

## Board of Directors

### Open Meeting

October 2, 2024 at 5:00 pm

IN PERSON: TBRHSC Executive Boardroom, Level 3, Room 3043

VIRTUAL OPTION for Board Directors: Webex Connection as provided by email

### AGENDA

**Vision:** *Exceptional care for every patient, every time.*

**Mission:** *We provide quality Care to Patient and Families, supported and advanced by research, innovation and education that is responsive to the needs of the population of Northwestern Ontario.*

**Values:** *Diversity, Compassion, Excellence, Innovation, Accountability*

#	Time	Presenter	Item & Purpose	Expected Outcome					
				Recommendation / Decision/Action	Education	Discussion	Strategic Progress	Fiduciary Information	
1.0	2	<b>CALL TO ORDER and WELCOME</b>							
1.1	2	P. Lang	Land Acknowledgement & Chair's Remarks						
1.2	2	P. Lang	Report from the Chair *					X	
1.3	1	P. Lang	Quorum (9 members total required, 7 being voting)						
1.4	1	P. Lang	Conflict of Interest					X	
1.5	1	P. Lang	Approval of the Agenda	X					
2.0	5	<b>PATIENT STORY – Jeannine Verdenik, VP, People &amp; Culture</b>							
3.0	<b>PRESENTATIONS/EDUCATION</b>								
3.1	15	Dr. Crocker Ellacott J. Logozzo	Strat Plan 2026: Quarterly Progress Report *		X				
4.0	<b>CONSENT AGENDA</b>								
4.1	-		Board of Directors Open Minutes – June 5, 2024 *	X					
4.2	-		Wages & Source Deductions Attestation – Q1 2024-25 *						
5.0	<b>REPORTS</b>								
5.1	10	Dr. Crocker Ellacott	Report from the President and CEO *					X	
5.2	10	Dr. Jacobson	Report from the Chief of Staff *					X	
5.3	10	A. Vinet	Report from the Chief Nursing Executive *					X	
6.0	<b>FOR INFORMATION</b>								
6.1	-		Report from the TBRHSC Foundation *					X	
6.2	-		Report from the Northern Ontario School of Medicine <ul style="list-style-type: none"> <li>Engagement Report – Fall 2024 *</li> <li><a href="#">Northern Routes</a></li> </ul>					X	
6.3	-		Environmental Compliance and Fire Safety Update *					X	
6.4	2	A. Vinet	Board Anti Stigma Pledge	X				X	
7.0	<b>DATE OF NEXT MEETING – December 4, 2024</b>								
8.0	<b>ADJOURNMENT &amp; BREAK</b>								

#### Ethical Framework

TBRHSC is committed to ensuring ethically responsible practices that align with our philosophy/vision/mission/values. All workers should consider decisions from an ethics perspective including their impact on patients, staff and the community.

Does the course of action:

#	Time	Presenter	Item & Purpose	Expected Outcome				
				Recommendation /Decision/Action	Education	Discussion	Strategic Progress	Fiduciary Information
			<ol style="list-style-type: none"> <li>Promote <b>DIVERSITY</b> by fostering a people-centered environment that is inclusive of all?</li> <li>Show <b>COMPASSION</b>, empathy &amp; respect by acknowledging ourselves as learners in understanding the experiences of others, and by considering the needs, thoughts and feelings of those we serve and with whom we work?</li> <li>Demonstrate <b>EXCELLENCE</b> by delivering the highest quality of services in every encounter and in all our work?</li> <li>Foster <b>INNOVATION</b> by embracing continuous learning and improvement to drive positive change for our patients, staff, and communities?</li> <li>Uphold <b>ACCOUNTABILITY</b> by sustaining and reinvesting in our mission and communities through wisely planning for and managing our resources?</li> </ol> <p>For more detailed questions please refer to the Hospital’s full Framework for Ethical Decision Making.</p>					

\* denotes attachment

**BOARD OF DIRECTORS (Open)**  
**October 2, 2024 – DRAFT**

Agenda Item	Committee or Report	Draft Motion or Recommendation	Approved or Accepted by:
1.4	Agenda – October 2, 2024	"That the Agenda be accepted, as circulated."	Moved by: Seconded by:
3.0	Consent Agenda	<p>"That the Board of Directors:</p> <p>4.1 Approves the Board of Directors Open Minutes of June 5, 2024;</p> <p>4.2 Accepts the Q1 2024-2025 Wages and Source Deduction Attestation for the Thunder Bay Regional Health Sciences,</p> <p>as presented."</p>	Moved by: Seconded by:



## **Report from the Board Chair** *October 2024*

For me, the transition from summer to fall brings with it a feeling of excitement; the anticipation of getting back into a routine and days becoming busier as the weather cools down. I hope that Thunder Bay Regional Health Sciences Centre (TBRHSC) staff, professional staff, learners, volunteers and members of the Board took time over the summer to reset, recharge and connect with family and friends. Before the summer break, our Hospital celebrated a successful year at the Annual Meeting of the Corporation in June. In my new role as Chair of Thunder Bay Regional Health Sciences Centre's Board of Directors, I'm pleased to announce the return of our existing Board of Directors, and the reappointment of the President and Chief Executive Officer to a new term.

Joining the Board is Jesse Fiddler as the new Community Member on the Governance and Nominating Committee. Darlene Furlong was appointed as the new Community Member on the Patient Safety and Quality of Care Committee.

Returning to the Board of Directors for a three-year term is Christine Bates. Along with myself, continuing their terms of office on the Board are Charles Campbell, Dr. Andrew Dean, Kimberly Ferris, Douglas Judson, Michael Pelletier, James Peotto, Matt Simeoni, Joy Wakefield, and Gord Wickham.

Recently departed Board Director and Treasurer John Hatton was remembered fondly and honoured for his leadership, his passion and dedication to the Hospital and the community.

The Board includes the ex-officio Directors Dr. Rhonda Crocker Ellacott, President and CEO, Adam Vinet, Chief Nursing Executive, Dr. Bradley Jacobson, Chief of Staff, Dr. Sarita Verma, (former Dean, President and CEO, NOSM University), and Dr. Elrasheed Osman, President, Professional Staff Association.

I am looking forward to working with this incredibly motivated group, aligning the care we provide to the needs of the community and the people we serve. We continue to advance the Hospital's *Strategic Plan 2026*; TBRHSC's [2023-24 Annual Report](#) was released and highlights last year's accomplishments and our continued commitment to patient and family centred care.

Speaking of which, this month marked 15 years of *Sharing and Caring Together*, a week-long event demonstrating our successes in patient and family-centred care, culminating in an exhibition displaying some of the initiatives that have been developed to improve the patient experience.

Leading up to the National Day for Truth and Reconciliation, our Hospital's Indigenous Collaboration, Equity and Inclusion portfolio organized events to honour the survivors and



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underscore the importance of Truth and Reconciliation. Starting with a sunrise ceremony, events for staff throughout the month included hand drum making, beading, drumming, and an education session with an Elder and Residential School Survivor. As part of our commitment to Truth and Reconciliation, and the 94 Calls to Action, our Hospital also recently published a report sharing our progress on the Calls to Action and our next steps. We are committed to promoting transparency with our response to the Calls to Action and to continually working towards creating an environment of inclusion, equity and compassion at our Hospital.

Pat Lang  
Chair, TBRHSC Board of Directors

# BRIEFING NOTE



TOPIC	SP2026 Report to Boards – 2024/25 Quarter 1 results
SUBMITTER NAME	Jessica Logozzo, VP, Strategy & Regional Transformation & Michael Del Nin, Director, Strategy & Performance
SUBMITTED BY <i>(name of TBRHSC Program /Service or IMS Branch)</i>	Strategy & Performance
APPROVED BY <i>(name of E/VP or IMS Section)</i>	Dr. Rhonda Crocker Ellacott, President and CEO <i>(via September 19 SLC)</i>
PREPARED FOR	President & CEO <input type="checkbox"/> Board of Directors <input checked="" type="checkbox"/> IMT <input type="checkbox"/> SLC <input type="checkbox"/> Other:
DATE PREPARED	September 13, 2024
REVIEWED BY DECISION SUPPORT <i>(if required)</i>	<Does this have financial impacts to the hospital's budget? Has a Decision Support Analyst been consulted on this briefing note?> YES <input type="checkbox"/> NO <input type="checkbox"/> N/A <input checked="" type="checkbox"/>
CO-SPONSER <i>(if required)</i>	NA

TBRHSC is committed to ensuring ethically responsible practices that align with our philosophy/vision/mission/values. All workers should consider decisions from an ethics perspective including their impact on patients, staff and the community.

Does the course of action:

- 1. Promote **DIVERSITY** by fostering a people-centered environment that is inclusive of all?
- 2. Show **COMPASSION**, empathy & respect by acknowledging ourselves as learners in understanding the experiences of others, and by considering the needs, thoughts and feelings of those we serve and with whom we work?
- 3. Demonstrate **EXCELLENCE** by delivering the highest quality of services in every encounter and in all our work?
- 4. Foster **INNOVATION** by embracing continuous learning and improvement to drive positive change for our patients, staff, and communities?
- 5. Uphold **ACCOUNTABILITY** by sustaining and reinvesting in our mission and communities through wisely planning for and managing our resources?

For more detailed questions please refer to the Hospital's full Framework for Ethical Decision Making on the iNtranet under [Quality and Risk Management>Ethics](#).

## PURPOSE/ISSUE(S)

To provide a report to the TBRHSC and TBRHRI Boards on the status of Strategic Plan 2026 (SP2026) initiatives and strategic indicators, at 2024/25 Quarter 1 (April 1, 2024 through June 30, 2024).

## BACKGROUND

Per the monitoring and accountability structure that was implemented at the start of the Strategic Plan 2026 (SP2026), regular updates on initiatives and strategic indicators are prepared, distributed to and reviewed monthly by TBRHSC and TBRHRI leadership and quarterly by TBRHSC and TBRHRI Boards.

The 2024/25 Q1 corporate and divisional financial results, status of initiatives and strategic indicator results were reviewed by the TBRHSC and TBRHRI SP2026 leadership group (Senior Leaders; Directors and like; Physician Leaders; PFA; etc.) at the Strategic Performance Review Session on September 17, 2024. A summary of the organizational performance results was also shared across the organization through the Staff Town Hall on September 18, 2024. A "Celebrating Our Progress" poster was also distributed throughout the organization to highlight progress on strategic initiatives and to support discussions with Staff on how they contribute to the Strategic Plan.

The results are then reviewed and discussed quarterly by the TBRHSC Board and its sub-committees, and the TBRHRI Board.

## ANALYSIS/CURRENT STATUS

Overall, at 2024/25 Q1 we have continued to make steady progress on our strategic initiatives and performance against our strategic indicator targets.

### A. Highlights of Progress on Strategic Initiatives at 2024/25 Q1:

On June 30, 2024, there were 20 SP2026 initiatives (of 26 in total) in progress. A majority of initiatives (18 or 20) are on track, with only two initiatives tracking slightly behind their expected timelines (with plans in place to mitigate further delays). Three initiatives have been completed, and two are scheduled to start later this fiscal year.

Overall initiative status is as follows:

SP2026 Direction / Enabler	Initiative Status					
	Total	On Track	Slightly Behind	Significantly Behind	Not Started	Complete
Equity Diversity & Inclusion	7	2			2	3
Patient Experience	5	5			0	
Staff Experience	7	6			1	
Research, Innovation & Learning	3	1	2		0	
Sustainable Future	4	4			0	
<b>Total</b>	<b>26</b>	<b>18</b>	<b>2</b>	<b>0</b>	<b>3</b>	<b>3</b>


Highlights of initiatives are included in **Appendix A**.

### B. Highlights of Performance against Strategic Indicator Targets at 2024/25 Q1:

Ten strategic indicators were developed and approved by the TBRHSC and TBRHRI Boards to measure overall progress on SP2026. These were most recently reviewed through the Year 2 Annual Review Process, with updates/refinements approved by the Boards in June 2024. A scorecard report for the ten SP2026 strategic indicators is included in **Appendix B**, which reflects recently approved updates.

*Note that due to timing of availability of some data, results for two 2023/24 indicators (% operating gross margin; % of NWO patients aligned with regional programs/services) reported to the Board in May 2024 were based on preliminary data. These were flagged as “not yet finalized” on the 2023/24 scorecard. These indicator results have now been finalized and are reported in Appendix B.*

Highlights of the strategic indicator results for 2024/25 Q1 are as follows:

 <b>Number of patients self-identifying as Indigenous.</b> Increasing and already exceeding target.	 <b>Positive overall staff experience.</b> Data for 2024/25 not yet available.
 <b>% completion of “Repairing the Sacred Circle” training.</b> Exceeding target.	 <b>Investigator-initiated research studies informed by NWO population needs.</b> Exceeding target.
 <b>% completion of “Wake the Giant” training.</b> Increasing but behind target.	 <b># participants enrolled in a clinical trial in 2024/25.</b> Exceeding target.
 <b>Overall positive experience responses for Inpatient &amp; Emergency Department patients.</b> Increasing and exceeding target.	 <b>Percent operating gross margin.</b> Improving but remains worse than target.
 <b>Repeat visits to the Emergency Department for targeted complex medical conditions – Congestive Heart Failure.</b> Exceeding target.	 <b>Proportion of patients aligned with regional programs/services.</b> Improving and exceeding target.
 <b>Measured reduction of patient harm.</b> Exceeding target.	

**RECOMMENDATION / PROPOSED CHANGE(S)**

TBRHSC and TBRHRI Boards endorse the 2024/25 Q1 report, as presented.

**NEXT STEPS**

Continue regular monitoring, reporting and reviews.

**CONSULTATION / STAKEHOLDER REACTION**

Consultation as outlined below in Communications.

**COMMUNICATIONS**

As noted above, the 2024/25 Q1 initiative and indicator results were reviewed by the TBRHSC and TBRHRI leadership group at the Strategic Performance Review Session on September 17, 2024. A summary of results was shared across the organization during a Staff Town Hall on September 18, 2024, which was accompanied by a “Celebrating Our Progress” poster (see **Appendix C**) that was distributed throughout the organization to support discussions on how staff contribute to the Strategic Plan.

Beginning in 2024/25, quarterly updates will be distributed to the public to highlight our progress; as requested through the Year 2 Annual Review Process.

**FINANCIAL IMPACTS (WHERE APPLICABLE)**

N/A

**APPENDIX SECTION**

Appendix A – SP2026 2024/25 Q1 presentation

Appendix B – SP2026 2024/25 Q1 Strategic Indicator Results

Appendix C - “Celebrating Our Progress” poster





# Strategic Plan 2026 2024/25 Q1 Board Report

TBRHSC & TBRHRI Board Meetings  
October 2 & 9, 2024



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# Objective

- To provide an update on the status of Strategic Plan 2026 Initiatives and Strategic Indicators, as at 2024/25 Quarter 1



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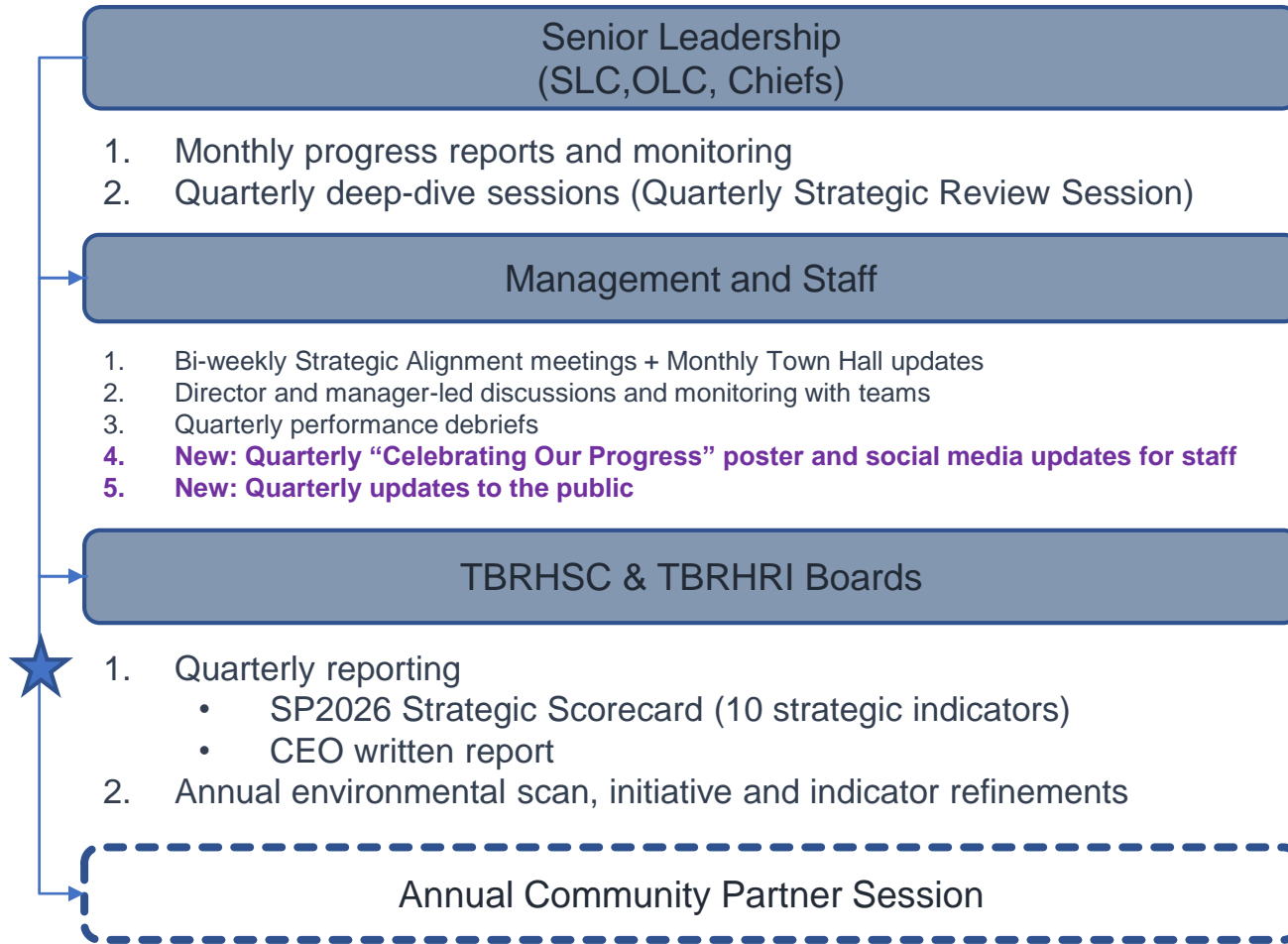
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# Cascading and Monitoring Our Plan

## Ensuring Accountability, Alignment and Focus



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# Overall Progress & Status Report to 2024/25 Q1

SP2026 Direction / Enabler	Initiative Status					
	Total	On Track	Slightly Behind	Significantly Behind	Not Started	Complete
Equity Diversity & Inclusion	7	2			2	3
Patient Experience	5	5			0	
Staff Experience	7	6			1	
Research, Innovation & Learning	3	1	2		0	
Sustainable Future	4	4			0	
<b>Total</b>	<b>26</b>	<b>18</b>	<b>2</b>	<b>0</b>	<b>3</b>	<b>3</b>



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# 2024/25 Q1: Highlights of our progress and successes...

## Equity, Diversity, & Inclusion

We all belong

- Completed 3 of 6 initiatives!
- Launched “Repairing the Sacred Circle” training and achieving targeted completion rates for leadership.
- Completed EDI gap analysis with internal stakeholders. Further engagement planned with patients and community members.
- EDI physical environment review project launched. Project charter and project plan developed, and environmental scan in progress.

## Patient Experience

Empathy, compassion, and respect in every encounter

- Co-design definition and framework developed and approved by SLC.
- Recruited and oriented 15 new Patient Family Advisors using revitalized onboarding process.
- Qualtrics patient experience survey system well established, response rates increasing and results improving consistently.
- Falls Prevention Committee launched “When Meals Are on the Way, Make Room for the Tray” to reduce patient fall risk.
- Clinical Decision Unit application submitted and approved, with go-live expected in September 2024.
- Phase 1 of Addiction Medicine Consult Services now live. Roaming education on stigma and employee pledge complete.

## Staff Experience

This is where we want to work, grow and thrive

- Talent Pool Builder implementation approved and core team identified.
- Successfully launched UKG Pro Workforce Management system.
- Leadership On-boarding and Orientation Program (LOOP) stakeholder engagement complete, with launch expected in Summer 2024.
- Design of Peer Mentorship Program is complete. When implemented, it will help new leaders navigate and excel in their roles.
- Celebrated graduation of first cohorts (38 leaders) of Humber Humanistic Healthcare Leadership Program.
- Inaugural Leadership Community Forum completed to envision future state of Leadership Community, as well as connect, share insights, and collaborate for mutual growth and success.

## Research, Innovation & Learning

Driven by the needs of our patients, our staff and our communities

- Phase 1 of Permission to Contact Business Case approved by Research Executive Leadership Council.
- Good Morning Innovation launched in June 2024, with the goal of highlighting outstanding innovation occurring and to promote a culture of innovative thinking by all staff.



# 2024/25 Q1: Highlights of our progress and successes...




- **Digital Health**
  - Program Director onboarded, and various program-related deliverables nearing completion.
  - Teams observing go-lives in North East region to learn lessons.
  - Successful 8-week Discovery Engagement Sessions being developed into validation and action plans.
- **Partnerships & System Integration**
  - Received regional endorsement of Regional Laboratory Services Plan. Work underway to advance key deliverables, in partnership with University Health Network.
  - Central Waitlist Management for MRI launched in June 2024.
  - Evolving Health Human Resources Task Force from hospital scope to system-level scope. Continued advocacy and mitigation support for ED Closures across the North West.
  - Advancing integrated clinical pathways for CHF and COPD, in partnership with Ontario Health Teams and regional partners.
- **Clinical Services Plan**
  - Environmental scan for acute and academic mandates and identification of areas focus complete.
  - Internal stakeholder consultation on 5-year volume estimates complete. Additional consultation sessions being planned in Fall 2024.
- **Sustainability & Accountability Framework**
  - Framework model being tested with financial and non-financial examples, with next steps identified.




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# Strategic Indicator Results for 2024/25 Q1


 **Number of patients self-identifying as Indigenous.** *Increasing and already exceeding target.*


 **% completion of “Repairing the Sacred Circle” training.** *Exceeding target.*

 **% completion of “Wake the Giant” training.** *Increasing but behind target.*


 **Overall positive experience responses for Inpatient & Emergency Department patients.** *Increasing and exceeding target.*

 **Repeat visits to the Emergency Department for targeted complex medical conditions – Congestive Heart Failure.** *Exceeding target.*


 **Measured reduction of patient harm.** *Exceeding target.*

 **Positive overall staff experience.** *Data for 2024/25 not yet available.*

 **Investigator-initiated research studies informed by NWO population needs.** *Exceeding target.*

 **# participants enrolled in a clinical trial in 2024/25.** *Exceeding target.*

 **Percent operating gross margin.** *Improving but remains worse than target.*

 **Proportion of patients aligned with regional programs/services.** *Improving and exceeding target.*



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# Questions & Discussion



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SP2026 Initiatives	Ind #	Indicator	SLC	2023/24 Fiscal							2024/25 Fiscal							Monthly Results Trending since Apr 2023	Observations, Reasons, & Mitigations	
				Jan-24	Feb-24	Mar-24	23/24 Q4	23/24 Target	23/24 Actual	23/24 Variance	Apr-24	May-24	Jun-24	24/25 Q1	24/25 Annual Target	24/25 YTD Target	24/25 YTD Actual			24/25 YTD Variance
Equity, Diversity & Inclusion	Strat-1	# of patients & staff who self-identify as Indigenous	Dr. M. Lesperance	17,936	18,231	18,555	18,555	10,564	18,555	7,991	18,785	19,312	19,578	19,578	19,500	18,791	19,578	787		As noted below.
	Strat-1a	# of staff who self-identify as Indigenous	Dr. M. Lesperance	64	64	64	64	64	64	0	64	64	64	64	64	64	64	0		Human Resources to commence surveying staff and establish new baseline during 24/25. In interim, using 23/24 actual as 24/25 preliminary target.
	Strat-1b	# of patients who self-identify as Indigenous	Dr. M. Lesperance	17,872	18,167	18,491	18,491	10,500	18,491	7,991	18,721	19,248	19,514	19,514	19,436	18,727	19,514	787		Updated target set for 24/25. Already exceeding 24/25 annual target.
	Strat-2a.1	% Sacred Circle completion: SLC	Dr. M. Lesperance	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a	90.0%	100.0%	100.0%	100.0%	25.0%	100.0%	75.0%		New indicator for 24/25. Target based on completion of training by select groups, including 100% of Senior Leadership staff. 24/25 results already at annual target.
	Strat-2a.2	% Sacred Circle completion: Managers et al	Dr. M. Lesperance	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a	23.7%	28.2%	28.2%	50.0%	12.5%	28.2%	15.7%		New indicator for 24/25. Target based on completion of training by select groups, including 50% of management staff. 24/25 results exceeding YTD target.
	Strat-2a.3	% Sacred Circle completion: Staff	Dr. M. Lesperance	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a	1.4%	2.1%	2.1%	15.0%	3.8%	2.1%	(1.7%)		New indicator for 24/25. Target based on completion of training by select groups, including 15% of remaining staff. 24/25 results below YTD target.
	Strat-2b	% staff who completed "Wake the Giant" training	Dr. M. Lesperance	41.8%	51.1%	66.5%	66.5%	90.0%	66.5%	(23.5%)	n/a	68.41%	69.5%	69.5%	90.0%	72.4%	69.5%	(2.9%)		Results include "Wake the Giant" mandatory training. Target is 90% completion for all staff. Target not achieved in 23/24 so training continuing into 24/25 until target achieved. While 24/25 compliance is steadily improving, results remain below YTD target.
Patient Experience - Evolution of PFCC	Strat-3	% positive (top box) survey responses on patient experience - Inpatient & Emergency Dept	A. Vinet	63.2%	57.8%	61.1%	60.7%	n/a	51.6%	n/a	67.0%	59.3%	55.9%	60.7%	51.6%	51.6%	60.7%	9.1%		24/25 target is improvement over 23/24 actual average. Once Ontario Hospital Association releases ON peer results, targets will be reassessed. See details re results below.
	Strat-3a	% positive (top box) survey responses on patient experience - Inpatient	A. Vinet	72.7%	64.5%	66.2%	67.8%	n/a	59.8%	n/a	79.5%	64.5%	66.7%	70.2%	59.8%	59.8%	70.2%	10.4%		24/25 target is improvement over 23/24 actual average. Once Ontario Hospital Association releases ON peer results, targets will be reassessed. 24/25 results fluctuating month to month but exceeding target.
	Strat-3b	% positive (top box) survey responses on patient experience - Emergency Dept	A. Vinet	56.0%	49.2%	56.2%	53.8%	n/a	46.9%	n/a	58.8%	61.5%	43.8%	54.7%	46.9%	46.9%	54.7%	7.8%		24/25 target is improvement over 23/24 actual average. Once Ontario Hospital Association releases ON peer results, targets will be reassessed. 24/25 results fluctuating month to month, including lower results in Jun 2024 but overall results exceeding target.
Patient Experience - Focus on Quality	Strat-4	% cumulative improvement in inpatient harm incidents for targeted categories	J. Wintermans	101.4%	68.3%	82.8%	84.1%	97.8%	91.6%	6.2%	64.1%				97.8%	97.8%	64.1%	33.7%		23/24 target maintained for 24/25. Apr 2024 results exceeding target.
Patient Experience - Coordination & Support for Frequent Users	Strat-5	% repeat ED visits for patients with Congestive Heart Failure	A. Vinet	34.8%	38.5%	36.7%	36.7%	n/a	24.2%	n/a	7.5%	18.8%			23.0%	23.0%	13.2%	9.8%		Target set for 24/25 based on 5% improvement over 23/24 baseline. 24/25 results exceeding target.
Staff Experience	Strat-6	% overall positive staff responses on experience survey	J. Verdenik	n/a	n/a	n/a	n/a	n/a	57.3%	n/a	n/a	n/a	n/a	Collecting baseline	Collecting baseline					Hold: Pending review of Accreditation Canada requirements.
Research, Innovation & Learning	Strat-7	# opened investigator initiated research studies informed by NWO population needs	Dr. C. Mushquash	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a	6	6	10	3	6	3		Updated indicator on advice of Research leadership to remove "applied to care" criteria, as timelines for applying research are very lengthy. Target for 24/25 is 10 studies. Results exceeding target.
	Strat-8	# participants enrolled in a clinical trial in current year	Dr. C. Mushquash	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a	92	92	140	35	92	57		Replaces 23/24 indicator "percentage positive responses on Emergency and Inpatients being made aware of research opportunities". Aligns with Ontario Hospital Association indicator and related reporting. Results exceeding target.
Sustainable future - Operational Sustainability & Accountability	Strat-9	% operating gross margin	P. Myllymaa	(8.71%)	(0.92%)	0.06%	0.06%	1.80%	0.06%	(1.74%)	(8.90%)	(14.17%)	(3.28%)	(3.28%)	1.80%	1.80%	(3.28%)	(5.08%)		Results below target. Overall negative variance is largely due to a shortfall in MoH and ON Health revenue, with smaller negative variances in med/surg supplies, and drug expenses, that are offset by other positive variances in various categories.

Sustainable future - Partnerships et al	Strat-10	% of NWO patients aligned with regional programs/services	J. Logozzo	55.7%	48.5%	52.1%	52.1%	48.0%	50.8%	2.8%	58.0%				50.0%	50.0%	58.0%	8.0%		Updated target set for 24/25. Preliminary Apr 2024 results exceeding target.
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**Results vs Targets:**  
 At or better than target  
 Slightly (less than 5%) worse than target  
 Significantly (5% or more) worse than target  
 n/a Data not expected for reporting period or too few results to be meaningful  
*Blue text* Incomplete period or result not yet finalized

**Monthly Results Trending:**  
 Monthly Results Trending  
 Results Targets

**Equity, Diversity, & Inclusion**  
We all belong



**Cultural Safety Training**

Repairing the Sacred Circle: Repairing the Sacred Circle, an in-person

Indigenous Cultural Awareness and Education Primer, has now been offered at our Hospital for six months. Within this time, 100% of Executive staff, 36% of Managerial staff, and 3% of general staff have been trained, approaching our organizational goals for 2024/45.

Alongside Repairing the Sacred Circle, Wake the Giant is a mandatory Indigenous cultural safety training offered on our Hospitals LMS site. Our organization has set a goal of 90% of staff completed by end of March 2025, in which we currently sit at 70%. Reminder to staff to complete training on the LMS site.

**Patient Experience**

Empathy, compassion, and respect in every encounter



**Focus on Quality**

The Falls Prevention Committee was re-established in September 2023 with a primary focus on reducing falls and associated injuries in the hospital setting. A key initiative this quarter has been the campaign titled, “When meals are on the way, make room for the tray,” which involved all hospital disciplines; including nursing, support services, allied health, and patients and families. The goal is to ensure that overbed tables are cleared and accessible prior to meal delivery times, addressing a significant cause of patient falls. Additionally, slip-resistant socks have been made available and “Falling Star” protocols, which indicate that a patient is at risk of falling, have been integrated into bedside communication whiteboards to further improve patient safety.

**Seamless Transitions**

The Seamless Transitions project continues to enhance patient flow activities through the successful implementation of the Surgical Short Stay Unit and the Advisory Board’s Discharge Toolkit. The Surgical Short Stay Unit has been implemented to facilitate early morning, safe discharges for surgical patients with an Expected Length of Stay (ELoS) less than 48 hours, but up to 72 hours when beds are available. The Discharge Toolkit has been implemented to help address common discharge delays in the acute setting through the early identification of patient need, proactive prediction of post-discharge destination, and active discharge planning intervention and management earlier in the patient stay.

**Staff Experience**

This is where we want to work, grow, and thrive



**Leadership Development**

The new Leadership Orientation and Onboarding Program (LOOP) has been designed to support new leaders as they integrate into TBRHSC’s Leadership Team. Stepping into a new leadership position can be both exhilarating and challenging. LOOP has been carefully crafted to provide new leaders with the necessary tools and information to thrive in their new role. The Leader Peer Mentorship Program is another new initiative within the LOOP program. This program aims to connect new leaders with seasoned professionals to foster growth and development within our leadership community, and will play a vital role in guiding and supporting new leaders as they navigate their roles within TBRHSC. Both programs will launch in Fall 2024.

**Healthy Workplace**

We are excited to confirm that after extensive engagement and consultation with front line staff, the “Joy in Work Framework”, developed by the Institute for Health Care Improvement, will form our Hospital’s Healthy Workplace Framework. This evidence-based framework aims to address the realities of today’s hospital environment with the goal of supporting individuals to work in a happy, healthy, and productive environment.

**Our first steps will focus on the following domains of the framework:**

- 1) Physical & Psychological Safety
- 2) Wellness & Resilience

Your continued input will help us to support the foundational needs of our workplace and the well-being of everyone who works, volunteers, and learns in our hospital.

**Research, Innovation, & Learning**

Driven by the needs of our patients, our staff, and our communities



**“Hello Innovation” – Good Morning Innovation Event**

The vision of the “Hello Innovation” events is to create opportunities for collaboration, highlight and celebrate innovation amongst staff, and promote a culture of innovative thinking for all staff at the Hospital and Research Institute.

On June 4th, the inaugural Good Morning Innovation event was held with over 70 attendees. There were nine staff presentations featured, highlighting innovative work from a variety of departments including Interprofessional Education, Nutrition and Food Services, Quality and Risk Management, and 2C. The innovations were presented in three-minute summaries of the related projects, focusing on outlining the gap that the innovation intended to fill, the specific idea they had to fill that gap, and how the innovation connects to strategic goals.

The second Good Afternoon Innovation Event was held on September 19 with a drop-in, expo-style portion included where presenters were engaged in group conversations, networking and sharing ideas.

**Sustainable Future**

Ensuring our Healthy Future



**Digital Health**

The NWO Digital Health Strategic Roadmap embraces the vision to be a leading health system - enabled by innovative digital transformation - where partners work together to achieve the best outcomes and care experience for the people of Northwestern Ontario. The roadmap has 3 key components:

**Phase 1: The North West Ontario Health Record (NWOHR)**

Work is underway to standardize digital solutions, interfaces and clinical equipment in pharmacy and laboratory as deployment planning of the NWOHR begins. TBRHSC is continuing to work with multiple partners, including Primary Care to build a solution that will meet the needs of the people in our region.

**Phase 2: Advanced Analytics & Research**

We worked with system partners through an 8-week Discovery Engagement process. The ideas from these sessions are now being developed into validation and action plans.

**Phase 3: New Digital Health**

The Digital Health Innovation Program Board continues to review opportunities. A proposal to look at Artificial Intelligence ambient transcribing is being developed with Northern Ontario School of Medicine University as a research project with the specific interests of the region in mind.

How are you advancing our Vision of Exceptional care for every patient, every time?

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**Board of Directors – *Open***  
**Wednesday, June 5, 2024 at 5:00pm**  
**In Person at TBRHSC and via Webex (Board Directors only)**

Action

**Present:**

Gord Wickham ( <i>Chair</i> )	Dr. Rhonda Crocker Ellacott*	Patricia Lang
Charles Campbell	Dr. Andrew Dean	Douglas Judson
Christine Bates	Matt Simeoni	Kimberly Ferris
Joy Wakefield	Dr. Sarita Verma	Adam Vinet*
Dr. Brad Jacobson*		

**By Invitation:**

Elena Arena, *Recording Secretary*  
 Peter Myllymaa, *Vice President, Operations, Clinical & Support Services*  
 Jennifer Wintermans, *Vice President Quality & Corporate Affairs*  
 Dr. Chris Mushquash, *Vice President, Research*  
 Jessica Logozzo, *Vice President, Regional Transformation & Integration*  
 Jeannine Verdenik, *Vice President, People & Culture*  
 Dr. Miranda Lesperance, *Vice President, Indigenous Collaboration, Equity & Inclusion*  
 Katy Commisso, *Thunder Bay Regional Health Sciences Foundation Board of Directors Observer*

**Regrets:**

Dr. Elrasheed Osman*	James Peotto	Michael Pelletier
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**1.0 CALL TO ORDER** – The Chair called the meeting to order at 5:07p.m.

**1.1 Chair’s Remarks**

The Chair opened with a land acknowledgement and welcomed Board members, Hospital Vice Presidents, and special guests to the final meeting of the current Board term.

**1.2 Quorum** – Quorum was attained.

**1.3 Conflict of Interest** - None

**1.4 Approval of the Agenda**

*Moved by: Charles Campbell*

*Seconded by: Matt Simeoni*

**Motion**

*“That the Agenda be approved, as circulated.”*

**CARRIED**



## 2.0 PATIENT STORY

A patient story was shared to highlight the positive impact of the newly hired Addictions Medicine Consult Nurse role.

## 3.0 PRESENTATIONS

### 3.1 Engagement & Advocacy: Building Support for the Unique Needs of our Hospital & Region

A presentation was provided to inform the Board of recent advocacy efforts with Government Officials and Members of Provincial Parliament.

The presentation included an overview of common themes and messaging, information on outcomes, and an overview of next steps. Each event included an opportunity to highlight the Hospital's challenges, efficiencies, opportunities, and regional differences.

The Hospital will continue to work with Ontario Health and the Ministry of Health to address current operational, capital and pressure needs necessary to advance our mission.

## 4.0 CONSENT AGENDA

*Moved by: Joy Wakefield*  
*Seconded by: Kimberly Ferris*

*Motion*

*"That the Board of Directors:*

- 4.1 Approves the Board of Directors Open Minutes of April 3, 2024;*
- 4.2 Approves the Broader Public Sector Accountability Act Attestation Certificate, for the period April 1, 2023 to March 31, 2024;*
- 4.3 Accepts the Broader Public Sector Use of Consultants Report;*
- 4.4 Approves the Hospital Service Accountability Agreement Declaration of Compliance for the period of April 1, 2023 to March 31, 2024;*
- 4.5 Approves the Multi Sector Service Accountability Agreement Declaration of Compliance for the period of April 1, 2023 to March 31, 2024;*
- 4.6 Accepts the Q4 2023-2024 Wages and Source Deduction Attestation for the Thunder Bay Regional Health Sciences,*

*as presented."*

**CARRIED**



## 5.0 REPORTS

### 5.1 Report from the President & CEO

The President and CEO report was pre-circulated for information. The report highlighted various accomplishments, current challenges, and highlights on activities including updates on capital projects, staff engagement, research engagement, cultural safety training and a facilities refresh.

### 5.2 Report from the Chief of Staff (COS)

The COS report was pre-circulated for information. Highlights included professional staff engagement activity, initiatives to enhance the experience of regional patients and to provide continued support to regional partners in regional transfers, and a commitment to ensuring all professional staff complete cultural safety and sensitivity training.

### 5.3 Report from the Chief Nursing Executive (CNE)

The CNE report was pre-circulated for information. Highlights included an update on the Enhanced Extern Program recruitment tool for 2024-25, the success of the inaugural Preceptor Workshop hosted in collaboration with NOSM University, and National Nursing Week celebrations.

## 6.0 FOR INFORMATION

6.1 Report from the TBRHS Foundation – For information.

6.2 Report from NOSM University – For information.

6.3 Environmental Compliance & Fire Safety Update – For information.

7.0 DATE OF NEXT MEETING – to be scheduled in October, 2024

8.0 ADJOURNMENT – The meeting adjourned at 5:45 p.m.

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Chair

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Board Secretary

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Recording Secretary



## ATTESTATION

**TO:** Thunder Bay Regional Health Sciences Centre Board of Directors (the “Board”)  
**FROM:** Dr. Rhonda Crocker Ellacott  
President and Chief Executive Officer  
**DATE:** September 18, 2024  
**RE:** Q1 2024-25 Wages and Source Deductions for Fiscal Year Beginning April 1, 2024 and ending March 31, 2025 (the “Applicable Period”)

On behalf of the Thunder Bay Regional Health Sciences Centre (the “Hospital”), I attest that:

- all wages owing to employees have been recorded, processed, accrued and/or paid accordingly as per established payroll cycle and other scheduled payouts;
- all source deductions relating to the employees, which the Corporation is required to deduct and remit, pursuant to all applicable legislation, including without limitation, the Income Tax Act (Canada), the Canada Pension Plan (Canada), the Unemployment Insurance Act (Canada), and Employer Health Tax Act (Ontario), have been made and remitted to the proper authorities within established timelines;
- all taxes collected pursuant to the Harmonized Sales Tax have been collected, claims filed and/or remitted as required to the proper authorities;
- the Corporations Information Act Annual Return required of Registered Charities under the Income Tax Act (Canada) has been filed;
- that the systems in place, as established by the Board, for the preparation and submission to the Board of compliance certificates, confirming that wages, source deductions and other taxes have been accomplished, are in place, are functional, adequate and monitored

during the Applicable Period.

In making this attestation, I have exercised care and diligence that would reasonably be expected of a President and CEO in these circumstances, including making due inquiries of Hospital staff that have knowledge of these matters.

Dated at Thunder Bay, Ontario this 18<sup>th</sup> day of September, 2024.



Dr. Rhonda Crocker Ellacott, HBSN, M.A., Ed.D  
President and Chief Executive Officer  
Thunder Bay Regional Health Sciences Centre  
Chief Executive Officer  
Thunder Bay Regional Health Research Institute



## October 2024

Greetings, boozhoo, and bonjour.

Please let me begin by acknowledging that throughout the month of September, we brought awareness to the significance of National Day for Truth and Reconciliation through various events to honour the survivors while honouring to the importance of the day. We remain committed to working towards creating an environment that provides equitable and culturally safe care. We know we have made progress but recognize that we have much more work ahead of us and an ongoing obligation to the communities we serve.

I would like to take a moment as well to speak to the professionalism and hard work of our staff throughout the summer. During this time, the Hospital was extremely busy with record numbers visiting our Emergency Department (ED). Our Staff and Professional Staff within the ED and throughout the Hospital were well prepared and kept patient flow at top of mind to ensure prompt and appropriate care was available throughout the patient's care experience. I am proud of the work done and the preparedness done by all to support the increased capacity levels.

To further address our ED surges, we have introduced a new approach to care by establishing a short-term monitoring, investigation and treatment assistance unit to patients that require a brief hospital stay. The Clinical Decision Unit is a complementary care service with an aim to bridge some of the care services between Hospitalists and ED Physicians for an improved care experience while reducing hospital admissions, and overcapacity.

As you are aware, our community and region are no different from other areas dealing with substance use and addiction challenges. I am pleased that the Ministry recently announced investments toward *safe sobering* and providing much needed funds to address new beds to the system and meeting a gap in the continuum of care offered to create a model for safe sobering. This funding will enable valuable pathways and partnerships to provide compassionate care for individuals in need of these services.

We continue to see progress with the Cardiovascular Surgery Project, and I am happy to report that once approval is granted for the next stage, a construction start date will be established. We are optimistic yet mindful of the factors that influence timelines when conducting a project as complex as this one.

As you know, Health Human Resources remains one of the biggest challenges in healthcare across the province, at all levels from frontline to leadership. One way we are addressing it is by continuing to create an environment where a culture of continuous learning and improvement grows leaders and retains our greatest resource. We are proactive in building our leaders of tomorrow by providing opportunity to develop their leadership skills through the Leadership Development Framework. Various initiatives will provide opportunity for all to develop their skills and revitalize the workforce culture.





## Patient Experience

Empathy, compassion, and respect in every encounter



### Cardiovascular Surgery (CVS) Project Update

Progress continues on the Cardiovascular Surgery (CVS) project as the public General Contractor Request for Pre-Qualification (RFPQ) process was completed in June 2024. As a result, the Ministry granted authorization to tender the project with a bid period expecting to be closed on October 9, 2024. Following the tender process, the prime consultant will recommend the preferred proponent based on the lowest bona fide bid. From there, we will proceed with submission Stage 3.1, Final Estimate of Cost to the Ministry for review. Stage 3.1 will include the Board motion identifying the preferred bidder, bid price, any accepted alternative prices and confirmation of local share funds. Upon review, the Ministry will provide approval to award the contract, which will move us to the stage of working with the General Contractor to establish a firm start date for construction activities.

From a clinical perspective, Dr. Vivek Rao has been appointed as the Medical Lead, Cardiovascular Surgery (CVS) Implementation as of June 2024. Dr. Rao is an expert in heart failure surgery and serves as the head of the Mechanical Circulatory Support and Heart Transplant Programs at the Peter Munk Cardiac Centre (PMCC) within the University Health Network (UHN). As the CVS Program Implementation Lead, Dr. Rao will provide oversight, direction and leadership to the Cardiovascular Surgery project.

Additional progress is being made with our clinical operations as the 3<sup>rd</sup> Cardiovascular Perfusion Candidate started at the Michener Institute of Education in August 2024 with anticipated graduation in spring of 2026.

### Substance Use Disorder & A Sobering Story

Thunder Bay ranks first in the province for alcohol-related hospitalizations, mental health visits, and stimulant harm. In 2022/2023, there were nearly 3,000 emergency department (ED) visits for people with mental health illnesses and nearly 5,000 visits for substance use. This is a patient population that is forecasted to see increased ED visits.

The Patient Experience pillar guides the work of the Substance Use and Addictions Strategy, which indicates that we will become *experts in caring for and supporting patients with complex care needs due to acute and chronic conditions, mental health and addictions issues, and social vulnerabilities.*

To improve access to care and better support people with substance use and addictions, some of the initiatives the Hospital has taken include:

- The launch of the Addictions Medicine Consult Service (AMCS) on March 4, 2023, with a goal for expansion to provide 24/7 interprofessional team support.



- The launch of the substance use and addictions anti-stigma campaign, called “*Our Words & Actions Matter*” which includes the opportunity to take a pledge.
- Working towards a dedicated ED Mental Health & Addictions Assessment and Observation Area where a pre-capital submission to Ontario Health is pending.
- Submission of an application for the development of a Substance Use Disorders (SUDs) Integrated Care Pathway, which includes expansion of the AMCS to Ontario Health for permanent funding of over \$4 million.
- Providing education for all hospital leaders in October, *Stigma Ends with Me*, by the Community Addictions Peer Support Association (CAPSA).

In addition to the above, there will be a screening of *A Sobering Story* for all Hospital staff, Professional staff, Health Research Institute staff and their family and friends. The Substance Use & Addictions Education Working Group in partnership with the Thunder Bay Regional Health Sciences Foundation is offering this screening free of charge on November 7, 2024, at Silver City Cinema. *A Sobering Story* is a local documentary that unveils the harsh reality of the prevalence and impact of substance use and addictions in Thunder Bay and aims to reduce stigma and ignite compassion for those grappling with addiction.

## Clinical Decision Unit

We are pleased to announce the launch of a Clinical Decision Unit (CDU) in our Emergency Department (ED), effective September 30, 2024. Patients who require extended observation and treatment beyond the usual scope of the ED but do not necessitate an inpatient admission can receive focused, short-term care (up to 24-hours) in the CDU. This initiative aims to enhance patient care, reduce unnecessary admissions, and optimize the use of Hospital resources.

The CDU is particularly suited for patients with specific clinical conditions that require short-term monitoring or therapy. The CDU's goal is to provide targeted, patient-centred care that improves outcomes and ensures efficient resource utilization. This program will allow us to provide safe patient care while avoiding admissions to our hospital.

## Pathology Services

The Ontario Forensic Pathology Service (OFPS) and Thunder Bay Regional Health Sciences Centre (TBRHSC) have recognized an important milestone — the one-year anniversary of the Provincial Forensic Pathology Unit (PFPU) Mobile Team initiative for medicolegal autopsies from Thunder Bay and Northwestern Ontario. Through this innovative partnership, we are able to continue to perform high-quality medicolegal autopsies in Thunder Bay when a PFPU-staffed Mobile Team is present.

Medical autopsies continue to be done for Hospital patients as requested, but the funding of medicolegal autopsies is directed to OFPS. As well, to align with recommendation #29 from the 2016 Office of the Independent Police Review Director (OIPRD) Broken Trust report, OFPS will continue to explore a more permanent solution to establish a Forensic Pathology



Unit in Thunder Bay, ideally housed alongside the Regional Coroner's Office. Until then, we are pleased to continue this important partnership that is highly meaningful to families, Indigenous communities, stakeholders, partners and our staff.

## Staff Experience

This is where we want to work, grow and thrive



## Employee and Professional Staff Engagement Survey

The leadership team is in the final stages of consultation on the corporate results from the Employee and Professional Staff Engagement Survey. Three priority themes for improvement have been identified along with recommended action plans. Staff can look forward to the next stage of engagement starting this Fall, including sharing of department level results, corporate actions plans and tools to support continuous feedback and improvement at the department level.

## Leadership Development

The TBRHSC Leadership Development Framework aims to support leaders at every level - from emerging to executive, catering to their unique needs and aspirations. Several additional elements within the leadership framework have recently launched including the Management Essentials training, revised Leadership Orientation Program, Peer Mentorship and Leadership Community Forums. In addition, we have additional cohorts of leaders participating in the Rotman Healthcare Leadership Program and Humber Humanistic Healthcare Leadership Program. We are also hosting the next session of the Fostering Well-being Through Leadership series in partnership with Your Health Space.

## Values Based Recruitment

We are excited to have launched Values Based Recruitment at TBRHSC as of June 2024. This initiative not only guides our recruitment process but also reinforces our commitment to upholding our core values. Hiring managers now have access to a range of tools and resources to facilitate every step of the recruitment process including the Values Based Recruitment Guide, Interview Question Database, Interview Guides, Recruitment Checklist and more. Consistent messaging in our recruitment process and use of the selection tools with help TBRHSC build a strong values-driven team.

## Research, Innovation, & Learning

Driven by the needs of our patients, our staff and our communities



## Good Afternoon Innovation

Thunder Bay Regional Health Sciences Centre, in partnership with Thunder Bay Regional Health Research Institute, held its *Good Afternoon Innovation* event on September 19<sup>th</sup> and



its first Innovation Expo. This event provided a platform for innovators with the Hospital and Health Research Institute to share their work and collaborate with other creative thinkers. The event highlighted nine innovators including the Renal Biomed team using creating transportation methods to bring home hemodialysis to remote locations; the Falls Prevention Committee reducing the number of falls occurring in patient rooms by engaging everyone to participate in 'Clear the Tray'; and the Cardiovascular Surgery Program developing local specialists through the 'Grow your Own' partnership. The expo created an interactive opportunity for guests to speak with the innovators and view project details, including ROSA Robotics. The next event will take place February 2025 with new innovations!

## Internships and Research Development

Since 2011, through the Northern Ontario Heritage Fund Corporation (NOHFC), both the Hospital and Health Research Institute have been routinely utilizing the NOHFC Internship Program. The NOHFC was established in 1988 with a mandate to promote and stimulate economic development initiatives in Northern Ontario by providing financial assistance to projects that stabilize, diversify and foster economic growth in the region.

Recently we hosted MPP Greg Rickford and MPP Kevin Holland to showcase the Physician initiated studies currently underway, as well as several upcoming studies. One position works closely with the associated Orthopedic Physician and the Clinical Research Services Department to support and develop clinical research projects related to the Orthopedic Group. Another internship was highlighted that focused on a novel material science research project with high commercialization potential. The intern will lead the design and development of novel diluted semiconductor materials with further implementation in microwave technology and signal processing. The intern will conduct deposition and characterization of the designed materials, train and supervise students at all levels, as well as obtain funding for the project. Through this program, we are able to build on our research success and innovation within the Hospital and Health Research Institute.

## Equity, Diversity & Inclusion

We all belong



## Truth and Reconciliation Commission Report Update

As we further advance our Strategic Plan 2026, we are committed to promoting transparency regarding Thunder Bay Regional Health Sciences Centre's efforts to address the Truth and Reconciliation Commission's 94 Calls to Action. This is aligned with the Truth & Reconciliation Call to Action Implementation project of our Strategic pillar of Equity, Diversity, and Inclusion.

The Truth and Reconciliation Commission of Canada (TRCC) continues to address the legacy of residential schools and advancing the reconciliation process. Following consultations with survivors, the Commission recommended 94 Calls to Action aimed at





various levels of government and institutions, including those in the healthcare and education sectors.

On an ongoing basis, TBRHSC assesses its progress towards the Calls to Action and will be publishing an online report to share progress and next steps publicly to partners and the Indigenous community. TBRHSC continues to provide annual updates on these initiatives.

### **Ontario Health System Quality and Innovation Award**

We are proud to announce that the Miskwaa Biidaaban team (Indigenous Health Hub within the Indigenous Collaboration, Equity & Inclusion portfolio) has been nominated for the 2024 Improved Indigenous Health Award at the inaugural Ontario Health System Quality and Innovation Awards.

The award acknowledges the excellence in providing care to First Nations, Inuit, Métis, and Urban Indigenous people, families, and communities within Ontario. The Miskwaa Biidaaban team is a vital initiative that aims to improve health care access and support for Indigenous patients and families in Thunder Bay and the Northwestern Ontario region, an area with a significant Indigenous population. In addition, the program was selected for addressing long-standing health care disparities by offering culturally appropriate care coordination services.

This nomination highlights the department's achievements and commitment to improving health care as well as providing a culturally safe experience for all staff and patients. We look forward to providing you the outcome of this nomination that will happen at the award ceremony on September 26, 2024, at the University of Toronto.

### **Sustainable Future**

Ensuring our  
Healthy Future

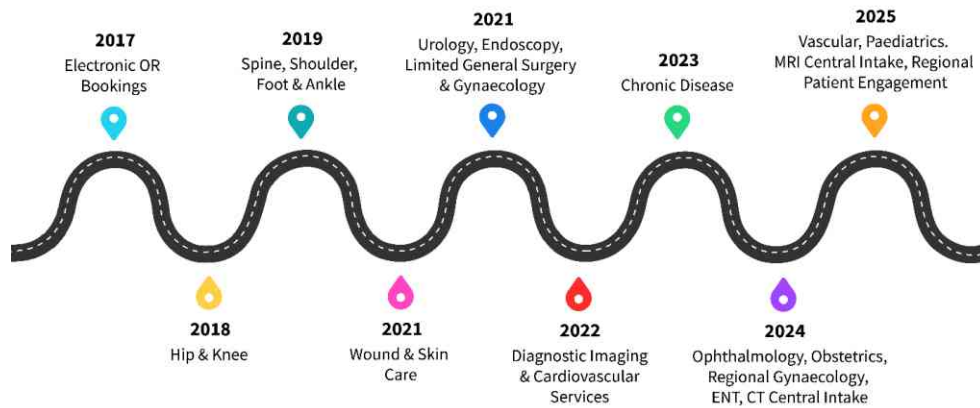


### **Centralized Waitlist Management**

The Centralized Waitlist Management (CWM) platform ensures patients are better prepared for consult, pre-admission and endoscopy and operating room bookings – while also reducing the administrative burden of booking appointments, lowers cancellation or no-show rates. The platform continues to benefit many and recently a funding proposal for the 2024-2025 fiscal year was submitted to Ontario Health North for a one-time budget ask that totals \$3.8M with a request for annual sustained funding of \$3.9M. The goals of funding this year include expanding to centralized intake for Vascular Surgery, Paediatrics and Regional MRI as well as a Patient Engagement platform that will digitize patient communication.



## Single Entry Model Timeline - Northwest



### Final Thoughts

As I wrap up this month's report, I would like to highlight again that we are in the 20<sup>th</sup> Anniversary of this building. As with any building, we have to upkeep the environment and repair much needed and dated areas where patients are provided care and beyond. In my next report I will be providing you an overview on some of the improvements that are happening around the Hospital and Health Research campus. We have numerous projects on the go to improve our workspace and provide a better experience for patients, families and caregivers.

On a final note, I would like to invite you to take part in the 15<sup>th</sup> annual Sharing and Caring Together event taking place October 21<sup>st</sup>-25<sup>th</sup>. The purpose of Sharing and Caring Together is to celebrate our successes and numerous accomplishments in Patient and Family Centred Care (PFCC) and patient experience. This week-long event features educational lunch-and-learns, coffee rounds, a community education session, and concludes with a full-day exhibition showcasing how various departments embody our PFCC philosophy.



## What Patients and Partners in Health are Saying

“ A big ‘thank you’ to Dr. Patrick Martel for going out of his way to help me get a patient to the care they needed. I know how much pressure the Emergency Department is under, yet Dr. Martel took the time to help me make a reasonable disposition. ”

- Staff compliment, via Quality and Risk Management (July 2024)

“ Dr. Boake’s patient care is top notch! Thumbs up to Dr. Armour Boake who showed so much patience and empathy to a patient during a very stressful procedure. Dr. Boake took so much extra time to make sure the patient understood and felt heard. It was really great to witness ”

- Staff compliment, via Quality and Risk Management (July 2024)

“ I had a fabulous experience with Dr. Merat and his team for my recent colonoscopy. A caring team perfectly positioned for this type of exam. I wouldn’t hesitate to endorse this fine group of professionals! Well done Dr. Merat and Thunder Bay Regional Health Sciences Centre. ”

- Patient compliment, via Quality and Risk Management (August 2024)

“ I would like to commend Logan, RN, on his professionalism and kindness to my father during his two week stay on 3A. He always went above and beyond to assist and answer any questions we had. We were always in great hands with Logan, expressing his knowledge and compassion every shift with a smile. He made my father’s stay bearable under the circumstances. My father would rest easy knowing Logan was his nurse. Thank you very much. ”

- Patient compliment, via Quality and Risk Management (August 2024)

“ Please give my appreciation to Monique, RPN, on 3A for her professionalism, kindness and vast knowledge during my recent stay at TBRHSC. I was able to see how wonderful she is and told her she should be teaching other nurses how to be just like her! What an exceptional nurse and asset to the Surgical Team. She always checked on me, and communicated when she was unavailable (on break) and who would be looking after me during that time. I always felt cared for and never had to wait for anything. Very prompt and always with a smile. Keep up the awesome work and please know you are appreciated. ”

- Patient compliment, via Quality and Risk Management (August 2024)



**Chief of Staff Report**  
**to the**  
**Board of Directors**  
**Thunder Bay Regional Health Sciences Centre**  
**October 2024**

**Staff Experience and Engagement**

We are committed to enhancing the experience of our Professional Staff, and several key initiatives have been launched this quarter:

- **Renovations of the Professional Staff Lounge**  
We have completed renovations to the Professional Staff Lounge, creating a more comfortable and inviting space for our team to relax and collaborate.
- **CMPA Session**  
This fall, we will host a session titled "Theatre Arts - The Surgical Safety Course" facilitated by the Canadian Medical Protective Association (CMPA). This program is designed to empower Professional Staff and their perioperative teams to enhance the operating room environment, fostering a culture of safe surgical care.
- **Reinstatement of Grand Rounds**  
We are pleased to announce the return of Grand Rounds, which will be held in person monthly. This initiative will feature a diverse array of clinicians presenting on various topics, promoting ongoing education and engagement among our staff.

**Patient Experience**

Our commitment to patient-centered care continues to evolve, with several initiatives aimed at enhancing patient experience:

- **Seamless MD Program**  
We are developing safer and more efficient pathways for our patients through the Seamless MD program. This initiative enables patients to stay connected with their care partners after discharge, ensuring continuity of care and support.
- **Expansion of Remote Patient Monitoring**  
Building on the Seamless MD program, we plan to expand our remote patient monitoring initiatives, further enhancing patient engagement and health outcomes.





- **Clinical Decision Unit in the Emergency Department**

Soon, our Emergency Department will implement a Clinical Decision Unit (CDU) aimed at safely diverting patients from admission while optimizing their care. This initiative is expected to enhance patient flow and improve overall care delivery.

### **Equity, Diversity, and Inclusion**

We are dedicated to fostering an inclusive environment that values diversity and addresses inequities. Our current initiatives include:

- **Wake the Giant Training**

We have introduced "Wake the Giant" training for Professional Staff in the departments of Emergency Medicine and Hospitalist Medicine. This program educates participants on identifying racism and engaging in anti-Indigenous racism strategies, while also exploring Indigenous history, culture, and traditions.

Through these initiatives, we are taking significant strides toward enhancing staff engagement, improving patient experience, and promoting equity, diversity, and inclusion within our organization. We look forward to continued progress and the positive impact these efforts will have on our community.



**Chief Nursing Executive (CNE)**  
**Open Report to the Board of Directors**  
**October 2024**

**Staff Experience**

- Nursing orientation has been refreshed this year. The changes were made based on previous year's feedback from new hires. Changes include; restructuring of content, streamlining of e-learning modules, standardized branding, and additional resources for Managers. The effectiveness of these changes are currently being evaluated.
- Nursing skills day has also been revamped. Changes include an increase in frequency and change from current delivery (didactic) to increase interactive learning.
- The Roaming Education for Staff (R.E.F.S) team has been recognized with the publication of an article by the Ontario Hospital Association. Since its inception (February 2024), REFS has educated 3,136 staff members from varying disciplines.
- To support the increased recruitment of internationally educated Nurses, we have hired a temporary Supervised Practice Experience Partnership Coordinator to assist in the on-boarding process for Nurses as they transition into their role. Dedicated clinical support and tailored orientation will aim to facilitate their success in the organization.

**Patent Experience**

*Pressure Injury Prevalence and Injury Survey*

- The annual pressure injury prevalence and incidence study was completed on March 21 and 29, 2024. The hospital prevalence rate for pressure injuries was 7% (8-12% historically), and incidence rate was 2.4% (3-5% historically).

*Transitioning Paediatric and Neonatal Patients to Syringe Pumps*

- TBRHSC is transitioning to syringe pumps for Paediatric and Neonatal patients. New smart pumps have a drug library which will enhance the safety of infusion medications in this population and complements the pumps that will be used to support the Paediatric Emergency Transport Team.
- The transition over to the new pumps will require an interdisciplinary approach and will be guided by an interprofessional team that includes the vital role of the Pharmacy Department in building the drug library and standardization.



### *Inter-organizational Standardization of Infusion Concentrations*

- Representatives from TBRHSC, regional sites and ORGNE have been meeting to review the infusion concentrations (for adult and paediatric patients) in order to standardize processes for infusions as much as possible across the region.
- Standardization will improve patient safety and increase the efficiency during transport.

### **Research Innovation and Learning**

- Multiple research projects are underway in collaboration with Confederation College, Lakehead University and NOSM University including an in-hospital study on the retention and recruitment of health care professional. The study will be submitted to an academic journal and used to inform the organization
- To garner interest with positions in Nursing and UCAs, we are participating in career fairs at Lakehead University and Confederation College to attract students for these positions at our Hospital.
- We are working with Lakehead University to improve the transition from student to graduate nurse by reviewing content overlap and expected competencies prior to graduation.



**Thunder Bay Regional  
Health Sciences  
Foundation**

980 Oliver Road  
Thunder Bay ON  
P7B 6V4 Canada

TEL: 807 345 4673  
FAX: 807 684 5802  
TOLL FREE: 1 877 696 7223



**Northern  
Cancer Fund**



**Northern  
Cardiac Fund**



**Health Sciences  
Discovery Fund**

## **Report to the Thunder Bay Regional Health Sciences Centre Board of Directors September 2024**

### ***Foundation Events***

#### **Tbaytel Luncheon of Hope**

Join us for an inspiring afternoon on Friday, October 4th, from 10:30 am to 2:00 pm at the Superior Inn Hotel & Convention Centre. Proudly sponsored by Equipment World, Synergy North, Chronicle Journal, and Little Details Designs, this event supports the **Northern Cancer Fund for Breast Cancer**. Prepare for a day filled with hope, including an update on the Radialis and the future of breast cancer care from Dr. Reznik, as well as an emotional story from a breast cancer survivor. Explore our exciting trade show, participate in the blitz events, and don't miss out on the penny auction!

#### **Our Hearts Around the World**

Ready for a culinary adventure? **Our Hearts Around the World** brings the world's flavors to you with a 5-course dinner, featuring dishes from Switzerland, Panama, Costa Rica, Mexico, and Italy! Each course will be paired with a live auction, offering travel packages to the corresponding country—including accommodations and a travel gift card. This one-of-a-kind event takes place at the Fort William Historical Park on Saturday, November 2, 2024. Come for an unforgettable evening focused on gourmet food, fine wine, and world travel. Tables are available for 8, 10, or go big with a King Table of 12.

### ***Foundation Update***

#### **Our Hearts at Home Cardiovascular Campaign**

We're thrilled to announce that the Major Gifts portion of the **Our Hearts at Home Cardiovascular Campaign** wrapped up this past June! Cardiovascular disease is the leading cause of death in Northwestern Ontario, with long travel distances for treatment being a major factor. Thanks to the incredible support from our donors, we're building a world-class Cardiovascular Sciences Program at the Health Sciences Centre. This will allow us to treat patients closer to home, offering vital and often life-saving procedures right here in our community. Stay tuned—the public phase will kick off with a groundbreaking ceremony planned for early 2025!

### **Thunder Bay Online and In Store 50/50**

#### **August Draw**

Thunder Bay's 50/50 is on a roll! We've made millionaires 12 months in a row! In August, the **"Dog Days of Summer"** draw attracted big-hearted customers and their furry friends. Our grand prize winner, Samantha Woods from Geraldton, is a proud dog lover with four of her own! Our 50/50 store at the Intercity Shopping Centre is also thriving thanks to our incredible staff and volunteers.

#### **September's Draw – Recess is Over!**

Start the school year with excitement and generosity! The **September 50/50 Draw** offers you the chance to win an estimated **Grand Prize of \$1,200,000** on Friday, September 27th. Don't miss out—there are 33 early bird draws across six different days, including bonus blitz draws of 5 x \$2,000 and 10 x \$1,000. Get your tickets today and take your shot at winning big!

**OUR MISSION: To inspire people of Northwestern Ontario to give generously to advance our healthcare at  
Thunder Bay Regional Health Sciences Centre.**



**Thunder Bay Regional  
Health Sciences  
Centre**





# President's Engagement Report

## Final Report | May 20 - September 18, 2024

### Northern Routes Blog

*Summer joy in Northern Ontario and my top ten for summer*



**5,920 Subscribers**  
Open Rate **48.7%**  
vs. 23.4% Industry Average

### X (Twitter)



Increased X (formerly known as Twitter) followers to **▲3,123**  
@ddsv3

### National OpEd



"If we continue as we are, 4.4 million Ontarians will not have a family doctor by 2026. We can fix this, and rebuild public trust in the health system, with a plan and targeted investments," say Drs. Danielle Martin, Jane Philpott and Sarita Verma.

Read the article in the [Ottawa Citizen](#).

### YouTube

#### Top 5 Videos

1		Cannabis Use by Teens Apr 13, 2022
2		How to Simulate a Burn Wound Dec 9, 2011
3		A Powerful Voice for Primary Care in Canada—Family Medicine at NOSM University May 16, 2024
4		NOSM University Convocation 2024 – Thunder Bay May 25, 2024
5		NOSM University Canada's First – And Only – Independent Medical University Jul 3, 2024

### @thenosm followers

X (Twitter) **▲1%**  
**4,572**

Facebook **▲1.8%**  
**8,956**

LinkedIn **▲7%**  
**5,978**

Instagram **▲5%**  
**3,360**

YouTube **▲7.8%**  
**688** subscribers

### Notable Meetings and Presentations: 39

- AFMC Board Meeting
- AFMC Adhoc Committee on Health Workforce
- AMS History of Health Care
- Be Active with NOSM U Event
- BScPA Governance Committee meeting
- Camp Med Event
- COFM Dean Meeting x 2
- COFM HHR Modelling Discussion x 2
- Continuing Education and Professional Development (CEDC) Event
- Convocation Thunder Bay
- Convocation Sudbury
- Dr. Gilles Arcand Centre for Health Equity Celebration
- Executive Group Retreat
- Expansion Task Force Meeting x 2
- Finance Audit and Risk Management Committee
- Francophone Reference Group Meeting
- Family Medicine Steering Committee x 2
- HSN/HSNRI Strategic Plan
- HSN Joint Relations Committee
- ICES Finance, Audit and Risk Committee
- ICES Board of Directors Meeting
- Métis Nation of Ontario Meeting
- Northern Health Research Conference Welcome
- NOSM U Board of Governors Meeting
- NOSM U/Sault Ste Marie Meeting
- Ontario Health Meeting
- PC Summer Leaders Golf Classic
- Primary Care Summit Planning Meetings
- Section Chairs' Meeting
- Senate Executive Committee Meeting
- Senate Meeting
- TBRHSC Board Meeting
- TBRHSC/NOSM U Leadership Meeting
- Transition Week events
- University of Toronto/NOSM U meeting

May 20, 2024 — Present

# Five-Year Overview

July 1, 2019 - September 18, 2024

## X (Twitter)



▲ **152%**

Increased X followers from 1,241 to 3,123 @ddsv3

## Northern Routes Blog



▲ **91%**

**3,097 to 5,920**  
**Subscribers**

Avg. Open Rate  
**38.6%**

Highest Open Rate  
**64.3%**

*vs. 23.4% Industry Average*

## YouTube



[A Powerful Voice for Primary Care in Canada—Family Medicine at NOSM.U.U](#)



[Canada's First – And Only – Independent Medical University](#)

## @thenosm followers

X (Twitter) ▲ **115%**  
**2,123 to 4,572**

Facebook ▲ **87%**  
**4,795 to 8,956**

LinkedIn ▲ **393%**  
**1,211 to 5,978**

Instagram ▲ **368%**  
**781 to 3,360**

YouTube ▲ **1620%**  
**40 to 688**  
subscribers

## Fostering a Culture of Philanthropy and Advancement

Fiscal Year	Notable Donations	Alumni Overview
2023/2024	(Since May 1, 2024)	<ul style="list-style-type: none"> <li>20th Anniversary in 2025 Celebration Planning, ongoing Alumni Committee Meetings</li> </ul>
2022/2023	<ul style="list-style-type: none"> <li>\$1M towards chair in Pathology</li> </ul>	<ul style="list-style-type: none"> <li>Alumni newsletters (July and September)</li> </ul>
2021/2022	<ul style="list-style-type: none"> <li>CMA Foundation \$150K</li> <li>Indigenous Leadership Awards</li> </ul>	<ul style="list-style-type: none"> <li>Welcomed 69 new MD Graduates, 63 Postgraduate Trainees, 10 Dietetic Graduates, and 2 inaugural MMS alumni to NOSM University Alumni</li> </ul>
2020/2021	<ul style="list-style-type: none"> <li>Chuck Schmitt bursary \$40K</li> </ul>	<ul style="list-style-type: none"> <li>Orientation week activities welcomed new students</li> </ul>
2019/2020		



**Download previous versions of the [President's Engagement Report.](#)**



# Farewell Events — Thunder Bay and Sudbury



Farewell Video — From NOSM University to Dr. Verma



Farewell Video — From Dr. Verma to NOSM University





# Convocation — Thunder Bay and Sudbury





# Orientation Week — Thunder Bay and Sudbury





# Dr. Gilles Arcand Centre for Health Equity Officially Opens



On June 10, 2024, NOSM University officially cut the ribbon on the Dr. Gilles Arcand Centre for Health Equity. The grand opening of this Centre signals another major step forward in the improvement of health and wellness for all in Northern Ontario.



Through policy leadership and advocacy, research and innovation, and education that better aligns medical training with community needs, this multidisciplinary, one-of-a-kind Centre in Canada will ultimately help people who both need and deserve better access to health care services across the region and beyond.

[Read the article.](#)

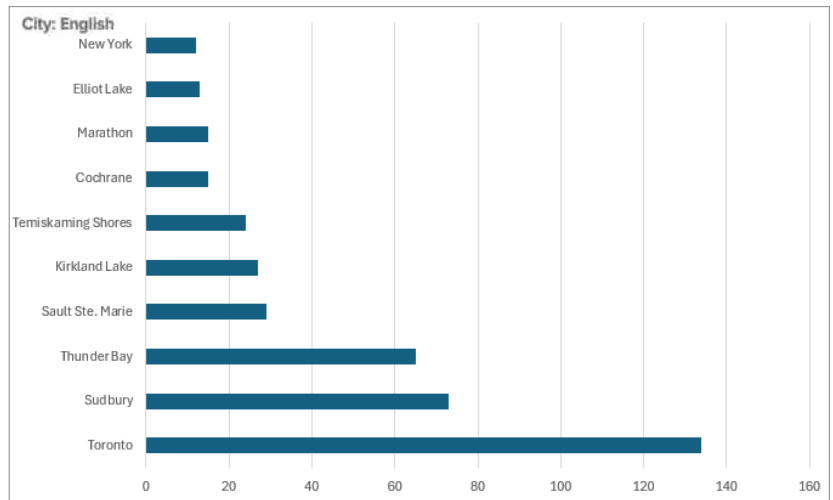


## Earned Media Report

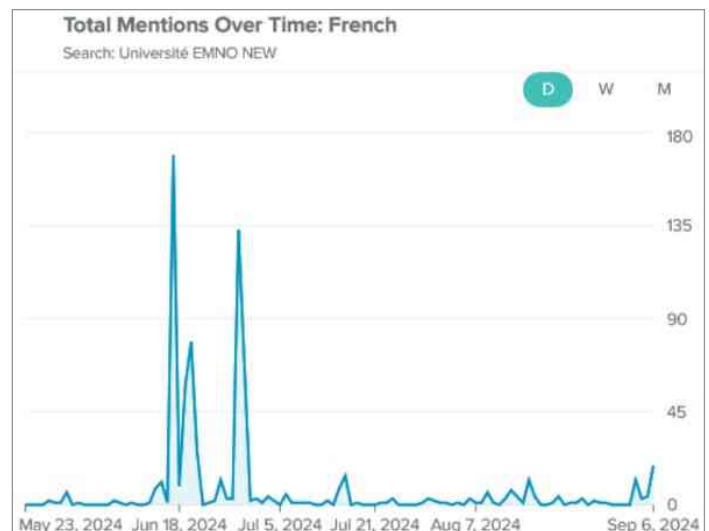
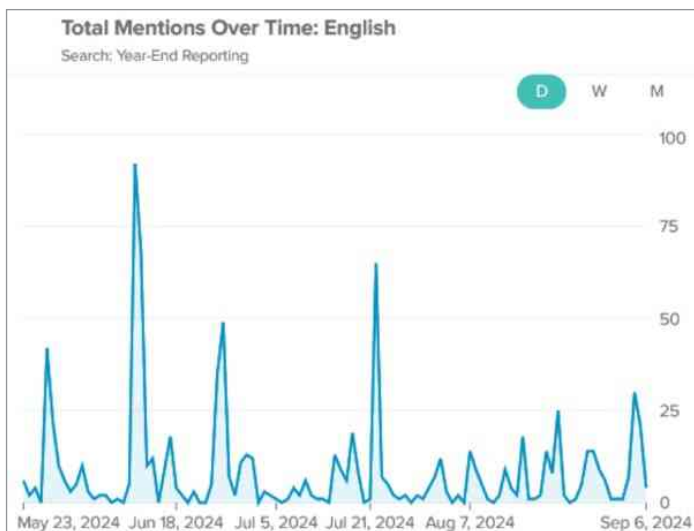
Since May 20, 2024, NOSM has been mentioned in the news **1,653** times generating **\$1,373,000** of advertising value equivalency (AVE).<sup>1</sup>

- **45%** of mentions were Francophone media outlets.

## Media Distribution



<sup>1</sup>Advertising value equivalency (AVE) is used in PR to measure the dollar value of media coverage of a PR campaign. AVE would measure the size of the media coverage, the space it was put, and calculate the advertising rate for similar ad.



## Superior Morning with Mary-Jean Cormier



Dr. Sarita Verma: NIOSM & Family Medicine

▶ Play Episode 7:29

Graduates of the Northern Ontario School of Medicine are stepping up to help ease the shortage of family doctors. We discuss why NIOSM has the highest rate of students choosing to pursue family medicine.



**NIOSM U celebrates its second convocation**  
Canada's first independent medical school is celebrating 69 new physicians on Friday with convocation ceremonies in Sudbury & Thunder Bay.  
June 1, 2024 3:47 p.m. EDT  
Why you can trust CTV News



Sudbury

### Some potential future doctors for northern Ontario begin their journey

First-year medical students at NIOSM University started classes on Tuesday

CBC News - Posted: Sep 04, 2024 9:22 AM EDT | Last Updated: September 4



Meagan Noble has worked in Ontario's far north as a nurse practitioner. Now she's starting her first year at NIOSM University to become a doctor. (Submitted by Meagan Noble)



Meagan Noble will be starting her first year of medical studies at NIOSM University's Thunder Bay campus with a little more experience in health care than the average student.

Noble, 34, studied kinesiology at London's Western University and then completed a compressed nursing program at the University of Toronto.

She worked as an emergency room nurse for five years at several hospitals in Ontario and Nova Scotia before returning to school once again.



### Historic graduation class from NIOSM University

By Reno Thom  
May 27, 2024 11:09 AM

There are 69 new physicians from NIOSM University.

Convocation ceremonies were held in Thunder Bay and Sudbury last week.

It is the largest class to graduate from the University in its 19-year history.

This was also the final ceremony for Dr. Sarita Verma, who announced last fall that she would not be continuing as President, Dean, Vice-Chancellor and Chief Executive Officer after this year.

Dr. Verma says it held special significance for her.

"This is actually the class that I've journeyed through with. And we went through massive changes of the pandemic and having to manage becoming a University which was you know a big rocky," says Dr. Verma.

"And then we went on to establishing ourselves in Thunder Bay and Sudbury and watching you become amazing physicians."

The University also welcomed its first graduates of a new Masters of Medical Studies program.

### Research dedicated to changing health inequities in northern Ontario

Sudbury

Monday marks the grand opening of the Gilles Arcand Centre for Health Equity at the Northern Ontario School of Medicine University in Sudbury.



The grand opening of the Gilles Arcand Centre for Health Equity at the Northern Ontario School of Medicine University in Sudbury, June 10, 2024. (Alana Evanson/CTV Northern Ontario)

Officials at the centre said northern residents have the worst health outcomes of any geography in the province.

"In northern Ontario, the health inequities are profound," said Dr. Sarita Verma, the dean of NIOSM.

"Emergency rooms are closing, there aren't enough family doctors. We have a high rate of mental health and addictions chronic disease. People don't have clean water good food to eat."

Home Local News

### Dr. Gilles Arcand Centre for Health Equity opens at NIOSM University

Dedication of new centre signals another major step forward in the improvement of health and wellness for all in Northern Ontario

Sudbury.com Staff  
Jun 12, 2024 8:00 PM



1 Supplied

▶ Listen to this article  
00:02:26

NIOSM University has officially cut the ribbon on the Dr. Gilles Arcand Centre for Health Equity. The recent dedication of the centre signalled another major step forward in the improvement of health and wellness for all in Northern Ontario, said a NIOSM U news release.



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## NOSM students staying in the north says university

'About 90 per cent of learners who do both an MD degree and a residency in the north, stay in the north'

BayToday Staff  
May 19, 2024 8:00 AM



NOSM University file photo | Image supplied by NOSM University

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## NOSM University student wins Medical Hall of Fame award

Emma Harland of Thunder Bay is recognized for her leadership and potential as an innovator.

Gary Rinne  
Aug 27, 2024 3:35 PM



**sudbury.com**

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## Most NOSM-trained docs choose family medicine residency

NOSM family medicine residencies are at 55 per cent, the highest proportional residency rate in Canada

Sudbury.com Staff  
May 19, 2024 11:00 AM



NOSM University's Sudbury campus. | Len Gillis / Sudbury.Com

Listen to this article  
00:02:15

Northern Ontario's **NOSM University** is succeeding in its mission to have more family doctors in this part of Ontario, the university said recently.

Highlighting residency data on its students, NOSM U said its MD students have recently completed their residency choices for 2024 through the [Canadian Resident Matching Service](#).

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News / Local News

## Student in Sudbury earns Indigenous youth scholarship

Justice Seidel says she plans to return home to the Moose Cree First Nation to practise medicine

Star Staff  
Published Jun 16, 2024 • Last updated Jun 17, 2024 • 2 minute read

Join the conversation



Justice Seidel

A medical student at the Northern Ontario School of Medicine University in Sudbury has been chosen as one of only 20 recipients of this year's RBC Future Launch Indigenous Youth Scholarship.

STORY CONTINUES BELOW

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## Physiotherapy student encourages healthy living in the North

Finishing his final year as a physiotherapy student, Javier Armando Porras-Gil described the growing need for medical services in First Nations communities and rural municipalities.

Clint Fleury  
Aug 22, 2024 9:20 AM



1 / 2 Finishing his final year as a physiotherapy student, Javier Armando Porras-Gil describes the growing need for medical services in First Nations communities and rural municipalities. | Javier Armando Porras-Gil

Listen to this article  
00:04:37

RED LAKE - Physiotherapy student Javier Armando Porras-Gil is getting his degree from the University of Ottawa through the Rehabilitation Sciences team at Northern Ontario School of Medicine, serving his final placement with the Sioux Lookout First Nations Health Authority and working out of Red Lake.

The major point of the placement is that students get first-hand experience practising pediatric physical therapy in Northern communities where children living in communities in the Far North won't have access to specialized medical services.

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MuskokaRegion.com

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News


**Muskoka hospital officials get deal with group to enhance research growth**

Local education groups, consisting of physician clinical faculty, contribute significantly to the academic mandate of the Northern Ontario School of Medicine University.

By: Mainland Staff MuskokaRegion.com  
Friday, August 2, 2024 @ 2 min to read  
© Article was updated Aug 18, 2024.

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ON THE CONVERSATION



NOSM University site administrator Krista Paulstone, regional research coordinator Dr. Lisa Allen, MAHC president and CEO Cheryl Hamilton, Dr. Hector Poonji, regional research administrator Maggie Partridge-Clinic, and CEO administrator Sue Richardson celebrate a new partnership agreement with physician-based local education groups in the region to enhance research growth. MAHC photo

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Careers Feedback CEO Blog


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**Advancing Clinical Research in Muskoka Through Collaboration and Partnership**

Home / About MAHC / MAHC News / Media Room / News Releases

Posted on Thursday, August 01, 2024

Back to Search



Building on a record of innovation and collaboration, Muskoka Algonquin Healthcare (MAHC) has entered into a formal partnership agreement with physician-based Local Education Groups (LEGs) in the region to enhance research growth.

A Local Education Group (LEG) is a group of physician clinical faculty who have joined together to assume responsibility for the provision of a significant, identifiable components of Northern Ontario School of Medicine University's (NOSM) current academic mandate, explains Dr. Lisa Allen, Regional Research Coordinator. LEGs also support other academic activities such as professional development, research, and clinical innovation.

For more than a decade, MAHC has been involved in research projects led by physicians from the Huntsville, South Muskoka and Parry Sound Local Education Groups. Through the hard work of this collaboration of LEGs, the region has benefitted from over \$1 million in research grant

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sudbury.com

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**Sudbury researchers part of national cancer research program**

Prof. Christopher Thome of NOSM University is part of a national effort to study ways to stop exposure of cancer in the workplace

Sudbury.com Staff  
Aug 7, 2024 7:00 PM



Prof. Christopher Thome of NOSM University is part of a national effort to study ways to stop exposure of cancer in the workplace. | Supplied

Listen to this article  
00:04:32

A Sudbury professor at NOSM University is leading a team that is part of a new national cancer-research program that will work to prevent cancer caused by exposures in the workplace.

[Christopher Thome of Sudbury](#) is part of the new initiative involving the Canadian Cancer Society (CCS), along with the [Canadian Institutes of Health Research](#).

CTV NEWS NORTHERN ONTARIO

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ASTRO BOT AVAILABLE 10PM

NORTHERN ONTARIO

**Northern medical school receives funding to research occupational cancer**



A research team at Queen's University & NOSM University has received \$200,000 in funding to examine occupational-related cancer. Amanda Hicks reports.

CTV NEWS NORTHERN ONTARIO

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**NOSM starts news occupational-cancer research**

A research team at NOSM University has received a \$200,000 grant to examine occupational-related cancer. Amanda Hicks reports.

Aug 7, 2024 6:11 p.m. EDT

Why you can trust CTV News

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CHRIS THOME  
NOSM UNIVERSITY

01:15 / 02:01



**AFMC** Association of Faculties of Medicine of Canada

ABOUT RESOURCES & DATA



## Dr. Joseph LeBlanc named Vice-President, Social Accountability of the Association of Faculties of Medicine of Canada

The Association of Faculties of Medicine of Canada (AFMC) is thrilled to welcome Dr. Joseph LeBlanc, PhD, as the organization's new Vice-President, Social Accountability.

Joseph is the Associate Dean, Equity and Inclusion and Assistant Professor, Indigenous Health at NOSM University, roles that he will continue to hold concurrently with his work at AFMC. He is a lifelong Northern Ontarian and member of Wiikwemkoong Unceded Territory.

As a member of the AFMC leadership team, Joseph will spearhead the implementation of the organization's strategic priorities related to social accountability and ensure that AFMC committees and networks are effectively supported in this work. This includes continued efforts to strengthen anti-racism, Indigenous health, Black health, Francophone representation, and planetary health within Canada's medical schools.

Joseph has extensive experience in promoting equity, increasing diversity, and strengthening the approach to social accountability in medical education. He has received several awards including a Top 20 under 40 Northwestern Ontario visionary award and a Tony under 40 Northern Ontario Business Award. Joseph is passionate about community health and well-being and is recognized as a leading expert in Indigenous food systems and community development in Canada.

"Joseph's contributions in this field are invaluable and we are extremely lucky to have him join our team," says AFMC President and CEO, Dr. Connie LeBlanc in relation to Dr. Joseph LeBlanc. "His deep expertise in policy and community health will be instrumental in advancing social accountability within Canadian medical schools, ultimately benefiting all Canadians."

"NOSM University is proud of Dr. Joseph LeBlanc and his appointment at this senior level within such an important and influential national organization," says Dr. Sarita Verma, President, Vice-Chancellor, Dean, and CEO. "As a Vice-President in this inaugural role, he

**What can you expect to see at ICAM?**  
November 26, 2023

AFMC has exciting plans for our inaugural International Congress on Academic Medicine (ICAM). This leading international gathering is dedicated to academic medicine. ICAM will be a success that is...

**Learner News: July 6, 2023**  
July 6, 2023  
[Read More](#)


**CTV NEWS** NORTHERN ONTARIO

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**NOSM University has a new leader**  
The Northern Ontario School of Medicine University announces the name of its new president, vice-chancellor, dean and CEO.

June 26, 2024 2:49 p.m. EDT  
If why you can trust CTV News



**NOSM UNIVERSITY**

**Dr. Michael Green**  
New President  
Vice-Chancellor, Dean, CEO

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## New NOSM University head will visit North to decide where to live

Dr. Mike Green plans to bring his family along to 'figure out where we're going to land.'

**Gary Rinne**  
Jun 27, 2024 7:15 PM

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Listen to this article  
00:04:33

THUNDER BAY — The newly-appointed leader of NOSM University plans to travel to Thunder Bay next month as part of a familiarization tour of Northern Ontario.

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## NOSM UNIVERSITY

### Dr. Joseph LeBlanc named Vice-President, Social Accountability of the Association of Faculties of Medicine of Canada

September 4, 2024

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The Association of Faculties of Medicine of Canada (AFMC) is thrilled to welcome Dr. Joseph LeBlanc, PhD, as the organization's new Vice-President, Social Accountability.



Dr. LeBlanc is the Associate Dean, Equity and Inclusion and Assistant Professor, Indigenous Health at NOSM University, roles that he will continue to hold concurrently with his work at AFMC. He is a lifelong Northern Ontarian and member of Wiikwemkoong Unceded Territory.

As a member of the AFMC leadership team, Dr. LeBlanc will spearhead the implementation of the organization's strategic priorities related to social accountability and ensure that AFMC committees and networks are effectively supported in this work. This includes continued efforts to strengthen anti-racism, Indigenous health, Black health, Francophone representation, and planetary health within Canada's medical schools.

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## Elliot Lake, surrounding communities welcome NOSM University Students

These third-year medical students - Tiana Bressan, Tess Dufour, and Rosemary Rankin - are beginning their Comprehensive Community Clerkship for the upcoming academic year.

**ElliotLakeToday Staff**  
about 7 hours ago

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Listen to this article  
00:03:31

NEWS RELEASE  
ST. JOSEPH'S GENERAL HOSPITAL ELLIOT LAKE


On Sept. 3, Elliot Lake and its surrounding communities rolled out the red carpet to warmly welcome three Northern Ontario School of Medicine (NOSM) University students: Tiana Bressan, Tess Dufour, and Rosemary Rankin. These third-year medical students are beginning their Comprehensive Community Clerkship (CCG) for the upcoming academic year. For the past four years, Dr. Frank Chi and the City of Elliot Lake have led this initiative, and this year marks a significant milestone as he welcomes neighbouring communities, Blind River, Huron Shores, and Thessalon to join in in the festivities to ensure these young medical students feel truly at home.

**CTV NEWS** NORTHERN ONTARIO

NEWS VIDEO SHOWS ABOUT LOCAL

**OFFCAST** Check the mosquito threat in your area

## NOSM University partners with West Nipissing's hospital for med student training



The Northern Ontario School of Medicine University is partnering with the West Nipissing General Hospital to create a training site for med students located at the university.

Maximize Shiva streams of one-day becoming a family doctor. She's one of two interns assigned to the hospital for an eight-month clerkship placement.

"I feel that it's the little difference in everyday life that really matters," Shiva said.

"I just want to be that guide for patients in order for them to navigate the health care system."

Updated Sep 4, 2024 11:00 AM EDT  
Published Sep 4, 2024 9:30 AM EDT



# BRIEFING NOTE



TOPIC	Fire Safety & Environmental Compliance Update
SUBMITTER NAME	Ryan Sears, Director, Capital & Facility Services
SUBMITTED BY (name of TBRHSC Program /Service or IMS Branch)	Capital & Facility Services
APPROVED BY (name of EVP or IMS Section)	Justin Garofalo, Interim Vice President, Corporate Services & Chief Financial Officer
PREPARED FOR	President & CEO <input type="checkbox"/> Board of Directors <input checked="" type="checkbox"/> IMT <input type="checkbox"/> SLC <input type="checkbox"/> Other:
DATE PREPARED	September 13, 2024
REVIEWED BY DECISION SUPPORT (if required)	<Does this have financial impacts to the hospital's budget? Has a Decision Support Analyst been consulted on this briefing note?> YES <input type="checkbox"/> NO <input type="checkbox"/> N/A <input checked="" type="checkbox"/>
CO-SPONSER (if required)	N/A

TBRHSC is committed to ensuring ethically responsible practices that align with our philosophy/vision/mission/values. All workers should consider decisions from an ethics perspective including their impact on patients, staff and the community.

Does the course of action:

- 1. Promote **DIVERSITY** by fostering a people-centered environment that is inclusive of all?
- 2. Show **COMPASSION**, empathy & respect by acknowledging ourselves as learners in understanding the experiences of others, and by considering the needs, thoughts and feelings of those we serve and with whom we work?
- 3. Demonstrate **EXCELLENCE** by delivering the highest quality of services in every encounter and in all our work?
- 4. Foster **INNOVATION** by embracing continuous learning and improvement to drive positive change for our patients, staff, and communities?
- 5. Uphold **ACCOUNTABILITY** by sustaining and reinvesting in our mission and communities through wisely planning for and managing our resources?

For more detailed questions please refer to the Hospital's full Framework for Ethical Decision Making on the iNtranet under [Quality and Risk Management>Ethics](#).

<b>PURPOSE/ISSUE(S)</b>
To provide the Thunder Bay Regional Health Sciences Centre (the Hospital) Board of Directors with an update on Fire Safety and Environmental Compliance.
<b>BACKGROUND</b>
The Hospital has no outstanding orders under the Ontario Fire Code (as overseen by the Chief Fire Official) or the Environmental Protection Act (as overseen by the Ministry of Environment and Climate Change). The Hospital is not aware of any non-compliance in regards to the requirements of these legislations, except as noted following.
<b>ANALYSIS/CURRENT STATUS</b>
<p><u>Ontario Fire Code</u></p> <ul style="list-style-type: none"> <li>• The Hospital continues to provide an update on the use of Hogarth Riverview Manor to relieve capacity issues to the Thunder Bay Chief of Fire Prevention as warranted. The Lease is valid until August 2027.</li> <li>• The Hospital's annual Fire Plan review was submitted in March 2024. Ongoing updates and consults are done with Thunder Bay Fire and Rescue (TBFR) for projects if needed. The next annual Fire Plan update is due March 31, 2025.</li> <li>• The Hospital's annual Fire Inspection (including record inspection) occurred June 20, 2024. No violations or orders received, some minor deficiencies were noted and have since been rectified. The next scheduled inspection is expected to occur in June 2025.</li> </ul>

- The Vulnerable Occupancy annual Minimum Staffing Drill with TBFR took place on October 12, 2023. Overall, the drill was successful. No orders received. The next scheduled drill will occur on October 16, 2024.

**Environmental Protection Act**

- There are no outstanding orders for the Environmental Compliance Approvals (ECAs) for air emissions, noise or storm water. The Cardiovascular Surgery project Air & Noise Feasibility Assessment was completed in July 2023 and determined to be compliant. No additional noise controls are expected for the expansion. This will be submitted as part of the project to the Ministry of the Environment for approval.

**Energy Related Reporting**

- The annual Broader Public Sector (BPS) energy reporting program requirement commenced in July 2013 based on the Electricity Act - O. Reg. 507/18, now O. Reg. 25/23 as of February 2023. BPS organizations are required to submit reports via Energy Star Portfolio Manager by July 1, 2024. This has been complete.
- Emissions Performance Standards (EPS) program greenhouse gas (GHG) emission reporting based on Regulations as per Ministry of the Environment, Conservation and Parks has been submitted for the 2022 reporting year and excess emissions units have been reconciled. The 2023 reporting year submission was due June 1, 2024. This has been complete with Third-Party Verification completed and submitted Sept. 1, 2024.
- Monthly report to Canada Revenue Agency (CRA) on fuel usage per Emissions Performance Standards (EPS) requirements ongoing as per the Greenhouse Gas Pollution Pricing Act.

**RECOMMENDATION / PROPOSED CHANGE(S)**

N/A.

**NEXT STEPS**

N/A.

**CONSULTATION / STAKEHOLDER REACTION**

N/A.

**COMMUNICATIONS**

N/A.

**FINANCIAL IMPACTS (WHERE APPLICABLE)**

N/A.

**APPENDIX SECTION**

N/A.

***For Use by Section Head/at IMT/SLC***

- |  |   |   |
|--|---|---|
| <input type="checkbox"/> Approved by Section Head            | <input type="checkbox"/> Approved by IMT            | <input type="checkbox"/> Approved by SLC            |
| <input type="checkbox"/> Approved with edits by Section Head | <input type="checkbox"/> Approved with edits by IMT | <input type="checkbox"/> Approved with edits by SLC |
| <input type="checkbox"/> Not approved by Section Head        | <input type="checkbox"/> Not approved by IMT        | <input type="checkbox"/> Not approved by SLC        |

Summary of decision/feedback:

Date:

Signature Section Head/Incident Manager/EVP/CEO: