



Timeline (guide):

- 4:30 pm Meeting clients and staff, tour of Truro HSNS site (site visit information is below the agenda)
- 5:15 pm Call to Order
- 5:20 pm Light supper and continued discussion with staff and client/family – note: John Grant is Vegan
- 6:00 pm Risk Plan Annual Report for 2023-2024
- 6:20 pm Talent Management Plan Annual Report for 2023-2024
- 6:40 pm Regular Board Meeting

Board of Directors

Frost, Jon	R	Kujath, Magdalena	P	Noronha, Adline	P
Grant, John	P	Landy, Mark (Chair)	R	Rizzetto, Maria (Vice Chair)	P
Haley, Matthew (Sec-Treasurer)	P	Marchand, Josette	R	Sullivan, Vickie	P
Kaur, Anuroop	P	Mason-Browne, Anne (CEO)	P	Vossen, Emma	P
Kieft, Michael	P	Moore, Gordon	R	Leslie, Kimberlee (Exec. Assistant)	P

Guests:

- Mr. R. Kolanko, Director of Finance and Operations (P)
- Dr. Greg Noel, Director of Adult and Mi’kmaq Hearing and Speech Services (P)
- Ms. Marika Holmes, Professional Practice Development Officer and Accreditation Lead (P)

Present: (P)

Videoconference: (V)

Regrets: (R)

Absent: (A)

5:15 pm	<p>1. Call to Order & Introductions</p> <p>There was continued discussion with HSNS staff and client. The staff commented on how much they enjoyed their work and support from their co-workers. They were proud to announce that since being fully staffed, their wait list has been reduced by 50%. They expressed concern over the wait times for service and expressed a need for more staffing resources. The client (a stroke survivor) described her efforts to regain her communication skills and thanked her Speech-Language Pathologist for their support. Staff and the client were thanked for the tour and the insightful discussion.</p> <p>Ms. Rizzetto served as Acting Chair in the absence of Mr. Landy. She called the official Board meeting to order at 6:00pm.</p>
6:00 pm	<p>2. Presentation – Risk Plan Annual Report for 2023-2024</p> <p>Presenters: Mr. Kolanko, Director of Finance and Operations & Dr. Greg Noel, Director of Adult and Mi’kmaq Hearing and Speech Services</p> <p>Mr. Kolanko presented the Risk Plan annual report for 2023-2024. The detailed version of the risk plan is available on Aprio. Items marked orange (moderate probability and impact) and red (high probability and serious impact) are brought forward to the Board throughout the year for discussion. Mr. Kolanko reviewed the orange items (staffing resources, succession planning for specialized expertise in leadership, risks related to cyber security, and inadequate space). There are no “red” risk areas.</p>

Q: It may be semantics but given that you lease the space, the risk related to infrastructure is around the working space you're providing for staff. It's the working environment that is at risk. The infrastructure risk resides with the owners of the space.

A: That is correct. We don't have a lot of control. The control lies with our partners in terms of the facilities. Our risk is around trying to make sure we have appropriate space.

Comment: With the changes in the accessibility legislation, it may be worthwhile to have something in a future meeting so people understand what the impact of the accessibility legislation will be on the work environment and the expectations to meet the standards.

A: Agreed. We can arrange for that in a future board meeting.

Q: (This ties into talent management) When speaking to staff during the site visits, there is a core group of experienced professionals and some newer staff. Is this similar across the organization?

A: We have a few staff at the 40+ years; with an average retention of 11.5 years. We do have quite a few new staff from the autism changes that happened over the last few years. Over the next five years, that will shift.

Q: Apart from training and security updates, is there anything else on cybersecurity?

A: Key for us is establishing good connections with Nova Scotia Digital Solutions (IT) who provides our network services. We rely heavily on the protection of that network and a lot of what we do is within that network. We enjoy the protection that it provides but it also presents some challenges. This is our internal assessment on the likelihood of a cyber-attack. It is orange as the risk is always present for all organizations across the world. We are in good shape but plan for a re-audit of our cyber security systems in 2024-25.

Mr. Noel presented an overview of the Risk reports received for 2023-2024. It is a new document for the Board and will be shared with the community. Any comments on the presentation of the data can be sent to Ms. Leslie.

Q: Can you walk us through the data? How do the numbers flow through the charts? For clarity, it would be good to have a breakdown of this flow.

A: In the first chart, you will see the section showing 62% events. This group of events is broken down into a finer classification of type of events (e.g. complaint, risk event) and then the group of events related to client safety, it is broken down further into events that presented 'harm', 'near miss' and 'no harm' to client safety.

Q: Who else is looking at the information? Is this something that's available to clients? Who's interested in looking at this?

A: From an Accreditation perspective it is required, and we want to be transparent and accountable with the communities and clients we serve. We are working on a quarterly reporting template that we can post on our website and on social media. Questions from members of the public would go through the Risk Management Steering Committee and if needed to the Executive Council to discuss.

- Follow-up Q: Do clients ask for this data? Is this something they are worried about? Are they worried that this is a risky place?
- A: It would be rare for clients to ask for the risk data. The motivation for this is transparency. Clients may not ask for it but we want to disclose the information and how we are using it to drive improvement.

Q: Of the total reports received, what is the % of unique clients represented?

A: We don't have this number at this time but will look at including it.

	<p>Q: Were there any controls in place for the 18% harm client safety events? A: Yes. The controls were related to EMR training. Most of the errors related to data input (e.g. missing information or misdirected referrals). We have invested in having a data and training specialist who can monitor this risk and provide the training on a regular basis.</p>
<p>6:10 pm</p>	<p>3. Presentation – HSNS Talent Management Annual Report for 2023-2024 Presenter: Ms. Marika Holmes, Professional Development Officer</p> <p>Ms. Holmes presented an overview of the talent management annual report for 2023-2024, highlighting some of the achievements in the past year.</p> <p>Document coding for status of goals:</p> <ul style="list-style-type: none"> • Orange = in progress • Green = achieved • Boxes = new goals <p>Q: In speaking with staff, it sounds like they moved around the province a bit. How does this happen? A: Typically, postings occur for rural areas. As more positions come up in more metro areas like HRM, staff can apply. It is not uncommon for someone to join the team and start off in a rural community and then as more positions come up in other communities they move into those positions. Some of the positions may have been term positions, and staff may go from term position to another term or regular position.</p> <p>Q: When staff move positions, is there usually a clean transfer? A: It is the goal, but it doesn't always happen. Sometimes staff leave without advanced notice (e.g. unanticipated medical leave). When we are not able to do a "warm transfer", we try to bring in HSNS staff from around the community to provide some coverage of services during the staff vacancy.</p> <p>Q: Is there an opportunity for a co-op placement? A (by Dr. Kieft): Students do an internship or an externship that does provide support and experience for SLP and Audio students in training. We are not sure that the organization can rely on it for support. Students provide HSNS with an excellent advantage for recruiting – we encourage students to take the rural placements and the school provides some financial assistance for a rural placement. In some cases students realize that many of our rural clinics are excellent work environments.</p> <p>Q: In the underserved areas, are there any thoughts about public-private collaboration? A: Not sure how we would negotiate that financial arrangement with the government to make this kind of agreement. It is worth investigating.</p> <p>Q: When staff move between sites, is there anything done to talk about why they want to move? A: That is something that they would discuss with their manager.</p> <p>Q: What is your average ratio of management for staff? Q: Currently it is about 1 manager to 24-28 staff (recognizing provincial travel to assigned sites).</p> <p>Q: How do you identify if an individual is ready for a leadership goal? And how do you know which positions require succession planning? A: Leadership training and opportunities are ongoing. We don't have the complete succession plan for specialized positions yet but we are working on creating a matrix which identifies those positions.</p> <p>Q: Who is part of the union? Are the management staff unionized or non-union? A: Management staff are non-union.</p>

	<p>Board members can email Ms. Marika Holmes at marika.holmes@nshsc.nshealth.ca if there are questions about the plan. There will be an infographic to accompany this information that will be presented on a quarterly basis.</p>
6:20 pm	<p>4. Approval of Agenda</p> <p>MOTION: that the Board of Directors approve the agenda as presented. Moved by Mr. Haley. Second by Ms. Vossen. Motion carried.</p>
6:25 pm	<p>5. Announcements</p> <p>5.1 Regrets: Mr. Landy, Mr. Frost, Ms. Marchand, Mr. Moore 5.2 Declarations of potential conflict of interest: none</p>
6:30 pm	<p>6. Approval of Minutes – March 2024</p> <p>MOTION: that the Board of Directors approve the previous minutes. Moved by Ms. Kujath. Second by Ms. Sullivan. Motion carried.</p>
6:35 pm	<p>7. Board Executive Report</p> <p>Ms. Rizzetto presented the Board Executive Report for April 2024.</p> <p>7.1 Annual Board Evaluation Activity: Board Member ‘Check-In Interviews’</p> <ul style="list-style-type: none"> The check-in interviews have started. The goal is to identify some themes and create a report to present to the Board for discussion on how to move forward. <p>7.2 Chair performance review and CEO performance review</p> <ul style="list-style-type: none"> The Chair and CEO performance reviews are coming up. May for the Chair and June for the CEO review. <p>7.3 Accreditation Board Governance Functioning Tool</p> <ul style="list-style-type: none"> Has been deferred to the Policy & Governance committee report. <p>MOTION: that the Board of Directors accept the report from the Board Executive as presented. Moved by Mr. Grant. Second by Ms. Vossen. Motion carried.</p>
6:40 pm	<p>8. CEO Report</p> <p>8.1 Monthly Update</p> <p>Ms. Mason-Browne presented the CEO Report for April 2024.</p> <p>Q: How does the increasing concern regarding dysphagia (swallowing) services play into the risk plan? A: it would be a risk to care. It is being reported as complaints from partners and from family members of clients. We are meeting with the partners to discuss the concerns and identify strategies to mitigate these issues.</p>

Q: Given that there is a complaint from a family member, what are staff saying?
A: Staff are stressed and concerned regarding the inadequate resources to meet demands.

8.2 Strategic Plan 2024: Annual Report for 2023-2024

The recommended amendments to the Strategic Plan Values and Goals and the proposed operational targets for 2024-25 were reviewed. HSNS would like to make two recommendations that need Board approval.

- 1) For the values, the nature of the words is not consistent so staff would like them all to be the same word type (suggested amendments presented).
- 2) The long-term goal under Accessibility regarding safety should include “psychological”. The addition of the work reflects the interest from staff and management to address psychological safety in the workplace.

MOTION: that the Board approve the recommended changes to the value themes and the amended long-term goal as presented.

Moved by Ms. Sullivan. Second by Mr. Haley.

Motion carried.

8.3 Plans for HSNS Annual Report to NS

6:55 pm

9. Committee Reports

9.1 Finance and Investment Committee Report – no report

Mr. Haley presented a motion before the Board to announce the innovation fund.

MOTION: that the Board approves the distribution of the all-staff communication regarding the Board’s invitation for submission of proposals for the Innovations Fund as drafted.

Moved by Ms. Vossen.

Motion carried.

9.2 Policy & Governance Review Committee Report

Ms. Vossen presented the Policy & Governance report for April 2024 on behalf of Mr. Landy.

- Policy amendments
The policies were reviewed by the Board.

MOTION: that the Board of Directors approve the recommended amendments to Policies #1, #3, #7 and #22 as presented by the Policy and Governance Committee.

Moved by Ms. Kujath.

Motion carried.

- Preparation for Accreditation review of governance standards
The Policy & Governance committee recommends that the Board use the current Accreditation Board Functioning tool and administer the tool after the April meeting.

9.3 Nominating Committee Report

Ms. Rizzetto presented the Nominating report for April 2024.

	<p>We have received an expression of interest that has been shared with the committee. Thank you to the Board members for putting forth some names for the potential to join the Board.</p> <p>The Board Executive have confirmed their intent to continue their roles. The list of officers will be formally presented at the Annual Board meeting in June.</p> <ul style="list-style-type: none"> Notification of intention to resign from Board. Board members can contact either a member of the Board Executive or discuss this in their check-in interviews. Deadline for notification of intent to resign is May 6, 2024. <p>MOTION: that the Board of Directors accept the committee reports as presented. Moved by Mr. Haley. Second by Ms. Kujath. Motion carried.</p>
7:00 pm	<p>10. Business Arising None</p>
7:05 pm	<p>11. Old Business None</p>
7:10 pm	<p>12. New Business</p> <ul style="list-style-type: none"> Board Reflections on meeting with clients, staff, and overview of HSNS services at Truro site It was an extremely positive experience and a great opportunity to speak with staff and the client. It was well organized and a provided a good overview. Discussion with the staff and board was excellent. The staff were very comfortable and forthcoming. The issues that staff identified as concerns were all areas that the Board was already aware of.
7:15 pm	<p>13. Members' Comments</p> <ul style="list-style-type: none"> Provide definitions of "Business Arising", "Old Business" and "New Business". What is "Member's Comments"? Can this be defined? ACTION: take questions to the next Policy & Governance meeting. Thank you for including the long form of the word before acronyms. We went over the allotted time for presentations, but the discussion was very good and we made up time in the rest of the meeting. We are only slightly over the planned agenda time for the meeting. We may need to plan for more time for the presentations.
7:20 pm	<p>14. In-camera session</p> <p>MOTION: that the Board of Directors move to in-camera session. Moved by Mr. Haley. Second by Ms. Sullivan. Motion carried.</p>
7:25 pm	<p>15. Date of next meeting: May 16th, 2024 at 5:15 (In-person, HSNS Provincial Office, Halifax)</p>
7:30 pm	<p>16. Adjournment Meeting adjourned at 7:44pm</p>