### Holland Bloorview Board of Directors Meeting Minutes Wednesday, October 27, 2021 6:00 p.m. to 8:00 p.m. ZOOM

#### Attendance

**Present:** Marg Rappolt, Chair; Poonam Puri, Vice Chair; Catherine Wood, Secretary; Allyson Whyte Nowak, Treasurer; Alycia Calvert; Carol Cowan-Levine; Laura Dottori-Attanasio; Julia Hanigsberg; Andrea Hoffman; Suzanne Jorisch; Alice Keung; Jean Lam; Golda Milo-Manson; Dale Ponder; Jennifer Quaglietta; Lisa Robinson; Catherine Roche; Neil Selfe; Michael Wasserman

*Sr. Management:* Tom Chau; Enza Dinino; Sandra Hawken; Tracey Millar; Bohodar Rubashewsky; Diane Savage; Meenu Sikand; Stewart Wong

Guest: Christine Chambers; Emily Gruenwoldt; Lisa Wolff; Sarah De La Rue

Regrets: Irene Andress

Recorder: Poppy Harpula

#### 1. Call to order

M. Rappolt, Chair, called the meeting of the Holland Bloorview Kids Rehabilitation Hospital Board of Directors to order at 6:00 p.m.

#### Chair's remarks

M. Rappolt, began the meeting with a Land Acknowledgment. She recognized and congratulated J. Quaglietta, J. Hanigsberg, M. Wasserman and P. Puri on their respective appointments and awards. M. Rappolt recognized the entire Holland Bloorview team for exceptional accreditation results and thanked board colleagues for making #HBStrong day happen for staff.

#### Approval of agenda

The Chair requested approval of the agenda as pre-circulated.

MOTION: It was MOVED by Alycia Calvert, and seconded by Poonam Puri that the Board of Directors approve the agenda.

#### Calvert/Puri

#### CARRIED

#### **Disclosure of Conflicts of Interest**

The Chair asked whether anyone wished to declare a conflict of interest on any of the items slated for discussion at this Board meeting, and there were none.

#### 2. Discussion Agenda

#### 2.1 Board Education: Inspiring Healthy Futures

C. Chambers, E. Gruenwoldt and L. Wolff shared a slideshow on the purpose, process, guiding principles, key findings and priorities for systemic change within the Inspiring Healthy Futures initiative. Directors appreciated the information and data provided as some were unaware of the child poverty statistics. The Inspiring Healthy Futures team noted the importance of health professionals speaking on

investments in social determinants and having balanced conversations on life cycle to include children. The Children's Welfare League of Canada and youth in care have been engaged in the process and planning of the initiative. The team shared that change is measured utilizing the UNICEF report card as a tool. Overall, the team emphasized that advocacy with government officials is key to seeing the priorities implemented within the health system. M. Rappolt thanked the team for their time in providing an insightful education session.

# 2.2 Caring Safely

## 2.2.1 Debrief on Accreditation Canada survey

J. Hanigsberg reflected that the accreditation team were thoughtful about moderating their expectations during preparations, evident that a deep consciousness of quality and safety is embedded into the hospital's work and is assured from a clinical risk that the hospital is beyond the minimum quality and safety requirements. D. Savage reflected that becoming accredited demonstrates a commitment to continually improving quality and safety and to reducing all avoidable harm. For the third consecutive accreditation survey the hospital has earned a result of 100% compliance which is a first for any hospital. This covers a 12 year time frame where there is new staff, changes in leadership, changes in standards and during a pandemic where it has been a challenging couple of years. D. Savage noted some of the strengths the surveyors highlighted: continuing to embed people and family centered care through the hospital and sharing this work externally, calling out the presence of equity focused conversations in many of the teams, board of Directors' commitment and passion for the hospital and the depth and breadth of our strategic partnerships. D. Savage shared some of the opportunities which is to continue to reach out to underserved populations, invest in formalizing client flow strategy and processes and staying focused on health and human resources and the well-being of staff. The Directors agreed with J. Hanigsberg and D. Savage's reflections and appreciate the transparency and continuous improvement on safety. D. Savage also mentioned that an area of improvement would be the hospital's emergency management system and plans to bring consultants to assist in aligning with system partners. M. Rappolt thanked D. Savage. S. Peacocke and L. Oxenham-Murphy for all of their work.

## 2.2.2 Safety Story

G. Milo-Manson shared a story about a client and their experience during the pandemic. The client was scheduled for an appointment but declined both virtual and in person times. With some continued communications, the family shared they could not afford the transportation. The Foundation introduced a transportation fund and the family were able to make it to an in-person appointment. G. Milo-Manson found that this family had other risk issues such as food insecurity, challenges with furniture sanitization and a safe home. Through her continued relationship with the client, she was able to support the client with food cards, respite and new mattresses and eventually a safe place to live. The Directors thanked G. Milo-Manson for the authentic, detailed story and for advocating for children and youth.

## 2.2.3 IDEA update: Building Capacity for Health Equity

D. Savage shared a slide show on integrating social determinants of health at point of care. She highlighted that various teams within the hospital are working together on interventions to reduce the negative impacts of social determinants of health. Teams are working toward embedding an equity orientation in all program design and policy that is leading to shifts in care. Organizational data collected helped inform more meaningful access and connection to existing and new services, shifting resources to address short and longer term needs and incorporating the opportunity for easier access to support based on social needs conversations for everyone we serve. One aim is to develop and implement a systemic approach to screening and addressing social determinants of health across the hospital's program and services through: 1) An evidence-based Social Needs Screening Tool to identify

client/family social needs and level of urgency and 2) develop internal action pathways to a new service called the Family Navigation Hub, providing interventions to link families to supports and resources. The purpose of the tool is to help clinical/non-clinical staff consider the social determinants of health when determining which clients and families should be granted priority access to hospital services, complement existing prioritization criteria and asks 18 questions across three domains of need (financial, medical, social) to prioritize respondents into one of three categories. 30 screens have been completed so far and 16 have identified needs that unaddressed would impact access to care and ability to support treatment and overall goals. Directors noted the tool truly addresses collecting meaningful information and is a real approach to improving access. And hopes it could be shared with other organizations in the future.

## 2.2.4 Quality Committee Report

C. Cowan-Levine gave a report of the Quality Committee September and October meeting. She drew attention to the quarterly performance report and noted that performance for the overall client experience indicator achieved the highest rating in three years, particularly notable in a pandemic. C. Cowan-Levine also highlighted the Project Inclusion: Ontario Educator Learning Modules where Holland Bloorview together with the Bloorview School Authority led the development process with contributions from over 300 stakeholders that included current and former students with disabilities, parents of children with disabilities, educators and community agencies. The modules are expected to be disseminated in November 2021 through school board and other professional organizations.

## 2.2.5 Medical Advisory Report

G. Milo-Manson asked whether anyone had any questions or comments on the medical advisory report, and there were none.

# 2.3 Foundation Report

S. Hawken highlighted the closing of the BRI Growth Strategy \$32,000,000 fundraising campaign in October, thanked Directors who sponsored the Evening of Possibility and shared the launch of the Capes for Kids "kid captain" program to enhance corporate team experience.

## 2.4 President & CEO Report- September 2021

## 2.4.1 Update on COVID-19 current status and planning

J. Hanigsberg referred Directors to her written report and highlighted that 99% of Holland Bloorview employees are fully vaccinated and in partnership with Toronto Public Health the hospital hosted a vaccine clinic in October and will have another one in November emphasizing that children aged 12-17 years were under vaccinated. J. Hanigsberg shared her work at the CEO COVID-19 recovery table she sits on and that children are being left behind in the conversations. They are advocating for a wraparound set of services and an integrated pathway for children with comorbidity and complex needs. Directors commented on the Working for Workers Act that was just introduced and J. Hanigsberg shared that the Ontario Hospital Association will develop advice for the sector and Holland Bloorview waits for their guidance. M. Rappolt paid tribute to I. Andress's nursing team and the awards they received and thanked J. Hanigsberg for the time she spends with colleagues, system partners and government officials.

## 3.0 Consent Agenda

The Chair noted the following items under the Consent Agenda requiring Board approval.

3.1 Minutes of Board Meeting September 29th 2021

A MOTION to approve: It was MOVED by Alycia Calvert and seconded by Suzanne Jorisch that the Board of Directors approve the Consent Agenda.

Calvert/ Jorisch

CARRIED

### Adjournment

M. Rappolt noted the Executive Committee will be meeting with the Business & Audit Committee in a closed joint meeting on November 19, 2021 to approve a decision regarding a legal claim and mediation strategy.

There being no further business for discussion, the meeting was adjourned at 8:00 p.m.

Marg Rappolt Chair, Board of Directors :ph