



**Timeline (guide):**

- 5:15 pm Call to Order
- 5:15 pm 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 (February 2025)
- Board Committee Reports
  - Board Executive
  - Finance & Investment
  - Nominating
  - Policy & Governance
- CEO Report to the Board

**Additional Supporting Documents**

- 2024-25 Q3 Integrated Quality Care Report
- Engagement plan 2024-25
- Board education cumulative list
- Policies:
  - 5 (CEO Succession)
  - 6 (Financial Conditions and Activities)
  - 8 (Global Executive Constraint)
  - 13 (Standing Committees)
  - 17 (Risk Oversight)

**Board of Directors**

Bhangale, Chirag	V	Kieft, Michael	R	Rizzetto, Maria (Vice Chair)	V
Frost, Jon	V	Kujath, Magdalena	V	Sullivan, Vickie	V
Grant, John	V	Landy, Mark (Chair)	V	Vossen, Emma	V
Haley, Matthew (Sec-Treasurer)	R	MacLean, Matthew	R	Mason-Browne, Anne (CEO)	V
Kaur, Anuroop	V	Noronha, Adline	A	Leslie, Kimberlee (Exec. Assistant)	V

**Guests:**

- Mr. Bob Kolanko, Director of Finance and Operations (V)
- Dr. Greg Noel, Director of Adult and Mi'kmaq Hearing and Speech Services (V)
- Dr. Sharon Walker, Director of Pediatric and Autism Hearing and Speech Services (V)
- Ms. Erin Lamond, Manager (V)
- Ms. Ferne Mardlin-Smith, Patient Advisor (V)
- Ms. Alayne MacDonald, SLP & support staff to Patient Advisor (V)
- Ms. Courtney Douglas, Patient Advisor (R)

**Present: (P)**

**Videoconference: (V)**

**Regrets: (R)**

**Absent: (A)**

5:15pm	<b>1. Call to Order</b> The meeting was called to order at 5:15 pm.
5:20	<b>2. Announcements</b> 2.1 Regrets: Mr. Haley, Mr. MacLean, Dr. Kiefte, Ms. Courtney Douglas 2.2 Declarations of potential conflict of interest: None
5:25	<b>3. Consent Agenda</b> a. Board meeting agenda b. Previous meeting minutes c. Board Executive Report d. Committee Reports <ul style="list-style-type: none"><li>• Finance &amp; Investment</li><li>• Nominating</li><li>• Policy &amp; Governance</li></ul> The agenda was revised to include under New Business: the April site visit.  MOTION: that the Board of Directors approve the revised consent agenda. Motion was moved and seconded. Motion carried.
5:30	<b>4. Quality of Care</b> 4.1 Patient Safety Quality Improvement Project: Informed consent (Presenters: Erin Lamond, Clinical Manager) Discussion with Patient Advisors  Ms. Erin Lamond provided an overview of the Patient Safety Quality Improvement Project regarding informed consent and improving consent processes through engagement.  Highlights of the presentation included: <ul style="list-style-type: none"><li>• The level of engagement with staff and Partners in Care in developing the consent process</li><li>• Accomplishments of the project; future directions</li></ul> Q: What is the difference between the Nova Scotia Health and Hearing & Speech Nova Scotia consent process? A: Nova Scotia Health is legally a separate entity, so Hearing & Speech Nova Scotia must have its own process. HSNS relied heavily on Nova Scotia Health and the IWK for examples of the consent process. HSNS has also been exploring a shared consent model with its partners (development of a process for shared “consent for information” for PPAS is underway with IWK).  Q: If a circle of care is established, and it is assumed you have permission to discuss the client, why would you need a signed consent?

	<p>A: The circle of care allows you to talk only about the information that is needed and applicable for the health care team (not partners in education, early childhood development services, community health, etc) .</p> <p>Q: Should the forms be available online?</p> <p>A: The forms related to a client’s treatment are in the client record. We can look at adding these forms on the website to prepare clients for their appointments. Information about privacy, confidentiality and access to personal health information will be shared with the public via the website.</p> <p>Q: In the underserved areas, if you cannot sign things online, how are you overcoming the issue of signed consent for clients seen remotely?</p> <p>A: We document verbal consent in the EMR and then have ways of getting the forms out and getting them back. Improvements can be made and are being investigated. The Personal Health Information Act (PHIA) recognizes written and verbal consent equally for health agencies recognized in the Act (e.g. “custodians of health information”).</p> <p>Q: From a future planning perspective, are some of the issues going to be resolved once the province moves towards One Person One Record (OPOR) and having one platform for health records?</p> <p>A: The intent is to have all information in one spot. HSNS has been working with partners at OPOR for a number of years to achieve this goal. The OPOR provincial government project is complex involving multiple information sources, electronic record systems, and IT platforms. Recently, HSNS has been in contact with the YourHealthNS app team and will be involved in this process as well.</p> <p>Q: Is there a version of Adobe where you can sign documents?</p> <p>A: Some document formats don’t work with the Electronic Medical Record (EMR). Another issue is the need to get permission from Digital NS around privacy. Adobe is not inclusive outside of MAC or Windows operating systems.</p> <p>Question posed to the Patient Advisors: Are there any suggestions?</p> <p>A: Ms. Ferne Mardlin-Smith agrees that a single record needs to be kept for all areas of a client’s record.</p> <p>The hard work and engagement of staff and the Partners in Care were acknowledged.</p> <p>At this point, Ms. Erin Lamond and Ms. Ferne Mardlin-Smith left the meeting.</p>
6:00	<p><b>5. Board Executive</b></p> <p><b>5.1 Annual Board member self-evaluation and check-in interviews</b></p> <p>The annual Board member self-evaluation and check-in interviews will be occurring throughout April. The Board will receive an email with the evaluation forms and the roster of check-in interviews. The check-in interviews will be completed by the end of April. Board members are asked to complete the self-evaluation before their check-in interview.</p> <p><b>5.2 Accreditation Canada Survey update</b></p>

	<p>The mock survey will take place on June 2, 2025. The Board portion will be one hour. All board members are invited. The specific time of the session is still to be determined.</p> <p>The new Governance Functioning Survey tool will be completed at the April Board meeting via pencil and paper. The results will not be submitted electronically to Accreditation Canada, but will inform the next Board Quality Improvement Action Plan.</p> <p>5.3 Meeting format for winter Board meetings</p> <p>Mr. Landy provided an overview of the discussion that was held at the Board Executive meeting. The suggestion was to offer hybrid meetings during the winter months (November – March) where members/guests have the option to attend the meeting in person in the HSNS boardroom. Dinner will not be provided for these meetings. This option will come into effect next board meeting cycle.</p>
6:10	<p><b>6. Strategic Planning 2025-2028</b></p> <p>6.1 Engagement Plan</p> <p>The revised Engagement plan was first introduced to the Board at the January meeting. The plan was further discussed regarding updating the plan. Partners will be pulled from the master plan to develop the engagement plan for the new strategic plan.</p> <p>The Board was asked to review the plan and share any contact information they may have and any contact information for partners they would like to see added to the plan. Information and suggestions can be sent to Ms. Leslie or Mr. Greg Noel.</p> <p>Q: Regarding adding organizations, is there anything specific HSNS is looking for?  A: It would be for organizations that you feel would have an interest in or are impacted by HSNS hearing and speech services. If there is a suggestion for a partner, please include the contact name, title and email address. It would also be great to have some background information to provide some context so that we understand the connection to ensure meaningful engagement .</p> <p>Q: Do you see the EDI committee as a key link to the optional engagement partners?  A: Yes, the level of engagement will change based on the activity/project.</p> <p>Q: what does “Optional” mean?  A: It means “as needed”.</p> <p><b>ACTION:</b> Ms. Leslie will change “Optional” to “As needed” in the engagement plan.</p> <p>6.2 Strategic Planning Core Committee</p> <p>Work is continuing behind the scenes on the new strategic plan. The Board is looking at possible consultants, and an initial approach for sourcing an external facilitator has been drafted. A Strategic Planning committee meeting will be planned for after Easter to look at the transition of the plan – closing out the current plan and what needs to move forward for the next strategic plan.</p>

	<p>It was mentioned that the Board needs to be more engaged in strategic planning. If any Board members are interested in participating in the development of the strategic plan, let Mr. Landy or Ms. Mason-Browne know.</p> <p>Q: From an Accreditation Canada perspective, does HSNS need anything formally documented that the current strategic plan will be extended?</p> <p>A: Yes. Ms. Mason-Browne will be reporting at the May Board meeting the annual report of the current strategic plan. A recommendation will be made that the Board approve that work on the goals for the current plan be continued into the next fiscal year, while the new strategic plan is being developed.</p>
6:15	<p><b>7. CEO Report</b></p> <p><b>7.1 2024-25 Q3 Integrated Quality Care Report</b></p> <p>Dr. Sharon Walker presented the Integrated Quality Care report for 2024-25 Q3. Highlights included:</p> <ul style="list-style-type: none"> <li>- Equitable wait times: While the wait time has increased, the variability in wait time across regions is improving. One of the reasons for this is the amazing work being done as a result of the partial funding received.</li> </ul> <p>Q: With the increased funding, when will we see a correction in wait time?</p> <p>A: We will likely see a change in wait time next year.</p> <p>Q: There was an increase in the number of harmful incidents. Can you speak to this?</p> <p>A: This continues to be around coordinated services related to swallowing. There was also a rise in incidents related to access to services (people waiting longer than they should for services). Both issues are being addressed through caseload management strategies and allocation of resources. The issues related to swallowing are being examined by clinical and leadership staff from both NS Health and HSNS (Dr. Noel is HSNS lead on this work). We anticipate that this service area will be identified as a formal Quality Insurance project in 2025-26.</p> <p><b>7.2 Monthly update</b></p> <p>Ms. Mason-Browne provided the monthly update highlighting key topics:</p> <ul style="list-style-type: none"> <li>• Just culture and the introduction of Clearview Connects platform – an anonymous reporting system for incidents and complaints. The whole staff, clients, leadership, and board will have access to the system and will be provided with training. A town hall will be occurring in May where HSNS will invite staff, Board members and the public to provide feedback.</li> <li>• Accreditation and the related preparatory work and review of the standards by Policy &amp; Governance is well underway. The Board will have evidence identified for all governance standards by the time of the Board's Annual meeting. Opportunities for participating in Accreditation training are included in the update, interested Board members can reach out to Ms. Mason-Browne or Ms. Leslie.</li> </ul> <p>Q: Is Clearview going to be accessible for patients/families and will there be a link on the website?</p> <p>A: Yes. A link will be included on the website, as well as, having QR codes available in</p>

	the waiting rooms at the clinics.
6:40	<p><b>8. Finance &amp; Investment</b></p> <p>8.1 Confirmation of the auditor for 2025-26</p> <p>MOTION: that the Board approve the appointment of Lyle Tilley Davidson to be retained as HSNS' auditors for the 2025-26 fiscal year. Motion moved. Motion carried.</p> <p>8.2 Direction of investment funds discussion Finance &amp; Investment committee will be doing a review of the investment policies. These are the instructions to give to the finance advisors for the types of investments the Board prefers and those they want to avoid.</p>
6:50	<p><b>9. Nominating</b></p> <p>9.1 Recruiting Update The nominating committee has received two expressions of interest, and the committee will move forward with the recommendation to proceed with the interview process.</p> <p>An update was also provided on the discussion around the meet and greet events and the need to proceed delicately with the First Nations communities. The committee will continue to work on these events for the next year.</p> <p>Q: Is the Board planning on doing an event in the Colchester area? A: This will discussed at the Nominating committee meeting.</p>
7:00	<p><b>10. Policy &amp; Governance</b></p> <p>10.1 Policy amendments</p> <ul style="list-style-type: none"> <li>• 5 (CEO Succession)</li> <li>• 6 (Financial Conditions and Activities)</li> <li>• 8 (Global Executive Constraint)</li> <li>• 13 (Standing Committees)</li> <li>• 17 (Risk Oversight)</li> </ul> <p>Revisions to policies 5, 6, 8, 13 and 17 were reviewed by the Board.</p> <p>MOTION: that the Board of Directors approves the recommended amendments to Policies #5, 6, 8, 13 and 17 as presented by the Policy and Governance Committee. Motion moved. Motion carried.</p> <p>10.2 Public Disclosure Policy The committee provided information on the development of a public disclosure policy. This policy is under development and the Board will see it at a future meeting.</p> <p>10.3 Board Education requests</p>

	<p>The Board reviewed the suggested education topics. Several items were added to the list based on recommendations from the Board from the recent meeting evaluations. These topics will be brought forward for planning board activities in the next year.</p> <p>Recently suggested topics by board members include:</p> <ul style="list-style-type: none"> <li>• Virtual assistance for patients</li> <li>• Electronic Medical Record (EMR)</li> <li>• Security maintenance of health records</li> <li>• Services to Indigenous communities</li> </ul> <p>The Board is encouraged to review the list and to include any suggestions in the meeting evaluation.</p>
7:15	<p><b>11. Old Business</b></p> <p>None</p>
7:20	<p><b>12. New Business</b></p> <p>12.1 Site visit in April</p> <p>Typically, the Board does a site visit during the April meeting. It has been suggested that the next meeting be in New Glasgow. Mr. Landy discussed the need to have a quorum at the meeting. HSNS is also looking at HRM as a back-up plan.</p> <p>The location of the April Board meeting will be finalized and confirmed with the Board as soon as possible.</p>
7:25	<p><b>13. Members' Comments</b></p> <p>None</p>
7:30	<p><b>14. In-camera session</b></p> <p>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>
7:30	<p><b>15. Date of next meeting:</b> April 17, 2025 (In person, location TBC)</p>
7:35	<p><b>16. Adjournment</b></p> <p>MOTION: that the Board of Directors move to adjourn the meeting. Motion carried.</p> <p>Meeting adjourned at 7:43 pm.</p>