



**Timeline (guide):**

- 5:15 pm Call to Order
- 5:20 pm Presentation: Quality Improvement Patient Safety Plan and Partners in Care
- 5:35 pm Dinner
- 6:05 pm Regular Board Meeting

**Board of Directors**

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

**Guests:**

- Mr. R. Kolanko, Director of Finance and Operations (P)
- Dr. Greg Noel, Director of Adult and Mi'kmaq Hearing and Speech Services (R)
- Dr. Sharon Walker, Director of Pediatric and Autism Hearing and Speech Services (P)
- Ferne Mardline-Smith, HSNS Partner in Care (P)
- Erin Lamond, Manager (P)

**Present: (P)**

**Videoconference: (V)**

**Regrets: (R)**

**Absent: (A)**

5:15 pm	<p><b>1. Call to Order &amp; Introductions</b></p> <p>The meeting was called to order at 5:19pm</p> <p>Mr. Landy welcomed and introduced Ferne Madline-Smith, HSNS Partner in Care, and Erin Lamond, HSNS clinical manager who would be presenting on the Quality Improvement Patient Safety Plan and Partners in Care.</p>
5:20 pm	<p><b>2. Presentation: Quality Improvement Patient Safety Plan and Partners in Care (PIC)</b></p> <ul style="list-style-type: none"> <li>• Quality Improvement (QI) Plan revisited</li> <li>• Partners in Care (PIC) revisited</li> <li>• Quality Improvement (QI) Project: "Informed Consent"</li> </ul> <p>Presenters: Ferne Mardline-Smith (PIC member) and Erin Lamond (Manager and Co-chair of PIC)</p> <p>Presentation materials were provided to the board in advance of the meeting (included with the materials for this meeting. Discussion followed the presentation:</p> <p>Q: The consent forms for the various treatment and engagements, where are they located? Are they accessible to the Board?</p> <p>A: They are located on SharePoint which Board members do not have access to. The forms will be included with this meeting's package.</p> <p>Q: What has changed in terms of consent? What are you doing differently now?</p>

	<p>A: Advice from PIC led to a few changes such as bolding important words and concepts, we reduced the number of words, and it is written in plain language to a grade 6 reading level which is industry standard. A lot of time was spent talking with staff about the importance of having conversations with clients around consent. A consent to release information must be signed at least once a year but we will require staff to confirm the client’s consent for assessment or treatment at every appointment.</p> <p>Q: Elsewhere, there is the concept of “circle of care”. Does the framework of circle of care exist within the organization?</p> <p>A: We talked with staff about who is part of the circle of care. For example, we work with a lot of early childhood educators – they are not part of the circle of care because they’re not healthcare providers. If a social worker is working for a healthcare provider, then they would be within the circle of care. Best practice would be to include the people who are to receive the client’s information on the consent form.</p> <p>Q: So, if you are seeing a child who is in school and information should be shared with their teacher, they would have to be listed on the consent form, correct?</p> <p>A: Yes, that is correct.</p> <p>Q: It was mentioned about getting implied consent for treatment, is that a form?</p> <p>A: Sometimes we need a form for informed consent for assessment, treatment and training. Sometimes verbal consent is okay so long as there is a good conversation about what’s going to happen in the appointment and the guardian/client agrees.</p> <p>Q: What format are the forms in?</p> <p>A: At the moment they are paper based. We are working toward having the consent for assessment, treatment and training be electronic but currently we are working on some technical problems with having electronic forms and signature pads.</p> <p>Mr. Landy thanked Ms. Madline-Smith and Ms. Lamond for joining the Board for this presentation and for conversation with the board over dinner.</p> <p>The Board broke for dinner and reconvened at 6:05pm.</p>
6:05 pm	<p><b>3. Approval of Agenda</b></p> <p>MOTION: that the Board approve the agenda as presented. Motion carried.</p>
6:10 pm	<p><b>4. Announcements</b></p> <p>4.1 Regrets: Dr. Kiefert, Mr. Haley, Ms. Rizzetto, Ms. Noronha 4.2 Declarations of potential conflict of interest: none</p>
6:15 pm	<p><b>5. Approval of minutes – April 18, 2024</b></p> <p>MOTION: that the Board of Directors approve the previous minutes. Moved by Mr. Grant. Second by Ms. Sullivan Motion carried.</p>
6:20 pm	<p><b>6. Board Executive Report –</b> The Board Executive has not met since the last Board meeting. Mr. Landy, Chair of the Board Executive updated the Board on the following topics.</p>

	<p>6.1 Annual Board Evaluation Check-in Interviews Update</p> <ul style="list-style-type: none"> <li>The touch-base interviews with the Board members have been completed. A summary of the discussions are being put together and will be presented at the June board meeting.</li> </ul> <p>6.2 Annual Board Evaluation: Board Chair review</p> <ul style="list-style-type: none"> <li>The Vice Chair, Ms. Rizzetto, will be conducting the Board Chair evaluation.</li> <li>Mr. Landy will also be reaching out to Board members and some HSNS directors/managers to complete an evaluation of the CEO. This will be completed in June.</li> </ul>
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<p>6:25 pm</p>	<p><b>7. CEO Report</b></p> <p>7.1 Monthly Update</p> <p>Ms. Mason-Browne presented the CEO Report for May 2024.</p> <p>Q: What was received in the ask to the government?  A: We received 1.245 million which will give us 9 FTE across a number of classifications.</p> <p>Comment: When you refer to the KPIs, I think they would want to see how far the wait list comes down.  Response: The objective is to address the inequity of wait times for preschool children. With the money granted, we won't be able to address inequities province wide; we will need to look at the biggest areas of inequity. This is the deliverable for this funding.</p> <p>Q: Are you parachuting the 9 FTEs in to hopefully reduce wait times or are you doing something different in the approach to reduce wait times?  A: It will be about looking at where strategically we put staff. There are a couple of things we want to try out such as remote audiology, scaling out parent training programs, and providing some parachutes into underserved areas in Cape Breton. We are also investigating offering services outside of regular working hours.</p> <p>Q: When talking about the zones, is HSNS restricted to certain areas?  A: We have a presence across the province - in 25 communities across all zones. Nova Scotia Health uses zones. We are closely tied with Nova Scotia Health, so it doesn't make sense for HSNS to look at the province in a different way.</p> <p>Q: How do you choose a particular area to focus on?  A: We look at the data. We have data that tells us where referrals come from and how long wait times are provincially. The selection of where we are going to expand services is data driven. We are trying to find ways to bring services to underserved communities that don't have as many people but still need services and have to travel for those services. It's about where referrals come from but also where the clients are coming from.</p> <p>Q: What is the concern for the governance framework for PPAS? Will it affect this board?  A: HSNS was an equal member involved in the initial governance framework along with 3 other organizations. Now that the PPAS program is in to implementation, it was decided that the original governance structure should be replaced by a different governance structure. The governance framework for PPAS addresses accountability for all the organizations involved to government. The new governance framework for PPAS will not affect this Board.</p> <p>7.2 Integrated Quality Framework (Presenter: Dr. Sharon Walker)</p>
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Dr. Sharon Walker provided a summary of HSNS performance. The complete annual data set for the Integrated Quality Framework was uploaded to Aprio before this meeting.

Q: In terms of the data, there was a good 1<sup>st</sup> quarter and then the 4<sup>th</sup> quarter, is there anything cyclical there?

A: Although the 1<sup>st</sup> quarter looks good, it is not as good as the 1<sup>st</sup> quarter in the years before. The last two years have been very difficult for HSNS with lots of position changes and recruiting challenges. And, we still seeing a lot of impact related to staff absences due to COVID and medical leaves.

Q: Is there any information on the geographic origin of new recruits?

A: Our biggest success is local. Our relationship with Dalhousie University School of Communication Disorders results in most of our Audiology and Speech Language Pathology recruiting success. We do have some recruits who have been away and then came back to Nova Scotia. There has been more success in recruiting for Administrative Support Professionals (ASPs). We are getting great candidates that are newer to the province. The position we have the most difficulty with is the Communication Disorders Technician (CDT) because there isn't a training program east of Ontario. We have been exploring ways to grow that talent locally.

Q: Is the CDT training done at a college level?

A: Yes

Q: Is there nothing done in the Atlantic region at all?

A: No. However, we are having discussions with the community college.

Q: When do you have to go back to the government with the annual data for the KPIs?

A: The government hasn't confirmed the meeting date as of yet. It typically is in mid-June.

Q: The staff/partner concerns, what are they?

A: One was a Dr. concern about a specific staff practice and that was something we took very seriously and others are related to dysphagia services which were included in the Risk Plan.

6:45 pm

## 8. Committee Reports

### 8.1 Finance & Investment Committee Report

Mr. Moore presented the Finance & Investment report for May 2024 on behalf of Mr. Haley.

- Appointment of auditors for 2024-25

MOTION: that the Board approves the appointment of Lyle Tilley Davidson be retained as HSNS' auditors for the 2024-25 fiscal year.

Second by Ms. Vossen.

Motion carried.

### 8.2 Policy & Governance Review Committee Report

Mr. Landy presented the Policy & Governance report for May 2024

Discussion occurred about the Accreditation Governance Functioning tool. Ms. Leslie will send out the link after this meeting. Mr. Landy reminded the Board about answering “neutral” and that Accreditation Canada scores “neutral” answers as negative, and that information can be found on Aprio to assist with answers any of the questions.

Discussion occurred around the Board commitment form. It was mentioned that the commitment term is not included on the form. This will be brought forward to the Policy & Governance Committee for review before the June meeting.

**ACTION:** The Policy & Governance Committee to review the Board Commitment form and make revisions to the form before the June meeting.

- Board Evaluation form revision

MOTION: that the Board approves the use of the revised Board Evaluation Form as presented.

Second by Mr. Grant.

Discussion occurred around the addition of a new question about requiring any support such as resources in a language other than English and visual or technician supports. Discussion included when and how the question should be asked and the importance of asking the questions.

Motion was put to vote.

Motion carried.

- Policy amendments  
Policies 12, 15 and 16 were reviewed by the Board.

Discussion occurred around the amendment to Policy 15 on the audited financial statements being reviewed by the Finance & Investment Committee before presentation to the Board for approval.

Q: What is the timeframe between the statements and the annual meeting?

A: In the last couple of years, HSNS did not receive the statements from the auditors until the day of the meeting. This year, the annual meeting is later in the month, and we specifically requested the statements by a solid deadline in advance of that meeting. We did attempt this last year but for several reasons they were not ready until the Board meeting date. Having flexibility in scheduling the annual meeting a week later is helpful.

Q: When does the annual general meeting have to occur?

A: Policy & Governance discussed moving the annual meeting from the 3<sup>rd</sup> Thursday to the 4<sup>th</sup> Thursday of June. The change in meeting date will be brought forward to the Board in June. The date change will hopefully give time for the auditors to get the statements to the Finance & Investment Committee to review before the Board meets to review and accepts the financial statements.

Discussion occurred around the amendment to Policy 12 on the reference to the Equity, Diversity and Inclusion Task Force.

Q: Is your Equity, Diversity and Inclusion (EDI) Task Force not ongoing as task forces are usually time limited? Is there a plan to move it into a committee?

	<p>A: When the EDI Task Force was introduced (almost 2 years ago), HSNS wanted it to be staff-driven and ensure that there was robust staff engagement before looking at a committee structure. The terms of reference identify five pillars across the organization (e.g. HR, Communications, Clinical Standards, Policy and Procedures, Education) which required optimal staff engagement to determine how this work would be integrated throughout the organization.</p> <p>MOTION: that the Board of Directors approve the recommended amendments to policies #12, 15, 16 and 25 as presented by the Policy and Governance Committee. Moved by Dr. Kujath. Second by Mr. Moore. Motion Carried.</p> <p>8.3 Nominating Committee Report – no report</p> <p>MOTION: that the Board of Directors accept the committee reports as presented. Moved by Mr. Moore. Motion carried.</p>
6:55 pm	<b>9. Business Arising</b>
7:00 pm	<b>10. Old Business</b>
7:05 pm	<p><b>11. New Business</b></p> <ul style="list-style-type: none"> <li>• HSNS Annual Report for 2023: content review The content of the 2023-24 Annual Report has been posted on Aprio. Board members have until June 3, 2024 to review the content. Any comments can be sent to Ms. Leslie.</li> </ul>
7:15 pm	<b>12. Members' Comments</b>
7:20 pm	<p><b>13. In-camera session</b></p> <p>MOTION: that the Board of Directors move to in-camera session. Motion carried.</p> <p>MOTION: that the Board of Directors move to adjourn the in-camera session. Motion carried.</p>
7:25 pm	<p><b>14. Date of next general meeting:</b> June 20, 2024 (In person, HSNS Provincial Office, Halifax)</p> <p><b>Date of Annual Board meeting:</b> June 20, 2024 (In person, HSNS Provincial Office, Halifax)</p>
7:30 pm	<p><b>15. Adjournment</b></p> <p>MOTION: that the Board of Directors move to adjourn the meeting. Motion carried.</p> <p>Meeting adjourned at 7:47pm</p>