

BOARD OF DIRECTORS – OPEN MEETING – VIDEOCONFERENCE CALL

Date: Monday, June 21, 2021
 Time: 1500 – 1800 hours – Regular KHSC Board Meeting
 1800 – 1810 hours – Annual General Meeting of the Corporation
 1810 – 1825 hours – Special KHSC Board Meeting
 Zoom Link: <https://kingstonhsc-ca.zoom.us/j/94232665944>

Start	Time	Item	Topic	Lead	Purpose	Attachment
1.0 CALL TO ORDER, CONFIRMATION OF QUORUM, CONSENT AGENDA ITEMS & APPROVAL OF AGENDA						
1500	5 min	1.1	Call to Order, Confirmation of Quorum, Conflict of Interest Declarations	O'Toole	Inform	Verbal
		1.2	Consent Agenda Items a) Approval of Minutes: May 10, 2021 b) BPSAA Compliance Report Attestation c) KHSC People Report	O'Toole	Decision	Draft agenda
		1.3	Approval of Open Agenda	O'Toole	Decision	Draft minutes
2.0 PRESENTATIONS						
2.0 KEY DECISIONS						
1505	5 min	2.1	Approval of the Audited Financial Statements & Management Discussion & Analysis Report	Thesberg	Decision	Briefing note + draft financials
1510	5 min	2.2	Appointment of the Auditors for Fiscal 2020-21	Vollebregt	Decision	Briefing note
3.0 PATIENT & FAMILY CENTRED CARE – GENERATIVE DISCUSSION						
1515	30 min	3.0	COVID-19 Recovery: Ethical & Planning Considerations	McCullough/ Carter	Discuss	Briefing note
4.0 REPORTING & UPDATES						
1545	10 min	4.1	KHSC President & CEO + External Environment Update	Pichora	Discuss	Written report
1555	15 min	4.2	COVID-19 Update – Pandemic Planning for KHSC	Pichora/Bardon Carter/Fitzpatrick	Discuss	Presentation @ mtg
1610	5 min	4.3	Medical Advisory Committee/Chief of Staff Report – May & June MAC meetings	Fitzpatrick	Discuss	Written report
1615	5 min	4.4	UHKF President and CEO Update	Zsolnay	Discuss	Written report
1620	5 min	4.5	KHSC Accreditation 2022 Update – Governance Survey Results & Next Steps	Hunter/Carter	Decision	Briefing note
1625	10 min	4.6	KHSC Performance Reporting Fiscal 2021: Q4	Bardon	Discuss	Briefing note + Q4 reports Presentation @ meeting

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Start	Time	Item	Topic	Lead	Purpose	Attachment
5.0 BOARD COMMITTEE REPORTING						
1635	5 min	5.1	Patient Care & Quality Committee • Program: Virtual Care	McCullough	Inform	Verbal / BN & Presentation
1640	5 min	5.2	Governance Committee	Hunter	Inform	Verbal
1645	5 min	5.3	People, Finance & Audit Committee	Thesberg	Inform	Verbal
6.0 IN-CAMERA SEGMENT (Members of the Public/Guests depart meeting)						
1650	5 min	6.1	Motion to Move In-Camera	O'Toole	Inform	Verbal
10.0 REPORT ON IN-CAMERA MATTERS						
1750	5 min	10.1	Motion to Report on Decisions Approved In-Camera	O'Toole	Inform	Verbal
		10.2	Date of Next Meeting & Termination			
11.0 OPEN FORUM						
Opportunity for directors to reflect on how patients, families and the community were considered in today's discussions						
12.0 IN-CAMERA ELECTED MEMBERS SESSION & CEO ONLY						
13.0 IN-CAMERA ELECTED MEMBERS SESSION WITHOUT MANAGEMENT PRESENT						

BOARD OF DIRECTORS OPEN MEETING: MAY 10, 2021

A regular meeting of the Board of Directors of the Kingston Health Sciences Centre was held by video-conference on Monday, May 10, 2021 from 1500 to 1830 hours. The Board Chair and Secretary determined, in advance of the meeting, that it was important to hold the meeting by videoconference in light of the government's directives for self-isolation and social distancing in response to the COVID-19 pandemic. The following are the open minutes.

Elected Members Present (voting): Alan Cosford, Mélanie-Josée Davidson, Anne Desgagnés, Brenda Hunter, Michele Lawford, Emily Leslie, Sherri McCullough, David O'Toole (Chair), David Pattenden, Axel Thesberg, Glenn Vollebregt and Sandy Wilson.

Ex-officio Members Present (voting): Dr. John Leverette and Dr. Jane Philpott.

Ex-officio Members Present (non-voting): Dr. Mike Fitzpatrick, Dr. Renate Ilse, and Dr. David Pichora.

Regrets: Dr. Sonal Varma.

Staff: Rhonda Abson (Recording Secretary), Amit Bansal, Elizabeth Bardon, Sandra Carlton, Brenda Carter, Val Gamache-O'Leary, Renaud Gosse, Chris Gillies, Troy Jones, Mike McDonald, Steve Smith, Krista Wells Pearce and Tom Zsolnay.

1.0 CALL TO ORDER, CONFIRMATION OF QUORUM, CONSENT & AGENDA APPROVALS

1.1 Call to Order, Confirmation of Quorum, Conflict of Interest Declarations

David O'Toole called the meeting to order and confirmed that all board members participating by video-conference and phone were able to hear the proceedings. The Secretary confirmed quorum and invited declaration of conflict with no declarations being recorded.

The Chair extended his appreciation to Dr. Jane Philpott for the invitation to the KHSC Board and Executive team to participate in the strategic planning exercise that is underway in the Faculty of Health Sciences and Southeastern Ontario Academic Medical Organization.

The Chair drew attention to the date of the next Board meeting slated for Monday, May 10, 2021 at 1400 hours and joining the first part of the meeting will be the Southeastern Ontario Academic Medical Organization followed by the regular KHSC Board meeting. KHSC board members are welcome to attend any of the upcoming Hive Sessions scheduled to take place starting May 26 through to June 23, 2021 – the dates and timing were included in the pre-circulated materials.

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David O'Toole noted that, as outlined in the email communication to Board members on Friday, May 7, 2021 further work is needed on the research recommendations before presentation to the Board. Further details will follow in terms of timing.

KHSC Board committees will be meeting on Monday, May 31, 2021 and the date of the next Board meeting will be Monday, June 21, 2021 starting at 1500 hours and will be followed by the Corporation's annual general meeting and special meeting to elect the Officers.

The Chair thanked Board members for completing Accreditation Canada's governing functioning tool survey recently. The next self assessment survey requiring the Board's attention was released prior to the Board meeting. The survey link will be open until Sunday, May 16 and Board members were asked to send along a confirmation email to the recording secretary once they have completed the self assessment. The results from both survey tools will be presented to the Governance Committee at their May 31 meeting.

The KHSC Board recognized the start of National Nursing Week and, as an expression of gratitude, David Pichora shared with members of the Board the recent "Posters of Thanks" to recognize and share with staff, comments that have been made by members of the community. A series of posters have been created and placed at staff entrances at HDH and KGH sites so all can see, firsthand, how appreciative members of the community are – for all that they do.

The Chair recognized Sherri McCullough and her organizing team for their outstanding efforts preparing for this year's Rose of Hope Golf Tournament at the Cataraqui Golf Club – taking place on Tuesday, July 27, 2021. This year the group hopes to surpass the \$2M mark with proceeds going to the new Breast Assessment Centre.

David O'Toole invited each of the Board Committee Chairs to reflect on the significant contributions of Chief Operating Officer, Troy Jones, as he prepares for his retirement and last "official" working day of Friday, May 15. Sherri McCullough, Axel Thesberg, and Brenda Hunter recognized his many accomplishments, his commitment to the Kingston Health Sciences Centre, as well as his leadership abilities and support. Chair O'Toole remarked on Troy Jones' public service, Troy's ongoing support in bringing together HDH and KGH, and his commitment to ensuring the delivery of a regional health information system. The KHSC Board extended their best wishes for a healthful post-KHSC life.

1.2 Approval of Consent Agenda

The following items were provided as part of the consent agenda:

- Approval of Minutes: March 29, 2021
- KHSC People Update
- KHSC Accreditation 2022 Update
- KHSC's Integrated Annual Corporate Plan 2021-22 and Strategy Performance Indicators

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Moved by Dr. John Leverette, seconded by Axel Thesberg:

THAT the consent agenda be approved as circulated.

CARRIED

1.3 Approval of Agenda

Agenda materials were circulated to board members on Tuesday, May 4, 2021 and additional materials were provided to members last Friday, May 7, 2021 which included the draft minutes of the March 29, 2021 board meeting.

Moved by Emily Leslie, seconded by Sherri McCullough:

THAT the agenda be approved as circulated.

CARRIED

2.0 PATIENT & FAMILY CENTRED CARE – no agenda items identified.

3.0 KEY DECISIONS & DISCUSSION

3.1 2021 Patient Safety & Culture Survey Results

Sherri McCullough, Chair of the Patient Care and Quality Committee, drew attention to the briefing note circulated to members in advance of the Board meeting. As part of KHSC's Accreditation preparedness plan, a working group has been established to identify and implement 1-2 strategies to improve patient safety culture at KHSC going forward in 2021: 1) improving an understanding of "just culture" and improving psychological safety; and 2) understanding and addressing differences in the perception of patient safety culture between leadership and frontline staff.

Brenda Carter, Chief of Quality and Clinical Transformation, explained that surveys are conducted every two years as required under the *Excellent Care for All Act, 2010*. The purpose is to collect information on the satisfaction of employees and other persons with their experience working for or providing services and to solicit views about the quality of care provided by the health care organization. KHSC's annual corporate plan states that KHSC will support an engaged workforce by nurturing a positive, health environment and strengthening our culture of safety. KHSC undertook a survey in 2018 and again in 2020. A table showing comparison results from both survey years was included in the briefing note; Brenda Carter highlighted the fact that survey results were almost identical. Recommended actions undertaken in support of the 2018 results included building out safety huddles at KHSC; sharing practice information that contributes to positive perceptions of safety culture within portfolios; and looking at ways to further refine SAFE reporting to make it easier for staff to use and ensuring feedback was provided to those who submitted reports. Brenda Carter

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emphasized that staff concerns around reprisals due to errors remains a focus to ensure staff have a comfort level in reporting errors.

4.0 REPORTING & PRESENTATIONS

4.1 KHSC President & CEO and External Environment Update

The written report of the President and CEO was pre-circulated to members in the agenda package. Dr. Elizabeth Eisenhauer has been recognized for her outstanding leadership in medicine and medical science as the 2021 Canada Gairdner Wightman Award.

Discussion focused the 70 transitional care unit beds and how they have assisted KHSC in patient flow. Since its inception in 2017, the unit has care for and supported over 400 KHSC patients who required alternate level of care. The unit provides patients with access to restorative therapies as well as nursing and personal support services. Dr. David Pichora noted that the net effect has resulted in an additional 6,000 inpatient days being available for the sickest patients that KHSC serves.

David Pichora highlighted the upcoming retirement of Rev. Dr. Neil Elford, Director of Spiritual Health in mid-July. Under his leadership, Dr. Elford worked to support change as Spiritual Health Practitioners became eligible to join the College of Registered Psychotherapists; he help to nurture the relationship with the RHSJ Sisters; and to support activities to advance mission and values across the sites. An insightful and thoughtful leader, Dr. Pichora acknowledged Dr. Elford's invaluable contributions in the development of Medical Assistance in Dying protocols at KHSC.

Discussion focused on the Federal Minister of Health's announcement in establishing a Critical Drug Reserve to ensure key drugs used in the treatment of COVID-19 symptoms being available across the country. Troy Jones, Chief Operating Officer, confirmed that KHSC has increased drug inventories noting that they are careful monitored by the Pharmacy team.

David Pichora provided a brief overview of his recent interview with the Office of the Auditor General of Canada which focused on the following areas: cyber security challenges and opportunities within the health care setting; health data and how this information is shared; access to care; digital health and health information systems; the need for standardization of care across the system; the need for a single system of data access; the impact of health human resources supply with an aging workforce and the challenges that providers face to keep up with demand; pandemic preparedness; drug supply challenges; and the need for domestic supply system for vaccines.

The update also included an overview of federal and provincial budget allocations as well as a detailed listing of recent legislative updates. The final section focused on a number of "Mission Moments" at KHSC including a patient story from KHSC's ICU who recently recovered from COVID-19.

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4.2 COVID-19 Pandemic Planning Update for KHSC

Elizabeth Bardon, Vice President Mission & Strategy Integration and Support Services, delivered the update on COVID-19. The first section of the presentation focused on the Emergency Orders issues by government on April 9, 2021 relating to patient transfers and consent as well as providing the government with the ability to deploy LHIN and Ontario Health staff to hospitals in order to support staffing and capacity pressures.

Current COVID-19 case counts for KFL&A, Hastings Prince Edward, and Lanark, Leeds and Grenville were highlighted. KHSC COVID-19 patient volumes were also shared including an overview of patient transfers information. On April 8, 2021, Ontario Health directed ramp down focusing on elective surgeries and non-emergent/non-urgent acute care activities. Incident Command continues to monitor patient volumes and procedures closely.

The Alternate Health Facility on Union Street is now complete and fully equipped and, while this facility is available and ready to receive patients, Incident Command has determined that patient volumes and bed flow availability has not dictated the need to open this facility.

Screening volumes remain high with the labs averaging 1,000 daily tests. No issues with the supply chain and, in partnership with KFLA Public Health, vaccination roll out continues. KHSC continues to support the Hub and Spoke Framework and Mobile Enhancement and Support Teams.

The April Stay-at-home Order prompted additional restrictions to the family presence/visiting policies at KHSC. With the guidance of patient experience advisors, family presence has been retained for highly vulnerable patient populations. A new Care Partner Program is being piloted this month and special protocols are in place for patients who are imminently dying to facilitate last moments with loved ones. Ensuring a safe environment for patients and staff members is one of the many considerations in ensuring a balanced between risk mitigation and compassion when changes are needed to the family presence guidelines. Patient safety incidents are closely monitored and tracked and the majority of patient feedback continues to be in the areas of visitor restrictions, seeking clarification, and ensuring effective and consistent communication. There has been a marked increase in the number of compliments in Q4.

The component of the presentation focused on KHSC People. To-date, zero cases of work-related COVID-19 at KHSC. Previously KHSC had 150-200 staff on work isolation due to COVID-19 risk factors and now that the red/grey zone restrictions have been lifted, KHSC is experiencing 15-20 staff on work isolation per day. No staffing issues or reductions to-date. KHSC continues to offer a series of webinars to support wellness and to reduce stress.

Discussion focused on inpatient impact in critical care and the volume of GTA transfers of COVID-19 patients to Kingston. Renate Ilse, Vice President Clinical Care, highlighted the nursing staff ratios required to support ICU patients. In response to a question relating to cancer care volumes, clinical leaders connect on a regular basis to discuss ramp down impacts on patient volumes and care delivery. Provincial guidelines provide direction in

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terms of the types of procedures that are completed. Mike McDonald, Executive Vice President Patient Care and Community Partnerships, confirmed KHSC's overall mental health census has been trending downwards over the last several months with the exception of child and adolescent numbers which have increased. Addiction caseloads are rising in the emergency department and urgent care centre and KHSC continues to work closely with the Health Hub on Montreal Street.

4.3 Medical Advisory Committee/COS Report

The written report of the Chief of Staff and Chair of the Medical Advisory Committee was pre-circulated in the agenda package. Reports and presentations from the Physician Quality Committee and from Dr. Gerald Evans on COVID-19 were shared with the Board as part of the COS/MAC report. The Physician Quality Committee report confirmed that KHSC is seeking certification as part of the Choosing Wisely Canada program.

4.4 UHKF President and CEO Update

The written report of UHKF President and CEO was distributed with the agenda materials. Tom Zsolnay confirmed that pledges remain on track. Nominations for the Ian Wilson, Davies and Sister Dorothy Fournier awards are underway.

Discussion focused on the reference to the Operating Agreement on page 1 of the report and that, although some of the funds are donated with specific designations/restrictions, the total monies raised this past year are shared, after expenses, between KHSC and Providence Care. Tom Zsolnay confirmed that sharing ratios are based on the Ministry of Health Healthcare Indicator Tool (HIT) resulting in allocations of 84% to KHSC and 16% to Providence Care, and is applied to unrestricted donations.

5.0 BOARD COMMITTEE REPORTING

5.1 Patient Care & Quality Committee

- Program & Service Presentation: Clinical Labs

Sherri McCullough, Chair of the Patient Care & Quality Committee, provided a brief update on April committee meeting activities. Committee members received an outstanding presentation from the Clinical Lab leaders which focused on quality and patient safety activities as well as overall performance. A copy of the briefing note and slide deck on the labs was also shared with the KHSC Board.

5.2 Governance Committee

Brenda Hunter, Chair of the Governance Committee, confirmed that the committee's minutes were available to the board as part of the in-camera consent agenda materials. The Governance Committee is in the process of preparing a recommendation to the Board for the appointment of Patient Experience Advisors on Board committees for 2021-22.

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5.3 People, Finance & Audit Committee

Axel Thesberg, Chair of the People, Finance & Audit Committee, provided key highlights from the April 19, 2021 meeting which focused mainly on the regional health information system project and funding requirements and the committee's endorsement to move forward with the Integrated Annual Corporate Plan for 2021-22. Committee discussion focused on KHSC capacity, COVID-19 recovery, organizational capacity, and how KHSC would decide to ramp down, if required. The Committee receives regular HR/People updates and committee discussion continues to focus on how employees are responding. Axel Thesberg confirmed that the HR/People update will be provided to the Board going forward.

6.0 IN-CAMERA SEGMENT

6.1 Motion to Move In-Camera

The Chair invited a motion to move in-camera and an invitation was extended to the executive team to attend.

Moved by David Pattenden, seconded by Alan Cosford:

THAT the Board move into an in-camera session.

CARRIED

10.0 REPORT ON IN-CAMERA MATTERS

10.1 Motion to Report the Decisions Approved In-Camera

The Chair reported on the following in-camera decision/discussion items:

- The board approved the closed minutes of the March board meetings;
- The board received the final board committee minutes from the March Patient Care and People, Finance & Audit Committee and Governance Committee meetings along with the draft committee minutes from their April 19, 2021 meetings.
- The board received the final package for the month ending February 2021;
- The board approved appointments and reappointments to the medical, midwifery, RN extended class staff, and housestaff;
- The board received confirmation that the annual CEO and COS sudden succession plans are in place and confirmed;
- The board received the compliance report which will be presented at the May Partnership Council meeting.
- The board received an update on the Trillium Gift of Life Program at KHSC;
- The board received an update from the President and CEO;
- The board received an update on the redevelopment project;
- The board was briefed on the regional hospital information system project and further information to the community will follow once partner organizations have considered the matter that is before their boards.

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- The board was briefed on a research matter;
- The board was briefed on a partnership matter;
- The board was briefed on a personnel matter.

10.2 Date of Next Meeting & Termination

The date of the next KHSC Board meeting is Monday, June 21, 2021 at 1500 hours followed by the annual general meeting and special board meeting. The meeting terminated at 1830 hours on motion of Emily Leslie.

11.0 OPEN FORUM – no session was held.

12.0 IN-CAMERA ELECTED MEMBERS SESSION & CEO ONLY – no session was held.

13.0 IN-CAMERA ELECTED MEMBERS SESSION WITHOUT MANAGEMENT PRESENT – no session was held.

David O'Toole
Chair

Briefing Note

Topic of Report:	CEO Update	For Decision
Submitted to:	KHSC Board of Directors	For Discussion X
Submitted by:	Dr. David R. Pichora, President and CEO	For Information
Date submitted:	June 11, 2021	

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 May Board meeting. As always, I welcome feedback and suggestions in terms of content and focus for these regular updates.

Current State

1. Ontario Health Update – Resumption of Non-emergent/urgent Surgeries & Procedures

On Wednesday, May 19, the Chief Medical Officer of Health rescinded Directive #2 for health care providers to enable hospitals to gradually resume non-emergent and non-urgent surgeries and procedures following the guidelines set out by Ontario Health. In May 19th memo and accompanying guidelines, Ontario Health emphasized the need for resumption of services to be gradual and carefully managed to maintain an ability to rapidly response to increases in COVID-19 case counts and hospitalizations.

For hospitals to resume ambulatory care, the government has stated that resumption of service cannot impede the inpatient resources that may be needed if there are increases in COVID-19 case counts and hospitalizations. Further, hospitals that are unable to resume ambulatory care must collaborate with regional structures to explore ways to support equitable access to care. The May 19th memo also states that Ontario Health and regional structures will be responsible for overseeing equitable access to care by monitoring provincial and regional surgical and procedural data and, if needed, directives will be issued if needed. Ontario Health also confirmed that they will monitor regional resource availability and support collaboration with primary care, home and community care, rehabilitation and other relevant care to ensure the safe and timely discharge of patients from hospital. Finally, Ontario Health is committed to developing plans with hospitals unable to resume non-emergent and non-urgent surgeries and procedures due to local COVID-19 epidemiology and capacity.

On Thursday, June 3, further guidance was provided by Ontario Health and a request for hospitals to work closely with Ontario Health regional leadership to develop and confirm plans but with an understanding that the hardest-hit GTA hospitals will still require support from partner hospitals including further patient transfers.

At KHSC, we are resuming non-urgent surgeries and procedures as quickly as possible considering ongoing staffing challenges. KHSC, like other hospitals around the country, is experiencing considerable health human resources (HHR) shortages. This shortage is most acute with nursing staff, as the pandemic has accelerated many nurses' retirement plans and delayed new graduations. We expect that our ramp up will take many months, and we continue to work on creative HR strategies and to collaborate provincially on addressing the broader HHR challenge. We are also working with regional public and private partners to explore alternative locations for completing elective surgical procedures.

2. Ontario New Chief Medical Officer of Health

On Monday, May 31, 2021, the Ontario government tabled a motion in the Legislature to appoint Dr. Kieran Moore as the next Medical Officer of Health for the Province of Ontario. As many Board members know, Kieran has served as the Chief Medical Officer of Health for KFL&A since July 2017. He has served in a variety of roles including as a Program Director for the Public Health and Preventive Medicine Residency Program as well as a Professor of emergency, family medicine and public health services at Queen's, and is a member of the attending staff of the Kingston Health Sciences Centre. Kieran is also the principal investigator at the Canadian Institutes of Health Research-funded Canadian Lyme Disease Research Network. In a recent press release, the KFLA Public Health Board has confirmed that they will be recruiting a new Medical Officer of Health and, for the interim, Linda Murray, Director of Corporate Services will become the Chief Executive Officer and Dr. Hugh Guan will be appointed as the full-time Associate Medical Officer of Health.

3. New Secretary of Cabinet Announced for Ontario

On May 26, 2021, Premier Doug Ford announced the appointment of Michelle DiEmanuele as the new secretary of cabinet and clerk of the executive council effective June 20. Currently she serves as the president and CEO of Trillium Health Partners. Under the previous Liberal government, she served as associate secretary of cabinet and was a deputy minister from 2004 to 2008. In business, she held senior executive positions with CIBC and Brookfield properties.

4. Deputy Minister of Health Retirement Announcement

Helen Angus has announced her plans to retire from the Ontario Public Service later this summer. Appointed to the role in 2018, she spearheaded a number of health care initiatives including the creation of Ontario Health and the establishment of Ontario Health Teams as well as leading the Home Care Modernization Strategy and Digital First Health Strategy. She provided wise counsel and was very supportive of KHSC and our activities for which I will always be grateful.

5. Meeting with Matt Anderson and Chris Simpson, Ontario Health

On May 31, 2021 I had an opportunity to connect with Matt Anderson and Chris Simpson at Ontario Health. Our discussion focused on system recovery, our experience as an Ontario Health Team. I requested the call to better understand their intentions with respect to the role of OHTs in system recovery.

6. Meeting with Key Ministry of Health Leaders

As many of you know, Mike Heenan has departed from the Ministry and joined the senior team at Humber River Hospital in Toronto. Tara Wilson replace Mike as the Director of Hospitals Branch with the Ministry reporting to Melanie Fraser.

I had a preliminary call with Tara last week and we agreed to bring together a small group of Ministry and KHSC leaders to further our discussions on operational and capital matters at KHSC. On Thursday June 10, a call has been arranged with Melanie Fraser to provide an update on a number of KHSC's key deliverables. Subsequent to that call we are asked to provide a briefing note in preparation for a follow up meeting that will also involve Ontario Health, and may be shared with the Minister/cabinet to provide a snapshot of the reality facing large hospitals as they plan for system recovery and the associated budget implications.

7. Porcupine Public Health Unit

The Porcupine Public Health Unit supports the Weeneebayko James Bay region of the province. A state of emergency has been declared in this region and KHSC, as a partner, is seeing an increase of transfers of COVID-19 positive patients. This has pushed our census up from 2 to 13 as of June 14, 2021. There is a different array of partners engaged in this issue: PHO, MEOC, Ministry, OH North, and the Federal government. Most of the communities with severe outbreaks, i.e. Kashechewan, are managed by Federal public health and are staffed by federal government nurses.

8. KHSC Employee & Physician Experience Survey – Open May 26 to June 13

The Employee & Physician Experience survey was recently released by McLean & Company at KHSC. Responses will help us to open the door to conversations at the corporate and team levels about how we can keep drive change to improve engagement focused on our passion for caring, leading and learning at KHSC.

9. KHSC Virtual Open Forum – June 24

Save the date – the next KHSC virtual open forum will be held on June 24 at 1200 noon. Joining me will be Dr. Gerald Evans and members of the infection control team to discuss KHSC's post-COVID planning and variant updates. A calendar invitation to join has been extended to the KHSC Board, Hotel Dieu Board and KGH Board.

10. KHSC Care Partner Program Launch – May 10

KHSC's Care Partner Program pilot was successfully launched on May 10 on Connell 9 at the KGH site. A Care Partner is a person chosen by the patient or substitute decision-maker as an active partner in their care during their hospital stay. While such partners already exist for many patients, we know that family members do spend time with loved ones who are living with dementia or are palliative. This pilot program is designed to formalize the Care Partner role and responsibilities.

Care Partners will be expected to fulfill several requirements, including completing mandatory education, signing a Care Partner pledge, wearing photo ID at all times on site and following all hospital infection prevention and control practices. They will pledge to follow the patient care plan and, in coordination with the care team, will agree upon the kinds of support they can provide to the patient. Initially, the program will focus on supporting our most vulnerable patients, with the care team determining whether a request for a Care Partner is suitable. Keeping the pool of Care Partners small reflects the need to limit the number of people in our building as a critical safety measure at this time.

A staff training module for the Care Partner Program will be part of pilot project on Connell 9. The feedback C9 staff, patients and families from this two-week pilot was very positive and has helped to finalize the education components of the program and we look forward to launching the program more broadly across KHSC.

11. Department of Imaging Services – Providing Patients with Access to their Imaging Records

Effective June 1, 2021 the Diagnostic Imaging Department at KHSC launched a new electronic image sharing system called PocketHealth Patient Sharing. This platform allows patients access to their imaging records anytime they need and to share with anyone they want through a simple online experience that eliminates the need for CDs. Patients pay a \$5.00 fee and receive access to KHSC imaging studies including any new exams over the subsequent 14 days.

Once enrolled, patients can view their entire imaging history back to 2011 and share their records instantly. All imaging is in its original diagnostic format – so full quality suitable for physician’s viewing.

12. Ontario Health Team Update

Over the last four months, I have been actively participating in a series of leadership workshops designed to promote shared ownership and commitment of collaborative governance sessions as outlined below. The final session, Module 6, will take place on June 24 where we will synthesize learnings from across all modules and create a roadmap going forward.

Module 1: Introductory Session - Collaborative Governance

Module 2: Authentic Collaboration and Shared Leadership

Module 3: Shared Decision Making

Module 4: Shared Accountability

Module 5: Collaborative Governance and Backbone

Module 6: Synthesis and Development of an OHT Roadmap related to Shared Governance

We are actively collaborating with Dean Philpot and SEAMO with respect to the role of specialists in the OHTs, and the potential to engage primary care in a value based partnership.

I encourage Board members to stay in touch by dropping by: www.flaohht.ca where updates on Year 1 projects are available.

13. University Hospitals Kingston Foundation Strategic Planning Session

During the month of May, I was invited to participate in the UHKF strategic planning exercise providing input and advice on UHKF’s vision, mission and values statements as well as an opportunity to discuss strategic choices and priorities going forward.

14. University Hospitals Kingston Foundation 50/50

UHKF has launched a new fundraising venture – an online lottery is now available in support of KHSC and Providence Care. The UHKF 50/50 will take place monthly with a minimum \$5K jackpot to be won. There will be one guaranteed early bird \$500.00 cash prize every month. Tickets are \$10.00 for 10, \$20.00 for 40 and \$40.00 for 150 tickets. The June draw opened on May 31 and you have until June 17 to purchase your ticket: <https://www.uhkflottery.ca/>

15. Rose of Hope Charity Golf Tournament – Cataraqui Golf Club

The 23rd annual Rose of Hope tournament will be held on Tuesday, July 27 starting at 1200 noon and it will be a crossover format. Anyone making a donation in excess of \$20.00 will receive a charitable tax receipt and cheques are payable to the Rose of Hope (and can be dropped off at the golf club). KHSC Board Vice Chair, Sherri McCullough, and her team are leading the event again this year and are close to reaching the \$2M milestone to support breast health care at KHSC. Details and registration are available on the Cataraqui Golf Club website.

16. TI Gran Fondo – Starts June 1

The 2021 Thousand Islands Gran Fondo Challenge is sponsored by Focus Personal Fitness Studio. The Thousand Islands Gran Fondo was created to encourage folks of all abilities and levels to get fit and active by challenging themselves to one of the three routes (80/120/160km). The event date was purposely selected in September to allow riders to get fit over the summer and be ready for one of the distances in September. The COVID-19 pandemic has eliminated the ability to host a one-day mass event. Focus Personal Fitness Studio has the ultimate challenge for every rider regardless of ability. A challenge that will inspire you for months and will get you ready to conquer any distance event. For registration details: <https://uhkf.ca/Get-Involved/Events-Calendar/2021-Thousand-Islands-Gran-Fondo-Challenge>

17. Information and Privacy Commissioner of Canada – Digital Health

The Information and Privacy Commissioner of Ontario has released a new resource on digital health designed to help health information custodians navigate the recent amendments made to the *Personal Health Information Protection Act*. Topics covered in the publication include information relating to the electronic health record, interoperability of digital health assets, electronic audit logs, consumer electronic service providers, and access to records in electronic formats. The resource is available on the IPC's website at: www.ipc.on.ca

18. Regional Security Operating Centre Pilots

The Ministry of Health is seeking to establish two or three pilots to test the Regional Security Operations Centres shared service model. The pilots will help identify and address gaps in cyber security maturity and decrease duplication of efforts across healthcare organizations. The goals are to help perform centralized security oversight; provide critical cyber capabilities across Ontario Healthcare regions making health systems more resilient to cyberattacks and to inform provincial cyber security planning and implementation. Proposals must be sent by July 9, 2021.

19. Call for Applications: Ontario Standards for Care Program and Alignment / Standardization of HIS Implementations

A key objective under Ontario's Digital First for Health Strategy is enabling better, more-connected tools for frontline providers. The Ministry of Health is working to advance the Clinical Systems Renewal for Integrated Care Strategy, designed to support providers and Ontario Health Teams to advance their clinical system maturity by focusing on clinical and data standardization, provider access to patient information, and high-quality systems. To support this, the Ministry is calling for applications for two distinct but related initiatives.

Ontario Standards for Care Program: will take standardized, evidence-based clinical content and translate it into decision-support tools and templates that can be embedded into frontline clinical systems. The program would provide a conduit to bring provincially endorsed clinical content to the point of care in alignment with provincial clinical priorities. Organizations must submit an application by July 15, 2021.

Alignment and Standardization of Hospital Information System Implementation Across Ontario: one approach to advancing clinical and data standardization involves supporting hospitals to embed the latest standards and best practices into their HIS. This project's goal is to support Ontario hospitals to more closely align their HIS implementations to reflect the latest clinical, business and technical requirements and standards that can be used by those hospitals. Again, work through this project will support OHTs to achieve their clinical and digital health objectives such as better patient and population health outcomes and seamless information sharing.

20. Health Standards Organization / Accreditation Canada

Health Standards Organization (HSC) was formed in February 2017 focused on the development of standards, assessment programs and other tools to help care providers do what they do best: save and improve lives. Recognized by the Standards Council of Canada, HSO is the only standards development organization solely dedicated to health and social services. HSO is building on the strength of nearly 60 years of experience by Accreditation Canada.

What makes HSO and Accreditation Canada different from any other standards development or accreditation body – “People Powered Health” – HSO and Accreditation Canada are focused on the people that power health systems around the world: patients, providers, and policy-makers. A people-centred approach to the design of products, standards and assessments makes a difference in improving quality and health outcomes – by incorporating patients into accreditation surveyor teams, including patients on technical committees that review HSC standards.

Last month, HSO announced the world's first integrated care standard – the www.healthstandards.org website describes the foundation for this standard as follows: *“an integrated People-Centered health system is one with health and social services that are organized and managed across sectors and organizational boundaries so that people can receive coordinated and comprehensive services – at the right time, by the right provider, in the right place.”*

21. Ontario Hospital Association – CEO Connection Update

In the most recent update from Anthony Dale, provided an update on OHA's work to develop a consistent approach to healthcare worker vaccination. To inform and support OHA's advocacy work, an Advisory Group, chaired by Barb Collins, President and CEO of Human River Hospital, has been formed comprised of CEO's, IPAC Medical Directors, HR and Nursing leaders:

- Barb Collins, President and CEO, Humber River Hospital – Chair
- Dominic Giroux, President and CEO, Health Sciences North
- Liz Buller, President and CEO, Scarborough Health Network
- Dr. Jerome Leis, Medical Director, IPAC, Sunnybrook Health Sciences Centre
- Dr. Reena Lovinsky, Medical Director, IPAC, Scarborough Health Network
- Sandra Smith, VP People, Culture and Equity and CHRO, Women's College Hospital
- Greg Hedgecoe, VP People, Performance Improvement and Diagnostic Services, Queensway Carleton Hospital
- Robert Alldred-Hughes, VP Operations and CHRO, Muskoka Algonquin Healthcare
- Nancy Shaw, VP Clinical Services, Perth and Smiths Falls District Hospital
- Julia Marchesan, VP Interprofessional Practice and Academic Relations, London Health Sciences Centre

22. OHA Session: Leadership Vulnerability: Strength or Fragility?

On July 7, the OHA is hosting the above referenced session for hospital board chairs. The lead-in to the invitation to the Chairs: *“Janice Kaffer, President and CEO of Hotel Dieu Grace Healthcare, made a bold statement in an interview with the Windsor Star: one of the things we don’t do really well as leaders is actually just talk about how we’re feeling openly and leave safe space for others to talk about it too.”*

The OHA recommends the July 7 session will encourage hospital chairs to explore and debate whether vulnerability is a source of leadership strength or fragility – an ally or an enemy. It can be a demonstration of authenticity and trust or a leader spinning out of control. The session will look at ways to support the hospital CEO as they endure extreme levels of sustained stress while continuing to provide motivation and inspiration to the team. Joining the conversation will be Dr. Carolos Davidovich, physician and now a professor in the field of neuromanagement along with three hospital CEOs: Jake Tran from Toronto Grace Health Centre; Liz Buller from the Scarborough Health Network, and Todd Stepanuik from the Middlesex Hospital Alliance.

23. Ontario Hospital Association – Health Insurance Reciprocal of Canada Benefits Strategy

The OHA and HIROC recently released the final report developed by Willis Towers Watson *“Provincial Benefits Strategy – OHA/HIROC – Financial Analysis Report”*, which looks at the employee group benefits. The report looks at proposed governance structures, roles and responsibilities of hospitals, insurance carriers, and potential savings opportunities. KHSC participated in the study and members of the human resources team will continue to monitor.

24. Mission Moments

Anti-Muslim Racism Message

After the tragic and fatal terrorist attack against a Muslim family in London recently, the medical staff of KHSC have released the following statement on our social media feeds: *“We, the medical staff at KHSC, feel compelled to state clearly that we stand with our Muslim patients, staff and faculty in support of their rights to safety and freedom from discrimination. We are committed to fighting racism against Muslim and all other groups and to ensuring all people, regardless of race, religion, sexual orientation or gender, as welcome and safe in our hospital and clinics.”*

Cultural Sensitivity

Protection Services Officer Satwinder Singh demonstrated cultural sensitivity in upholding the dignity of one of our patients entering HDH on the evening of 2021-06-21. A Muslim woman wearing a Hijab entered HDH to be screened before attending her out-patient appointment. After going through the screening questions the female patient was asked by the female KHSC Access Control Screener present to switch-out her non-medical mask and put on a clinical mask provided by KHSC, consistent with our current policy. Satwinder immediately identified that his presence was a stressor for the female patient and moved himself away to uphold her dignity and respect her religious beliefs while removing and reapplying her face covering to adhere to the KHSC IPAC guidelines for universal masking at KHSC during COVID-19. This level of awareness and alignment with our values was exemplary and supported enhanced cultural safety for a patient during her experience at KHSC.

Consecration Ceremony – KGH Site – June 1, 2021

Further to the update provided to Board members in my May report, on Wednesday, June 1, 2021 welcomed leaders from the Anglican, Presbyterian, and Roman Catholic parishes as well as the Founder and President of the Kingston Irish Folk Club and Kingston Irish Famine Association, along with Rev. Dr. Neil Elford, Director of Spiritual Care, members of the KHSC planning team, and a representative from Ground Truth Archaeology Ltd. to recognize those buried at the KGH site.

Arrangements now in place, and Ministry correspondence has confirmed, that we can proceed with our plans to move the remains to St. Mary's Cemetery when deemed necessary to support redevelopment plans at the site. Archeological excavation work has now started behind the Douglas wing and Etherington Hall and will be completed in multiple phases.

Staying Connected Virtual Visit Program

From a person whose family used the Staying Connected Virtual Visit program (in her own words):

"My dad was admitted (non-COVID) and was put on life support. I am living approximately 1200 km away and unable to get to him bc (sic) of Covid restrictions etc. I wanted to be there more than anything and I am SO happy I got the chance (and still have the chance) to be able to see him. Whomever made this program or whomever is involved in making it happen are angels. Thank-you so much. I got the chance to say everything I wanted to and it lessened my anxiety about what was/is happening with him even though he's in bad shape. I can NOT express enough how important these meetings have been for me. I am overwhelmingly thankful. Please continue this important service. I would love however, that more than 2 visits per week be given, specially to those who are in a position such as my dads. Thank-you, thank-you, thank-you!!!

This means more to me than you can imagine. I feel so helpless being so far away and this has really helped not only me, but being able to relay these visits to my daughter who's in BC and my son who's in AB. (His grandchildren who are very worried and stuck out West)"

25. On the Move ...

Earlier this month, **Dr. Barry Guppy** announced that he would be leaving the CEO position at the Perth and Smiths Falls District Hospital having accepted a position with Health Canada.

26. KHSC Annual Report

This year we have created a multi-media, online COVID-themed annual report that chronicles the journey we've been on over the past year and celebrates the heroic efforts of staff across the organization. This year's report also provides a window into an extraordinary chapter in our hospital's history. The annual report is nearing completion and we will forward to the Board when available.

Respectfully submitted,



David R. Pichora
President and CEO