during this Board year. J. Tobin advised the Board that Dr Carmine Simone has recently joined hospital's Executive team after being appointed Vice President, Medical, and provided a high level update with regards to recruitment process for the Chief of Staff role.

## 3.2. COVID-19 Update

Dr Jeff Powis, Medical Director, Infection Prevention and Control, joined the Board meeting and provided a presentation with the COVID-19 Update. The presentation included the dynamics of the number of cases, hospital admissions and number of patient in ICU among unvaccinated individuals vs fully vaccinated ones. Dr Powis outlined forth wave predictions and shared with the Board that the case count is expected to increase but hospitalization numbers won't be as high as during wave 3. Dr Powis also noted that booster doses will be offered to those with immunosuppression and congregate setting seniors, it is also anticipated that vaccination of 6-11 year old kids will start late 2021 or early 2022. Vaccination dashboard was presented to the Board and Dr Powis provided an overview on COVID testing and clinical outreach strategy as well as paediatric planning, including a new dedicated paediatric space at the Emergency Department.

#### 4.0 ITEMS REQUIRING APPROVAL

# 4.1. Nominating Committee Update

A briefing note pertaining to the appointment of a new Board director was pre-circulated with the agenda package. Andrew Steele, Chair of the Nominating Committee, referred to the pre-circulated materials and reiterated that the Nominating Committee met several times in April and June 2021 and reviewed the submitted applications. The Committee compared skills and competencies of applicants vs the gaps in Board skill matrix and conducted interviews with the selected candidates. The Committee unanimously agreed to recommend Leah Myers for Board approval to be appointed for the first three year term. A. Steele asked Board members if they had any questions and requested a motion to approve L. Myers appointment to the Board.



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# 4.2. Finance & Audit Committee Update

## 4.2.1 Debt Financing Approval

A briefing note regarding debt financing approval was pre-circulated with the agenda package and the requested detailed motion was presented on the screen. Catriona Read, Chair of the Finance & Audit Committee, referred to the pre-circulated materials, asked if there were any questions and requested the approval as per the presented motion.

## 4.2.2 Establishing a Women's Withdrawal Management Centre

A briefing note pertaining to establishing a Women's Withdrawal Management Centre was pre-circulated with the agenda package. C. Read referred to the pre-circulated briefing note, asked Board members if they had any questions and requested a motion as per the briefing note.

# 4.2.3 Update on the Financial Position

A briefing note outlining the Hospital's financial position including statement of revenue and expense was precirculated with the agenda package. S. Chow asked directors if they had any questions and none were brought forward. The Board thanked MGH Finance team for working hard on the debt financing initiative.

## 4.3. Governance Committee Update

#### 4.3.1 Approval of Board Goals for 2021-2022 Board Year

A briefing note regarding the annual Board goals and the Board Goals for 2021-2022 Board year were precirculated with the agenda package. Scott McDonald, Chair of the Governance Committee, referred to the precirculated materials and requested a motion to approve the Board goals as presented by the Governance Committee.

# 4.3.2 Approval of the Revised Signing Authority Policy

A briefing note regarding the approval of the Revised Board Signing Authority Policy and the updated D12 Board Policy to reflect the changes to section 6 of the hospital Signing Authority Policy were pre-circulated with the agenda package. S. McDonald referred to the pre-circulated materials and noted that the proposed changes include reference to the new role of Chief of Redevelopment and if approved will make the Board policy aligned with the administrative Signing Authority policy.

## 4.3.3 – 4.3.4 Board Evaluation results and HR Committee Review

A briefing note pertaining to Board evaluation results and HR Committee discussion was pre-circulated with the agenda package. S. McDonald referred to the pre-circulated briefing note and reiterated that the Governance Committee reviewed the Board evaluation results and following the feedback from directors agreed to further explore with respect to striking a HR Working Group. Discussion ensued. Directors proposed to change the name of the working group and set it up as People and Culture Working Group.



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# 4.4. Performance Monitoring and Quality Committee Update

## 4.4.1 Approval of the Mandatory Vaccination Policy

A briefing note regarding the approval of the Mandatory Vaccination Policy together with the draft policy were pre-circulated with the agenda package. Dr Moez Rajwani, Chair of the Performance Monitoring and Quality Committee referred to the pre-circulated materials and asked Phil Kotanidis, Chief HR Officer, to provide an overview of the proposed policy. P. Kotanidis shared with the Board that MGH is implementing the Mandatory Vaccination Policy for staff, physicians and volunteers in accordance with Directive 6 by Ontario Government. Hospital management is working with other TAHSN hospitals to establish protocols for implementing the policy for staff, vendors and contractors while accommodating medical exemptions. It is planned to launch the policy effective November 4, 2021.

# 4.4.2 Critical Incident Report

On a request of Dr Rajwani, Chair of the Performance Monitoring and Quality Committee, Dr Ian Fraser, Chief of Staff, walked the Board through the Critical Incident Report. Dr. Fraser referred to the pre-circulated meeting materials and provided a high level overview of the most recent critical incident including a number of contributing factors and the action plan and immediate mitigation steps related to this incident. The summary of critical incidents and never events for 2020-2021 was pre-circulated as well.

# 4.5. MAC Decision Items: MAC Recommendations for Medical Professional Staff Appointments

Dr. Ian Fraser referred to the pre-circulated briefing note regarding MAC decision items and advised the Board that MAC recommendations fall into three categories: 1) endorsement of the Mandatory Vaccination Policy; 2) appointment of the new Head of Division of Plastic Surgery; and 3) clinicians appointments and privileges, assured the Board that the credentials of the physicians brought forward for approval have been thoroughly checked and requested a motion to approve the appointments as listed in the briefing note.

## **5.0 Discussion Items**

# 5.1. <u>Update from CEO</u>

Sarah Downey, President and CEO of Michael Garron Hospital, referred to the CEO report submitted to the Board and provided a high level overview of some of the items from the pre-circulated update. She thanked the Board of Directors and Board Leadership for continued support. S Downey reiterated that MGH will be celebrating the National Truth and Reconciliation day on September 30 and invited the Board to attend the pipe ceremony led by Elder Little Brown Bear.

## 5.2. <u>Update from Chief of Staff</u>

Dr lan Fraser, Chief of Staff, referred to the pre-circulated Chief of Staff Report and reiterated a couple of items from the report. He shared with the Board that he would like to draw Board's attention to the fact that quality of patient care changed during the pandemic and all the Ontario hospitals experience significant staff shortages which may result is less patient satisfaction.



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## 5.3. Redevelopment Committee Update

A briefing note with the update on the Redevelopment Project was pre-circulated with the agenda package. Doug Farley, Chair of the Redevelopment Committee and David Cunic, Vice President, Redevelopment, referred to the pre-circulated report and provided an update with regards to the Redevelopment project sharing with the Board that overall the project is going well and MGH and Ellis Don site teams continue having great relationship. D. Cunic outlined at a high level the COVID claim situation and recruitment efforts to fill in significant gap in IT resources.

Next, Project Imagine update has been presented to the Board. Mark Fam, VP Programs, provided an overview of the project vision with the main focus on delivering exceptional quality care. M. Fam shared with the Board how the model of care assumptions were incorporated into space projections. The update from the Real Estate Working group was brought forward for discussion as well. Hospital management answered the questions raised by the Board.

#### 6.0 CONSENT

John Tobin, Chair

The Consent items were presented for information and included:

## 6.1. Report from the Governance Committee

A Briefing Note with the Governance Committee update was pre-circulated with the agenda package.

# 6.2. Report from the Performance Monitoring and Quality Committee

A Briefing Note with the Governance Committee update was pre-circulated with the agenda package.

## 6.3. Report from the Board of MGH Foundation

The September 2021 report from the Board of MGH Foundation was pre-circulated with the agenda package.

# 7.0 MEETING WITHOUT MANAGEMENT (ELECTED DIRECTORS ONLY) An in-camera meeting was held by the elected directors. 8.0 CONCLUSION There being no further business to discuss, the meeting was concluded at 1345 hours. Date of future meetings: November 23, 2021.

Olga Grigorovskaya, Recorder