

Date: February 11, 2019

Board Meeting

Location: Valemount, BC

Chair:	Colleen Nyce	Recorder:	Desa Chipman
Board:	<ul style="list-style-type: none">• Stephanie Killam• Frank Everitt• John Kurjata• Wilf Adam	<ul style="list-style-type: none">• Edward Stanford• Rosemary Landry• Patricia Sterritt• Brian Fehr	
Regrets:	<ul style="list-style-type: none">• Gaurav Parmar		
Executive:	<ul style="list-style-type: none">• Cathy Ulrich• Fraser Bell• Danielle Guglielmucci• Mark De Croos• David Williams	<ul style="list-style-type: none">• Dr. Sandra Allison• Steve Raper• Dr. Helene Smith• Penny Anguish	

Public Minutes

1. Call to Order Public Session

The Public Board session was called to order at 9:04am

2. Opening Remarks

Chair Nyce welcomed the guests to the meeting. The Board enjoyed a tour of the Valemount clinic this morning. This Board meeting is the first meeting of 2019. The Board Chair acknowledged the traditional territory on which we are holding this Board meeting. New Board Directors were introduced and the Board acknowledged the contributions that Board Director, Gaurav Parmar made over the last five years as he steps down from the Board.

3. Conflict of Interest Declaration

Chair Nyce 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 11, 2019 Public agenda.

4. Approval of Agenda

Moved by R Landry seconded by W Adam

The Northern Health Board approves the February 11, 2019 public agenda as amended.

- Moved the presentation of Virtual Healthcare to before the CEO Report.

5. Approval of Previous Minutes

Moved by F Everitt seconded by R Landry

The Northern Health Board approves the December 3, 2018 public agenda as presented.

6. Business Arising from Previous Minutes

There was no business arising from previous minutes.

Presentation: Virtual Health Care to Improve Rural Emergency Services

Dr. Ray Markham,

The Board expressed appreciation for the tour and the opportunity to see first hand how virtual care is provided. The Board also expressed appreciation for the additional information provided in the presentation.

7. CEO Report

An overview of the CEO report was provided for information and discussion with the following topics being highlighted:

- **IMAGINE Community Grants:** We are pleased that the IMAGINE Community Grants program is the recipient of the prestigious 2019 BC Patient Safety and Quality Council award in the Staying Healthy category. The program is being recognized for its outstanding contributions to wellness in the communities Northern Health serves and for being an innovator in the delivery of high-quality funding programs for health-related projects. The award ceremony will be held at the BC Patient Safety and Quality Council Quality Forum in Vancouver in February 2019.
- **Northern Diagnostic Medical Sonography Program:** Sandra Rossi, Regional Director, Recruitment and Organizational Development along with Dr. Shyr Chui, Radiologist with Northern Health attended the College of New Caledonia Sonography Grand Opening event on January 7, 2019. This is one of only two publicly funded sonography education programs in British Columbia. Dr. Chui spoke on behalf of Northern Health, where he discussed the importance of training in the north to support Northern Health's Recruitment and Retention needs. Seven of the eight students are from the north including Prince George, Quesnel and Burns Lake. The one student from outside of our region has been attending UNBC the last few years and plans to stay in the region after graduation.
- **Physician Quality Improvement Training:** In November, the Physician Quality Improvement (PQI) program delivered quality improvement (QI) training to its 100th physician participant.
 - The first province-wide PQI Summit was held in November 2018 and over 400 physicians attended from across the province. The PQI Summit opened with an inspiring talk by Edwina Nearhood, a patient representative from Fort St John. Several Northern Health physicians and teams presented their quality improvement initiatives, including Dr. Dawid Van Rensburg, who delivered a presentation about recent work done in Terrace to design and deliver an intensive, hands-on QI training curriculum for the local Medical Staff Association. The training was designed to help physicians take QI learnings from theory to practice, while increasing collaboration across organizational boundaries.
- **Northern Interior Leadership changes:** Northern Health has welcomed two new Health Services Administrators to the Northern Interior:
 - Laura Wessman officially took on her new role as Health Services Administrator in Prince George in early December. Her responsibilities include leadership at UHNBC. Laura has come to Northern Health from a Chief Operating Officer role in Churchill/Winnipeg with the Winnipeg Regional Health Authority.
 - Marie Hunter, Health Services Administrator in the Lakes District recently retired after over 40 years in nursing and leadership roles in health care. We would like to take this opportunity to thank Marie for her leadership and many years of service. Vicky Rensby will be assuming the Health Services Administrator role. Vicki is a long term employee of Northern Health and served most recently as the Community Services Manager in the Lakes District.
 - In addition, the Health Services Administrator in the Omineca area is on an extended leave. Tracee Dunn, the Long Term Care Manager, Stuart Nechako Lodge is providing interim leadership in the Health Services Administrator role.

- **Robson Valley:** This month, Northern Health is recognizing the extraordinary philanthropy and generosity of the Foundations and Hospital Auxiliaries across the north who enable Northern Health to improve the care and services provided. The McBride Hospital Auxiliary is one of those organizations. Recently, the McBride Hospital Auxiliary purchased the eleventh patient lift for the McBride Hospital. The lift is valued at \$10,000. These lifts are used to ensure safety for both patients and staff in lifting, moving, positioning and mobilizing patients.

7.1. Human Resources Report

The February Human Resources report focuses on the Psychological Health & Safety in the Workplace Standard.

- In 2017, BC Health Authorities, including Northern Health, committed to a three-year process to implement the Psychological Health and Safety in the Workplace Standard (called “the Standard”), which addresses 13 factors that make up psychologically safe and healthy workplaces. Successful implementation of the Standard is a critical element of the Ministry of Health’s (and Northern Health’s) vision of a healthy, skilled, engaged, and well-led workforce. The Standard offers a coherent and evidence-based framework that supports the transition toward an integrated, team-based health care system that is culturally safe.
- In a culturally safe health care work environment:
 - Staff and leaders recognize that differences and similarities exist between cultures and that the workplace culture is inclusive of those differences and similarities.
 - Health care services are free of racism and discrimination.
 - Employees, patients, residents, and their families are supported to draw strength from their identity, culture, and community.
- Supporting the health care system to be culturally safe for Indigenous people is one of Northern Health’s top priorities.
- Northern Health is committed to increasing psychological health and safety awareness in our workplaces and to reduce the stigma surrounding mental health. It is important to recognize, address, and treat mental health with the same attention as physical health or any other health-related condition.
- Successful implementation of the Standard is incumbent on widespread adoption and targeted actions focussed on the 13 psychosocial factors that can impact the mental health of workers and contribute to safer health care workplaces. The 13 factors were outlined in the material.
- Northern Health is meeting with its local union representatives in a collaborative partnership to guide implementation of the Standard. The above guiding principles align with Northern Health’s implementation plan. The goal of Psychological Health and Safety in the Workplace within Northern Health aligns with the Standard’s requirements for a documented and systematic approach to developing and sustaining a psychologically healthy and safe workplace
- Northern Health conducts an annual review of the Standard’s implementation plan which is shared with all stakeholders including HEABC and the unions.
- The Human Resources Strategy is also reviewed on an annual basis including quarterly reviews to Northern Health’s executive team.
- Information was provided on the current recruitment status for Northern Health as follows:

- To date in fiscal year 2018/19, Northern Health has posted 3041 positions, 72% have been filled by internal staff (existing regular and casual staff) and 9% have been filled externally (qualified applicants from outside of Northern Health). Some unfilled positions are currently in the competition phase. Positions that remain unfilled for more than 90 days become difficult-to-fill vacancies (DTFV). On average, only 10% of approximately 3000 positions go to DTFV.
- Casual hires are not reflected in this data. On average, NH hires 1,000 casuals per year, many of these staff successfully bid into permanent, ongoing positions through our internal posting process.

8. Audit and Finance Committee

8.1. Public Period 9 Comments & Financial Statements

- Year to date Period 9, Northern Health (NH) has a net operating deficit of \$3,744,000
- Revenues are favourable to budget by \$5.1 million or 0.8% and expenses are unfavourable to budget by \$8.9 million or 1.5%. Budget overage in Acute Care is primarily due to higher than expected patient volumes at a number of acute care facilities. Budget surplus in Community Care and Corporate is primarily due to vacant positions.
- At this time Northern Health is forecasting to be in a balanced position on base operations at yearend.

Moved by J Kurjata seconded by B Fehr

The Northern Health Board receives the 2018-19 Period 9 financial update as presented.

8.2. Major Capital Projects Summary (Period 9)

- The Northern Health Board approved the 2018-19 capital expenditure plan in February 2018, and amendments in June and November 2018. The updated plan approves total expenditures of \$49.4M, with funding support from the Ministry of Health (\$18.5M, 37%), Six Regional Hospital Districts (\$16.5M, 33%), Foundations, Auxiliaries and Other Entities (\$4.6M, 9%), and Northern Health (\$9.8M, 20%).
- Year to date Period 9 (December 13, 2018), \$25.9M has been spent towards the execution of the plan as summarized in the material.

Moved by J Kurjata seconded by W Adam

The Northern Health Board receives the Period 9 update on the 2018-19 Capital Expenditure Plan as presented.

9. Performance, Planning & Priorities Committee

9.1. Strategic Priority: Quality

9.1.1. Accreditation Canada Distinction in Trauma Services

- The Northern Health Board of Directors received a summary on the final Accreditation Canada, Trauma Distinction Decision Report based on the on-site survey that NH Trauma Program participated on October 21-25, 2018.
- The Accreditation Canada, Trauma Distinction Program recognizes organizations that demonstrate clinical excellence and an outstanding commitment to leadership in the field of trauma care. It promotes a culture of continuous quality improvement throughout the system by ensuring essential standards and performance indicators are met to assure optimal trauma care.
- Accreditation is provided to NH as an organization. Accreditation Canada assesses sample sites at each of the various levels of care to assess how trauma services are provided in the different contexts.

- Northern Health was commended on its commitment to using the Trauma Distinction Program to improve the quality and safety of services it offers to its patients and the communities it serves.
- Based on the Accreditation Canada evaluation, Northern Health was awarded Distinction in Trauma Services.

9.2. Accreditation Canada – Recognizing Achievement of Governance Standards

- Accreditation is an important tool to help assess how well we are meeting national standards of care and to guide continuous improvement so we can consistently deliver high quality services at Northern Health (NH). The outstanding achievements were highlighted from the 2018 Accreditation Canada survey.
- Over two thousand criteria were assessed (2125), with the organization meeting 94.8% of the criteria. NH received “accredited” status with requirements to provide evidence by May 2019 that the organization is meeting the unmet criteria identified through the survey.
- NH was successful in achieving **100% compliance** with healthcare standards in three areas:
 - Infection Control, Reprocessing of Reusable Medical Devices, and Governance.
- Staff across the region contributed to the outstanding achievement of infection control and medical device reprocessing standards. The Infection Prevention and Control team, under the leadership of Deanna Hembroff, Regional Manager, and the Medical Device Reprocessing Program, led by Bonnie Mackenzie, Regional Coordinator, have been recognized with certificates of achievement and NH Quality Lives Here mugs.
- Governance standards cover four functional areas:
 - Functioning as an effective governing body
 - Developing a clear direction for the organization
 - Supporting the organization to achieve its mandate
 - Being accountable and achieving sustainable results

9.3. Strategic Priority: Our People

9.3.1. Education & Development

- An overview of the 2016-2021 Education and Development plan for Northern Health was provided to the Board for information and discussion.
- Northern Health Education and Development aims to provide high quality, innovative, accessible, and evidence-based educational services, enabling students, staff, and physicians to flourish as they perform the duties of their job.
- Northern Health values and supports education and development as key drivers for excellence in rural and remote health service delivery.
- The presentation included additional information on the following areas:
 - Post-Secondary Training & Collaboration
 - Leadership Development
 - Nursing Orientation
 - Organizational Culture Development
 - Learning Hub

10. Governance and Management Relations Committee

10.1. Policy Manual BRD 500 Series

- The policy manual BRD 500 Series was presented to the Board for review and approval.

Moved by S Killam seconded by R Landry

The Northern Health Board of Directors approves the reviewed BRD 500 series

10.2. Policy Manual BRD 600 Series

- The policy manual BRD 600 Series was presented to the Board for review and approval.
 - Board members asked management to look into the provision for email voting to find out if that is a possibility in urgent situations.
 - Management will look into email voting and bring the information forward to the Governance & Management Relations Committee.

Moved by F Everitt seconded by R Landry

The Northern Health Board of Directors approves reviewed BRD 600 Series

10.3. Legalization of Non-Medicinal Cannabis

- On October 17, 2018, possession and use of cannabis for non-medicinal purposes became lawful, under the federal *Cannabis Act*.
- Northern Health prepared for this change in legislation by forming a working group which:
 - Reviewed and updated existing policies to reflect the change
 - Published a new policy on staff substance use, with a focus on fitness for work
 - Prepared an internal resource page for staff, with information that can be used to support staff, patients and families
 - Prepared public health guidance for external partners, including local governments and schools
- Next steps have been identified as follows:
 - Continue to monitor and adjust response as needed given non-medical cannabis health knowledge and impact of legalization will be evolving.
 - Be aware of new information emerging about edible products and any required action for NH. Edibles (accidental consumption, overdose) remain one of the primary concerns experienced by other places that have legalized, and they are expected to become legalized in Canada in October 2019.
 - Continue to look at prevention strategy and inform and advise on lower risk cannabis use for people who do use substances, within a healthy communities context.
- Board members appreciated receiving the information and recognize the complexities that are involved with the change in legislation.

10.4. Relationship with Foundations and Fundraising Societies.

- The foundations and auxiliaries across Northern Health continue to do exceptional work; providing funding for equipment, providing services such as hospital gift shops, and organizing events that build a positive presence in northern communities.
- In 2017/18, the foundations and auxiliaries committed \$2,183,623 million to Northern Health.
- These funds do not include the countless hours that volunteers committed to raising those funds, to organizing activities & events, and providing services. These hours make a big difference to the people we serve.
- As a group, the foundations that represent Northern Health continue to meet semi-annually. They meet face-to-face once, and via videoconference once. At these meetings, the foundations discuss how they can learn from each other and work together as a large group, or as sub regional groups.

- Board members expressed gratitude and appreciation to the foundations and the auxiliaries across Northern Health for their ongoing support and contributions to Northern Health.

Meeting was adjourned at 10:48am
Moved by S Killam

Colleen v Nyce

Colleen Nyce, Chair

Desa Chipman

Desa Chipman, Recording
Secretary