A special meeting of the Board of Directors of Kingston Health Sciences Centre was held on Monday, February 24, 2020, in the Henderson Boardroom at the Hotel Dieu Hospital site from 1700 to 1800 hours. The following are the open minutes.

Elected Members Present (voting): Alan Cosford, Brenda Hunter, Anne Desgagnes, Michele Lawford, Sherri McCullough, David O’Toole (Chair), Glenn Vollebregt, Axel Thesberg and Sandy Wilson

Ex-officio Members Present (voting): Cheryl Doornekamp

Ex-officio Members Present (non-voting): Dr. Peggy DeJong, Dr. Mike Fitzpatrick, Mike McDonald and Dr. David Pichora

Regrets: Emily Leslie, David Pattenden and Richard Reznick

Administrative Staff: Eleanor Hennessey (Recording Secretary), Amit Bansal, Elizabeth Bardon, Sandra Carlton, Brenda Carter, Troy Jones and Krista Wells Pearce

3.0 REPORT ON IN-CAMERA MATTERS

3.1 Motion to Report the Decisions Approved In-Camera

The Chair reported on the following discussion and decisions: the Board approved the open and closed minutes of the 2019 December 16 meeting; the Board approved the open and closed minutes of the 2020 January 27 meeting; the President & CEO’s report provided a number of updates; the Board approved the Fiscal 2021 Budget; the Board approved the H-SAA /M-SAA Amending Agreements; the Board approved the process for identifying the Board Chair succession.

3.2 Date of Next Meeting

The Chair reminded members that the date of the next KHSC Board meeting is Monday, March 23, 2020 at 1600 hours at the HDH site, Henderson Board Room.

The meeting terminated at 1800 hours on motion of Brenda Hunter.

David O’Toole
Chair
# Briefing Note

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<tr>
<th>Topic of Report:</th>
<th>CEO REPORT</th>
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<tr>
<td>Submitted to:</td>
<td>Medical Advisory Committee – February 11, 2020 Board of Directors – February 24, 2020</td>
<td>For Discussion X For Information</td>
</tr>
<tr>
<td>Submitted by:</td>
<td>Dr. David R. Pichora, President and CEO</td>
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<td>Date submitted:</td>
<td>February 11, 2020</td>
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## Background

This note provides an update on activities at the HDH and KGH sites that relate to our mission and annual corporate plan since our December Board and January MAC meetings. As always, I welcome feedback and suggestions in terms of content and focus for these regular updates.

## Current State

1. **Coronavirus Preparedness at KHSC and Providence Care**

Multiple stakeholders across the organization are collaborating to ensure KHSC and Providence Care are prepared if a patient presents with travel history to China and meets case definition for Coronavirus testing. KFL&A has requested that any patient presenting to primary care or L&A Hospital be sent to KGH for testing – see attached.

## Organizational Risk Assessment

An organizational risk assessment has been completed and the following preparedness measures are in place:

### Communications

- Organizational communication has been sent out January 24, 2020 to all staff at KHSC and Providence Care with a focus on review and preparedness at both sites.
- Targeted operational information has been sent to ED and HDH (areas of higher risk).
- Information posted on the intranet and external site

### Engineering Controls

- Maintenance records for functioning AIIRs reviewed.
- Plexiglass present in high risk areas for first patient contact.
Administrative Controls

- Passive Screening – signs with symptom and travel history (including map of Hubei province) are posted in high risk locations at KHSC.
- Active Screening – areas of focus are those identified at high risk:
  - ED,
  - Urgent Care,
  - COPC,
  - Connell 5 L&D,
  - Direct admits/transfers

- Outpatient Areas

Passive screening directing individual to use ABHR, don mask and notify reception/RN immediately if symptomatic AND travel history. Outpatient areas provided plan on how to deal with who “self-identifies” as possible case at both sites

Personal Protective Equipment

- Respirator fit testing/training compliance has been reviewed, communicated to managers/PMDs and testing is focused on staff/affiliates working in higher risk areas.
- We have a stockpile for KHSC and Providence Care sites that is accessible through Protection Services Department. The current N95 Fit-Tested respirator stock has been moved to a centralized location to preserve our supply.

Next Steps

- Review education and training needs in high risk areas
- Review other areas for passive and active screening
- Continue to liaise with KFL&A and regional hospital sites

The Ontario Hospital Association and Ministry of Health continue to monitor and provide regular updates to health care providers. I will provide a verbal “in time” update at our upcoming meetings.

3. Connecting Patients and Families with Patient Relations at KHSC

It is second nature to want to be helpful when dealing with stressed individuals seeking feedback and raising concerns about their patient and/or family experience. KHSC’s Patient Relations Specialists are here to assist patients and family members following a clearly identified process to address feedback in a fair and impartial way.

We appreciate that Board members are often approached in the community and we welcome the opportunity for contact with one of our specialists: 613-549-6666, ext. 4158 / Toll Free: 1-800-567-5722 x 4158 or by emailing to: PatientRelations@kingstonhsc.ca
4. **Annual Coat Drive Update**

Thanks to many generous donations, living our mission of caring for others translated into a warmer winter for hundreds in our community this year. When the annual HDH/St. Mary’s Cathedral Winter Coat Drive wrapped up January 17, the distribution centre at St. Mary’s Parish Hall had handed out close to 3000 winter coats and accessories to 1062 people (compared to 964 last year. This was our busiest season ever and, fortunately, we had more inventory than ever before.

We’re grateful to community, KHSC and Providence Care Hospital donors of clothing, socks and funds (used to purchase warm boots and socks for some people desperately in need) and for so visibly living the HDH Mission of being a just and caring community. Thanks should be extended, too, all KHSC staff and community volunteers who continue to make the Coat Drive a smoothly-run initiative every year.

5. **City of Kingston & KFL&A Health Unit Opens Overnight Warming Centre**

A new overnight warming centre has opened its doors in Kingston to help support the more vulnerable members of our community during the winter months. Located at 235 Wellington Street, the Kingston Warming & Counselling Centre is now operating seven days a week, 8 p.m. to 8 a.m., January to April.

It is open to individuals aged 16 and older, serves meals and offers nursing and counselling services. Health care professionals are asked to call ahead prior to sending someone to ensure they have space. The Centre is funded by the City and KFL&A Public Health and collaboratively operated by multiple health and social service providers such as Home Base Housing, Kingston Community Health Centres and Providence Care. You can contact it at 613-561-4618 (8 p.m. to 8 a.m.) or email adorosz@kingstonhomebase.ca.

KHSC’s HDH site also runs a warming station in its main lobby on days when Public Health issues a cold weather alert. Anyone sheltering from the frigid temperatures is welcome to warm up indoors and enjoy a free hot beverage.

6. **Province Releases Third Quarter Finances**

On January 30, the provincial government reported that the province remains on track to a balanced budget in the third quarter update on finances. Key highlights from the report:

- A deficit projection of $9.0 billion in 2019-20, consistent with the Fall Economic Statement and a $1.3 billion improvement from the 2019 Budget.
- Total revenue is projected to increase by $3.1 billion over the 2019 Budget, reflecting strong job growth, rising household incomes and strengthening home resales.
- Ontario’s economy continued to grow in the third quarter of 2019. Real GDP grew by 0.6 per cent, following a gain of 0.8 per cent in the second quarter. Third quarter growth was supported by higher consumer spending, investment in residential structures and stronger exports.
- Interest on debt expense is projected to be $630 million lower in 2019-20 than forecasted in the 2019 Budget. Every dollar saved on servicing the debt is one more dollar that can go to ensuring the sustainability of services that the people of Ontario rely on.
• Program expense is projected to increase by $2.5 billion higher than the 2019 Budget projection, demonstrating that the government is continuing to make life more affordable by helping Ontarians manage electricity costs and investing in health care, education and other social services.
• Ontario's credit ratings were confirmed by all four credit rating agencies (Moody's, DBRS, S&P and Fitch), and Fitch also improved the outlook on the Province's rating to Stable from Negative.

7. Infrastructure Ontario

Last month the government advised that Ehren Cory, CEO of Infrastructure Ontario, will be leaving his position to return to the private sector. In a statement from government, the Minister of Infrastructure recognized Mr. Cory’s significant contributions having successfully delivered over $65B “P3” infrastructure projects at hospitals, courthouses, subway projects and roads. As reported at the January board session, KHSC has signed the final agreement for the planning, design and confirmation consulting services for the KGH site phase 2 redevelopment project with Ontario Infrastructure and Lands Corporation.

8. Building Rural Ontario Together

The Honourable Steve Clark, Minister of Municipal Affairs and Housing, recently announced 27 joint projects to be funded through the Municipal Modernization Project. In a recent statement, Minister Clark stated that the provincial government will be working with municipal partners to make life more affordable, deliver smarter government services, create a more competitive business climate, and build rural Ontario. More than 300 project submissions were made with 27 projects being approved involving over 130 municipalities. The government is also supporting small and rural municipalities by:

Maintaining the funding envelope for the 2021 Ontario Municipal Partnership Fund at $500 million.
Investing $200 million through the Ontario Community Infrastructure Fund to repair local roads, bridges, water and wastewater infrastructure.
Releasing Connecting the Southwest: A Transportation Plan for Southwestern Ontario - our government's plan to deliver an integrated transportation system for the region.
Providing up to $130 million for new projects under the Natural Gas Expansion Program.
Investing $175 million through the Health Infrastructure Renewal Fund to help repair and upgrade 131 hospitals across the province.

9. New Framework to Support Accessibility

Late last month the province announced a new cross-government framework following the third legislative review of the Accessibility for Ontarians with Disabilities Act focused on four key elements: 1) breaking down barriers in the built environment; 2) government leading by example; 3) increasing participation in the economy for people with disabilities; and 4) improving understanding and awareness about accessibility. The facilities team at KHSC recently submitted our annual report (December 2019) and will be reviewing the new framework in detail.
10. **Historic Agreement for French-Language in Ontario**

The Honourable Ross Romano, Minister of Colleges and Universities and Caroline Mulroney, Minister of Francophone Affairs and Melanie Joly, Federal Minister of Economic Development and Official Languages signed a funding agreement in January signaling the first French-language university governed by and for Ontario Francophones. A funding commitment of $126M over eight years was confirmed and the Government of Canada will assume up to 50% of the total investment in the project (or up to $63M over five years). With this agreement, both levels of government affirm their commitment to addressing the needs of 620,000 Francophones in Ontario.

11. **Ontario Health Insurance Plan Services**

Ontario is protecting the health care system against fraud by ensuring the final transition to a more secure photo health card. As of July 1, 2020, red and white health cards will no longer be accepted for Ontario Health Insurance Plan (OHIP) services. The advanced security features of the photo health card help protect our public health system. While there is no cost to convert or renew an Ontario photo health card, there could be significant costs by allowing red and white health cards, which could be used fraudulently, to remain in circulation. Each month, individuals using these outdated cards access up to $108 million in health services.

Starting in January, individuals with red and white health cards will begin to receive letters letting them know that they will need to get a photo health card at a ServiceOntario centre before the July 1, 2020, deadline.

12. **Federal Medical Assistance in Dying Consultations**

On June 17, 2016 Medical Assistance in Dying became legal in Canada. At that time the federal government committed to studying (through independent reviews) and making possible changes to the legislation by June 2020 about Medical Assistance in Dying:

- For mature minors
- In response to advanced requests
- Where a mental disorder is the sole underlying medical condition.

On December 12, 2018 the Council of Canadian Academies (CCA) in response to the request of the government for independent study of these 3 topics presented their reports. You can read their reports by following this link [https://cca-reports.ca/reports/medical-assistance-in-dying/](https://cca-reports.ca/reports/medical-assistance-in-dying/)

On Monday January 13, 2020 the CBC reported the Canadian government is moving forward with a 2 week period of consultation about updates to the legislation, in response to a Quebec Superior Court ruling and to fulfill its commitment to review the legislation. [https://www.cbc.ca/news/politics/consultations-medical-aid-in-dying-1.5422850](https://www.cbc.ca/news/politics/consultations-medical-aid-in-dying-1.5422850)

The federal Department of Justice has posted on its website an explanation about the consultations and the period of time for consultation (ending January 27, 2020). [https://www.justice.gc.ca/eng/cons/ad-am/index.html](https://www.justice.gc.ca/eng/cons/ad-am/index.html)

Following this period of consultation, proposed changes to legislation will be developed and discussed.
KHSC staff have been engaged to ensure members of the credentialed professional staff are aware.

Further details will be provided in my next report. Please let me know if there are any ways we can support KHSC related to this ethical topic in the coming months.

13. Health Standards Ontario – Revised Governance for Health Services Standard

The public review of HSO’s revised governance for health services standard was posted in mid-January. The updated standard will be applicable to health and social services organizations across the continuum of care and outlines the processes by which a governing body functions and its broad range of responsibilities. This standard will eventually be incorporated into Accreditation Canada’s assessment programs. Comments will be received until March 15, 2020.

Click here to view full standard: Governance for Health Services

Summary of changes

The updated CAN/HSO 1001:2019 Governance for Health Services standard includes a change to the title of the standard (formerly Governance) to provide more clarity on the scope. The updated standard will be applicable to health and social services organizations across the continuum of care and outlines the processes by which a governing body functions and its broad range of responsibilities.

As part of this revision, HSO’s people-centred care principles and language were implemented. The result is a standard that emphasizes the importance of the perspectives of clients and families who regularly use the organization’s services. The standard also emphasizes the need to regularly review and update policies and procedures related to the governing body’s mandate.

Some other changes seen in this revision include the addition of information on the role of the governing body in the following areas, among others:

- Selection of governing body members and chair, including ensuring diversity and minimizing conflict of interest
- Policies and procedures around information management, data security, and privacy
- Ensuring value for clients and families
- Ensuring both client and staff safety, including psychological safety and cultural safety
- Evidence-informed decision-making
- Environmental sustainability

The revised standard is divided into the following subsections:

- Developing Clear Direction for the Organization
- Building an Effective Governing Body
- Overseeing Organizational Activities, Outputs, and Outcomes
- Being Accountable and Reflective
14. **OHA Series: Board Chair at the Helm**

Brenda Hunter, Sherri McCullough and Axel Thesberg participated in the most recent ‘board chair at the helm’ webinar which focused on “Influencing and Shaping Board Culture”. The next session is scheduled for February 27 “Board Terms, Rogue Directors and Underperforming Directors” – while the OHA has indicated this session is for Board Chairs Only, we have connected back to confirm that the Vice Chairs and Chair of Governance can participate.

15. **OHA Advocacy for Action Webinar**

The OHA is bringing member hospitals together on Tuesday, February 11, for a discussion on the government’s health agenda and priorities and to seek further advice from hospitals on issues like funding. A verbal update following this session will be provided at our February meetings.

16. **Legislative & Regulatory Update**

Deputy Premier and Minister of Health, Christine Elliott, has confirmed that the government has filed a regulation under the *Health Protection and Promotion Act* listing Novel Coronavirus as a mandatory reportable disease. The new regulation expands current reporting requirements by amending the previous reference to SARS to “disease caused by a novel coronavirus, including Severe Acute Respiratory Syndrome (SARS) and Middle East Respiratory Syndrome (MERS). As a result, physicians, hospitals and other care facilities will be required to report a suspected or confirmed case of 2019-nCoV to their local medical officer of health.

The OHA has also updated *Understanding Your Legal Accountabilities – A Guide for Ontario Hospitals* which is intended to help hospital and health care providers understand areas of legal accountability to stakeholders. There are two parts in the publication: Part 1 focuses on Director Liability and lists the key statutory obligations for directors of Ontario public hospitals. Part 2 outlines periodic reporting compliance to help hospitals manage reporting obligations for both internal and external stakeholders. Link to the guide: [click here](#).

17. **Ethics Blog – Matters that Matter “What’s the Best Way to Teach Ethical Behaviour?”**

An important question is whether ethical behavior can be taught. Some claim that teaching ethics is a waste of time because ethical behavior is hardwired into the human psyche—for example, some people are naturally kinder, braver, or more fair-minded or altruistic than others, while others, such as psychopaths and sociopaths, lack a sense of empathy that is essential to ethical behaviour. While there are extremes of human behaviour and some individuals might have psychological dispositions to be more or less empathetic than others, few would take seriously that human behaviour is completely pre-determined and that environmental factors do not have an important influence on behaviour.

The entire concept of education is based on the belief that humans can and do learn new information through experience and instruction. If ethical behavior couldn’t be taught, there would be no point to teaching our children how to behave and explaining why certain actions are wrong while other actions are right. We would not reward our children when they behave well or punish them if they misbehave. There would be a greatly diminished role for religion, and our legal system would have to
jettison the concepts of deterrence and rehabilitation if we cannot learn from our mistakes.

Ethical development and reinforcement continues throughout our lives and is embedded into the fabric of our social and personal lives. The concepts of remorse, apologizing, making amends, and praising virtuous behaviour can only make sense if we believe that we can learn from our mistakes and try to be better people.

So what is the best way to teach ethical behaviour?

One approach is to treat ethics like any other academic subject and to introduce it at the primary, secondary, or post-secondary level. The ethics teacher could introduce rationales for ethical behaviour and methods to deliberate ethical issues to help provide ethical guidance. This approach, however, is very passive and can lack relevance if not done properly. It would treat ethics like any other school subject to be memorized and then later forgotten.

In addition, formal academic ethics education is often introduced far too late. Many students do not receive any formal education in ethics and the few who do receive it are introduced at the university level when their characters are largely formed; students who are curious and open-minded will be more open to learn about ethics while students who lack the ethical and intellectual virtues of humility will resent ethics education and think of it as a waste of time.

Teaching by developing moral character

A more productive and relevant way to teach ethical behaviour is through the development of moral character. This approach is an active style that focuses on practicing ethics as a skill versus an abstract body of knowledge. Ethical behaviour through character development can be taught by modelling ethical behaviour and developing moral imagination through moral literature.

Next month I will discuss the topic of moral modelling. And no, this does not mean that looking good is the same as doing good or that we should be keeping up with the Kardashians.

Stay tuned ethics fans!

David Campbell, Ethicist, KGH site

18. On the Move …

The President and CEO of the Quinte Healthcare Corporation, Mary Clare Egberts, has announced her intention to retire this summer. There will be lots of opportunity, I’m sure, to recognize Mary Clare as she moves towards her retirement date.

As many of you already know, Jack Kitts announced his retirement some time ago and last month The Board of the Ottawa Hospital announced the appointment of Cameron Love as the new President and CEO starting June 29, 2020. Cameron serves as the Executive Vice President and Chief Operating Officer at the Ottawa Hospital.

Eric Hanna was recently appointed Supervisor for the Lanark, Leeds & Grenville Addictions and Mental Health service located in Brockville, Ontario.
19. **Upcoming Events, Conferences & Calendar Dates**

On Saturday, **February 22**, a free education day on colorectal cancer will be taking place at the Isabel Bader Centre, 390 King Street West, starting at 0800 and running until 1500 hours. Organized by the Cancer Centre of Southeastern Ontario and Supported by Colorectal Cancer Canada, this session will connect with local experts on in clinical trials, symptom management and self-care, genetic testing and surgical innovation in the field of colorectal cancer. To learn more and register: [click here](#)

This year’s **UHKF benefit dinner**, presented by BMO, will take place on Saturday, **March 28, 2020** at Ban Righ Hall. Doors open at 1730 hours and tickets can be purchased at: [www.uhkf.ca](http://www.uhkf.ca). Proceeds from this event support a wide variety of programs and equipment to enhance patient care at KHSC and Providence Care. Looking forward to joining members of the Board, MAC members and executive team at this year’s event.

**Winemaker’s Benefit Dinner** - AquaTerra Executive Chef, Brent McAllister, Cardiologist, Dr. Adrian Baranchuk, and Winemaker, Dan Sullivan, invite you to enjoy a memorable evening of great food and wine in support of UHKF on **April 24, 2020** at the Delta Hotels by Marriott Kingston Waterfront. Link to the event site is available [here](#). Only a limited number of tickets are available with net proceeds going to UHKF.

Respectfully submitted

David R. Pichora
President and Chief Executive Officer