

Minutes - Meeting of the Administrator January 24, 2023

1:00-4:00 pm

Nova Scotia Health (In-Person – Acadia Boardroom)

Attending: Janet Davidson, Administrator; Karen Oldfield, Interim CEO

Staff/Guests: Dr. Nicole Boutilier, Vice President, Medicine; Derek Spinney, Vice President, Corporate Services, Infrastructure and CFO; Krista Grant, Chief, Public Engagement and Communications; Anna Marenick, Vice President, People, Culture and Belonging; Wendy Anderson, Board Coordinator

1.0 Call to Order and Approval of the Meeting Agenda

The meeting was called to order at 1:00 pm

Motion: *That the Administrator approves the agenda for the current meeting, Tuesday, January 24, 2023 with a change of ordering to have #4 and #7 “in camera” portions together.*

2. Consent Agenda

2.0 Minutes of the Board of Directors Meeting – November 11, 2022

2.1 Interim CEO Report

MOTION: *That the Administrator declared the Minutes of the Board Administrator meeting of November 11 2022 and Interim CEO Report approved as presented.*

2.2 Quality Improvement and Safety – Receipt of the following reports:

- 2.2.1 Aligning Quality & Patient Safety with Policy & Practice in NSH
- 2.2.2 Patient Story (4 min) [Juanna's Experience as a Patient Family Public Advisory Council member and our work together. The time to make change is now!](#)
- 2.2.3 Quality Improvement & Culture Strategy BN / Quality Improvement & Culture Strategy
- 2.2.4 Patient Engagement BN
- 2.2.5 Patient Feedback Report Dec 2022
- 2.2.6 Quality Review Status Q2 2022-23 BN / Q2 Report
- 2.2.7 Patient Safety Incident Disclosure Q2 2022-23 BN / Q2 Report
- 2.2.8 Patient Safety Incident Management Q2 2022-23 BN / Q2 Report
- 2.2.9 Patient Safety Act Indicators & IPAC Surveillance Q2 2022-23 BN / Q2 Report
- 2.2.10 Quality Scorecard Jan 2023
- 2.2.11 2023 Quality Awards Announcement
- 2.2.12 CIHI Embargo Release Summary Dec 2022 / HSMR Summary Report / HSMR Q2 Report / Hospital Harm Update BN

2.3 Human Resources - Receipt of the following reports:

- 2.3.1 Labour Relations Update BN
- 2.3.2 Recruitment Update

2.3.3 Provincial OSHW Compliance Report Q2 July 1-Sept 30 2022

2.3.4 Physician Recruitment Q2 Update

2.4

2.4.1 Case Costing (no materials)

Administrator spoke to her mandate on governance structure for the organization and consideration of a model going forward regarding case costing.

2.4.2 Virtual Care (no materials)

Administrator updated on progress of Virtual Care and impact on Need a Family Physician registry with the opportunity to expand to allow different model for talent

2.4.3 **Accountability Framework Agreement** (For approval)

2.5 Financial – Receipt of the following reports:

2.4.4 Regulatory Compliance Report Environmental – Q3 FY23

2.4.5 Regulatory Compliance Report Finance – Q3 FY23

2.4.6 KPI Report

MOTION: That the Administrator reviewed and approves the Consent items as presented including approval of the Accountability Framework Agreement Report.

3.0 Declaration of Conflict of Interest

No conflicts were declared.

5.0 Accreditation BN and Report

The final accreditation report was received with a grade of *Accreditation with Accommodation*.

The Administrator requested regular meeting updates going forward. Note of Accreditation Canada advising of a different model inclusive of additional visits in future.

6.0 Nova Scotia Health Performance Dashboard Review

The Vice President, Medicine provided an update on the previously circulated performance dashboard documentation. The current data provided via Tableau on the scorecard and Need a Family Physician registry were discussed. The corporate priorities have been identified with progress being tracked including percentage of completion to date and alignment with mandate requirements. Combined reporting with the Department of Health & Wellness ensures alignment to the overall Provincial Strategic Plan.

The current dashboard was reviewed and discussion ensued on function/accountability and benchmark standards being followed.

8.0 Financial Governance Oversight

The Vice President, Corporate Services, Infrastructure and CFO presented the forecast and quarterly reporting were discussed and reviewed.

8.0.1 Forecast

NSH budget obligations unmet this quarter due to COVID pressures, Home First (DSLTC Program), and agile approvals for business cases and inflation. We continue to work with DHW Finance but have been consistent with previous forecasting and our agile approval strategy.

Discussion ensued on increased pressures on operations i.e. inflation and utilities and HHR staffing strategies and how to normalize going forward.

8.0.2 Business Case Implementation

An update was provided on progress to date and action to fully operationalize the Implementation Management Office (IMO). IMO-level portfolio reporting dashboard in progress to provide real time insight into execution status, recruitment and financials and overall portfolio oversight on business cases.

8.0.3 Fraud Incidents

The Vice President Corporate Services, Infrastructure and CFO shared the recently completed report on Fraud incidents.

The Report was reviewed with a breakdown of cases identified and discussed in the last quarter. There is a defined policy and procedure for reporting, investigating and following the cases to conclusion.

4.0 Physician Credentialing Recommendations “In Camera”

MOTION: That the meeting moves to “in-camera”

The Vice President, Medicine referenced to the previously circulated credentialing recommendations confirming established process has been followed and no irregularities to report. The Vice President, Medicine confirmed that the credentials have been unanimously approved by the Health Authority Medical Advisory Committee (HAMAC).

MOTION: That the Administrator approves the Physician Credentials as delivered.

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CBC Story Update

The Vice President, Medicine/Quality and System Performance provided an update on previously submitted case of last meeting under review with 70% of recommendations implemented to date.

7.0 *Update on ED's "In Camera"*

The Vice President, Medicine provided an update on current cases under investigation and process/standards followed. Current timeline of 90 days to complete with goal to complete in shorter timeframe.

MOTION: Declare meeting "Out of Camera" and recessed for Office of the Auditor General arrival – 2:27 pm

MOTION: Meeting to reconvene with Office of the Auditor General Arrival – 3:00 pm

8.0 *Financial Governance Oversight (Cont'd)*

8.0.4 *Audit Annual Plan*

The Vice President, Corporate Services, Infrastructure and CFO introduced members of the Office of the Auditor General: Kim Adair, FCPA, FCA, ICD.D, Auditor General; Morgan McWade, CPA, CA, Assistant Auditor General; Alexandra Whalen, CPA, CA, Audit Manager; Janet White, CPA, CA, CISA, Audit Principal to present the audit plan for the annual financial statement audit of Nova Scotia Health for the year ending March 31, 2023.


An audit timetable was presented, as well as an overview of the presented document on their approach to engagement and areas of focus. An interim management letter was offered to provide a status update prior to year-end to identify any risks or deficiencies with the opportunity to mitigate prior to year-end.

MOTION: Meeting moved to "In Camera" with the Office of Auditor General - 3:42 pm

9 *Adjournment*

With no further business, the meeting was adjourned at 4:05 pm.

Respectfully submitted,


Janet Davidson, Administrator

Recorded by Wendy Anderson, Board Coordinator