

Board of Directors

Open Meeting

April 1, 2026 at 5:00 pm

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

VIRTUAL OPTION for Board Directors: Teams 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		CALL TO ORDER and WELCOME					
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		PATIENT STORY – Dr. Adam Exley					
3.0			PRESENTATIONS/EDUCATION					
3.1	15	Dr. Crocker Ellacott J. Logozzo	Strat Plan 2026: Quarterly Progress Report *		X			
4.0			CONSENT AGENDA					
4.1	-		Board of Directors Open Minutes – February 4, 2026 *	X				
5.0			REPORTS					
5.1	10	Dr. Crocker Ellacott	Report from the President and CEO *					X
5.2	10	A. Vinet	Report from the Chief Nursing Executive *					X
6.0			FOR INFORMATION					
6.1	-		Report from the TBRHSC Foundation *					X
6.2	-		Report from the Northern Ontario School of Medicine University *					X
7.0			DATE OF NEXT MEETING – June 3, 2026					
8.0			ADJOURNMENT & BREAK					

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:

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.

* denotes attachment

BOARD OF DIRECTORS (Open)

April 1, 2026 – DRAFT

Agenda Item	Committee or Report	Draft Motion or Recommendation	Approved or Accepted by:
1.4	Agenda – April 1, 2026	"That the Agenda be accepted, as circulated."	Moved by: Seconded by:
4.0	Consent Agenda	"That the Board of Directors: 4.1 Approves the Board of Directors Open Minutes of February 4, 2026, as presented."	Moved by: Seconded by:



Report from the TBRHSC Board Chair *April 2026*

The compassion and dedication demonstrated every day by the staff, professional staff, volunteers and learners at Thunder Bay Regional Health Sciences Centre (TBRHSC) is second to none; which is why celebrating Employee Recognition Week is so important. We, the Board, recognize the collective commitment to the health of patients and families of Northwestern Ontario is what sets us apart. In March we set aside a week to express our appreciation through small gestures, recognizing the dedication and exceptional work of those who support patient care – both directly or indirectly.

As a part of this celebratory week, we also hold our iCare Impact Awards - a forum for staff to recognize others for their efforts and outcomes that positively impact our patients and their families. This year's winners reflect what our people do each and every day:

- *Equity, Diversity, & Inclusion Award* – Trisha Desa, Registered Nurse (RN), for her work practicing trauma informed care in the Neonatal Intensive Care Unit and implementing culturally appropriate breast/chest feeding prenatal classes in collaboration with community partners.
- *Patient Experience Award* – Linda Buchan Centre Staff, as the staff consistently go above and beyond to support patients during highly stressful situations. They work collaboratively to ensure each patient feels comfortable and receives the highest quality of care possible.
- *Staff Experience Award* – Anne Purves, RN, Manager of 3B Surgery, for her outstanding leadership, dedication, and unwavering commitment to fostering a supportive, inclusive, and psychologically safe work environment.
- *Research, Innovation & Learning Award* – Clinical Nurse Specialists, Interprofessional Educators, and Nursing Practice Leaders, for their transformative work in the nursing onboarding process, driving an innovative, dynamic, and continually evolving program that directly strengthens the organization's nursing workforce.
- *Sustainable Future Award* – Open Doors Career Showcase Organizing Committee, for their innovative recruitment and retention initiative effort in designing an inclusive event that proactively builds our future workforce and fosters a culture of belonging.
- *Vision Award* – Miskwaa Biidaaban (Indigenous Collaboration department), for the work the Indigenous Care Coordinators (ICCs) do to support Indigenous patients receiving care at TBRHSC. The ICCs work tirelessly to ensure Indigenous patients feel they are supported, receiving equitable care, having their voices heard in their care plan, and ensuring Indigenous patients are receiving care in a culturally safe environment
- *Strategy In Action Award* – Cook Serve Meal Program Service, for their dedication and hard work in the implementation of the Cook / Serve program, where meals are prepared in real time. This allows for a higher quality and more varied menu for patients, which has improved patient experience.

Congratulations to all our award winners and nominees for their work in advancing our vision of *exceptional care for every patient, every time.*



This month, we also celebrate the generosity of our volunteers and Patient Family Advisors, who give so freely of their time. Their contributions to our Hospital community are invaluable, enhancing the care experience for patients and families and making our organization a warm and welcoming place. If you know or see a volunteer, please take this opportunity to thank them for their incredible commitment, and the meaningful difference they make in our community.

I would also like to recognize the volunteer members of the Board of Directors. Thank you for gifting your time and talent to guide the Hospital's priorities, provide strategic direction and oversight in order to improve the quality of care for patients and families of Northwestern Ontario.

Finally, coming up next month, surveyors from Accreditation Canada will visit our Hospital. Accreditation ensures we meet nationally endorsed standards, provides a formal process for ongoing evaluation, and allows for discussion of education and training. We look forward to sharing details from the survey with the community when they are available.

Patricia Lang

Chair, TBRHSC Board of Directors

BRIEFING NOTE



TOPIC	SP2026 Report to Boards – 2025/26 Quarter 3 results
SUBMITTER NAME	Jessica Logozzo, VP, Strategy & Regional Transformation
SUBMITTED BY (name of TBRHSC Program)	Strategy & Performance
APPROVED BY	Dr. Rhonda Crocker Ellacott, President and CEO
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	March 18, 2026
REVIEWED BY DECISION SUPPORT (if required)	Does this have financial impacts to the hospital's budget? YES <input type="checkbox"/> NO <input type="checkbox"/> N/A <input checked="" type="checkbox"/> If yes, 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)	

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Does the course of action:

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- Demonstrate **EXCELLENCE** by delivering the highest quality of services in every encounter and in all our work?
- Foster **INNOVATION** by embracing continuous learning and improvement to drive positive change for our patients, staff, and communities?
- 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 2025/26 Quarter 3 (October 1, 2025 through December 31, 2025).

BACKGROUND

Per the monitoring and accountability structure that was implemented for Strategic Plan 2026 (SP2026), regular updates for initiative statuses and strategic indicator results are prepared, distributed to and reviewed quarterly by TBRHSC and TBRHRI leadership and then by the TBRHSC Board and its sub-committees, and the TBRHRI Board.

ANALYSIS/CURRENT STATUS

Overall, at 2025/26 Q3 continued progress has been made both on strategic initiatives and performance against strategic indicator targets.

A. Highlights of Progress on Strategic Initiatives at 2025/26 Q3:

At December 31, 2025 there were 19 SP2026 initiatives (of 26 in total) in progress. A majority of initiatives (18 of 19) are on track, with only one initiative tracking moderately behind their expected timelines. Seven initiatives have been completed with all others tracking for completion by December 2026 (the end of the Strategic Plan).

A breakdown of 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	4				3
Patient Experience	5	3				2
Staff Experience	7	5	1			1
Research, Innovation & Learning	3	2				1
Sustainable Future	4	4				
Total	26	18	1	0	0	7

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


B. Highlights of Performance against Strategic Indicator Targets at 2025/26 Q3:

Ten strategic indicators were developed and approved by the TBRHSC and TBRHRI Boards to measure overall progress on SP2026. A scorecard report for the SP2026 strategic indicators is included in **Appendix B**.


Highlights of the strategic indicator results for 2025/26 Q3 are as follows:


-  Continuing to exceed new target for the number of patients and staff that self-identify as Indigenous.


-  Exceeding target for the number of staff that have participated in “Repairing the Sacred Circle” an Indigenous Cultural Awareness and Education Primer (SLC, Managers and Staff)


-  Met target for the number of staff who completed “Wake the Giant”, an Indigenous cultural safety training program.


-  Exceeding target for overall positive experience ratings for Inpatient & Emergency Department patients.


-  Below target for 30 day inpatient readmission rate for Congestive Heart Failure. **Q3 results are preliminary*


-  Meeting target for cumulative improvement in inpatient harm incidents for targeted categories. **Q3 results are preliminary*

-  Final results from HSO Global Workforce Survey shared.

-  Exceeding target for number of investigator-initiated research studies informed by Northwestern Ontario population needs.

-  Below target for number of participants enrolled in a clinical trial in 2025/26.

-  Not meeting target for percent operating gross margin. New target is 0%.

-  Exceeding target for the proportion of patients aligned with regional programs/services. **Q3 results are preliminary*

RECOMMENDATION / PROPOSED CHANGE(S)

TBRHSC and TBRHRI Boards endorse the 2025/26 Q3 report, as presented.

BEST PRACTICE & EVIDENCE

Not applicable.

NEXT STEPS

Continuation of current Leadership reviews and related actions.

CONSULTATION

List the names and titles of those who were consulted, the level in which they were consulted and indicate if they endorse the proposed changes.

Name & Title	Level of Engagement (i.e. Informed, Engaged, Collaborator)	Engagement Outcome (Endorsed, Not Endorsed)
Pascal Rivest – Manager, Decision Support & Case Costing	Collaborator (provided data)	Endorsed
Senior Leadership Council	Informed & Engaged	Endorsed
Operational Leadership Council	Informed & Engaged	Endorsed

COMMUNICATIONS

The 2025/26 Q3 corporate and divisional financial results, status of initiatives and strategic indicator results were provided to the TBRHSC and TBRHRI SP2026 leadership group (Senior Leaders; Directors and like; Physician Leaders; PFA; etc.) via the Quarterly Strategic Performance Review Session package on February 12, 2026. A summary of the organizational performance results was also shared at the Staff Town Hall on February 25, 2026 and will be supported by a “Celebrating Our Progress” poster that is shared at a departmental level and augmented by social media updates.

Quarterly updates will be posted to website following the Board meeting.

FINANCIAL IMPACTS

There are no financial impacts related the request

APPENDIX SECTION

- A. SP2026 2025/26 Q3 Results Presentation
- B. SP2026 2025/26 Q3 Strategic Indicator Results Report



Strategic Plan 2026 2025/26 Q3 Report

Joint Board Presentation
April 2026



Thunder Bay Regional
Health Sciences
Centre

Thunder Bay Regional
Health Research
Institute

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



Cascading and Monitoring Our Plan

Ensuring Accountability, Alignment and Focus



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



Overall Progress & Status Report to 2025/26 Q3

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



Thunder Bay Regional Health Research Institute

Exceptional care for every patient, every time.



2025/26 Q3: Highlights of our progress and successes...

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

Cultural Safety Training

- Completed pilots of Indigenous Cultural Safety and EDI Training in ICU and 3A, with micro-training options to reach clinical staff with limited time.

EDI Toolkit – EDI Experiences for Learning

- Work on the EDI toolkit progressed from engagement to active building and testing of practical, ready-to-use tools to support EDI learning in everyday work.
- The toolkit has received organizational review and approval, marking an important milestone and positioning the work for structured implementation across the hospital.

Indigenous Recruitment & Education

- Incorporated insights from 50+ youth surveys into the existing opportunities document. Completed an effort-impact analysis to prioritize initiatives based on youth feedback.
- Advanced early partnership discussions with Matawa Education and Care Centre and Lakehead District School Board to create meaningful youth engagement pathways.

2025/26 Q3: Highlights of our progress and successes...

Patient Experience

Empathy, compassion, and respect in every encounter

Substance Use and Addictions

- Alcohol Withdrawal Management's Pre-Printed Direct Order (PPDO) was launched in October 2025. The accompanying policy (PCS-DO-299) was revised to reflect PPDO.
- Throughout the month of November 2025, the Roaming Education for Staff (R.E.F.S.) team was focused on substance use health, hosting a Lunch and Learn and two Thought Leader Sessions, along with roaming education that included a Community Partner. A total of 498 staff members participated in these initiatives.
- Every third Wednesday of the month, community partners who provide mental health and addictions support are onsite to share information about their programs. To date, 18 community partners have joined us at the hospital, and 955 staff, patients, and visitors have stopped by to gather information or ask questions.

Focus on Quality

- Hosted the Second Annual Quality Huddle Excellence Awards in October 2025, engaging 100+ staff from 35+ departments. Recognized staff-led initiatives that improved safety, efficiency, teamwork, and patient and family-centred care. Reached 72 implemented departments for Quality Huddles by the end of December 2025.
- Launched Phase 2 of the 2A Mobility Pilot in December 2025, with increased staff engagement and resources to enhance patient mobility tracking. Leveraged Quality Huddles/Bullet Rounds to strengthen adherence and engagement.
- Started engagement with key internal collaborators to begin establishing the indicators and targets for the upcoming 2026-27 Quality Improvement Plan (QIP).
- Provided continued organizational support for Accreditation, in preparation for the May 2026 on-site survey. Key activities included: providing updated Standards and Required Organizational Practices (ROPs), action planning related to the HSO Global Workforce Survey, addressing 'unmet' criteria, collecting evidence for 'met' criteria, creating tracer question banks, updating Required Documents, and continuing to meet with and leverage support from the Accreditation Steering Committee.

2025/26 Q3: Highlights of our progress and successes...

Staff Experience

This is where we want to work, grow and thrive

Workplace Violence

- The respectful workplaces poster was developed through a co-design process with multiple internal groups. The poster's core message: "Be Inclusive. Be Compassionate. Be Kind.," emphasizes safe, respectful interactions and has a clear call to action: "If you feel or witness unsafe behavior, speak up, support one another and report the issue."

Healthy Workplace Strategy

- 51 leaders participated in full-day Psychological Health & Safety Leadership Training sessions facilitated by CMHA Ontario in November. Sessions focused on the role of leaders in shaping psychologically safe work environments, particularly in high-pressure clinical settings.
- Launched a Recognition Toolkit for Leaders to complement existing corporate recognition programs. Promotes personalized, inclusive, and values-driven recognition approaches beyond traditional models.
- Completed a 90-day pilot with six leaders from across the organization, focused on "What Matters to You?" conversations.
- 2025 Grow Strong Leadership Evaluation is nearly complete, with a 93% completion rate, surpassing previous years. The team has started exploring ways to improve feedback and evaluation, showing strong momentum toward process improvement.

2025/26 Q3: Highlights of our progress and successes...

Research, Innovation & Learning

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

- Preliminary environmental scan presented to the Research Institute Board in December. Additional items for environmental scan currently underway such as governance, program offerings, etc.
- Webpage to post Research publications is nearing completion.
- Research Ethics Board application is nearing completion for a collaborative research project between the Research Institute, a clinical nurse specialist, and a nursing practice leader.
- To reinforce our learning culture, revised the framework, policies and procedures that ensure staff have access to the professional development resources, opportunities and supports necessary to remain effective in their current roles. Working group will meet annually to validate mandatory education.

2025/26 Q3: Highlights of our progress and successes...




Digital Health


- Electronic Health Record project remains on schedule and on budget.
- Following several months of workflow mapping and validation with staff and subject matter experts, scopes of work have been finalized and submitted to our build partner, ONE HITS.
- Frontline staff, physicians, and departmental leaders across clinical and operational areas have been actively engaged in the selection of end-user devices.
- Clinicians and subject matter experts are reviewing order sets and clinical content so Expanse supports safe, efficient, and patient-centered care.


Clinical Services Plan and Master Plan/Master Program


- Work is progressing well on Master Plan/Master Program; tracking to complete by Summer 2026.


Strategic Indicator Results for 2025/26 Q3

-  Continuing to exceed new target for the number of patients and staff that self-identify as Indigenous.


-  Exceeding target for the number of staff that have participated in “Repairing the Sacred Circle” an Indigenous Cultural Awareness and Education Primer (SLC, Managers and Staff)


-  Met target for the number of staff who completed “Wake the Giant”, an Indigenous cultural safety training program.

-  Exceeding target for overall positive experience ratings for Inpatient & Emergency Department patients.

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Questions



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Health Sciences
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SP2026 Initiatives	Ind #	Leadership	TBRHSC & TBRHRI Boards	PSQCC	RPAC	HRC	Indicator	SLC	2025/26 Fiscal												25/26 YTD Variance	25/26 YTD % Variance (for YTD colour-coding)	Monthly Results Trending since Apr 2023	Observations, Reasons, & Mitigations								
									24/25 Target	24/25 Actual	24/25 Variance	24/25 YTD % Variance (for YTD colour-coding)	Apr-25	May-25	Jun-25	25/26 Q1	Jul-25	Aug-25	Sep-25	25/26 Q2					Oct-25	Nov-25	Dec-25	25/26 Q3	25/26 Annual Target	25/26 YTD Target	25/26 YTD Actual	
Equity, Diversity & Inclusion	Strat-1	X	X	X			# of patients & staff who self-identify as Indigenous	Dr. M. Lesperance	15,500	22,121	2,621	13.4%	22,440	22,676	22,886	22,886	23,220	23,496	23,753	23,753	24,040	24,289	24,520	24,520	23,090	22,193	24,520	2,327	10.5%		As noted below.	
	Strat-1a	X	X	X			# of staff who self-identify as Indigenous	Dr. M. Lesperance	64	84	20	31.3%	84	83	83	83	83	90	90	90	84	87	92	92	90	84	92	8	9.5%		New target established for 2025/26. Results continuing to exceed target.	
	Strat-1b	X	X	X			# of patients who self-identify as Indigenous	Dr. M. Lesperance	19,436	22,037	2,601	13.4%	22,356	22,593	22,803	22,803	23,137	23,406	23,663	23,663	23,956	24,202	24,428	24,428	23,000	22,109	24,428	2,319	10.5%		New target established for 2025/26. Results continuing to exceed target.	
	Strat-2a.1	X	X	X			% Sacred Circle completion: SLC	Dr. M. Lesperance	100.0%	100.0%	0.0%	0.0%	100.0%	91.0%	91.0%	91.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	0.0%	0.0%		Target unchanged for 2025/26. Results declined somewhat in 2025/26 Q1 due to changes in SLC membership but now meeting target as training has been completed.
	Strat-2a.2	X	X	X			% Sacred Circle completion: Managers et al	Dr. M. Lesperance	50.0%	61.1%	11.1%	22.1%	62.0%	63.0%	68.0%	68.0%	77.0%	79.0%	79.0%	79.0%	84.0%	85.0%	93.0%	93.0%	75.0%	68.8%	93.0%	24.3%	35.3%		New target established for 2025/26. Results continuing to exceed target.	
	Strat-2a.3	X	X	X			% Sacred Circle completion: Staff	Dr. M. Lesperance	15.0%	9.0%	(6.0%)	(40.0%)	12.0%	12.0%	15.0%	15.0%	16.0%	17.0%	19.0%	19.0%	20.0%	21.0%	21.0%	15.0%	15.0%	21.0%	6.0%	40.0%		Target unchanged for 2025/26. Results exceeding target.		
	Strat-2b	X	X	X			% staff who completed "Wake the Giant" training	Dr. M. Lesperance	90.0%	88.7%	(1.3%)	(1.4%)	89.20%	89.60%	89.8%	89.8%	89.9%	90.1%	90.3%	90.3%	90.3%	90.4%	90.4%	90.4%	90.0%	90.0%	90.4%	0.4%	0.4%		2025/26 results improved steadily, now exceeding target.	
Patient Experience - Evolution of FRCC	Strat-3	X	X	X			% positive (top box) survey responses on patient experience - Inpatient & Emergency Dept	A. Vinet	51.6%	56.7%	5.1%	9.8%	53.2%	56.3%	64.0%	57.8%	54.2%	54.4%	60.8%	56.5%	61.2%	67.6%	69.3%	66.0%	51.6%	51.6%	60.1%	8.5%	16.5%		2025/26 YTD results have improved over 2024/25 actual average. Performance is better than target.	
	Strat-3a	X	X	X			% positive (top box) survey responses on patient experience - Inpatient	A. Vinet	59.8%	61.9%	2.1%	3.5%	47.5%	59.60%	67.0%	58.0%	65.5%	59.6%	64.6%	63.2%	67.4%	59.0%	79.5%	68.6%	59.8%	59.8%	63.3%	3.5%	5.8%		2025/26 YTD results have improved over 2024/25 actual average. Performance is better than target. There was an SMS outage issue in Q3 so survey responses are lower than normal.	
	Strat-3b	X	X	X			% positive (top box) survey responses on patient experience - Emergency Dept	A. Vinet	46.9%	52.1%	5.2%	11.1%	56.0%	53.4%	60.0%	56.5%	46.1%	52.5%	58.5%	52.4%	54.8%	77.1%	59.1%	63.7%	46.9%	46.9%	57.5%	10.6%	22.5%		2025/26 YTD results have improved over 2024/25 actual average. Performance is better than target. There was an SMS outage issue in Q3 so survey responses are lower than normal.	
Patient Experience - Focus on Quality	Strat-4	X	X	X	X		% cumulative improvement in inpatient harm incidents for targeted categories	J. Wintermans	97.8%	87.5%	10.4%	10.6%	83.6%	104.5%	79.4%	89.2%	96.2%	108.7%	96.2%	100.4%	112.9%				97.8%	97.8%	97.4%	0.4%	0.5%		Fluctuations in this data prompted a deep dive into data discrepancies. In working with Decision Support it was identified that reporting for this indicator was incorrect and did not focus on the targeted harm categories. Therefore all results have changed since inception of this report to reflect the four harm categories that were initially decided upon (UTI, Sepsis, MRSA vSRE infections, Patient trauma). YTD results are better than target.	
Patient Experience - Coordination & Support for Frequent Users	Strat-5	X		X			30-day inpatient readmission rate for Congestive Heart Failure	A. Vinet	16.5%	15.6%	0.9%	5.2%	25.0%	30.8%	26.7%	27.5%	21.4%	10.3%	10.0%	14.6%	21.4%	13.3%	13.6%	16.1%	16.5%	16.5%	19.2%	(2.7%)	(16.2%)		2025/26 target unchanged. For 2025/26, changed from operational to strategic indicator. Q3 results are preliminary. YTD results are worse than target.	
Staff Experience	Strat-6	X	X		X	X	% overall positive staff responses on experience survey	J. Verdenik		n/a			n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a		Further surveys deferred pending completion of Accreditation Canada Global Workforce Survey.	
	Strat-6a	X	X		X	X	% overall positive staff responses on Accreditation Canada Global Workforce survey	J. Verdenik					n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a	n/a	70.2%			Accreditation Canada Global Workforce Survey complete.		
Research, Innovation & Learning	Strat-7	X	X	X	X		# opened investigator initiated research studies informed by NWO population needs	Dr. C. Mushquash	10	19	9	90.0%	n/a	n/a	6	6	n/a	n/a	n/a	9	9	n/a	n/a	12	12	12	9	12	3	33.3%		Results exceeding target.
	Strat-8	X	X	X	X		# participants enrolled in a clinical trial in current year	Dr. C. Mushquash	140	258	118	84.3%	n/a	n/a	5	5	n/a	n/a	n/a	8	8	n/a	n/a	20	20	140	105	20	(85)	(81.0%)		Results are below target.
Sustainable future - Operational Sustainability & Accountability	Strat-9	X	X		X		% operating gross margin	J. Garofalo	1.80%	1.96%	0.16%	8.9%	6.65%	(2.33%)	(1.42%)	(1.42%)	(1.88%)	(1.86%)	(0.70%)	(0.70%)	(0.57%)	0.58%	(0.65%)	(0.65%)	0.00%	0.00%	(0.65%)	(0.65%)				2025/26 target reduced to 0% in anticipation of more difficult financial environment. Q3 results not meeting target.
Sustainable future - Partnerships et al	Strat-10	X	X	X	X		% of NWO patients aligned with regional programs/services	J. Logozzo	50.0%	48.9%	(1.1%)	(2.2%)	48.5%	52.0%	48.0%	49.5%	47.5%	51.3%	49.6%	49.5%	55.4%				50.0%	50.0%	50.3%	0.3%	0.7%		Results relatively consistent month over month, and trending better than target for this fiscal. Results lag for Q3.	

Results at or better than target
Results slightly (less than 5%) worse than target
Results significantly (5% or more) worse than target
Data not expected for reporting period or too few results to be meaningful
Incomplete period or result not yet finalized

Results trending
Target trending

Results vs Targets:
Results at or better than target
Results slightly (less than 5%) worse than target
Results 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

Results vs Target Trending:
Results trending
Target trending



Board of Directors – *Open*

Wednesday, February 4, 2026 at 5:00pm

In Person at TBRHSC and via Teams (Board Directors only)

Action

Present:

Patricia Lang (<i>Chair</i>)	Dr. Rhonda Crocker Ellacott*	Christine Bates
Charles Campbell	Dr. Michael Green	Matthew Aiken
Joy Wakefield	Michael Pelletier	James Peotto
Gord Wickham	Kimberly Ferris	Marla Morrison
Matt Simeoni	Adam Vinet*	Dr. Brad Jacobson*

By Invitation:

- Elena Arena, *Recording Secretary*
- Justin Garofalo, *Vice President, Facilities, Capital Planning & Support Services*
- Jennifer Wintermans, *Vice President, Clinical Services, 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*
- Mark Farrow, *Interim Regional Chief Information Officer*
- Sean Davies, *Vice Chair, Board of Directors, Thunder Bay Regional Health Sciences Foundation*
- Glenn Craig, *President & CEO, Thunder Bay Regional Health Sciences Foundation*

Regrets:

- Dr. Andrew Dean
- Dr. Armour Boake*
- Dr. Adam Exley, *Vice President, Medical Affairs*

1.0 CALL TO ORDER – The Chair called the meeting to order at 5:00p.m.

1.1 Chair’s Remarks

The Chair opened the meeting with a land acknowledgement and welcomed Board members, Hospital Vice Presidents, guests and the member of the public in attendance to the meeting.

1.2 Quorum – Quorum was attained.

1.3 Conflict of Interest - None

1.4 Approval of the Agenda

Moved by: *Matthew Aiken*
Seconded by: *Kimberly Ferris*

Motion



“That the Agenda be approved, as circulated.”

CARRIED

2.0 PATIENT STORY

A video recording was shared to showcase a facility design concept in place at a peer provincial hospital. The video included an overview of the refreshed space and collaboration concept with positive feedback from the hospital’s patients and visitors.

The design is responsive to patient and patient family needs, and aligns with legislative and accreditation standards. The concept will be further analyzed as part of the larger Hospital program planning with further updates forthcoming to the Board as the Hospital progresses through the plan.

The Board supported the showcased design concept.

Mr. Mark Farrow, Interim Regional Chief Information Officer, was welcomed to the meeting.

3.0 PRESENTATIONS

3.1 SP2026 Spotlight: Sustainability

The Board was provided with an update on the Electronic Health Record (EHR) renewal. The presentation highlighted the project strategy, value and risks, in support of the Joint Strategic Plan 2026.

Discussion ensued on the progress to date and future planning.

The Resource Planning Committee of the Board receives regular project updates and will continue to monitor progress towards initiation of the upgraded system.

Mr. Farrow was excused from the meeting.

4.0 CONSENT AGENDA

Moved by: Matt Simeoni
Seconded by: Kimberly Ferris

“That the Board of Directors:

Motion



- 4.1 Approves the Board of Directors Open Minutes of December 3, 2025;*
4.2 Accepts the Q3 2025-2026 Wages and Source Deduction Attestation for the Thunder Bay Regional Health Sciences, upon the recommendation of the Resource Planning Committee,

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 the construction progress of the Cardiovascular Surgery (CVS) Program, activity in preparation for the upcoming accreditation process, the success of recent innovation funding grant applications, the progress achieved on the EHR, and the completion of an external audit of the Hospital's physical environment through an equity lens. In addition, Hospital staff were commended for coordinating and collaborating to effectively manage patient care during a holiday season that saw the Hospital face elevated operational pressures.

5.2 Report from the Chief of Staff (COS)

The COS report was pre-circulated for information and included highlights on physician recruitment and retention activity, engagement initiatives, and new patient experience initiatives.

5.3 Report from the Chief Nursing Executive (CNE)

The CNE report was pre-circulated for information. Highlights focused on the development of a formal preceptor recognition program to support retention, and, the recruitment activity in progress to support the spring hire program.

6.0 FOR INFORMATION

6.1 Report from the TBRHS Foundation – For information.

6.2 Report from NOSM University – Deferred to April 2026.

6.3 Environmental Compliance and Fire Safety Update – For Information.



7.0 **DATE OF NEXT MEETING** – April 1, 2026

8.0 **ADJOURNMENT** – The meeting adjourned at 5:55 p.m.

Chair

Board Secretary

Recording Secretary



April 2026

Greetings, boozhoo, and bonjour.

As you know, this has been a demanding quarter. Emergency Department volumes remain high; bed capacity is tight and the health care system across Ontario continues to operate under significant pressure. None of that is new. What I want this report to show you is how we are managing through it.

Our formal accreditation survey takes place in May. A recent simulation highlighted real strengths in patient safety and quality of care and gave us a clear picture of where we need to sharpen our practices before surveyors arrive. Every team in the hospital is working toward that standard.

Construction on the Cardiovascular Surgery Program is on schedule and on budget. The Master Plan is advancing toward a Ministry submission in August. And we are now in the most intensive phase of our electronic health record build, a process that depends on frontline clinical staff shaping the system that will serve patients across the region for years to come.

The details are in the pages that follow.

The consistent theme across all of them is a hospital that is operating at high volume, investing in its future and holding itself accountable to the standards our community expects.

Patient Experience

Empathy, compassion, and respect in every encounter



Emergency Department Activity and Influenza Trends

Winter hit the Emergency Department hard. Flu volumes peaked and have since come down, but COVID-19 and RSV continued to bring patients through our doors into the spring. In January we saw 7,508 patient visits. February was slightly lower at 7,341. From April 2025 to February 2026, the average monthly visits to the ED is 8,027. Among Ontario's 17 teaching hospitals, 90th percentile performance, the Hospital's performance is strong for non-admitted ED patients, ranking 2nd for low-acuity ED length of stay (LOS) (5.4 hours) and 3rd for high-acuity ED LOS (8.1 hours). The time to inpatient bed is defined as the duration from admission in the ED to placement in an inpatient unit, between April 2025 and February 2026, patients experienced an average ED wait time of 28.3 hr., reflecting a 21% decrease from the previous year's average of 35.76 hr. in 2024/25.

Wait times for admitted patients remain a serious challenge, and not just for our hospital. Across Ontario, emergency departments are struggling to move patients into beds because

those beds are occupied by patients waiting for care in the community, long-term care or home support that doesn't yet exist.

At TBRHSC, 9 out of 10 admitted patients waited more than 36 hours for an inpatient bed in both January and February 2026. Compared to 39 hours in January and February 2025 We are not satisfied with that number. It reflects a system-wide capacity problem that no single hospital can solve alone. We continue to press provincial partners for the investments in capacity that will improve patient flow.

Fortunately, as flu season winds down, some of that pressure is easing.

Cardiovascular Surgery Expansion

Construction of the Cardiovascular Program continues to progress well, with structural steel installation substantially complete at approximately 95% and exterior wall framing on Levels 2 and 3 about 65% complete with the foundation waterproofing underway. Additional renovations to support the project are taking shape with Phase 1 of the Medical Device Reprocessing Department renovations nearing completion at roughly 80%. Overall, the project remains on track from both a budget and schedule perspective.

On the clinical side, there continues to be strong national and international interest from cardiac surgeons and cardiac anesthesiologists to support the cardiovascular Surgery Program, planned to launch in 2028. The business case proposing an Alternate Funding Plan (AFP) to support surgeon and anaesthesiologist recruitment is under review by the Ontario Medical Association.

As planning advances toward the go-live, the project continues to expand in scope and complexity with working groups to focus on training, education, recruitment and clinical operational readiness across multiple programs and services.

Organ and Tissue Donation

As part of BeADonor Month in April, TBRHSC continues to partner with Ontario Health (Trillium Gift of Life Network [TGLN]) and system partners across Ontario to advance public awareness of organ and tissue donation. Recognizing the critical role hospitals play in supporting informed conversations and addressing common misconceptions, these efforts contribute to sustained donor awareness and improved health outcomes across the system.

TBRHSC has received this award, reaching a conversion rate of 67%. The conversion rate is the percentage of potential organ donors (patients in a hospital setting that are deemed medically suitable for donation upon passing) who went on to become actual donors.

TBRHSC will remain committed to promoting and enabling the clinical supports for this important initiative.



Staff Experience

This is where we want to work, grow and thrive



Employee Recognition Week

We marked Employee Recognition Week in conjunction with National Employee Appreciation Day. Activities ran across all shifts, days and nights.

The week long appreciation was an opportunity to honor the outstanding dedication and compassion demonstrated every day by the staff who make an unwavering commitment to deliver exceptional care to patients and families.

We recognize the ongoing contributions of our staff, professional staff, and volunteers. Our recognition programs highlight individual and team achievements that exemplify our mission, vision, and values, while supporting a culture of meaningful appreciation year-round.

This month we also celebrated iCare Impact Award Winners. The Board Chairs report to the community includes the full list of winners. Instead of duplicating the headlines, I wanted to highlight the actual impact of awards.

Trisha Desa is building culturally appropriate prenatal programs in the NICU. The Miskwaa Biidaaban team is changing how Indigenous patients experience care in this building. The Cook Serve team redesigned how we provide dietary services for patients, and patient experience scores reflect it.

These aren't side projects. They are examples of the actual work being done that moves our hospital from talking about equity, Indigenous health and patient experience to demonstrating it. I encourage you to have a look at the Board Chair's report for the full list of winners.

Research, Innovation, & Learning

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



2026 SEED Grant Applications

The annual Research Seed Funding Competition for 2026–27 has wrapped up. This program supports innovative health research that strengthens research capacity and improves patient care within the region. Following a competitive review process, two projects have been selected for funding:

Understanding Lived Experiences and System-Level Perspectives on Access to Primary Reproductive Care in Northwestern Ontario: An Equity-Centred Learning Health System



Study - A study examining barriers to reproductive health services in northern communities, aiming to identify practical, equity-focused solutions that reduce preventable hospital visits.

Regional Differences in Trauma Outcomes: A Population-Based Comparison of Northern and Southern Ontario Using ICES Data - An analysis comparing trauma outcomes across regions using population-level data to highlight gaps and inform system improvements.

Both research projects will inform on outcomes and be used to enable better patient care.

Academic Affiliation Agreement Update

In March, the TBRHSC and NOSM University Academic Affiliation Agreement was tabled by the Joint Relations Committee.

The draft is informed by extensive senior-level consultation across both organizations to ensure alignment with the partnership's current and future needs. A targeted work plan is in place to finalize outstanding appendices, with priority given to the Academic Registrants appendix due to its critical importance to physician recruitment, at-risk services, and program sustainability at TBRHSC.

Equity, Diversity & Inclusion

We all belong



Frameworks & Action Plans – Equity, Diversity & Inclusion (EDI) and Indigenous Health

As part of the EDI sharing experiences and Indigenous Recruitment Strategic Plan projects, the Indigenous Collaboration, Equity and Inclusion team worked with partners to develop two Frameworks and associated Action Plans to contextualize Ontario Health's Frameworks for EDI and Indigenous Health.

TBRHSC's Indigenous Health Framework was developed in alignment with Ontario Health's First Nations, Inuit, Metis, and Urban Indigenous Health Framework (2024). The Framework will support ongoing equitable access to culturally safe care through the implementation of tangible in the operational Action Plan, developed in partnership with the Indigenous Partner Steering Committee and the Indigenous Collaboration, Equity and Inclusion portfolio.

TBRHSC's EDI Framework was developed with the EDI Steering Committee and aligns with Ontario Health's Equity, Inclusion, Diversity and Anti-Racism Framework (2022). Together with its Action Plan, it will continue to strengthen an organizational culture rooted in equity, inclusion, diversity, and anti-racism, contributing to improved outcomes for patients, families, and providers across the health system.



Sustainable Future

Ensuring our
Healthy Future



Master Program – Master Plan

Work on TBRHSC's Master Program and Master Plan is progressing well. Through extensive collaboration with clinical and non-clinical leadership, the Master Program is substantially complete, with option evaluation criteria established. The Technical Building Assessment, along with the Master Plan architectural and site drawings, has been finalized.

Three expansion options have been developed and are advancing through detailed costing. These options will be assessed based on function and cost, with a preferred option selected to guide the next phase of work.

Following selection, the Facility Development Plan will be finalized and Stage 1.2 submission documentation prepared for the Ministry of Health. Final materials are anticipated to be endorsed for submission to the Ministry in August.

Electronic Health Record (EHR) Update

The Meditech EHR Renewal project remains a key priority for all leadership, and we are currently in Stage 2: Build, Test, Train. This is the most people-driven phase of the project and requires the expertise of staff to directly shape how Meditech Expense will support patient care at our Hospital and across the North West region. The experience of all clinicians and subject matter experts is critical at this phase and requires the review and refinement of workflows, order sets, templates, and clinical content to enable optimal clinical support for safe, efficient, and patient-centered care. More frequent engagement and communication have begun with the introduction of Bridge Northwest Town Halls for leadership and staff involvement; leveraging existing front-line forums.



What Patients are Saying

“Casey Ruberto, the kinesiologist assigned to me during my cardiac rehab at TBRHSC in 2018, was a tremendous support. She carefully watched over me and guided me through the program. To this day, I'm still doing the exercises she taught me. Maybe that's part of the reason I'm still here today. Thank you, Casey!”

- Patient compliment, via TBRHSC's Facebook page (February 2026)

“Thank you to everyone at Thunder Bay Regional Health Sciences Centre (TBRHSC). I appreciate all of you in the healthcare field and I respect and appreciate every single person at TBRHSC that keeps that place running like a well-oiled machine from housekeeping, surgeons, nurses and everyone in between.”

- Patient compliment, via TBRHSC's Facebook page (February 2026)

“The cardiac team at TBRHSC is amazing. I received outstanding care from everyone involved – the cath lab staff, the team on 2C, and the technicians. I'm very grateful for the professionalism, kindness, and excellent care you provided. Thank you.”

- Patient compliment, via TBRHSC's Facebook page (February 2026)

“I completed my cardiac rehab at TBRHSC in January 2026, and I'm so grateful for the entire team. Everyone was amazing, supportive, and encouraging throughout the process. I truly don't know what I would have done without them. I miss you all and thank you for everything.”

- Patient compliment, via TBRHSC's Facebook page (February 2026)

“I am so grateful for Dr. Laferiere, who has kept me alive for six years and counting. My new counselor at the Cancer Center, Jessica McNaulty, has already made a huge impact on my care. She immediately made me feel safe talking about the scary parts and helped me see that there are always ways forward. The support I've received from the Cancer Center at TBRHSC has made an incredibly frightening, life-threatening diagnosis feel a little less overwhelming. The team has truly gone above and beyond, giving me the tools and encouragement I need. My time on 1A also showed me that every nurse, doctor, and care aide is exactly where they are meant to be. I am so thankful for all of you.”

- Patient compliment, via TBRHSC's Facebook page (February 2026)

“What an amazing cancer care team we have! I feel truly blessed and grateful for the wonderful nurses, radiation and lab technicians, doctors, social workers, psychologists, clerks, and every member of the team. Everyone goes above and beyond, and I always feel well cared for and completely comfortable at the clinic. Thank you for everything you do!”

- Patient compliment, via TBRHSC's Facebook page (February 2026)

Final Thoughts

The next several months will be some of the most consequential in our recent history.

Our accreditation survey takes place in May. The Cardiovascular Surgery Program continues to take physical shape. A preferred option on the Master Plan will be brought forward for endorsement before the Ministry submission in August. And, our electronic health record build will intensify as clinical teams work through the hardest part of the process.

All of this is happening inside a funding environment that has not kept pace with the complexity of what hospitals are being asked to deliver. Many of the challenges in areas like inpatient bed availability and patient flow - as referenced earlier in this report is not a TBRHSC problem. Instead, this is an Ontario problem and a health systems problem. We will continue to press that case and advocate with every partner who has the ability to act on it.

Our hospital is doing difficult work under challenging conditions. I remain confident in our team and the work we are doing. On behalf of the Senior Leadership Team, I'd like to thank the Board for its support and leadership as we build on our vision of exceptional care, for every patient, every time.



Chief Nursing Executive (CNE)
Open Report to the Board of Directors
April 2026

Staff Experience

- The 2026 spring Registered Nurse (RN) hiring has been completed. From a total of 105 applicants, 92 RNs have been hired and are scheduled to be onboarded between March and July of this year.
- The interview process for the Registered Practical Nurses was initiated in March. Successful applicants will be onboarded to the organization between July and September of this year.
- A total of 58 Unit Care Aides (UCAs) have successfully completed the required credentials to transition to a Registered Nurse. This clearly demonstrates that UCAs are an effective internal recruitment pathway. Efforts to recruit backfill candidates remain ongoing.
- An in-house nursing workload tool has been developed to assess and inform organizational resource allocation for this profession. The tool went live on March 23, 2026. An evaluation of its psychometric properties will be conducted concurrently as part of the implementation process.

Patient Experience

- To support the identification of any practice gaps and inform our planning efforts for safe, quality care across transitions, we are continuing our gap analysis related to the Registered Nurses' Association of Ontario Best Practice Guideline, *Transitions in Care and Services*.

Research, Innovation & Learning

- To evaluate our in-house nursing orientation program, a research study will be conducted on this year's cohort of spring hire Nurses. The study will focus on examining the impact of the structured orientation model on new graduate Nurses' role transition experience, confidence, and perceived readiness for independent practice.
- The Research, Innovation and Learning iCare Award for this year was awarded to The Clinical Nurse Specialists, Interprofessional Educators and Nursing Practice Leaders in recognition of their contributions to the Nursing Onboarding Program.



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Report to the TBRHSC Board of Directors March 2026

Foundation Events

The Foundation's events portfolio continues to grow with a strong emphasis on innovation and community engagement, highlighted by the introduction and growth of fundraising initiatives: the first Secret Supper Series held on February 22, 2026 and return of Bullseye: Chase the Case on April 16, 2026.

The Secret Supper Series was an exclusive, high-end donor experience at Tomlin Restaurant. This invitation-only event offered an intimate culinary experience featuring food and wine inspired by Lyon, France. The inaugural supper on Sunday, February 22, 2026, raised a total of \$21,645.00 and planning is well underway for the next series to take place in early June.

The return of Bullseye Chase the Case is taking place on April 16, 2026 at the Valhalla Hotel. Enhancements for 2026 include expanding to 20 prize packages and featuring 10 community models. The Foundation is thrilled that Doane Grant Thornton has been invited to return as Presenting Sponsor. The full 2025 committee has recommitted for 2026, ensuring continuity and strong leadership.

Foundation Funding

The Foundation remains committed to making strategic investments that directly enhance patient care across Northwestern Ontario. Key initiatives include funding essential capital equipment across nearly every clinical area, advancing the multi-year replacement of outdated inpatient beds with new SMART beds, and supporting the completion of major priorities such as the Cardiovascular Surgery Program and the Emergency Department renovations are currently underway.

The 2026 Capital Equipment Grant cycle opened on January 12 and remains underway, with a closing date of April 24. This program provides departments and individuals with the opportunity to request support for essential capital equipment, educational initiatives, and program expansion.

Charitable Gaming

The Foundation continued its streak of life-changing wins in February 2026, with Chad M. of Pembroke claiming the grand prize of approximately \$2,271,362. Chad's reaction was unforgettable — answering the call on his way to go ice fishing with family, he shared his plans to build his wife her dream home and invest in a new SUV. This latest win not only celebrates another supporter's good fortune but also reinforces how the 50/50 drives crucial funding back into local healthcare, supporting priority equipment and services at the TBRHSC and across Northwestern Ontario.

Tickets remain available online, at the Foundation Donation Centre in TBRHSC, and at the Foundation's permanent 50/50 location in the Intercity Shopping Centre, offering accessible ways for the region to participate and make a difference.

**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 REPORT.

SEPTEMBER 23, 2025 – FEBRUARY 18, 2026

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STRATEGIC ALIGNMENT

Operationalize the new Strategic Plan through clear key performance indicators (KPIs), transparent progress reporting, and accountability mechanisms that align initiatives with institutional priorities and interest holder expectations.

Since the last presentation to the Board, the Rooted in the North Strategic Plan has advanced through sustained effort, cross-portfolio collaboration, and disciplined decision-making across the organization. Input from all portfolios informed the key decisions required to move the plan from development to execution readiness, with a clear focus on prioritizing initiatives, aligning responsibilities, and sequencing work to support successful outcomes.

As confirmed at the previous meeting, executive sponsors have been assigned to each strategic initiative. Initiative leads have now been identified, establishing clear operational ownership and accountability as the University transitions from planning to implementation. Priority activities have been defined for each initiative to ensure the plan remains focused, phased, and achievable over the five-year planning horizon. This approach reflects sound governance practice by concentrating resources on the most critical actions, managing implementation risk, and maintaining a clear line of sight between strategic intent, operational activity, and outcomes.

To support effective Board oversight and performance assurance, key performance indicators have been developed for each strategic initiative and are supported by activity-level metrics. The Data Stewardship Office provided guidance in shaping these indicators to ensure they are clearly defined, methodologically sound, and aligned with institutional data standards. This enables consistent reporting, comparability over time, and informed Board-level monitoring as implementation proceeds.

In parallel, the refined creative design shifts from a singular focus on the tree to the broader ecosystem, emphasizing interdependence and connection. Rooted in the North reflects NOSM University's identity and purpose. Established to serve and be shaped by Northern Ontario, the University's growth depends on the strength of the ecosystem around it—its people, communities, partners, learners, and places. The line element is intentionally multifaceted, representing both roots that ground the University in its origins and a path that signifies movement, connection, and a shared journey forward. Together, these elements express NOSM University's evolution as a growing institution—advancing with momentum while remaining anchored in its values and sense of place.

Like a resilient ecosystem, NOSM University thrives through reciprocal relationships. Communities support learning and research, and in turn, the University contributes knowledge, care, and capacity back to the North. Rooted in the North captures this balance, reminding us that we grow stronger together.

The detailed initiatives, key performance indicators, and priority activities are presented as part of this meeting to support Board review, discussion, and oversight as the University moves into the implementation phase.

FINANCIAL STEWARDSHIP & INSTITUTIONAL EVOLUTION

Address structural deficits through disciplined financial management while advancing program expansion and diversification. Position NOSM University for its next stage of growth—from a medical school to a comprehensive university—through thoughtful academic development, resource optimization, and strategic partnerships.

Succession planning for senior leadership roles is actively underway. Recruitment for the Vice-President, Research and Graduate Studies is in progress, with the successful candidate expected to begin on January 1, 2027. In addition, succession planning for the Vice-President, Finance and Administration is advancing, with recruitment preparations beginning shortly to replace Ray Hunt, who will retire effective September 1, 2026. These timelines are designed to ensure continuity of leadership and a smooth transition in both portfolios.

NOSM University continues to advance disciplined financial stewardship while positioning the institution for its next stage of growth as a comprehensive university. For the 2026–27 fiscal year, the University is projecting a significant operating deficit driven by inflationary pressures, no increases to variable funding per learner, the continued provincial tuition freeze, and additional financial demands associated with program expansion. In response, a modified and more controlled budget approach has been adopted to support transparency, risk mitigation, and alignment with institutional priorities during this period of transition.

The Board's Finance, Audit and Risk Management Committee has supported a budgeted deficit of approximately \$2 million for 2026–27, with the requirement that a formal Recovery Plan be in place should increase government funding not be secured. All units are completing Recovery Plans as part of the budget process, supported by strengthened planning tools informed by Treasury Board Audit recommendations. Together, these measures reinforce financial discipline, shared accountability, and responsible resource optimization while enabling the University to continue advancing program expansion, academic development, and long-term sustainability in service of Northern Ontario.

ADVANCEMENT & FUNDRAISING

Implement targeted fundraising, partnership, and naming initiatives to generate new revenue streams and strengthen donor engagement, with a defined goal of securing \$5 million in new commitments in alignment with NOSM University's strategic priorities.

Since May 1, 2024, Advancement and Fundraising efforts have exceeded expectations through targeted fundraising and partnership aligned with NOSM University's strategic priorities. Against a defined goal of securing \$5 million in new commitments, a total of \$6.04 million has been raised, with \$1.87 million received to date. This includes a transformational [\\$5 million gift](#) in support of the Circle for Indigenous Health Research and Innovation, a three-year [\\$250,000 commitment from RBC Foundation](#) supporting Physician Workforce development, and ongoing annual sponsorship from MD Financial totaling \$139,600. These results reflect strong momentum in major gifts, corporate partnerships, and multi-year commitments.

Additional support has strengthened student financial aid and donor engagement through named and legacy bursaries. Contributions received include \$101,212.80 from N.M.C. Fielding Investments Limited toward the Sinclair Family Bursary in memory of Caroline Sinclair, \$48,849.57 from Justine Whitehead for a family bursary, \$53,000 from Jean Anawati toward a family bursary, and multi-year and annual bursary payments from Tenaris Global Services (Canada) Inc. (\$50,000), the Masonic Foundation of Ontario (\$50,000), and the Burnbrae Family Foundation [\\$40,000 over five years](#) to support dietetic learners. Collectively, these results advance NOSM University's priorities in Indigenous Health, physician workforce development, and learner support while positioning Advancement to sustain momentum through continued stewardship and partnership development.

NOSM University has partnered with [the NoahStrong Organization](#) who made a generous donation of \$7,500 to support pediatric residents in the North and a sponsorship of \$12,000 over three years to support the newly renamed NoahStrong Pediatric Conference at NOSM University, an event that brings health professionals together to strengthen child health outcomes across the region.

RESEARCH GROWTH & INNOVATION

Expand NOSM University's research enterprise by establishing independent Tri-Agency status, and later, increasing Tri-Agency competitiveness and funding, building infrastructure and expertise to support transformative, interdisciplinary, and collaborative research, and leveraging talent and partnerships across Northern Ontario communities – with a deliberate focus on advancing Francophone and Indigenous research priorities, partnerships, and opportunities.

Progress continues toward strengthening NOSM University's research enterprise and establishing the foundational governance and infrastructure required for long-term growth and competitiveness. An application for independent Tri-Agency eligibility is being prepared and will be submitted pending approval of the Research Administration Policy by the Board of Governors. This milestone represents a critical step in positioning the University to directly administer federal research funding and to expand support for investigator-led research aligned with Northern Ontario priorities.

Work is also advancing through the Research Ethics Board (REB) Task Force, a collaborative initiative involving Lakehead University, Laurentian University, Health Sciences North, and Thunder Bay Regional Health Sciences Centre. The Task Force continues to clarify NOSM University's board of record structures, agreements, and ethics review pathways to ensure appropriate oversight and clear processes for faculty research. This work is essential to enabling research activity that is both compliant and responsive to the evolving needs of researchers and partners across the region.

The Animal Use Policy is presented to the Board for approval, a final requirement in establishing the Animal Use program. Preparation of the Canadian Council on Animal Care application for Good Animal Practice certification is underway, with submission targeted for the spring. In parallel, commissioning of the Animal Care Facility at the Health Sciences North Research Institute is progressing in collaboration with Laurentian University, further strengthening shared infrastructure and regional research capacity.

NOSM University researchers and research partners continue to demonstrate strong competitiveness at the national level. Two major Canadian Institutes of Health Research (CIHR) Project Grants were awarded to research groups affiliated with the University. Dr. Erin Cameron, Professor and Director of the Dr. Gilles Arcand Centre of Health Equity, received \$803,251 in partnership with the Bruyère Health Research Institute for the project A Place-based Framework for Equitable Health Service Delivery. In addition, Dr. Robert Ohle, Vice-President of Academic and Research Impact at Health Sciences North Research Institute and NOSM University Chair in Indigenous and Rural Health Research, was awarded \$757,350 for his study Validation of a Clinical Risk Score to Identify Emergency Department Patients with Serious Causes of Dizziness. Together, these achievements underscore NOSM University's growing research impact and its emphasis on collaborative, community-responsive, and equity-focused scholarship.

This momentum was further strengthened by the \$5 million donation supporting the Indigenous Circle at the Dr. Gilles Arcand Centre for Health Equity.

DR. GREEN'S RESEARCH

- [Connecting families-randomised controlled trial of poverty screening and financial support navigation for families of young children in primary care: an internal pilot study informed protocol](#)
- [Distance to primary care and its association with health care use and quality of care in Ontario: a cross-sectional study](#)
- CIHR-funded collaboration—Up to BAT: Examining the association between 'business arrangement types' and family physician compensation, and workforce outcomes
- CIHR-funded collaboration—Evaluating the implementation of team-based primary care across Canada: A multiple case study and deliberative dialogues

ENGAGEMENT, LEADERSHIP & CULTURE

Strengthen internal leadership capacity and engagement across academic and administrative units. Enhance cross-portfolio communication, mentorship, and recognition to build cohesion, inclusion, and succession pathways that sustain a collaborative, values-based culture. Embed measurable feedback mechanisms—such as engagement surveys, wellness indicators, and communication audits—to assess progress, reinforce accountability, and drive continuous improvement.

Progress has been made in strengthening internal leadership capacity and engagement across both academic and administrative units through a more deliberate and transparent approach to communication, dialogue, and leadership visibility. The President's regular blogs continue to reinforce institutional values, share strategic context, and provide a consistent leadership voice that connects daily operations with long-term direction.

To further enhance cross-portfolio engagement and organizational alignment, the University has introduced two annual university-wide town halls referred to as the “NOSM University Check-Up.” These sessions are designed to support open dialogue, shared understanding, and collective accountability. The first Check-Up is scheduled for March 4, 2026, with a second planned for Fall 2026. Together, these forums provide an opportunity to reflect on progress, surface emerging issues, and strengthen connection across portfolios and roles.

In parallel, Executive Group summary reports are now available to the Senior Leadership Group to support informed decision-making, reinforce shared accountability, and ensure consistent alignment on priorities, decisions, and performance considerations. Collectively, these initiatives contribute to a more cohesive, inclusive, and values-based culture. With the implementation of the new Strategic Plan, the University will introduce engagement surveys, wellness indicators, and communication audits to support ongoing assessment and continuous improvement.

ALUMNI RELATIONS

Alumni engagement continues to strengthen through relationship-building activities. Alumni Awards were promoted in the fall of 2025 for the Distinguished Alumni, Rising Star, and Honorary Alumni Awards. We received 18 nominations across the three award categories, with recipients to be announced at the Alumni Dinner in Toronto on May 1, 2026.

40

NOTABLE MEETINGS, CONFERENCES AND EVENTS

- Senate & Executive
- Board of Governors & Executive
- Governance Committee
- Executive Group
- Senior Leadership Group
- Expansion Taskforce Meetings
- FARM Committee
- National Consortium for Indigenous Medical Education (NCIME) Board
- Thunder Bay Regional Health Sciences Centre (TBRHSC) Board
- TBRHSC Foundation Reception
- Strategic Planning
- Council of Ontario Faculties of Medicine (COFM) Board
- Association of Faculties of Medicine (AFMC) Board
- Health Sciences North Research Institute (HSNRI) Board
- Joint Relations HSN/HSNRI/NOSM U
- Manitoulin Island Community Visit
- Moose Factory/Moosonee Community Visit
- Indigenous Programs and Services
- Franco-Ontarian Flag 50th anniversary Celebration
- Franco-Ontarian Day Banquet
- National Day for Truth and Reconciliation Event
- University Wide Expansion Update
- Family Medicine Forum
- Year 1 Learners-Pizza with the President Events
- Ambassadors Northwest Event
- Sudbury Chamber of Commerce Fireside Chat Event
- Group consultatif francophone Meeting
- President's Lecture Series Event

INTEREST HOLDER MEETINGS

- NOAMA Meeting
- Laurentian President
- Potential Donor meeting
- Donor Meetings & Lunches
- Meetings with COU President
- Community members Dinner
- MPP Meetings
- Sault Area Hospital Expansion
- French Language Services Commissioner of Ontario
- Medical Council of Canada (MCC) Engagement Session
- Health Ministers Meeting
- Ministry of Colleges, Universities, Research Excellence (MCURES) Funding Model Meeting

On Friday, November 21, 2025, NOSM University opened campus doors in Thunder Bay and Sudbury for a 20th Anniversary Open House. Staff, faculty, and learners gathered to celebrate 20 years of impact, reflect on key milestones, and share what makes Canada's first independent medical university unique.

A panel of Canadian and Northern Ontarian physicians explored the challenges of widespread misinformation at the 2026 President's Lecture Series live [@NOSMtv on YouTube](#). In a time when online health information is easily accessible, how do physicians build trust, address misinformation, and support informed decision making?

The 2026 Bring a Doctor Home hockey tournament took place in Sault Ste. Marie in mid-January with the official puck drop at the Thursday evening game. To date, this tournament has raised more than \$611,000 for the [Bring a Doctor Home bursary](#).

NOSM University participated in the Greater Sudbury Chamber of Commerce's launch of the Sudbury Partnership for Higher Education, which brings together Sudbury's postsecondary leaders to strengthen student pathways, grow the Northern workforce, and position Northern Ontario as a destination for learning, research, and innovation.



NOSM UNIVERSITY | 2025

**20 Years in the North:
An Open House Celebration**

Mark your calendars for NOSM University's 20th Anniversary Open House. In November, all Northern Ontarians are welcome to join us in celebrating community, reflecting on the milestones of the past two decades, and learning more about Canada's first independent medical university.

**November 21, 2025
2:00 – 5:00 p.m.**

NOSM University in Thunder Bay
955 Oliver Road
Thunder Bay, ON P7B 5E1

NOSM University in Sudbury
955 Ramsey Lake Road
Sudbury, ON P3E 2C6

RSVP

NORTHERN ROUTES

3 BLOGS

- December 3, 2025: [Twenty Years Strong: Reflecting on Our Shared Journey](#)
- December 15, 2025: Season's Greetings
- January 27, 2026: [Welcome to 2026: Turning Up the Volume on What Matters Most](#)

20,047

TOTAL SENDS

6,645

OPENED

34.2%

OPEN RATE

1.0%

CLICK RATE

199

CLICKED

MEDIA RELATIONS

(September 22, 2025 – February 10, 2026)

- Total Audience Reach: 842,070,960
- Print: 642,989
- Online: 833,639,003
- TV: 5,632,076
- Radio: 2,156,892
- Number of news releases: 12
- Mentions (Media Items): 877

\$8,577,357
AD EQUIVALENCY

COVERAGE VOLUME & POTENTIAL AUDIENCE REACH

	Coverage Volume	Potential Audience Reach
Print	27	642,989
Online	634	833,639,003
TV	40	5,632,076
Radio	173	2,156,892
Magazine	3	Data unavailable

SUDBURY STAR

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News / Local News

NOSM University receives \$5M gift to advance Indigenous health equity

Anonymous donors kicked in the funding, university says

Star Staff

Published Feb 03, 2026 • Last updated 5 days ago • 2 minute read

[Join the conversation](#)



Dr. Michael Green, NOSM University's president, makes a presentation at a Town Hall at the Sudbury campus in this file photo. PHOTO BY JOHN LAPPA /Sudbury Star

NOSM University announced Tuesday a \$5-million gift to support Indigenous health equity through the creation of the Circle for Indigenous Health Research and Innovation.

CBC

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Sudbury

'Just imagine where we would be without the medical school': NOSM University marks 20 years

About half of the doctors trained at the medical school are now based in northern Ontario

Erik White - CBC News - Posted: Sep 11, 2025 12:46 PM EDT | Last Updated: September 11, 2025

[Listen to this article](#)
Estimated 4 minutes

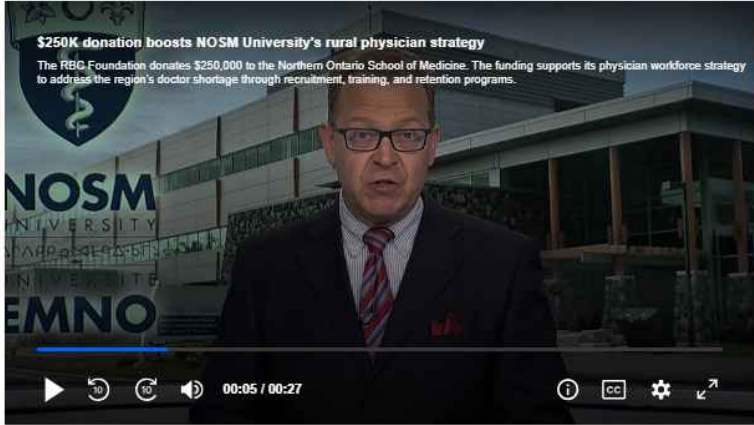


It's been 20 years since the Northern Ontario School of Medicine, now called NOSM University, held its first classes. (Jenifer Norwell/CBC)

[X](#) [Email](#) [Facebook](#) [LinkedIn](#) [Comments](#)

It was 20 years ago this month that the Northern Ontario School of Medicine started training doctors.

It came after years of lobbying that the region needed its own medical school to help keep new doctors from settling in the south.



\$250K donation boosts NOSM University's rural physician strategy

The RBC Foundation donates \$250,000 to the Northern Ontario School of Medicine. The funding supports its physician workforce strategy to address the region's doctor shortage through recruitment, training, and retention programs.

00:05 / 00:27

Northern Ontario Watch

\$250K donation boosts NOSM University's rural physician strategy

The RBC Foundation donates \$250,000 to the Northern Ontario School of Medicine. The funding supports its physician workforce strategy to address the region's doctor shortage through recruitment, training, and retention programs.

October 22, 2025 at 6:59PM EDT


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HOME > LOCAL NEWS

New teaching clinic coming to NOSM Thunder Bay


NOSM University will soon begin planning for five new primary care teaching clinic.

 [Alicia Anderson](#)
Jan 19, 2026 9:30 AM





Naomi Palmer, a first year NOSM student at the 20th anniversary of NOSM on Nov. 21, 2025. | Alicia Anderson

 Listen to this article
00:04:21

THUNDER BAY — Local residents could soon be seen by student doctors at a new learning clinic in Thunder Bay.

"A primary care teaching clinic is something that we haven't had before," said Dr. Michael Green, CEO of NOSM University.

"I practiced in one for many years when I was at Queen's University, and it's just like your family doctor's office, except that instead of maybe sometimes having a learner in the practice, usually, there is a learner in the practice."


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New specialist residencies will benefit all of northern Ontario, NOSM says


The medical school has added four post-graduate streams to its slate of programming.

 [Matt Prokopchuk](#), Local Journalism Initiative Reporter
Sep 21, 2025 12:30 PM





(FILE)

 Listen to this article
00:02:22

THUNDER BAY — The medical school that serves northern Ontario says the addition of four new residencies will improve access to health care across the region.

NOSM University has added post-graduate specializations in medical oncology, a new emergency medicine program, palliative care, and obstetrics and gynecology. In a media release, the medical school said the expanded programming is to improve access to health care throughout the north.

"This is a vital step toward improving access to care in northern Ontario by training more physicians where they are needed most," Michael Green, NOSM University's president, vice-chancellor, dean and CEO was quoted as saying in the university's release.

HOME > LOCAL NEWS

NOSM and NoahStrong team up to improve child health care across Northern Ontario

'By supporting NOSM University and becoming the title sponsor of the NoahStrong Pediatric Conference, we hope to spark conversations about pediatric stroke and ensure more families and clinicians are aware of its signs'



Chris Dawson
Dec 14, 2025 8:00 AM



North Bay's Noah Dugas, whose tragic story is behind the origin of the Noah Strong organization. File photo.

Listen to this article
00:03:30

NOSM University has announced the creation of a new partnership with the NoahStrong Organization, which is making a generous donation of \$7,500 to support pediatric residents in Northern Ontario.

In addition, NoahStrong is investing \$12,000 over three years to serve as the title sponsor of the newly renamed NoahStrong Pediatric Conference at NOSM University, an event that brings health professionals together to strengthen child health outcomes across the region.

HOME > LOCAL NEWS

NOSM celebrates 20 years

The Northern Ontario School of Medicine was created in 2005 and made history by becoming Canada's first independent medical university.



Alicia Anderson
Nov 23, 2025 4:02 PM



1 / 3 NOSM celebrated its 20th anniversary on Nov. 21, 2025. | Alicia Anderson

Listen to this article
00:02:50

THUNDER BAY — Twenty years after opening, the Northern Ontario School of Medicine (NOSM) is celebrating the significant milestone.

University employees, community members, and students gathered for NOSM's open house on Friday, celebrating 20 years of the medical school in the north.

"NOSM University today is the result of years of hard work and determination by those who believed in what it could become — a driving force for health equity and stronger communities in Northern Ontario," said Dr. Michael Green, president, vice-chancellor, dean, and CEO of NOSM in a news release.

Informing community members about the work NOSM does in Northwestern Ontario is important, said Joseph LeBlanc, associate vice president of equity and inclusion at NOSM.

SUDBURY STAR

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News / Local News

Researchers mark 20 years of tracking NOSM University MD student success

Results show 51.3 per cent of NOSM University graduates have stayed in Northern Ontario to practise and majority have chosen family medicine

Sudbury Star Staff
Published Nov 13, 2025 • 2 minute read

Join the conversation



As part of NOSM University's social accountability mandate, researchers have tracked students and graduates since the medical school opened its doors in 2005, with the goal of understanding the long-term impacts of its model of distributed, community-engaged medical education in Northern Ontario.

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News / Local News

RBC Foundation donates \$250,000 to NOSM University

Money will be used to train future doctors to practise in remote parts of Northern Ontario

Star Staff
Published Oct 25, 2025 • Last updated Oct 27, 2025 • 2 minute read


Join the conversation



Dr. Sarah Newbery PHOTO BY DOUG GIBBONS /SunMedia

A "transformative" \$250,000 gift from the RBC Foundation is helping to shape the future of health care in Northern Ontario.

YouTube



Watchable by pages.plugin.google.com.

NOSM University holds 20th anniversary open house

thenevewatch
7.8K subscribers

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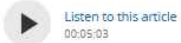
Sudbury post-sec schools emphasize close relationship as they sign MOU

'If we can attract students to Sudbury, we all win': Presidents of Laurentian, Cambrian, Boréal and NOSM take part in Chamber panel

Heidi Ulrichsen | Sudbury.com
 Jan 22, 2026 2:00 PM



The leaders of Greater Sudbury's four post-secondary institutions participated in a Greater Sudbury Chamber of Commerce panel Jan. 14. Speaking is NOSM University president Dr. Michael Green, while (from left) Vale general manager of Indigenous and community relations Mark Poystupa, Laurentian University president Lynn Wells, Collège Boréal president Daniel Giroux and Cambrian College president Kristine Morrissey listen. | Heidi Ulrichsen / Sudbury.com



With everything from radio to bus ads revealing the schools' competition for students, the presidents of Sudbury's post-secondary institutions also regularly meet for lunch.

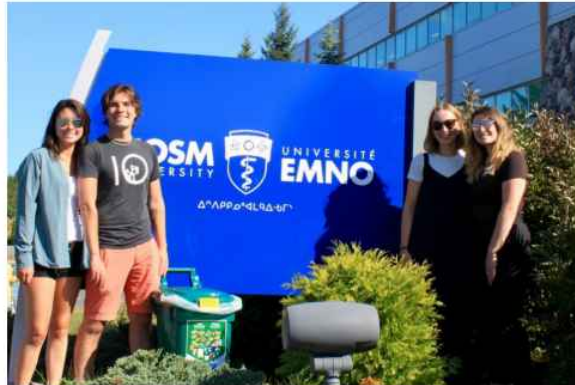
They do that because their institutions have a symbiotic relationship, sharing resources and students often transferring between schools as they complete their education.

HOME > LOCAL NEWS

Planetary health: What's good for Mother Earth is good for you, too

NOSM University students have a vision to make the campus more green and to get future doctors thinking about how human health and the environment intersect, and how that can help in their practice of medicine.

Isabelle Moy and Peter Greve
 Sep 24, 2025 2:00 PM



A group of NOSM University medical students started a Planetary Health Club at the school in 2024. Because human health and environmental health are linked, the club aims to encourage medical students to take the health of the planet as seriously as the health of their patients. | Supplied



We make choices that affect our health every day. Should I walk or drive? Should I eat out or cook at home? Should I see my doctor or wait?

However, some choices go beyond our individual health. Should I open my windows overnight to cool my home during a heatwave? What if wildfire smoke is simultaneously making the air quality dangerously poor? Will my lungs be damaged? Will my children's?



NOSM University - (File Photo)

News

Applications open for NOSM Summer Studentship Program

Jacob Henriksen Willis | February 2, 2026 | 2:58 pm | Last Updated on February 2, 2026 2:58 pm



Health care students planning a career in northern Ontario are now invited to apply for the NOSM University Summer Studentship Program.

The paid summer experience lets students work in Northern rural communities to explore professional interests and build connections.

Learners in a variety of regulated health professions are eligible, according to the [NOSM University website](#):

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News / Local News

Money for health-care students in Northern Ontario

Apply for funding through its Summer Studentship Program

Star Staff

Published Nov 11, 2025 • < 1 minute read

Join the conversation



The Northern Ontario School of Medicine in Sudbury. John Lappa/Sudbury Star

NOSM University invites health-care service agencies based in Northern Ontario to apply for funding through its Summer Studentship Program.

Funded by the Ministry of Health and delivered by NOSM University, the program funds summer jobs for health-care students in 2026.

Ontario to apply for funding through its Summer Studentship Program.

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Timmins to get primary care teaching clinic

The province announced 16 new sites expected to start opening in 2027-28

TimminsToday Staff
Jan 10, 2026, 12:54 PM



Stock image

 Listen to this article
00:01:10

TIMMINS - A new primary care teaching clinic is slated for Timmins. The province has announced it's giving up to \$500,000 each for 16 new teaching clinics that will run in partnership with medical schools.

In Timmins, the clinic is through NOSM University, which will also have sites in Thunder Bay, Sudbury, Sault Ste. Marie and North Bay.

"Hands-on learning is critical to ensuring our health care students can hit the ground running and provide exceptional care upon graduation," said Nolan Quinn, Minister of Colleges, Universities, Research Excellence and Security, in a news release.

"The new and expanded primary care clinics will not only equip our future doctors and nurses with the skills they need to thrive, but also connect more people in Ontario to compassionate health care, close to home."

The first teaching clinics are expected to open in 2027-28. The province says the clinics will train family physician residents alongside nurse practitioners, physician assistants and registered nurses. They're expected to provide access to primary care for 300,000 people.

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College names Sudbury doc as region's top family physician of 2025

Dr. Tom Crichton helped establish the City of Lakes Family Health Team and continues to share knowledge through his work with NOSM U, Northern Ontario's only medical school

Sudbury.com Staff
Nov 24, 2025 1:00 PM



Sudbury physician Dr. Tom Crichton has been named Regional Family Physician of the Year – North East Region by the Ontario College of Family Physicians. | Image: Dr. Tom Crichton

Listen to this article
00:02:07

The Ontario College of Family Physicians has named Sudbury's Dr. Tom Crichton as Regional Family Physician of the Year – North East Region.

Crichton was presented with the honour during a virtual ceremony on Nov. 19.

SOOTODAY.com

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Medical school expanding to the Sault

The teaching clinic is one of 16 across the province, thanks to \$8 million in provincial funding

SooToday Staff
Jan 14, 2026 12:07 PM



The NOSM University campus is seen here July 13, 2025. | Heidi Ulrichsen/Sudbury.com

Listen to this article
00:10:34

The Sault is one of 16 communities receiving a new or expanded primary care teaching clinic, thanks to \$8 million in funding from the Ontario government.

Each teaching clinic will receive up to \$500,000 to support planning work.

The clinics will train family medicine residents in a team-based model alongside other health-care professionals, such as nurse practitioners, physician assistants and registered nurses, offering training that combines direct patient care with hands-on learning in team-based environments, all while providing primary care for an additional 300,000 people.

Thunder Bay Regional Health Sciences Centre **Framework for Ethical Decision Making**



Thunder Bay Regional
Health Sciences
Centre

Introduction

The ethical commitments of Thunder Bay Regional Health Sciences Centre (TBRHSC) are grounded in its Philosophy, Vision, Mission and Values.

Philosophy:

Patients at the centre of everything we do.

Vision:

Exceptional care for every patient, every time.

Mission:

We provide exceptional Care to Patients and Families, supported and advanced by research, innovation and education that is responsive to the needs of the population of Northwestern Ontario.

Values:

Diversity

We foster a people-centred environment that is inclusive of all.

Compassion

We show empathy, compassion and 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.

Excellence

We deliver the highest quality service in every encounter and in all our work.

Innovation

We embrace continual learning and improvement to drive positive change.

Accountability

We sustain and reinvest in our mission and communities by wisely planning for and managing our resources.

For additional support and guidance please contact the Bioethicist.

The Framework for Ethical Decision Making is a tool which helps us further integrate these basic ethical statements into our decision making at TBRHSC.

Range of Decisions Informed by the Framework

The framework is meant to inform and guide decisions from the Boardroom to the bedside, including but not limited to decisions made by: the Board and its committees; Senior Leadership; Program and Service Directors; All teams and committees; Managers and Supervisors; Privileged Medical Staff; Educators; and Researchers.

The framework should inform and guide all decisions made at TBRHSC, including but not limited to: program approval, review expansion or cancelling; policy approval and review; human resource management; financial management; strategic planning; organizational development; public relations/marketing; and others.

How to Use the Ethics Framework

1. Articulate the proposed decision and alternatives.
2. Ask, using the check list below, how the proposed decision supports the Mission, Vision, and each of the organization's Values.
3. Select the option that aligns best with our Mission, Vision and Values.

Note: A decision which does not, at least partially, uphold the Mission is inappropriate. If the decision does not express all or most of our Values, or contradicts some of them, other options need to be considered. An exemption must be fully defensible.

MISSION & VISION

Exceptional care for every patient, every time

We provide exceptional Care to Patients and Families, supported and advanced by research, innovation and education that is responsive to the needs of the population of Northwestern Ontario.

Does the course of action uphold the hospital's Mission and Vision?

YES

NO

For additional support and guidance please contact the Bioethicist.

VALUES

Diversity

We foster a people-centred environment that is inclusive of all.

1

Is the course of action guided by the values and expectations of stakeholders (e.g. patients, families, staff etc.)?

YES

NO

2

Have we considered the needs and impact on internal and external stakeholders (e.g. patients, families, staff, community, etc.)?

YES

NO

3

Was there a fair consultation process about the course of action including representation of those who are most affected and most vulnerable or marginalized?

YES

NO

4

Does the course of action address a significant need of our patients, our community, or our staff?

YES

NO

Notes/comments

Compassion

We show empathy, compassion and 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.

1

Does the course of action demonstrate due consideration for the dignity, autonomy, and rights of stakeholders?

YES

NO

2

Is the course of action sensitive to the diverse needs, interests, feelings and expectations of stakeholders? (eg: cultural, religious, and socioeconomic backgrounds)?

YES

NO

3

Does the course of action provide a reasonable accommodation for individual needs, preferences, and expectations of our patients? (e.g. Indigenous healing practices)

YES

NO

4

Does the course of action mitigate the impact of systemic barriers and inequities – including systemic racism?

YES

NO

Notes/comments

For additional support and guidance please contact the Bioethicist.

Excellence

We deliver the highest quality service in every encounter and in all our work.

1

Does the course of action support Evidence Based Practice?

YES

NO

2

Will the outcome meet or surpass applicable standards?

YES

NO

3

Does an evaluation of the evidence support this course of action?

YES

NO

Notes/comments

Innovation

We embrace continual learning and improvement to drive positive change.

1

Will the course of action advance the hospital as a leader in patient and family centred care?

YES

NO

2

Does the course of action encourage and support learning and/or research?

YES

NO

Notes/comments

For additional support and guidance please contact the Bioethicist.

