



**Board of Directors Meeting
Wednesday, May 22, 2019
Best Western Hotel and Conference Centre, Liverpool NS**

Discussion Highlights

Nova Scotia Health Authority's Board of Directors met on Wednesday, May 22, 2019 at the Best Western Hotel and Conference Centre in Liverpool. This was the first meeting that included an open portion; approximately 15 members of the public were in attendance. The following outlines the highlights of the Board's discussions:

Committee Reports

- The Finance and Audit, Governance and Human Resources Committees brought forward their committee work plans for the 2019-20 fiscal year. Each committee of the Board is required to maintain an annual work plan that ensures fulfillment of the committee's responsibilities.
- The Governance Committee brought forward an updated general terms of reference that is applicable to all committees of the Board. These general terms of reference constitute the processes and membership applicable to all board committees. Specific terms of reference relating to mandate and responsibilities are developed for all committees of the Board, and approved by the Board of Directors.

Research and Innovation in Health

Dr. Gail Tomblin Murphy, Vice President, Research and Innovation

- Research and Innovation has a strong framework of network connections within academic, health care government, and private industry sectors. They are made up of a committed team of research professionals and experts.
- This portfolio achieves \$28 million in average annual revenue, has 1,200+ active research projects with 1/3 being clinical trials, 295 researchers and 440 research staff.
- A recent Atlantic Canada Opportunities Agency (ACOA) award recognized innovators through \$2M in funding for Drs Michael Dunbar, Marcy Saxe-Braithwaite and industry partners for Orthopedic Remote Patient Monitoring. Dr. Steven Beyea in collaboration with Synaptive Medical Inc. received an investment of \$700K from ACOA, along with a contribution of \$1.26M from the province, and \$1.4M in-kind contribution for a diagnostic system that will allow use of existing MRI technology for the emergency department at the QEII, Halifax Infirmary site.
- Research and Innovation receives funding from a variety of sources that aim to improve the system and care provided to Nova Scotians.
- Primary Health Care is embedded within the research strategy through exploration of team and program based innovations for individuals with complex needs and multimorbidity.

- Going forward, Research and Innovation will continue to build their research capacity and address challenges related to funding and the ability to stay fiscally responsible while satisfying complex guidelines and regulations.

President and CEO Report

Janet Knox, President and CEO

- As part of its meeting package, the Board of Directors received a report from the President and CEO which included a narrative on key activities in support of NSHA's strategic plan and business plan, and issues being addressed, and a the final report on the Board approved 2018-19 key priority indicators.
- An update was provided on service delivery changes that were initiated at Eastern Memorial Hospital in Canso earlier in May due to staffing challenges. Work is currently underway with local community leaders in partnership with Guysborough to develop a sustainable service model. The Board asked about strategies for inspiring interest in and recruiting local youth; there are foundations that work with local communities to provide bursaries to youth who are interested in a career in health care. The Board emphasized the importance of networking with and learning from where communities and NSHA have created positive outcomes in terms of staffing and service delivery models.

Perioperative Program

Tim Guest, Vice President Health Services and Chief Nursing Executive

- The program has transformed to a wellness model and has demonstrated positive patient outcomes. The wellness model includes both prehabilitation as well as rehabilitation components, and the length of stay has been shortened for hip and knee surgery patients.
- A centralized intake with standardized assessment tools have been implemented and family practice offices have been engaged to provide information on how to access and refer to surgical services.
- The wait list has increased by 10% as compared to 2017-18. Projections were based on a five-year trend. With the transformation of the program there are more referrals being received and there are additional orthopedic surgeons within the system.
- The Board asked questions related to factors that impact the wait times (i.e. diagnostics, anesthesiology and access to orthopedic beds), and what can be done to improve.
- Targets are nearly being met in the Eastern Zone and there is currently work underway to provide Nova Scotians with the choice to have surgery where wait times are shorter and to have post-surgical care locally.

Patient Access and Flow

Tim Guest, Vice President Health Services and Chief Nursing Executive

- An update on current strategies to improve patient access and flow across the system was provided. It was emphasized that this is a complex, system-wide issue with high interconnectedness.
- Overcrowding and Site Overcapacity, and Repatriation policies have been developed and approved which provide direction and process related to the flow of patients through EDs and inpatient resources and addressing community based barriers to discharge. In addition, the policy guides how overcapacity is

managed, how the organization is engaged in addressing overcapacity and how to escalate when required.

- The implementation planning is well underway and the policy goes into effect on June 3, 2019 in five facilities. A Patient Access and Flow Coordination Centre will be established, as well as centres within each of the zones that will provide a sustainable 24/7 service.
- Other components of this work include monitoring patient's expected discharge date and reacting when it has been exceeded; early mobilization of patients; and engaging patient and families early on so that they can be prepared for discharge with external supports lined up.
- Planning continues with long-term care and home care partners to improve how individuals are transitioned.
- The team is recommending external support to assist managers of impacted departments with this significant system-wide change; as well as communications to support an education campaign.
- The Board asked for the areas of greatest concern; it was noted that the entire project has the potential to be challenging. In addition, the Board emphasized the need to incorporate into the planning clear patient and public education around what to expect when visiting the emergency department.

NSHA Strategic Plan Refresh

George Unsworth, Chair, Governance Committee

Colin Stevenson, Vice President Health Services and Quality and System Performance

- Work to refresh the strategic plan has occurred over the past five months. The Chair extended congratulations to the team for all of the work that was completed.
- Highlights of the refreshed plan were provided. While the current values will remain in the refreshed plan there will be a focus on how to connect to and resonate with the values in the work that NSHA does. The third strategic direction will move from engagement of Nova Scotians to a focus on the health of the population through working with our communities to improve the health and wellness of Nova Scotians. In addition, the wording in the other two strategic directions was simplified.
- The refreshed strategic plan will be launched at the Annual General Meeting on July 10, 2019.

Physician Recruitment

Dr. Nicole Boutilier, Interim Co-Vice President, Medicine

Carmelle d'Entremont, Vice President People and Organizational Development

- In 2018-19, 130 physicians were recruited which was a 26% increase from 2017-18. There are 51 physicians with signed offers waiting to start practice. An update on recruitment events and fairs was provided. In terms of uptake on these events it was noted that it is hard to judge based on the volume; it's more about making meaningful connections.
- The provincial Physician Recruitment and Retention committee met recently and two sub-committees continue to meet regularly. There is a \$200,000 Culture Innovation Fund for community not-for-profits to assist with recruiting and

retaining new and existing physicians. The initiative is with the Department of Communities, Culture and Heritage is being launched on May 31st.

- Work continues to implement a robust candidate matching system that includes the ability to track candidates. A pilot project with the College of Physicians and Surgeons of Nova Scotia and NSHA is underway to streamline the application process. Efforts continue to build capacity with the recruitment team, and discussions continue to determine how best to coordinate recruitment efforts targeting Dalhousie students and residents.
- The Board emphasized the importance of having a strategy and adequate resources to support onboarding physicians. Medical Affairs is working with all partners to develop an onboarding process map. The Board noted their appreciation for the update on retention and requested that this continues to be a focus. It was noted that NSHA has gone to market to secure a vendor to develop a refreshed physician recruitment strategy.
- The team is currently working on projections and targets for 2019-20.

Western Zone Community Health Boards

- Representatives from the Western Zone Community Health Boards (CHBs) presented on the development of the evidence-based western zone health plan. The plan has a focus on the social determinants of health which were categorized into four themes: Food Security; Housing; Community Connection; and Recreation and Wellness.

Western Zone Foundations

- The Board welcomed representatives from the Western Zone foundations and the group engaged in a conversation regarding how to optimize working relationships and collaborate efforts around supporting healthy people and healthy communities.
- CHBs and foundations are two local bodies that desire to be consulted in order to influence things provincially; the Health Care Foundations of Nova Scotia group has been a forum for facilitating these conversations amongst the foundations and NSHA.
- The foundations are looking for ways to continue working effectively with leadership to identify areas of need locally that are appealing to the public. There is a desire to be able to inspire communities to give and alleviate concerns about loss of services in the community. In addition, the foundations can support public education of NSHA's priorities and plans as well as opportunities to collaborate to build donor interest and trust.
- The need for the NSHA Board to continue to be engaged in these conversations locally was emphasized. In addition, the value of visiting facilities and meeting with those who work on the frontline was noted.
- The procurement process needs to be streamlined to improve the ordering and processing time relative to the importance of maintaining an ongoing relationship with donors.
- Incredibly generous communities; now challenged with providing health care services to the local community because of the volume of patients from outside the region.

- The challenge of the transition to the provincial health authority was noted, and relationships and processes are improving. It was suggested that there be key individuals to interface with the foundations and auxiliaries rather than having to go to the Zone Executive Directors and or Vice Presidents.
- Many foundations have changed their names to health foundations; opportunities exist to expand outside of hospitals. There is an opportunity for closer interaction on common priorities with Community Health Boards.