



**MINUTES OF OCTOBER 3, 2017
REGULAR BOARD MEETING
9:00 am – 10:30 am
5th Floor Boardroom – 505 Doyle Avenue**

Board Members:

Dr. Doug Cochrane, Chair
Ken Burrows
Debra Cannon
Patricia Dooley (T)
Diane Jules
Dr. Selena Lawrie
Dennis Rounsville
Cindy Stewart
Tammy Tugnum

Resource Staff:

Chris Mazurkewich, President & Chief Executive Officer (Ex Officio)
Debra Brinkman, Board Resource Officer (Recorder)

Guests:

Susan Brown, VP & COO, Hospitals & Communities
Dr. Trevor Corneil, VP Population Health & Chief Medical Health Officer
Mal Griffin, VP Human Resources
Donna Lommer, VP Support Services & CFO
Norma Malanowich, VP, Clinical Support Services & Chief Information Officer
Dr. Glenn Fedor, Chair, Health Authority Medical Advisory Committee (T)
Anne-Marie Visockas, VP, Health System Planning, MHSU, Residential Services
Givonna De Bruin, Corporate Director, Internal Audit

Presenters:

Joseph Savage, Director, Standards, Quality & Practice, Mental Health
Substance Use
Corinne Dolman, Practice Lead, Mental Health Substance Use
Gillian Frosst, Epidemiologist

(R) Regrets (T) Teleconference (V) Videoconference

I. CALL TO ORDER

Chair Cochrane called the meeting to order and welcomed Board Directors, staff and visitors.

I.1 Acknowledgement of the First Nations and their Territory

Chair Cochrane respectfully acknowledged that the meeting was held on the Okanagan Nation traditional territory. Director Jules offered a pray of thanks.

I.2 Approval of Agenda

Director Tugnum moved, Director Burrows seconded:

Motion: 17-22 **MOVED AND CARRIED UNANIMOUSLY THAT** the Board approve the agenda as presented.

2. PRESENTATIONS FROM THE PUBLIC

None

3. PRESENTATIONS FOR INFORMATION

3.1 Wildfire Response, Recovery and Recognition

Chris Mazurkewich provided a report on the response to the wildfire emergency that took place throughout many communities in the Cariboo and Thompson region this summer. He wished to acknowledge that Interior Health relied heavily on private businesses, community services, First Nations communities, municipalities, Thompson Rivers University, Northern Health Authority, First Nations Health Authority, Provincial Health Services Authority and the Armed Forces during the evacuation events. It was a massive collaborative effort with an amazing response. Due to outstanding leadership an outstanding response emerged however, there were lesson learned and those will be forthcoming. The Minister of Health, Adrian Dix also came to the areas affected by the wildfires and met with staff and physicians and personally thanked those who provided aid and comfort. Many heartwarming stories came out of this tragedy.

Chair Cochrane asked how the health authority will support citizens who may require assistance as they cope with the trauma of the events in their communities. Chris Mazurkewich, Anne-Marie Visockas and Norma Malanowich commented that Interior Health's Mental Health and Substance Use professionals are aware of the issues within communities and for First Nations communities and are collaborating with the First Nations Health Authority. The BC Emergency Management System (BCEMS) are also working on a coordinated approach to assist those communities who are struggling.

The Board expressed their sincere gratitude to all those who assisted in this unprecedented event.

3.2 Interior Health Community Overdose Profile for Kelowna

Dr. Trevor Corneil reported that from January 1 to June 30, 2017, a total of 122 illicit drug overdose deaths were reported in the IH region (32.5 per 100,000). Among these, 46 deaths occurred in Kelowna (73.2 per 100,000). Joseph Savage spoke about the community profile for Kelowna. Currently, the Okanagan is the most affected region in Interior Health with overdose deaths in Kelowna in 2017 projected to be almost double the number reported in 2016. Interior Health has been monitoring overdose trends in Kelowna using data provided by emergency departments, BC Emergency Health Services and the BC Coroners Service. The profile highlighted that overdoses disproportionately affect males aged 30-49 and Aboriginals. The highest risks of fatal overdoses are people using drugs alone and in private residences.

Fentanyl is detected in over 90% of fatal overdoses, however, various types of drugs and modes of consumption were reported. Over 2,500 Take Home Naloxone kits have been distributed with approximately 4,500 client visits occurring at the supervised consumptions services.

Coordinated efforts are taking place to provide follow up mental health and substance use services and harm reduction services to those who experienced an overdose.

The crisis response is now transitioning to operations. The Emergency Operations Centre has been closed. An operational steering committee was established and continues to work on proactive responses and strategies.

The Directors asked questions of the guests.

APPROVAL

4.1 Approval – Minutes

Director Tugnum moved, Director Cannon seconded:

Motion: 17-23 **MOVED AND CARRIED UNANIMOUSLY THAT** the Board approves the minutes of the August 1, 2017 Board Meeting as presented.

5. FOLLOW UP ACTIONS FROM PREVIOUS MEETING

There were no actions for review.

6. COMMITTEE REPORTS

6.1 Health Authority Medical Advisory Committee (HAMAC)

Dr. Glenn Fedor provided an overview of the Summary Report of the Health Authority Medical Advisory Committee meeting that took place on September 15, 2017.

Dr. Fedor noted that HAMAC met in Kamloops for the first time with positive feedback from the members. Presentations from the Research Ethics Board, Infection Control and Mental Health and Substance Use were well received.

6.1.1 HAMAC Recommendation(s) for Action / Discussion / Information

- There were no recommendations from HAMAC at this time.

6.2 Audit and Finance Committee

Director Rounsville requested the Boards approval for the following motion:

Director Rounsville moved, Director Cannon seconded:

Motion: 17-24 **MOVED AND CARRIED UNANIMOUSLY THAT** the Board approve the advancement of the 2018/19 IMIT Tactical Plan 'Core Infrastructure Refresh' capital project at a total project cost of \$4M.

The recommended funding source is the 2018/19 >\$100K allocation for the IMIT tactical plan and will be included in the IMIT corporate projects presented to the Regional Hospital Districts for funding consideration and approval. Need to acknowledge normally funding source approval confirmed prior to Board approval granted to purchase.

Director Rounsville reported:

- The Board Audit & Finance Committee will recommend to the Board Governance and Human Resources Committee the approval of the revised Terms of Reference.
- The financial summary for period 5 was reviewed. A revised Ministry funding letter has not yet been received.
- Laundry Services onboarding went very well.

6.3 Quality Committee

Director Cannon reported:

- The Board Quality Committee will recommend to the Board Governance and Human Resources Committee to approve the revised Terms of Reference.
- Diagnostic Imaging Annual Report was received. Notable details included the installation of 3 new fixed MRI machines coming in the next 18 months and an overall increase of 4% in volume from last year.

6.3 Governance & Human Resources Committee

Director Tugnum requested the Boards approval for the following motions.

Director Tugnum moved, Chair Cochrane seconded:

Motion 17-25 **MOVED AND CARRIED UNANIMOUSLY THAT** the Board approve the attached revised Governance and Human Resources Committee Terms of Reference.

Director Tugnum moved, Director Jules seconded:

Motion 17-26 **MOVED AND CARRIED UNANIMOUSLY THAT** the Board approve the attached revised *Board Policy 2.1 - Board of Directors Terms of Reference; Board Policy 2.3 - President & Chief Executive Officer Terms of Reference; and Board Policy 6.4 - Board Calendar.*

Director Tugnum reported that:

- Workplace Health and Safety Annual Report was received.

6.4 Strategic Priorities Committee

Chair Cochrane reported that:

- The Board Strategic Priorities Committee will recommend to the Board Governance and Human Resources Committee to approve the revised Terms of Reference.

6.5 Stakeholders Relations Committee Report

The Stakeholder Relations Committee Report was received as information. Chris Mazurkewich provided a brief summary of the CEO / Board Chair visits on August 22-24, 2017 to St'at'imc (Lillooet) & Nlaka'pamux (Lytton) Nation that included the following communities:

- Xaxli'p
- Ts'kw'aylaxw
- Sek'welas
- T'it'q'et
- Xwisten
- Nicomen
- Cook's Ferry
- Siska
- Kanaka Bar
- Skuppah

Director Jules relayed thanks from the communities that they visited and looks forward to future engagement.

7. REPORTS

7.3 President and CEO Report

The President & CEO Report was received as information.

Highlights included:

- Thank you to Mal Griffin for his role as acting VP Communications and Engagement while a new VP of Communications and Engagement, Jenn Goodwin was being recruited. Mal Griffin had personal thank you letters sent to individual staff and community members that went above and beyond during the wildfire crisis. Also a thank you was provided to Communication and Engagement staff who assisted in crafting the CEO Wildfire memos which were very well received by physicians and staff. In addition, individual and team thank you letters were sent to staff, physicians, private businesses, Northern Health Authority, Provincial Health Services Authority, First Nations Health Authority and others.

Chris Mazurkewich answered questions from the Directors.

7.2 Chair Report

Chair Cochrane did not have a report at this time.

8. CORRESPONDENCE

Board correspondence was received as information.

9. DISCUSSION ITEMS

None

10. INFORMATION ITEMS

None

11. NEW BUSINESS

None

12. FUTURE AGENDA ITEMS

None

13. NEXT MEETING

Tuesday, December 5, 2017 – 9:00 a.m. – Kelowna, BC

14. ADJOURNMENT

There being no further business, the meeting adjourned at 10:22 am.



Doug Cochrane, Board Chair



Chris Mazurkewich, President & CEO