

BOARD OF DIRECTORS

OPEN SESSION AGENDA

Thursday, February 13, 2025 at 4:00 pm

[Click here to register to attend](#)



(R) denotes regrets received; (V) denotes participation virtually

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|------------------------------|---|------------------------|-------------------|--------------------|--------------------|-------------|
| Elected Directors: | Dave Uffelmann | Carla Clarkson-Ladd | Bruce Schouten | Tim Ellis | Moreen Miller | Jody Boxall |
| | Anna Landry | Line Villeneuve | Dr. William Evans | Marni Dicker | Colleen Nisbet | Mary Lyne |
| Ex-Officio Directors: | Cheryl Harrison | Dr. Khaled Abdel-Razek | Diane George | Dr. Helen Dempster | Dr. Joseph Gleeson | |
| Executive Support: | Alasdair Smith | Mary Silverthorn | Tammy Tkachuk | | | |
| Guests: | Katie Zammit, Manager, Women & Children's Health and Transitional Care, MAHC | | | | | |
| | Dr. Abi Sriharan, Scientific Director and Senior Scientist - AI and Health Sector Organizations, Krembil Centre for Health Management and Leadership; | | | | | |
| | Adjunct Professor, Health Sector Innovation, Schulich School of Business | | | | | |

| PAGE # | ITEM # / LEAD | TOPIC - WHAT IS TO BE ACCOMPLISHED/MOTION <small>♦ denotes attachment ☒ denotes attachment to follow</small> | LINK TO STRATEGIC DIRECTION | LINK TO GOVERNANCE ROLE | TIME (Min.) |
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1.0 CALL TO ORDER

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| --- | 1.1 D. Uffelmann | Welcome & Land Acknowledgment We, Muskoka Algonquin Healthcare, acknowledge that we are situated on the traditional territory of the Anishinaabe. We wish to deepen our understanding of the culture of the local Indigenous communities to develop appropriate culturally safe health care services by building trust through respectful relationships that acknowledge past harms and mistakes to move forward in the spirit of Truth and Reconciliation based on the Seven Grandfather Teachings. | | | 4:00 – 4:05 (5) |
| 1 | 1.2 D. Uffelmann | Approval of Agenda MOTION: That the meeting agenda be approved as circulated. | <i>Not applicable</i> | Decision Making | |
| --- | 1.3 D. Uffelmann | Declaration of Conflict of Interest <i>To remind members that conflicts are to be declared for any agenda items and the Director shall not attend any part of a meeting during which the matter in which they have a conflict is discussed.</i> | <i>Not applicable</i> | <i>Not Applicable</i> | |
| --- | 1.4 K. Zammit | Patient Experience <i>To provide real experiences of patients to help maintain focus on continually improving patient safety and experience.</i> | Quality Care and Safety | Oversight | 4:05 – 4:10 (5) |
| 5 | 1.5 Dr. Sriharan | Education & Strategic Discussion – Artificial Intelligence | Innovation & Technology | Education/ Strategic Discussion | 4:10 – 4:40 (30) |

2.0 BUSINESS ARISING

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| | | <i>There is no business arising for this meeting</i> | | | |
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3.0 REPORTS

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| --- | 3.1 D. Uffelmann | Chair's Remarks <i>To receive the report.</i> | Strengthens all Strategic Directions | Oversight | 4:35 – 4:35 (5) |
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3.0 Reports Continued...

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| 6 | 3.2 C. Harrison | Report of the President and Chief Executive Officer♦ <i>To receive and discuss the report.</i> | Strengthens all Strategic Directions | Oversight | 4:35 – 4:45 (10) |
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4.0 PROGRAM QUALITY & EFFECTIVENESS

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| XX | 4.1 Dr. K Abdel-Razek | Report of the Chief of Staff & Medical Advisory Committee♦ <i>To receive the report.</i> | Quality Care & Safety | Oversight | 4:45 – 4:50 (5) |
| XX | 4.2 Dr. K Abdel-Razek | Credentialed Staff Human Resource Plan♦ MOTION: That the Board of Directors approves the Credentialed Staff Human Resources Plan. | Quality Care & Safety | Decision | 4:50 – 5:00 (10) |
| --- | 4.3 Dr. Evans | Report of the Quality & Patient Safety Committee <i>To receive an overview of Committee activity.</i> | Quality Care & Safety | Oversight | 5:00 – 5:05 (5) |
| XX | 4.4 Dr. W. Evans | Quality Improvement Plan 2025-2026♦ <i>To receive the initial proposed metrics.</i> | Quality Care & Safety | Oversight | 5:05 – 5:15 (10) |
| XX | 4.5 Dr. W. Evans | Policy Review – Privacy, Confidentiality and Security of Information♦ Motion: That the Privacy, Confidentiality, and Security of Information policy be approved. | Strengthens all Strategic Directions | Policy Formation | 5:15 – 5:20 (5) |

5.0 FINANCIAL AND ORGANIZATIONAL VIABILITY

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| --- | 5.1 B. Schouten | Report of the Resources & Audit Committee <i>To receive an overview of Committee activity.</i> | Sustainable Future | Oversight | 5:20 – 5:25 (5) |
| XX | 5.2 B. Schouten | Energy Plan Environmental, Social and Governance (ESG) Issues♦ <i>To receive the annual update.</i> | Sustainable Future | Oversight | 5:30 – 5:40 (10) |
| XX | 5.3 B. Schouten | Inclusion, Diversity, Equity and Anti-Racism (IDEA) Committee Updates♦ <i>To receive an update.</i> | People | Oversight | 5:40 – 5:45 (5) |
| XX | 5.4 B. Schouten | Committee Terms of Reference♦ Motion: That the amended Resources and Audit Committee Terms of Reference be approved. | Strengthens all Strategic Directions | Policy Formation | 5:45 – 5:50 (5) |

6.0 BOARD EFFECTIVENESS

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| XX | 6.1 M. Lyne | Report of the Nominations Committee♦ <i>To receive an overview of Committee activity and an update on the recruitment timeline.</i> | Strengthens all Strategic Directions | Oversight | 5:50 – 6:00 (10) |
| --- | 6.2 M. Dicker | Report of the Governance Committee <i>To receive an overview of Committee activity.</i> | Strengthens all Strategic Directions | Oversight | 6:00 – 6:05 (5) |
| XX | 6.3 M. Dicker | Policy Review - Board Goals and Board Work Plan Policy♦ MOTION: That the amended Board Goals and Work Plan policy be approved. | Strengthens all Strategic Directions | Policy Formation | 6:05 – 6:10 (5) |

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6.0 Board Effectiveness Continued...

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| XX | 6.4 M. Dicker | Policy Review - Board Orientation and Education♦ MOTION: That the amended Board Orientation and Education policy be approved. | Strengthens all Strategic Directions | Policy Formation | 6:10 – 6:15 (5) |
| XX | 6.5 M. Dicker | Policy Review - Position Description for Officers and Committee Chairs♦ MOTION: That the amended Position Description for Officers and Committee Chairs policy be approved. | Strengthens all Strategic Directions | Policy Formation | 6:15 – 6:20 (5) |

7.0 CONSENT AGENDA - To approve or receive the items listed below without further debate.

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| | | MOTION: That the following items be approved or received as indicated: | | | |
| XX | 7.1 | Approval of the Board of Director Meeting Minutes of December 12, 2024♦ | Strengthens all | Decision | 6:20 – 6:25 (5) |
| XX | 7.2 | Receipt of the Chief of Staff Quality-of-Care Report♦ | Quality | Oversight | |
| XX | 7.3 | Receipt of the Emergency Preparedness Annual Report♦ | Quality | Oversight | |
| XX | 7.4 | Receipt of the Meeting Attendance Record♦ | Strengthens all | Oversight | |

8.0 WRAP UP & ADJOURNMENT

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| --- | 8.1 D. Uffelmann | MOTION: That the open session be adjourned. | <i>Not applicable</i> | <i>Not Applicable</i> | 6:25 |
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Break: 6:25 – 6:45

MAHC DEFINITION OF QUALITY

Quality at MAHC results in shared decision-making between the patient/family and health care team to achieve a patient identified desired health outcome. MAHC will deliver safe, effective, patient-centered services, efficiently, and in a timely fashion, resulting in optimal health status for our patients.

| Defining Elements of Quality Care | | |
|-----------------------------------|--|--|
| Element | Patient Meaning | Provider Meaning |
| Safe | I will not be harmed by the health system. | The care my patient receives does not cause the patient to be harmed. |
| Effective | I receive the right treatment for my condition, and it contributes to improving my health. | The care I provide is based on best evidence and produces the desired outcome. |
| Patient Centered | My goals and preferences are respected. My family and I are treated with respect and dignity. | Decisions about my patient’s care reflect the goals and preferences of the patient and his or her family or caregivers. |
| Efficient | The care I receive from all practitioners is well coordinated and efforts are not duplicated. | I deliver care to my patients using available human, physical, and financial resources efficiently, with no waste to the system. |
| Timely | I know how long I have to wait to see a doctor or for tests or treatments I need and why. I am confident this wait time is safe and appropriate. | My patient can receive care within an acceptable time after the need is identified. |
| Equitable | No matter who I am or where I live, I can access services that benefit me. I am fairly treated by the health care system. | Every individual has access to the services they need, regardless of his/her location, age, gender, or socio-economic status. |

ISSUE FOCUSED ETHICAL DECISION MAKING FRAMEWORK

The intent of this framework is to enable decision makers to address complex and challenging issues in a comprehensive and logical manner. It is a reflective process intended to stimulate discussion to identify explicit reasons for or against a proposed course of action, and to do that in the context of the Mission, Vision and Values.



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| <p style="text-align: center;">SITUATION <u>Understand the Problem</u></p> <p>Tell the Story</p> <p>What exactly is the problem we have to solve?</p> <p>Who needs to be involved in the decision-making?</p> <p>Who has the authority to make the decision?</p> | <p style="text-align: center;">BACKGROUND <u>Set the Context</u></p> <p>What values or principles are either engaged or are in conflict?</p> <p>How do MAHC’s Mission, Vision and Values fit?</p> <p>Is there relevant law?</p> <p>Is there relevant MAHC policy/procedure?</p> <p>Is there relevant professional ethical policy?</p> <p>What is my personal context and/or bias?</p> <p>Was the ethicists’ assistance required?</p> |
| <p style="text-align: center;">ASSESSMENT <u>Consider the Options</u></p> <p>Ask first – is doing nothing an option?</p> <p>What are the Benefits or Strengths?</p> <p>What are the Harms / Limitations / Consequences?</p> <p>How does this align with values?</p> <p>How does this align with relevant MAHC Values/Principles/Policies and Legislation/Laws?</p> | <p style="text-align: center;">RECOMMENDATION <u>Develop an Action Plan</u></p> <p>What is the decision?</p> <p>Does the decision pass the TV test?</p> <p>What is the implementation plan?</p> <p>Who has to take action?</p> <p>What is the communication plan?</p> <p>How do we evaluate/revise the action plan if required?</p> |