

**Timeline (guide):**

5:15	Call to order
5:15	George Mencher Award Presentation
5:25	Dinner
5:55	Regular board meeting

Standing Supporting Documents

- [Consent agenda information \(what is it and how is it used?\)](#)
- [Motions cheat sheet](#)
- [Board Governance Decision Matrix](#)
- [Policy 22 – Code of Conduct](#) (reference to Conflict of Interest)
- Meeting Minutes
- Board Reports
 - Board Executive
 - Finance & Investment
 - Nominating (no report)
 - Policy & Governance
- CEO Report to the Board

Additional Supporting Documents

- Mencher Award description and recipient biography
- Integrated Quality Care and Patient Safety Plan and Scorecard
- Capital Equipment Plan
- Operational Plan/Budget
- Board Governance, Education & Activity Calendar 2025-26
- Policies:
 - 2.2 Standing Committees
 - 2.9 Board Position Descriptions

Board of Directors

Bernard, Miranda	P	Affoo, Rebecca	P	Rizzetto, Maria (Vice Chair)	P
Bhangale, Chirag	P	Kujath, Magdalena	R	Sullivan, Vickie (Co-Vice Chair)	V
Frost, Jon	A	Landy, Mark (Chair)	P	Vossen, Emma	P
Grant, John	V	Lowe Lori	R	Mason-Browne, Anne (CEO)	P
Haley, Matthew (Sec-Treasurer)	P	MacLean, Matthew	R		
Kaur, Anuroop	P	Nakhla, Nardeen	P	Leslie, Kimberlee (Exec. Assistant)	P

Guests:

- Mr. Bob Kolanko, Director of Finance and Operations (P)
- Dr. Greg Noel, Director of Adult and Mi'kmaq Hearing and Speech Services (P)
- Dr. Sharon Walker, Director of Pediatric and Autism Hearing and Speech Services (P)
- Ms. Ferne Mardlin-Smith (Patient Advisor to the Board) (V)
- Ms. Courtney Douglas (Patient Advisor to the Board) (P)
- Ms. Alayne MacDonald (Communication Partner to Ferne) (V)
- Ms. Deborah Chan (Mencher Award recipient) (P)

Present: (P)

Videoconference: (V)

Regrets: (R)

Absent: (A)

5:15 pm	<p>1. Call to Order & Introductions</p> <p>The meeting was called to order at 5:15 PM.</p> <p>Mr. Landy introduced the new Board members: Miranda Bernard and Nardeen Nakhla.</p> <p>Mr. Landy also introduced the Patient Advisors to the Board and provided an overview of role of Patient Advisors.</p> <p>Board members and guests introduced themselves.</p>
5:15 pm	<p>2. Mencher Award presentation (with photos)</p> <p>Mr. Landry provided an overview of the Mencher award.</p> <p>Dr. Affoo introduced the 2025 recipient of the Mencher Award, Ms. Deborah Chan.</p> <p>Mr. Landy presented Ms. Deborah Chan with the Mencher Award. Photos were taken.</p>
5:25 pm	<p>Dinner</p> <p>Ms. Deborah Chan left the meeting after dinner.</p>
5:55 pm	<p>3. Consent Agenda</p> <ol style="list-style-type: none">Board meeting agendaPrevious meeting minutesBoard Executive ReportCommittee Reports<ul style="list-style-type: none">Finance & InvestmentNominating (no report)Policy & Governance <p>MOTION: that the Board of Directors approve the consent agenda. Motion was moved and seconded. Motion carried.</p>
6:00 pm	<p>4. Announcements</p> <p>4.1 Regrets: Matt MacLean</p> <p>4.2 Declarations of potential conflict of interest: None</p> <p>4.3 Other:</p> <ul style="list-style-type: none">Dr. Kujath has resigned from the Board. The Board has accepted the resignation.The Board has a potential candidate who has expressed interest in joining the Board. Mr. Landy will discuss with Ms. Rizzetto about the membership of the Board.
6:05 pm	<p>5. Quality Care and Patient Safety</p> <p>5.1 Integrated Quality Care & Patient Safety Plan (Presenter: Ms. Anne Mason-Browne)</p>

	<p>Ms. Mason-Browne presented the Integrated Quality Care and Patient Safety Plan. The presentation:</p> <ul style="list-style-type: none"> • Provided a link between the plan and the Integrated Quality Care and Patient Safety scorecard • Provided definitions of: <ul style="list-style-type: none"> ○ Quality of care ○ Quality improvement ○ Patient safety ○ Wait time for service <p>Q: We have self-referrals, do they differ from doctor referrals? A: All referrals are treated the same way.</p> <p>5.2 Integrated Quality Care & Patient Safety Scorecard Q1 (Presenter: Dr. Sharon Walker)</p> <p>Dr. Walker walked the Board through the new layout of the scorecard and presented the highlights of the scorecard.</p> <p>Q: With regards to Clearview, how are staff feeling? A: We did three townhalls to get feedback on Clearview. Feedback has been favourable from both staff and Partners in Care. Next steps: HSNS will work with Clearview to iron out any suggestions that were put forward.</p> <p>Q: Why are we still faxing? A: Healthcare still uses fax as it is still the most secure way for sending patient information. It is an electronic fax, directly from the EMR system.</p> <p>Feedback from Patient Advisors:</p> <ul style="list-style-type: none"> • Would like to take the one-page summary report back to Partners in Care and bring to the Board/HSNS any additional feedback. • What is the deadline for feedback? <ul style="list-style-type: none"> ○ Dr. Sharon Walker will be attending the November Partners in Care meeting and can receive the feedback.
6:40 pm	<p>6. Strategic Plan Update</p> <p>Mr. Landy provided an update on the Strategic Plan development.</p> <p>The Board needs to develop an RFP to recruit a consultant to help with development. The Board will use the RFP for the CEO recruitment to build the RFP for strategic planning.</p> <p>Mr. Landy posed to the Board; what kind of leadership does the Board see for themselves in developing the guidelines for the new plan? What should the Board be doing in their leadership role?</p> <p>The Board needs to determine what they are looking for from the consultant – i.e., what are achievable expectations of the consultant.</p>

	<p>The Board will need to have someone who has experience engaging with the Board, staff, clients and the community partners. The first step will be for the consultant to meet with the Board. Overall goal is to have a consultant who will workshop the priorities and then turn those into an achievable plan in conjunction with HSNS operations and Board governance.</p> <p>Q: How was the last strategic plan developed? A: It was led by a facilitator. Board members and staff participated in the development of the plan.</p> <p>Q: Was the experience useful? A: HSNS was happy with how it landed and how the plan was implemented.</p> <p>Q: Can we build upon the last RFP? A: Yes, the Board can build upon it.</p> <p>ACTION: HSNS will circulate the last RFP to the Board for review at the next meeting.</p>
6:50 pm	<p>7. Board Executive Report</p> <p>7.1 CEO recruitment update This item was moved to be discussed during the in-camera session.</p>
6:55 pm	<p>8. CEO Report</p> <p>8.1 Monthly Update Ms. Mason-Browne provided the monthly update, highlighting:</p> <ul style="list-style-type: none"> • Clinical coverage to mitigate disruptions in service • Continued rise in inpatient referrals – DHW has been alerted to the situation • Access and disclosure of personal health information – bring the Board’s attention to HSNS policies and information on the website • Engagement with partners <ul style="list-style-type: none"> ○ YourhealthNS – HSNS is part of the development meetings ○ OPOR (One Person, One Record) • Website enhancements to improve access of information for the public, in particular information regarding making a referral • Risk plan update including the launch of Clearview, as a result of clients and staff feedback • Facilities update <p>Q: Is Clearview available to clients? And how is it communicated to them? A: There is a QR code available in the waiting area at all our clinics. It is also available on our website. In addition, we are looking at social media posts.</p> <p>Q: Historically, have clients been able to submit reports? A: Originally, they could talk to their clinician. The clinician then would complete the report. We also have the website feedback area or client’s could email the info@ email or call the toll free number.</p>

	<p>Q: Will wait times be available on the website?</p> <p>A: We are getting ready to launch wait times on the website. It will be boarder to start with. The goal will be to move to a clinic level in the future. We want to provide good, accurate data to the public. We will not be able to provide live wait time data – it will be a quarter behind.</p> <p>8.2 Business Continuity (Emergency & Disaster Preparedness) Plan</p> <p>Dr. Noel provided a background on the plan. The Board was informed that HSNS will be testing the emergency phone tree on October 6, 2025. HSNS will also be conducting a table-top exercise (incident of an act of violence) with management. The results of these activities will be reported to the Board.</p> <p>8.3 Aprio Update</p> <p>A roadmap of Aprio was provided to the Board and is included on Aprio.</p> <p>8.4 Other</p> <p>Ms. Mason-Browne acknowledged Dr. Greg Noel’s 25th service anniversary.</p>
7:05 pm	<p>9. Finance & Investment</p> <p>9.1 Capital Equipment Plan</p> <p>9.2 Operational Plan/Budget</p> <p>Mr. Haley provided a brief overview of the discussion that occurred at the Finance & Investment meeting regarding the capital equipment plan and operational budget.</p> <p>MOTION: that the Board of Directors accept the 2026-27 operating budget and capital equipment plan as presented.</p> <p>Motion moved. Motion carried.</p> <p>9.3 Emergency Fund Threshold</p> <p>Mr. Haley provided an update of the emergency fun threshold discussion. The committee determined the threshold to be \$900,000. This number represented the maximum insurance deductible and what it would cost to run HSNS for two weeks.</p> <p>The amount was discussed with the Board. The Board agrees with the committee’s recommendation for the threshold amount. The committee placed a formal ask that the Policy & Governance (P&G) committee revise Policy 2.5 (Investment Funds) to include information on the threshold amount. P&G will update the policy which will then come back to the Board for final approval.</p> <p>Q: When does the threshold amount get reviewed?</p> <p>A: It would be reviewed in relation to the policy review, which is every 2 years.</p>
7:15 pm	<p>10. Policy & Governance</p> <p>10.1 Policy amendments:</p> <ul style="list-style-type: none"> • 2.2 Standing Committees • 2.9 Board Position Descriptions

	<p>Revisions to policies 2.2 and 2.9 were reviewed by the Board.</p> <p>MOTION: that the Board of Directors approve the recommended amendments to policies 2.2 and 2.9 as presented by Policy & Governance. Motion moved. Motion carried.</p> <p>10.2 Board Governance, Education & Activity Calendar 2025-26 The Board governance, education and activity calendar for 2025-26 was reviewed. The calendar lays out the Board's activities for the year.</p> <p>Q: How do we bring forward suggestions for topics? A: Members can put down suggestions in the meeting evaluation. It will then go P&G who will then work with HSNS to get it added to the agenda.</p>
7:20 pm	<p>11. Old Business None</p>
7:25 pm	<p>12. New Business None</p>
7:30 pm	<p>13. Members' Comments None</p>
7:35 pm	<p>14. In-camera session MOTION: that the Board of Directors move to in-camera session. Motion carried.</p> <p>MOTION: that the Board of Directors move to adjourn the in-camera session. Motion carried.</p>
7:45 pm	<p>15. Date of next meeting: October 30, 2025 (In person, HSNS Provincial Office)</p>
7:45 pm	<p>16. Adjournment MOTION: that the Board of Directors move to adjourn the meeting. Motion carried.</p> <p>Meeting adjourned at 7:38 PM.</p>