

**Board Meeting****Date: December 2, 2019****Location: Prince George, BC**

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<b>Chair:</b>	Colleen Nyce	<b>Recorder:</b>	Desa Chipman
<b>Board:</b>	<ul style="list-style-type: none"><li>• Stephanie Killam</li><li>• Frank Everitt</li><li>• Wilf Adam</li></ul>	<ul style="list-style-type: none"><li>• Edward Stanford</li><li>• Rosemary Landry</li><li>• John Kurjata</li></ul>	
<b>Regrets:</b>	<ul style="list-style-type: none"><li>• Patricia Sterritt</li></ul>		
<b>Executive:</b>	<ul style="list-style-type: none"><li>• Cathy Ulrich</li><li>• Fraser Bell</li><li>• Mark De Croos</li><li>• David Williams</li><li>• Kelly Gunn</li></ul>	<ul style="list-style-type: none"><li>• Penny Anguish</li><li>• Dr. Ronald Chapman</li><li>• Steve Raper</li><li>• Kirsten Thomson</li><li>• Danielle Guglielmucci</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 8:46am

**2. Opening Remarks**

Chair Nyce welcomed everyone to the meeting and acknowledged that the meeting is being held on the traditional territory of the Lheidli T'enneh.

**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 December 2, 2019 Public agenda.

**4. Approval of Agenda**

Moved by R Landry seconded by S Killam

The Northern Health Board approves the December 2, 2019 public agenda as presented

**5. Approval of Board Minutes**

Moved by F Everitt seconded by J Kurjata

The Northern Health Board approves the October 23, 2019 minutes as presented

**6. Business arising from previous Minutes**

There was no business arising out of the previous minutes

## 7. CEO Report

An overview of the CEO Report was provided for information and the following topics were highlighted:

- In November Northern Health Leaders and Staff had the opportunity to attend the following sessions held in Prince George:
  - Aging in Rural & Northern Regional Workshop: The workshop was organized by the Centre for Technology Adoption for Aging in the North in collaboration with Northern Health and UNBC. The workshop goals were to:
    - Prioritize the top 3-5 technologies/types of technology to focus on bringing to the region for immediate impact on health care delivery and/or aging in place in the north
    - Inspire participants about the opportunities with technology
    - Identify challenges and mitigation strategies for introduction, implementation, and sustainability of technology solutions in rural and northern communities.
  - Caring for Older Adults Symposium: The symposium was hosted by the BC Academic Science Network and Canadian Frailty Network.
    - The first day of the symposium was focused on:
      - Improving the quality of life of persons living with dementia and their caregivers with a focus on rural dementia care and Indigenous populations
      - Frailty: Tailoring care to need and vulnerability
      - AVOID – Activity, Vaccination, Optimize meds, Interact, Diet & Nutrition
    - The second day provided the opportunity to participate in workshops focused on healthy aging, AVOID, Risk – Awareness, Acceptance and Amelioration, and a session led by Isobel Mackenzie, Seniors Advocate entitled “Reality and Promise in BC”
- First Nations Health Council: the North Region Caucus hosted their Regional Health Assembly in Prince George on November 12 -14. As part of the Caucus the First Nations Health Authority hosted a celebration and acknowledgement banquet which celebrated and honoured First Nations students from the Northern Region that have participated in FNHA Regional Training over the last two years. Students from each training program shared their learning experiences and the difference this training and education has made in their lives.
- Adult Day Program and Respite Services: Northern Health is expanding adult day program services in a number of communities. New Adult Day program services have been established in Mackenzie and McBride. The program in Mackenzie is well integrated into the Long Term Care service within the hospital and offers extended hours service. In the Robson Valley, an Adult Day Program was started on November 1, 2019. This program has been integrated into the Long Term Care service at the McBride Hospital and is available to families three days a week. The program provides respite for caregivers up to 10 hours a day.
- Downtown Prince George Health Services: work is continue to implement the recommendations outlined in the Downtown Health Service Review. Actions underway were outlined in detail in the presentation.

### 7.1. Human Resources Report

An overview of the Human Resources report was provided for information and discussion. The following areas were highlighted:

- The Travel Nurse Program is a collaborative effort between Northern Health and the BC Nurses' Union which strives to provide innovative solutions to serve rural and remote communities and provide opportunities to nurses to expand their scope by discovering new experiences in nursing. The Travel Nurse Program has been in place approximately 1.5

years, fully operational for approximately 1 year and provides travel nursing opportunities in Prince Rupert, Hazelton, McBride, Fort St. John and Dawson Creek.

- Grow Our Own is an expansive program which targets grade 10-12 students within northern BC to increase awareness and engagement in health care career options. This program is in alignment with the recruitment philosophy 'In the north, for the north' and seeks to engage the next potential generation of medical professionals in northern BC.
- In the 2019-2020 school year, NH is planning to complete six events that support the Grow Our Own Program. These events will be a combination of the following:
  - In-school medical simulations: NH Recruiters in partnership with the UHNBC Clinical Simulation Lab will travel to high schools throughout northern BC to demonstrate medical procedures using medical simulation machines with support from local medical professionals.
  - Student career counselling sessions: NH is conducting focused on one-on-one career counselling sessions with high school students to provide information on careers to support students in clarifying details of any healthcare careers they may wish to pursue.
- NH participated in the Northern BC Indigenous Youth Science and Health Camp at UNBC. The purpose of the camp was to introduce northern BC Indigenous youth to a post-secondary environment and encourage them to learn more about health and sciences, potentially inspiring them to pursue health and science-related education and careers.
- NH worked collaboratively with HEABC Recruitment Solutions in the development in the marketing and recruitment campaign known as Choose2Care. This initiative features the Choose2Care website which provides a central repository of information for those considering a career as a Health Care Assistant. Choose2Care.ca is being supported by a provincial advertising campaign, which includes both digital and offline (print, radio, billboards, pamphlets) media. Advertisements are currently running on transit and in community print and digital media across the province. Other digital advertising includes Facebook ads, retargeting display campaigns, and other campaigns running through the Google audience and Google advertising platforms. The campaign also includes targeted social media on the following platforms: Facebook, Twitter, and Instagram.
- In fiscal year 2019/20 year to date, Northern Health has posted 2364 regular or relief positions; 69% have been filled by internal staff (existing regular and casual staff) and 8.50% have been filled externally (qualified applicants from outside of NH) within 90 days. Some unfilled positions are currently in the competition phase. Positions that remain unfilled for more than 90 days become difficult-to-fill vacancies (DTFV). In addition to the postings that are filled externally, 10.23% of approximately 3200 postings become a DTFV posting.
  - 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. Period 7 Financial Statements**

- Year to date Period 7, Northern Health has a net operating deficit of \$7, 231,000. Revenues are favourable to budget by \$2.8 million or 0.6% and expenses are unfavourable to budget by \$10.1 million or 2.0%.
- The budget overage in Acute Care is primarily due to higher than expected patient volumes at a number of acute care facilities. This year to date average inpatient daily census was 586.4 vs a budget amount of 555.7. Additionally, due to a number of vacancies, primarily specialized nursing positions, actual overtime hours are higher than budget.
- The budget overage in Long Term Care is primarily due to vacancies in a number of care aide positions across the region resulting in vacant shifts filled at overtime rates.

Moved by J Kurjata seconded by S Killam

The Northern Health Board receives the 2019-20 Period 7 financial update as presented.

#### 8.2. Capital Projects Expenditure Plan update

- The Northern Health Board approved the 2019-20 capital expenditure plan in February 2019, and an amendment in June 2019. The update plan approves total expenditures of \$55.6M, with funding support from the Ministry of Health (\$17.7M, 32%), Six Regional Hospital Districts (\$22.9M, 41%), Foundations, Auxiliaries and Other Entities (\$3.4M, 6%), and Northern Health (\$11.6M, 21%).
- Year to date Period 7 (October 17, 2019), \$21.2M has been spent towards the execution of the plan was summarized in the material.
- In addition to the major capital projects, NH receives funding from Ministry of Health, Regional Hospital Districts, and Auxiliaries for minor equipment and projects (less than \$100,000). For 2019-20, it is forecasted that NH will spend \$9.5 on such items.

Moved by J Kurjata seconded by W Adam

The Northern Health Board receives the Period 7 update on the 2019-20 Capital Expenditure Plan.

### 9. Performance Planning and Priorities Committee

#### 9.1. Strategic Priority: Coordinated & Accessible Services

##### 9.1.1. Primary Care & Community Services and Specialized Services

- An update was provided on the Primary Care and Community Services in Northern Health.
- The update included detailed information from three priority areas of focus which are:
  - Primary Care Networks: in various phases of development in the North with Division of Family Practice involvement.
  - Urgent and Primary Care Services: are operating in Quesnel and Prince George. There are early discussions regarding location of Urgent and Primary Care services in the North West.
  - Primary and Community Care Initiative: This initiative will improve the way physicians, nurse practitioners and community health care providers work together to ensure accessible and coordinated services in the community, prevent unnecessary patient presentation to Emergency Departments, avoid preventable admission to hospital, and enable supported discharge to shorten hospital lengths of stay. The four projects are:
    - Improve Team Based Care
    - Redesign Home Support Services
    - Increase Immunization rates for infants and school aged children
    - Complete the implementation of the Community Health Record

#### 9.2. Strategic Priority:

##### 9.2.1. Quality Program

- An update on the key initiatives of the Quality Program was provided for information. Detailed information was provided on the following:
  - Person and family-centred care
  - Quality framework
  - Accreditation
  - Quality improvement training and education

### 10. Presentation: Prince George Urgent & Primary Care Centre

Julie Dhaliwal, Director Community Services, Northern Health and Dr. Barend Grobbelaar, representing both the Division of Family Practice and the Nechako Medical Clinic, provided a presentation on the Prince George Urgent & Primary Care Centre.

## 11. Governance and Management Relations Committee

### 11.1. Policy Manual BRD 400 Series

- The revised policy manual BRD400 Series were presented to the Board for review and approval.

Moved by F Everitt seconded by R Landry

The Northern Health Board of Directors approves the revised BRD 400 series

### 11.2. Board Development and Education Plan

- The proposed board development and education plan was presented for review and discussion.
- Board members appreciated the information provided and agreed with the proposed plan. It was agreed that the joint session with the First Nations Health Authority Board would be best to be arranged for the April Board meeting which will be held in Prince Rupert.
- Management will reach out to the First Nations Health Authority Board office to coordinate the logistics and confirm their participation for the April 2020 Board meeting.

Moved by F Everitt seconded by R Landry

The Northern Health Board of Directors approves the Board Development & Education Plan.

### 11.3. Legislative Compliance Review:

#### 11.3.1. Safety Standards Act

- The *Safety Standards Act* regulates safety for workers, products and disciplines related to power engineers, electrical equipment, boilers, pressure vessels, and refrigeration. It applies to asset owners who own or manage facilities that have one or more regulated products such as escalators, boilers and gas appliances under one roof, which includes hospitals.
- The Act is administered by Technical Safety BC, as delegated by Minister of Municipal Affairs and Housing. Asset owners have unique responsibilities under the Act and Regulations throughout the equipment life cycle that are aimed at improving safety and lengthening equipment life. There are four main areas of responsibilities for asset owners including:
  - Design and purchase – newly built equipment or equipment purchased from outside of BC must be approved before installation
  - Installation – permits are required prior to operating newly installed electrical products, boilers, refrigeration systems, pressure vessels, and equipment or appliances operating with natural gas
  - Operation and maintenance – operation of regulated equipment requires an operating permit and maintenance requires the employ of qualified workers with the appropriate certification.
  - Sale and disposal – Technical Safety BC must be notified by the asset owner prior to sale or disposal of regulated equipment.
- Northern Health is generally highly compliant with the obligations of this legislation. In reviewing the obligations with Facilities Management, there are some identified areas of opportunity for improvement. There is not currently a complete NH inventory of all regulated equipment, and recently an unregistered asset was found during a Technical Safety BC inspection of an NH facility. However, Facilities Management is working with Technical Safety BC to develop a comprehensive listing of all assets and permits so that NH will have continued assurance that all aspects of compliance are met.

### 11.3.2. Food and Drug Act: Amendment – Vanessa's Law

- On 6 November 2014, Bill C-17 received Royal Assent, amending the Food and Drugs Act of Canada to:
  - a) Strengthen safety oversight of therapeutic products throughout their life cycle;
  - b) Improve reporting by certain health care institutions of serious adverse drug reactions and medical device incidents that involve therapeutic products; and
  - c) Promote greater confidence in the oversight of therapeutic products by increasing transparency.
- This is also known as Vanessa's Law – Protecting Canadians from Unsafe Drugs Act
- Much of the amendment focuses on safety in drug and medical device manufacturing facilities; section 21.8 requires mandatory health care institution reporting of adverse drug reactions (ADR) and medical device incidents (MDI) to Health Canada.
- Subsequent to the passing of the Act, the Food and Drug Regulations and the Medical Devices Regulations have been amended to provide detail and process for ADR and MDI reporting. The new regulations comes into force on December 4, 2019.
- This review is presented for information only; no compliance certificates are attached as the mandatory reporting requirement is not yet in effect. A full review to assess compliance will be conducted next year to assess implementation of the new reporting requirements.

Meeting was adjourned at 10:27am

Moved by S Killam seconded by R Landry



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Colleen Nyce, Chair



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Desa Chipman, Recording Secretary