

SUMMARY OF THE BOARD OF DIRECTORS

Meeting held on March 25, 2025

At 1530 hours via Zoom

1.0 WELCOME & INTRODUCTION

The Chair called the meeting to order at 1600H and started the meeting with Land Acknowledgement. It was confirmed that there was a quorum. The Chair asked whether there were any conflicts and no new conflicts were declared.

2.0 APPROVAL OF PREVIOUS MINUTES

The minutes from the Board meetings held on January 28, 2025 were approved as pre-circulated.

3.0 UPDATE FROM BOARD CHAIR

3.1. Update from Board Chair

The Chair provided a high level overview of agenda items and shared that a lot of informative stuff is brought forward to for discussion and approval including update of US tariffs, the new Strategic Plan as well as preparation for Accreditation.

3.2. CEO Report

The President and CEO of MGH/TEHN highlighted some items from the CEO Report which was submitted with the agenda package. It was reiterated that decanting of A, B and C wings was completed with precision, while having record influx of patients at the same time. MGH leaders continue to advocate for the Emergency Department revitalization as our volumes continue to increase. M. Kohn provided a high level update on Provincial elections and on the most recent code grey and shared that the U of T Temerty Dean Robinson and team visited the hospital on March 13. Our team and U of T guests had an excellent discussion and Dean Robinson noted that MGH is seen as leaders in medical education, research and AI implementation

4.0 ITEMS REQUIRING APPROVAL

4.1. Finance & Audit Committee Update

4.1.1 Capital Approval

Chair of the Finance & Audit Committee shared that there is a capital request for CT scanner that requires Board approval. The Vice President, Finance and Chief Financial Officer referred to the pre-circulated briefing note, provided an overview of the situation with the current scanner in suite 1 and estimated costs. Committee Chair asked the Board if they had any questions and requested a motion as per the pre-circulated meeting materials.

4.1.2 Update on US Tariffs

President and CEO and Chief Operating Officer of Mohawk Medbuy Corporation (MMC) joined the Board meeting and provided an update on US tariffs including the timelines and MMC efforts to support their members. MMC team answered the questions raised by the Board.

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4.1.3 Financial Dashboard

The financial dashboard was presented next, the current status with hospital operations was outlined. It was noted that the status of the hospital is consistent with YTD January results and the forecast is achieving balanced position at the year end.

4.2. Governance and HR Committee Update

4.2.1 Approval of the New Strategic Plan

Chair of the Governance and HR Committee referred to the pre-circulated meeting materials and asked President and CEO to present on the new Strategic Plan.

The proposed motion was outlined and it was recapped how the new plan was developed with over 1400 touchpoints with staff, patients, volunteers and community partners. Next, an overview of the MGH environment was provided emphasizing that the focus is on providing health care services to the underserved population in an innovative way, to continue being the safest hospital in the province, to balance access and excellence and advance a high impact academic mandate while looking for new partnerships to better support our community.

VP Medical Affairs, Strategic Partnerships and Innovation, outlined some initiatives that will help to accelerate our strategic plan vision. Discussion ensued. MGH leaders answered the questions raised by the Board.

4.2.2 Approval of the Board Workplan and Committees terms of Reference

Next item is the approval of the Board Workplan and Terms of Reference of Governance & Human Resources Committee and Performance Monitoring & Quality Committee. Committee Chair referred to the pre-circulated Briefing Note as well as the draft Board workplan and blacklined Terms of Reference of Performance Monitoring & Quality Committee and of Governance & Human Resources Committee, provided an overview of the proposed changes and asked Board members if they had any questions. None were brought forward.

4.3. Performance Monitoring and Quality Committee Update

4.3.1 Accreditation Presentation: Governance Board Assessment Results

Chair of the Performance Monitoring & Quality Committee (PMQC), provided a high level overview of the items discussed at the most recent PMQC meetings including the review of the Quality Improvement Plan, preparation for Accreditation, review of Governance Board Assessment results.

Committee Chair asked Director, Quality, Patient Safety and Operational Excellence, to present on the Governance Board Assessment results and action plan as part of the Accreditation process. It was shared that the collective response rate was 89.5% and 90% of responses were positive. The proposed action plan to address the question identified as red flag was outlined.

5.2.1 Approval of the Quality Improvement Plan

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A briefing note pertaining to the approval of the Quality Improvement Plan for 2025-2026 was pre-circulated with the agenda package. Chair of the Performance Monitoring and Quality Committee referred to the pre-circulated meeting materials, confirmed that the Committee unanimously approved the draft Plan and asked Board members if they had any questions. None were brought forward.

5.2.2 Critical Incident Reports

VP Clinical Programs referred to the pre-circulated meeting materials and provided a high level overview of the most recent critical incident and outlined the action plan.

4.4. MAC Decision Items: MAC Recommendations for Medical Professional Staff Appointments

4.4.1 MAC Decision Items

The Chief of Staff and VP Academics referred to the pre-circulated briefing note regarding MAC decision items, and assured the Board that all the clinicians met the appointment criteria. The Chief of Staff asked meeting participants if they had any questions and requested a motion to approve new Staff Appointments as recommended by the Medical Advisory Committee.

5.0 DISCUSSION ITEMS

5.1. Update from Chief of Staff

The Chief of Staff and VP Academics, referred to her report submitted as part of the agenda package and highlighted a couple of items included in her update. The annual credentialed clinician reappointment process started, Medical Services will support the reappointment of almost 700 individuals. It was shared that TAHSN identified physician wellness as one of their top priorities, and COS was asked to take on the role as the physician wellness lead. Our internal team will be presenting at the April TAHSN meeting on physician wellness priorities and quality improvement partnerships as MGH is viewed as leaders in that area.

6.0 CONSENT

The Consent items were presented for information and included:

6.1. Report from the Governance & Human Resources Committee

A briefing note with the Governance & HR Committee update was pre-circulated with the agenda package.

6.2. Report from the Finance & Audit Committee

A briefing note with the Finance & Audit Committee update was pre-circulated with the agenda package.

6.3. Report from the Performance Monitoring & Quality Committee

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A briefing note with the Performance Monitoring & Quality Committee update was pre-circulated with the agenda package.

6.4. Report from the Redevelopment Committee

A briefing note with the Redevelopment Committee update was pre-circulated with the agenda package.

6.5. Report from the Board of MGH Foundation

The March 2025 report from the Board of MGH Foundation was pre-circulated with the agenda package.

6.6. Volunteer Services Update

The March 2025 Volunteer Services newsletter was pre-circulated with the agenda package.

7.0 MEETING WITHOUT MANAGEMENT (ELECTED DIRECTORS ONLY)

An in-camera meeting was held by the elected directors.

8.0 CONCLUSION

There being no further business to discuss, the meeting was concluded at 1755 hours.

Date of future meetings: May 27, 2025.

Catriona Read, Chair

Olga Grigorovskaya, Recorder