

Holland Bloorview Board of Directors Meeting Minutes
Wednesday, January 22, 2025
5:30 p.m. – 8:00 p.m.
Holland Bloorview, 150 Kilgour Rd., Toronto ON
5th Floor Executive Boardroom – Room: 5E100

Attendance

Present: Irene Andress; Alycia Calvert, Treasurer; Michelle Caturay; Jonathan Davey; Megh Gupta; Julia Hanigsberg; Helen Hayward, Secretary; Sarah Kramer; Alysha Ladha; Jean Lam; Rhonda McEwen; Golda Milo-Manson; Ivona Novak; Jennifer Quaglietta, Vice Chair; Catherine Roche, Chair; Suzan Schneeweiss; Paul Spafford; Michael Wasserman, Heather Watt

Sr. Management: Evdokia Anagnostou; Enza Dininio; Joanne Maxwell; Tracey Millar

Regrets: Sandra Hawken; Stewart Wong

1.0 Call to order

Chair's remarks

The Chair, C. Roche called the meeting of the Holland Bloorview Kids Rehabilitation Hospital Board of Directors to order at 5:30 p.m. She welcomed everyone to the first board meeting of 2025 and expressed thanks to the coordinators for organizing today's meeting.

J. Maxwell, Vice President, Experience Transformation and Social Accountability presented a land acknowledgment with reflection on colonization - the displacement of indigenous communities, the seizure of indigenous lands and the purposeful destruction of the indigenous languages, traditions and culture over time. Emphasizing the endurance and resilience of the indigenous culture and traditions and their deep connection to this land, J. Maxwell expressed that personally, and we as a collective have a responsibility to honour the people and civilization who took care of this land before us.

The call to action was for all to seek opportunities to support decolonization by building real and authentic relationships with indigenous people in ways that demonstrate accountability to treaty relationships.

1.1 Approval of agenda

The Chair then requested approval of the agenda.

MOTION: It was MOVED by Jennifer Quaglietta, and seconded by Michael Wasserman, that the Board of Directors approve the agenda as pre-circulated.

Quaglietta/Wasserman

CARRIED

1.2 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.

1.3 Board Education: Learning Health System

As an introduction, J. Hanigsberg informed the Board that today's board education on Learning Health System (LHS) is an opportunity to provide an update on our commitment to becoming a LHS as one of the key objectives in the care that's agile goal in Holland Bloorview's strategic plan. Today's education session is to provide the board with a current status update on where we are, where we plan to invest our resources and to seek the Board's input.

I. Andress, Vice President, Programs and Services and Chief Nursing Executive, and executive lead for the LHS priority, walked the Board through the process to date from the initial year of discovery and on-the-ground demonstration projects indicating the steps taken to arrive at our current position. The presentation focused on the 2024-2025 year in review achievements, lessons learned and next steps.

N. Lise Tanel, Senior Director, Communications and Strategy offered an overview of our demonstration projects which included Extensive Needs Services (ENS) and Employment Pathways which are both uniquely resourced and uniquely positioned within the organization. Going forward, the organization will need to continue to advance LHS expertise both specialized and across all members of the staff.

Next steps include continuing to operationalize the LHS by building opportunities for learning and development with existing staff from frontline to leadership as well as clients and families.

Questions were raised and discussion held on having the capacity to address bias in data and whether the required resources (investment, capability, time) are in place to be successful. Reference was made to the operating planning process.

2.0 Discussion Agenda

2.1 Caring Safely Update

2.1.1 Safety Story

Andress commented on a safety story of managing a high-risk incident relating to an agitated inpatient. This was a no-harm incident, but it provided an opportunity for us to consider how to better enhance our safety plan not just for clients but also to ensure that our safety codes process is robust and used by staff for their safety and how we put guardrails around students. This has also prompted us to look at multiple practices with respect to brain injury patients.

2.1.2 Quarterly Performance Report

J. Maxwell presented the quarterly performance report for Q1/Q2 highlighting items from the four quadrants. She highlighted several metrics for Board discussion. For Caring Safely 100% of families felt involved/engaged in the discharge process. Team Experience, 83% of students would

recommend a placement at Holland Bloorview. Operational Excellence, target for number of in-patient days were not met but there was some improvement in Q1.

The report portrayed strong ambulatory attendances for both Q1 and Q2 resulting from enhanced clinical positions through Make Kids Count. For Neuromotor Services/Therapy Median Wait Time for a number of therapy services, the target wait time is 100 days, we were slightly above that at 105 days in both Q1 and Q2. Sociodemographic data collection, Q2 did not meet target but data has only been collected since January, the hope is with consistent collection this target will be reachable going forward.

In response to a question regarding factors that may influence higher client satisfaction J. Maxwell advised that additional quarters of data could help to determine the correlation.

2.1.3 2025 Accreditation Update

J. Hanigsberg referenced the briefing note for the 2025 Accreditation Update circulated as part of the Board meeting materials. The Board was advised that in the past, organizations were permitted to use their employee engagement surveys as the basis for evidence related to employee quality culture. Accreditation Canada (AC) is mandating a new tool that it administers directly to employees called the Global Workforce Survey. This survey is made up of AC developed questions including socio-demographic questions, does not provide data analytic capacity for organizations and does not enable year over year comparability with prior administered surveys. There has been considerable discussion of this new tool by the CEOs of the Toronto Academic Health Science Network (TAHSN) and the President and CEO of Accreditation Canada has attended a TAHSN CEO meeting to receive feedback.

As part of the 2025 accreditation cycle, AC requires the Board of Directors to complete a Governing Body Assessment (GBA) Survey Tool which will be administered by Health Standards Organization (HSO) and not by Holland Bloorview (HB). A link for the GBA survey as well as a guidance document will be provided by Holland Bloorview to support board members in completing this survey.

2.1.4 Quality Improvement Plan

J. Maxwell provided an overview of the Quality Improvement Plan (QIP). Continuous monitoring of performance relative to targets for 2024/25 is on-going. Proposed indicators will be presented at the March 26, 2025 Board of Directors Meeting following approval and recommendation by the Quality Committee.

2.1.5 Medical Advisory Committee Report

G. Milo-Manson provided the Medical Advisory Committee report for October and November and confirmed that this report has been approved by the Quality Committee. A large number of medications were administered with no harm associated and infection control mimics what is seen in the community.

In looking at good catches, G. Milo-Manson referenced one client incident in which an appointment reminder was sent to a client via text which is a new system that is being rolled out at Holland Bloorview. In an attempt to support the family versus the family coming into the hospital, a speech pathologist agreed to meet the family and the school team at the client's school. The client's mother received the reminder and saw that the appointment was being held off-site and interpreted that to mean that this was a home visit and kept the child at home.

Lesson learned from this incident is, the importance of communicating specific appointment details. Since then, our process has been revised to implement changes to avoid this type of incident going forward.

2.2 Financial Reports

2.2.1 Financial Statements as of September 30, 2024

E. Dininio provided a funding update and referred directors to the financial statements and variance report briefly highlighting key areas of the financial statements as of September 30, 2024.

In looking forward to Q3, E. Dininio informed the Board that the hospital has received funding from the Ministry of Health to address compensation pressures related to Bill 124; more information will be provided to the Board in the Q3 reporting period. Operating position for Q2 ended in a deficit position, yet in a better position than budgeted.

MOTION: It was MOVED by Megh Gupta and seconded by Paul Spafford that the Board of Directors approve the Financial Statements as of September 30, 2024, as presented.

Gupta/Spafford

CARRIED

2.3 KidSights Update

E. Dininio provided an update on Holland Bloorview KidSights Data Consortium. The Board discussed benefits, data sharing and risks.

The Board expressed appreciation to management for taking the time to ensure that their questions were answered and looks forward to an update in a year or two to see how risks and opportunities pan out.

2.4 Governance

2.4.1 Board Recruitment and Profile for New Director Recruitment

The 2025 – 2026 Board of Directors Recruitment Priorities were presented for approval. H. Hayward provided a brief overview of the process.

The Board recruitment profile for new directors will be posted on our website and shared with members of the Board. Board members and management were encouraged to reach out to colleagues within their individual network who may be interested in sitting on Holland Bloorview Kids Rehabilitation Hospital's Board.

MOTION: It was MOVED by Helen Hayward, and seconded by Paul Spafford, that the Board of Directors of Holland Bloorview Kids Rehabilitation Hospital approve the 2025 – 2026 Board of Directors recruitment priorities and profile as recommended by the Governance Committee.

Hayward/Spafford

CARRIED

2.5 Bioethics Update

D. Menna-Dack, Senior Bioethicist and Interim Senior Director, Collaborative Practice and Clinical Education provided a summary of the bioethics services at Holland Bloorview by defining bioethics and reviewing the Board's connection to bioethics in their role as hospital directors.

2.6 President and CEO Report

J. Hanigsberg drew attention to the President and CEO report and invited questions from the Board.

In addition, she provided an update on an Executive Leadership Team (ELT) half day leadership retreat hosted by the Proximity Institute. The experience provided an opportunity to participate in a leadership dialogue with a First Nations photographer who uses images of his community as a teaching tool. ELT members found it to be a very profound experience which was very consistent with our commitment to anti-indigenous racism and increased our learning in a new way.

In conclusion, J. Hanigsberg offered a government and system update emphasizing the need to maintain a close relationship with the Ministry of Health. The hospital recently met with ministry officials regarding stable funding for the Extensive Needs Services (ENS).

3.0 Consent Agenda

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

- 3.1 Minutes of Board of Directors Meeting – November 20, 2024
- 3.2 FY2024/25 President and CEO Performance and Compensation Committee Membership
- 3.3 Board of Directors Meeting Schedule 2026-2028
- 3.4 Accreditation Governance Team Membership
- 3.5 Re-appointment of Chair, Research Ethics Board

3.6 Terms of Reference and Work Plan

- 3.6.1 Business and Audit Committee Work Plan
- 3.6.2 Business and Audit Committee Terms of Reference
- 3.6.3 Investment Sub-committee Terms of Reference

3.7 Governance Policies

- 3.7.1 Bioethics Integrated Structure
- 3.7.2 Commitment to Bioethics
- 3.7.3 Director Signing Authority
- 3.7.4 Whistle Blower

MOTION: It was MOVED Jean Lam and seconded by Michelle Caturay that the Board of Directors approve the Consent Agenda.

Lam/Caturay

CARRIED

4.0 Adjournment

There being no further items for discussion, the meeting was adjourned at 8:00pm

Catherine Roche
Chair, Board of Directors
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