

*Date: October 21, 2015*

# Board Meeting

*Location: Brunswick Board Room*

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Chair:	Dr. Charles Jago	Recorder:	Desa Chipman
Board:	<ul style="list-style-type: none"><li>• Sharon Hartwell</li><li>• Gary Townsend</li><li>• Ben Sander</li><li>• Maurice Squires</li></ul>	<ul style="list-style-type: none"><li>• Edward Stanford</li><li>• Rosemary Landry</li><li>• Gaurav Parmar</li><li>• Colleen Nyce</li><li>• Stephanie Killam</li></ul>	
Executive:	<ul style="list-style-type: none"><li>• Cathy Ulrich</li><li>• Fraser Bell</li><li>• Terry Checkley</li><li>• Kelly Gunn</li><li>• Mark De Croos</li><li>• Penny Anguish</li></ul>	<ul style="list-style-type: none"><li>• David Williams</li><li>• Dr. Ronald Chapman</li><li>• Angela De Smit</li><li>• Michael McMillan</li><li>• Dr. Sandra Allison</li><li>• Steve Raper</li></ul>	

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## *Public Minutes*

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### 1. Call to Order Public Session

The Open Board session was called to order at 1:18pm.

### 2. Opening Remarks

Chairman Jago welcomed the guests to the October Public meeting.

### 3. Conflict of Interest Declaration

Chairman Jago asked if any Director present had a conflict of interest they wish to declare regarding any business before the Northern Health Board at this meeting.

- There were no conflict of interest declarations made related to the February 16, 2015 Public agenda.

### 4. Approval of Agenda

Moved by S Hartwell seconded by S Killam

The Northern Health Board approves the October 21, 2015 public agenda as presented

### 5. Approval of Board Minutes

Moved by R Landry seconded by G Parmar

The Northern Health Board approves the June 15, 2015 public minutes as presented

### 6. Business Arising from Previous Minutes

There was no business arising from the June 15, 2015 minutes.

## 7. CEO Report

C Ulrich provided an overview of the CEO report and highlighted the following topics;

- On September 22<sup>nd</sup> and 23<sup>rd</sup>, 2015 Dr Charles Jago and Cathy Ulrich attended the Union of BC Municipalities conference where they had the opportunity to meet with local government representatives from 23 communities and Regional Hospital Districts to discuss issues of concern to the communities.
- The six Northern Regional Hospital Districts met with Northern Health on October 19, 2015 in Prince George at the recently opened Learning & Development Centre. The annual planning meeting provided an opportunity for Northern Health and Regional Hospital District members to discuss several topics.
- Northern Health was nominated in partnership with Interior Health as a finalist in the 2015 Canadian HR Awards in the category "the Winds of Change Award for Best Health & Wellness Strategy". There were nine finalists in the category. This award recognizes excellence in the area of corporate health and well-being, with clear evidence of a positive impact on the workforce. Being nominated was a significant achievement and while Interior Health and Northern Health did not win the award it shows that both health authorities have done considerable work in this area to improve the health and wellness of staff and physicians.
- In June 2015 the Health Employers Association of BC hosted the annual Health Care Gold Apple award luncheon in Vancouver. Northern Health was the recipient of two awards, one in collaboration with Interior Health:
  - Heather Floris - Head Nurse, St John Hospital in Vanderhoof was awarded the Health Care Hero gold apple for Northern Health.
  - Northern Health and Interior Health were nominated for an award of merit for the Duty-to-Accommodate Pilot Project: A Collaboration with HR Operations & Disability Management.

### 7.1. Human Resources Report

D Williams highlighted the following topics from the Human Resources Report as follows;

- In July 2015 Northern Health created a new portfolio combining education and training with human resources planning and design.
  - This new portfolio combined the areas of: clinical placement; recruitment and retention; education - inclusive of the learning management system; learning pathways, and continuing medical education; organization development; and human resources planning and design.
  - This new configuration of services is intended to support the lifecycle of Northern Health's employees from our engagement with them as students, to their flourishing to their highest potential with Northern Health.
- This fall, the Health Sciences Placement Network (HSPnet) was implemented in NH. HSPnet is a comprehensive, web-enabled Practice Education Management system for the health sciences, which addresses the challenges of discipline-specific and interprofessional student placements. HSPnet will assist NH to place, track, and manage student placements across the health authority.

## 8. Audit and Finance Committee

### 8.1. Financial Statements (YTD Period 5)

- Year to date Period 5, revenues exceeded expenses by \$695,000.
- Revenues are unfavourable to budget by \$2.1 million or 0.7% expenses are favourable to budget by \$2.9 million or 1.0%.
- Delays in approval of targeted funding for a few budgeted programs have resulted in a delay in program expenditures and recognition of related funding. It was budgeted that

\$1.9million of targeted funding and matching expenditure would have been realized to the end of Period 5. As a result, revenues are showing an unfavourable variance to budget, while expenditures are showing a corresponding favourable variance to budget.

Moved by B Sander seconded by G Townsend

The Northern Health Board approves Northern Health's Period 5 financial statement, as presented

#### 8.2. Reappointment of External Auditor (2015-16)

- In October 2012 the Board approved a five-year service contract with KPMG LLP for the provision of external audit services (representing fiscal years 2012-13 - 2017-17 inclusive). Board approval is required each year to reappoint the external auditor for the next fiscal year.

Moved by B Sander seconded by G Townsend

The Northern Health Board approves the reappointment of KPMG LLP as external auditor to Northern Health for the fiscal year ending March 31, 2016, representing Year Four of a five-year term of engagement.

#### 8.3. Major Capital Projects Summary (Period 5)

- An overview of the major capital project summary for Period 5 was provided to the board for information with additional details provided on projects that are experiencing a delay.

### 9. Performance Planning and Priorities Committee

#### 9.1. Strategic Priorities: A Focus on Our People

##### 9.1.1. Occupational Health

- An update was provided to the Northern health Board on Occupational Health and Safety for 2014-15. The overall number of incidents has been decreasing, medical aid increasing and lost time relatively stable. This shows that injury prevention methods are being sustained and the Stay at Work Program is effective.
- In January 2015 WorkSafeBC announced their High Risk Strategy. This strategy focuses primarily on violence prevention in the workplace and the role of the supervisor. Several activities were in place to address this strategy and a number of additional activities have been initiated to enhance and support violence prevention in the workplace. Highlights of the activities were outlined in detail in the report.
- An audit of Violence Prevention Program Elements was completed and submitted at the request of the Ministry of Health. This audit was coordinated by the Occupational Health and Safety (OHS) Directors and included information on current education platforms, training statistics, hazard risk assessment tools, policies and reporting practices currently available at the Health Authorities.
- This audit provided the basis for enhanced conversations with Senior Executive who is supporting the development of a violence prevention program current state assessment to determine existing program implementation at WSBC designated high risk sites. This information will be used to develop site and HSDA specific action plans to support sustainability of the violence prevention program.
- In response to low reporting rates of immunizations, Workplace Health & Safety implemented an Immunization Status Reporting Project which launched April 1, 2015 focusing on new hires to the Health Authority. The objective of the project is to ensure that optimal vaccination rates are achieved for direct NH employees. It is anticipated that through increased knowledge and reporting of vaccination history, workers will be better protected against vaccine preventable diseases, in turn protecting the patients that they

interact with daily. In addition, should an outbreak situation occur, information will be easily accessible to those that require it to ensure worker and patient safety.

- Workplace Health and Safety are now beginning the fourth year of a comprehensive Five Year Plan which is aligned with both Interior Health and Northern Health's organizational strategic plans, and will to continue to be revised annually to support the Vice Presidents of Human Resources and People and Clinical Services' annual plans.
- Workplace Health and Safety continues to promote a comprehensive systems approach supporting a culture of health and safety across Interior Health and Northern Health. A primary focus continues to be supporting increased capacity at all levels to incorporate health and safety into operational practices, policies, procedures and decision-making.

## 9.2. Strategic Priorities: High Quality Services

### 9.2.1. Healthy Aging in the North: Action Plan

Stacey Patchett, Executive Lead, Elder Program and Dr. Nicole Ebert, Medical Lead, Elder Program joined the meeting to provide an overview of the Healthy Aging in the North: Action Plan as follows:

- The Healthy Aging in the North: Action Plan provides a framework for the delivery of seniors' health services in northern BC spanning the next 5 years. It is a broad framework intended to be flexible and responsive to a particular community's context, needs, health services, and other related resources.
- The action plan is embedded within the context of Northern Health's Idealized System of Services. The principal aim is to assist seniors to live well, retain their independence, and where possible, to avoid or minimize the duration of hospital stays. Ultimately, the goal is to support seniors to continue to be active and vibrant in their communities and to age healthily and gracefully at home. If hospital or facility care is required, the action plan guides the best quality experience possible for the elderly.
- The action plan has identified key principles which are as follows:
  1. A population health approach
  2. Person and Family Centered Care (recognizing Diversity & Choice)
  3. Supporting Community and Family Capacity
  4. Primary Care Homes and Integrated Services
  5. A Rehabilitative Approach in Northern Health Care Settings
  6. Recognizing Diversity and Choice
- The three areas that guide the work are:
  1. Supporting healthy living in community
  2. Supporting Frail Seniors Living in Community (Primary Care Home)
  3. Supporting quality for life in facility based care
- Areas of special consideration within the action plan are:
  - Aboriginal Health and Caring for other cultures
  - Dementia care
  - Palliative and End of Life Care

## 10. Presentation: Regional Dysphagia Management Team

Members from the Regional Dysphagia Management team, Susanne Watson, Professional Practice Lead, Home Care, Tysen LeBlond, Occupational Therapist, Shelley Doerksen, Speech Language Pathologist, and Amy Horrock, Registered Dietitian attended the meeting to provide information on Dysphagia. The presentation included highlights on the following:

- Swallowing & Quality of Life
- What Dysphagia looks like
- Interprofessional Dysphagia Model
- Mandate and Accomplishments

- Education & Training Mentorship
- Standardized Processes, Guidelines and Protocols
- Outreach Services and Consultation
- Quality Improvement Change Management
- Dysphagia Checklist
- The Board expressed appreciation for the work that the team does across Northern Health and commented that the presentation was very informative and educational.

## 11. Governance and Management Relations Committee

### 11.1. Policy Manual BRD 300 Series

The Policy Manual BRD Series was provided to the board with suggested changes highlighted for feedback and approval.

Moved by S Hartwell seconded by R Landry

The Northern Health Board approves the revised Policy Manual BRD 300 Series.

### 11.2. Community Consultation Strategy: Child Health

S Raper informed the Board that the planning has begun to determine the topic and timelines for the NH Board's Public Consultation as follows:

- In December 2015 at the Northern Health Board meeting Dr Allison will be presenting the child health status report focused on pre-natal to children up to 5 years of age. With the release of this health status report later in 2015, it is proposed that the NH Boards' Community Consultation process in 2016 focus on Child Health.

The Public Meeting adjourned at 2:38pm



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Dr Charles Jago, Chair



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Desa Chipman, Recording Secretary