

**Holland Bloorview Board of Directors Meeting Minutes**  
**Wednesday, March 26, 2025**  
**5:30 p.m. – 8:00 p.m.**  
**Holland Bloorview, 150 Kilgour Rd., Toronto ON**  
**5<sup>th</sup> Floor Executive Boardroom – Room: 5E100**

**Attendance**

**Present:** Irene Andress; Alycia Calvert, Treasurer; Michelle Caturay; Jonathan Davey; Megh Gupta; Julia Hanigsberg; Sarah Kramer; Alysha Ladha; Jean Lam; Rhonda McEwen; Golda Milomanson; Ivona Novak; Catherine Roche, Chair; Suzan Schneeweiss; Paul Spafford; Michael Wasserman

**Sr. Management:** Evdokia Anagnostou; Enza Dininio; Sandra Hawken, Joanne Maxwell; Tracey Millar, Stewart Wong

**Regrets:** Helen Hayward, Secretary and Interim Vice-Chair; Heather Watt

**1.0 Call to order**

**Chair's remarks**

The Chair, C. Roche called the meeting of the Holland Bloorview Kids Rehabilitation Hospital Board of Directors to order at 5:30 p.m. She welcomed everyone to the meeting and expressed thanks to the coordinators for organizing today's meeting.

S. Wong, Vice President, Communications, Strategy and Sustainability presented the land acknowledgment with a reflection on Holland Bloorview's smudging policy which was recently developed to support Indigenous healthcare. Smudging is considered to be an essential part of a healing process in Indigenous cultures.

The Smudging policy development by Holland Bloorview's (HB) Inclusion, Diversity, Equity, Accessibility and Anti-Racism (IDEAA) team included consultation from external organizations, healthcare partners as well as HB families. This policy is aligned with the Truth and Reconciliation Commission of Canada's Call to Action for healthcare organizations to recognize and adopt Indigenous healthcare practices into the healthcare system.

The Board was provided with a brief overview of steps that have been taken to support the smudging process, challenges encountered, next steps and learnings as we continue to adapt to be inclusive of Indigenous healthcare and culturally safe practices.

**1.1 Approval of agenda**

The Chair then requested approval of the agenda.

**MOTION: It was MOVED by Michelle Caturay, and seconded by Jean Lam, that the Board of Directors approve the agenda as pre-circulated.**

**Disclosure of Conflicts of Interest**

The Chair asked whether anyone wished to declare a conflict of interest on any of the items slated for discussion at this Board meeting, and there were none.

**2.0 Discussion Agenda****2.1 Caring Safely Update****2.1.1 Accreditation Update**

J. Maxwell, Vice President, Experience and Transformation provided an update on the Holland Bloorview accreditation process with respect to the self-assessment questionnaire, employee engagement survey, governing body assessment tool and the patient experience survey. The Board was reminded that Accreditation 2025 was officially launched in February. Based on results of the self-assessment questionnaire, an action plan to address unmet criteria is currently being developed which will be presented at the May 21<sup>st</sup> Board of Directors meeting after having been reviewed by the Governance Accreditation Team.

**2.1.2 Medical Advisory Committee Report**

G. Milo-Manson provided the Medical Advisory Committee report for December 2024 and January 2025 and confirmed that this report has been approved by the Quality Committee. From the medication incidents, the number of dosages for December 2024 and January 2025 were slightly lower than the same time the previous year. Infections were also lower than the same time the previous year, which is usually a reflection of what is happening in the community.

A no-harm medication incident was shared with the Board in which a teenager received a different appearing medication. The medication administered had been changed to a generic version. The patient recognized the different appearing medication and being concerned that she was potentially being harmed became anxious and worried for several days.

Lessons learned, going forward, the hospital should educate the patient or family member when medication is changed from one form to the next instead of waiting for the client to raise the question.

With respect to public media coverage on measles outbreak, J. Hanigsberg assured the Board that Holland Bloorview has not had any cases to date. Our Communications and Public Engagement Team continues to share information on the importance of immunization. The hospital uses every opportunity to encourage families of the importance of being immunized.

**2.2 Quality Improvement****2.2.1 2025/26 Quality Improvement Plan**

On recommendation of the Quality Committee, J. Maxwell presented the 2025/26 Quality Improvement Plan (QIP) for the Board's approval.

For member's benefit, J. Maxwell provided a walkthrough of the process used in determining the QIP indicators reminding the board that these are sub-sets of the hospital balanced scorecard which will be presented at the May 21<sup>st</sup> Board meeting. J. Hanigsberg explained that the QIP is a public document.

Currently there are 18 indicators, and Management is proposing twelve indicators to remain largely unchanged with recommended changes to some degree for the following six indicators.

- Number of survey responses for clients who completed the Sociodemographic Survey
- % of students rating their experience as very good or excellent
- Patient Experience question "Told danger signals to watch for" (*New Indicator*)
- Staff Attrition Rate
- Count of Social Needs Screening Tool Completed
- Transitions Satisfaction satisfied and strongly satisfied scores

**MOTION: It was MOVED by Alycia Calvert, and seconded by Rhonda McEwen, that the Board of Directors of Holland Bloorview Kids Rehabilitation Hospital approve the 2025/26 Quality Improvement Plan as presented.**

***Calvert/McEwen***

***CARRIED***

### **2.2.2 Quality Improvement Plan – Executive Compensation**

S. Kramer, Interim Chair, Quality Committee presented the 2025/26 Quality Improvement Plan (QIP) for Executive Compensation. She drew attention to the information that was shared in the meeting materials relating to the history of which indicators have been used in the past for Executive Compensation and the rationale for the new indicators. The QIP – Executive Compensation is reviewed and approved on an annual basis. The following indicators were proposed as the 2025/26 Executive Compensation Indicators:

- Number of pressure injuries per 1000 patient days
- Medication reconciliation at discharge
- Number of survey responses for clients who completed Sociodemographic Survey

**MOTION: It was MOVED by Sarah Kramer, and seconded by Michelle Caturay, that the Board of Directors of Holland Bloorview Kids Rehabilitation Hospital approve the Quality Improvement Plan – Executive Compensation, as pre-circulated.**

***Kramer/Caturay***

***CARRIED***

### **2.3 Financial Statements as of December 31, 2024**

E. Dininio provided an update on the impact of the evolving United States (US) / Canada tariff situation. Holland Bloorview is a member of Mohawk Medbuy (MMC) Inc, which is a national shared services organization that plays a vital role in supporting the Canadian healthcare landscape. MMC has done a detailed analysis to determine which of their suppliers qualifies as a US supplier. Some of their efforts involved a rigorous review of their contracts while ensuring that vendors are held to contract pricing regardless of tariffs.

Based on MMC's analysis, Holland Bloorview appears to be at limited risk with respect to medical supplies, but it was felt that food services will be affected. E. Dininio will continue to monitor the situation and provide updates as they become available. MMC will provide an update at the June Board of Directors meeting.

The Board discussed specifics of contract clauses with respect to force majeure and whether the hospital plans to implement a policy pertaining to non-essential travel. J. Hanigsberg shared the discussions that have occurred at the Executive Leadership Team regarding employee travel to the U.S. with an emphasis on supporting staff and supporting those not-for-profit organizations such as learned associations, research networks and hospital associations that rely on members traveling to their meetings for the revenue. Therefore, the hospital has no plans for a travel ban but will continue to advise staff to travel to the US as long as they are comfortable to do so while being cautious to not provide travel advice that is out of the hospital's scope of expertise. The hospital will support any employee if they are detained in the US with legal counsel etc.

E. Dininio reviewed the financial statements and variance report briefly highlighting key areas of the financial statements as of December 31, 2024. The Ontario Health Association (OHA) circulated a survey to all Ontario hospitals – 94% of hospitals who completed the survey are forecasting a deficit for the end of this fiscal year. The Board was informed that Holland Bloorview is still awaiting outstanding funding letters from the Ministry of Health for the fiscal year ending March 31, 2025.

**MOTION: It was MOVED by Paul Spafford and seconded by Jean Lam that the Board of Directors approve the Financial Statements as of December 31, 2024, as presented.**

***Spafford/Lam***

***CARRIED***

#### **2.4 Operating Plan 2025/26**

I. Andress and E. Dininio presented the Operating Plan for 2025/26. The plan was reviewed and recommended for Board approval at the Joint Business and Audit Committee (B&A) and Quality Committee meeting on February 19, 2025. E. Dininio provided a high-level overview and shared some discussions that took place during the plan review while I. Andress focused on accomplishments over the past fiscal year. In response to a question on items that could be pushed out or cut back, J. Hanigsberg advised that the operating plan may be adjusted to align with new opportunities as they come up.

The presenters requested approval of the 2025/2026 Operating Plan to include approval of the Hospital Service Accountability Agreement (HSAA) and Multi-Sector Service Accountability Agreement (MSAA) extensions.

**MOTION: It was MOVED by Michelle Caturay, and seconded by Sarah Kramer, that the Board of Directors of Holland Bloorview Kids Rehabilitation Hospital approve the 2025/2026 Operating Plan to include approval of the Hospital Service Accountability Agreement (HSAA) and the Multi-Sector Service Accountability Agreement (MSAA) extensions.**

***Caturay/Kramer***

***CARRIED***

## **2.5 Foundation Update**

S. Hawken provided a fundraising update on the Foundation's \$100M Campaign with a focus on current position and next steps. This campaign is the largest campaign in Canadian history for paediatric disability and Holland Bloorview (HB). Key components of this campaign are Access, Excellence and Inclusion which supports HB's 2030 strategic priorities. Thanks were extended to all for the Capes for Kids fundraising efforts as donations exceeded the \$1M goal.

In addition, the presentation focused on Board campaign engagement as well as confirmed Board goals. Over the last five years, the Foundation has continually diversified its donor base and its approach as they continue to ask for 100% giving and participation from hospital board members. C. Roche confirmed the expectation that all Directors contribute to the Campaign ideally through a pledge.

S. Hawken extended her appreciation for members engagement and assured the Board that the Foundation will continue to provide on-going update as the campaign progresses. The Foundation looks forward to receiving any introductory leads that Board members can provide.

## **2.6 President and CEO Report**

J. Hanigsberg drew attention to the President and CEO report and invited questions from the Board. In the context of tariffs, the President and CEO informed the Board that the Federal Minister of Health has extended an invitation to Children's Healthcare Canada to better understand the impact from the child health sector on whether there were any specific implications resulting from the tariffs.

She expressed appreciation for continuity resulting from the Provincial elections as there were no changes in the two ministries that the hospital works with. The new Minister of Colleges, Universities, Research Excellence & Security has Research in his portfolio, and we look forward to meeting with him and plans to leverage individually and collectively. The hospital is pleased to host the all-party debate for the Federal election here at Holland Bloorview. Once a date is confirmed, the information will be shared with Board members should they wish to join the debate. Following the meeting it was determined that the debate would be hosted by the CNIB for logistical reasons.

In closing, members were encouraged to complete the Ontario Hospital Association Diversity Survey. Appreciating the effort that goes into the March meeting, J. Hanigsberg thanked everyone for their efforts in preparing the materials particularly the Quality Improvement Plan and the Operating Plan.

## **3.0 Consent Agenda**

The Chair noted the following items under the Consent Agenda requiring Board approval.

3.1 Minutes of Board of Directors Meeting – January 22, 2025

3.2 Revised 2024/25 Board Committee Membership

**MOTION: It was MOVED by Paul Spafford and seconded by Michelle Caturay that the Board of Directors approve the Consent Agenda.**

*Spafford/Caturay*

**CARRIED**

#### **4.0 Adjournment**

There being no further items for discussion, the meeting was adjourned at 7:50pm

*Catherine Roche*  
*Chair, Board of Directors*  
:cw