

**OPEN SESSION MINUTES OF THE AHI & TDMH JOINT BOARD OF DIRECTORS' MEETING**  
**Wednesday, January 26, 2022**  
**Virtually**

**PRESENT:***AHI*

Don Campbell (Co-Chair) Ian Blain Michelle Franklin Harold Matthews Stephanie Nevins Tanya Pirie

*TDMH*

Ruby Withington (Co-Chair) Diane Kleer Carrie Lewis Ann Loker Heather Spanjers (vacancy)

*EX-OFFICIOS*

Mike Bastow Dr. Jamie Cluett Cheryl Pfaff Dr. Jay Taylor

**GUEST:** Dan Carney, Manager Information Technology (Item 2.)

**REGRETS:** Dr. Amy Blake Barbara Morgan Todd Ross Dr. Michael Surkont

**RESOURCES:** Jennifer Row, VP, Program Development and System Transformation; Lorelee Heemskerk, Recording Secretary

AGENDA ITEM	DISCUSSION/OUTCOME	ACTION PLAN/ TIMEFRAME & RESPONSIBILITY
<b>OPEN SESSION</b>		
<b>1. CALL TO ORDER</b>	Don Campbell called the open session meeting to order at 5:32pm.	
<b>1.1 Quorum</b>	A quorum was present for both organizations.	
<b>1.2 Conflict of Interest</b>	There were no conflicts to declare.	

AGENDA ITEM	DISCUSSION/OUTCOME	ACTION PLAN/ TIMEFRAME & RESPONSIBILITY
<p><b>1.3 Approval of Agenda</b></p>	<p><b><u>MOTION:</u></b>  <b>Moved by Michelle Franklin</b>  <b>Seconded by Ann Loker</b></p> <p><b>RESOLVED that the agenda be approved, including consent items, as circulated. Carried.</b></p> <p>Consent Agenda Items:</p> <ul style="list-style-type: none"> <li>• Approval of previous open session minutes – November 24, 2021</li> <li>• CNE and VP Clinical Services, Quality and Safety Report</li> <li>• VP, Program Development and System Transformation</li> <li>• AHI Joint Health and Safety Minutes – November 23, 2021</li> <li>• TDMH Joint Health and Safety Minutes – November 17, 2021 and December 15, 2021</li> </ul>	<p>Obtain original signature on meeting minutes (L. Heemskerck)</p>
<p><b>2. BOARD EDUCATION SESSION</b></p>	<p><u>Cybersecurity by Dan Carney, Manager Information Technology</u>  The presentation provided an overview about cybersecurity and the impact to our hospitals as well as risk mitigation and recovery strategies. Hospitals have a responsibility to manage cybersecurity risk and AHI/TDMH have a number of strategies to protect ourselves and mitigate risk. We recognize that cyberattacks are continually evolving and there is strong commitment to ensure our security posture.</p> <p>Presentation highlights:</p> <ul style="list-style-type: none"> <li>• Recently dedicated a primary role within the Information Technology (IT) Department to focus on security issues.</li> <li>• 24 month pilot project being launched through London Health Sciences Centre involving regional hospitals with a mandate to complete the regional security operations centre (RSOC) initiatives.</li> </ul>	

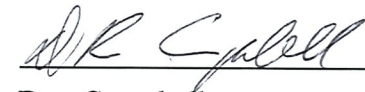
AGENDA ITEM	DISCUSSION/OUTCOME	ACTION PLAN/ TIMEFRAME & RESPONSIBILITY
	<ul style="list-style-type: none"> <li>• Implementation of governance scorecard to track progress.</li> <li>• New tools developed as early identifiers of hacker activity to isolate attacks.</li> <li>• Data back-ups are replicated off-site to mitigate risk.</li> </ul> <p>Clarification that US data showing the average cost for organizational recovery (\$7.13M) is specific to staff time, new equipment, etc., and does not include ransom dollars. Smaller hospitals have a smaller component of health data and likely a lower cost recovery. Suggest follow-up with Healthcare Insurance Reciprocal of Canada (HIROC) to confirm coverage for recovery expenses. HIROC might also have some metrics for the Canadian industry.</p>	Follow-up with HIROC (M. Bastow)
3. <b>BUSINESS ARISING FROM CONSENT AGENDA</b>	- There is no business arising from the consent agenda.	
4. <b>MATTERS FOR DECISION/DISCUSSION/INFORMATION</b>		
4.1 <b>President and CEO Report</b>	<ul style="list-style-type: none"> <li>• AHI outbreak declared over; occupancy is starting to climb back up.</li> <li>• TDMH outbreak declared on 2South and 2North; droplet precautions implemented; patient and staff swabbing; awaiting direction from Southwest Public Health regarding admission restrictions; implemented visitor restriction on units to compassionate and palliative care and necessary visitors on 1South; proactive N95 mask fit testing for necessary staff.</li> <li>• Restrictions in response to directive #2 implemented; proactively modelling to ramp back up; effective January 31<sup>st</sup> AHI cardiac rehab will re-open to 50% capacity.</li> </ul>	
4.2 <b>Quality, Risk and Patient Safety</b>	The January meeting was cancelled and there is nothing new to report.	
4.3 <b>Governance Steering Committee</b>	<u>December 9, 2021 and January 13, 2022</u> Meeting highlights were reviewed.	



AGENDA ITEM	DISCUSSION/OUTCOME	ACTION PLAN/ TIMEFRAME & RESPONSIBILITY
<p><b>4.5 Annual Freedom of Information Update</b></p> <p><b>5. NEW BUSINESS</b></p> <p><b>6. MOTION TO MOVE TO IN-CAMERA SESSION</b></p>	<p>There was only one freedom of information (FOI) enquiry in 2021 specific to TDMH. There was a request from a law firm investigating issues related to Sexual Assault Evidence (SAE) kits. An explanation was provided that we are partnered with St. Joseph's Health Care London with regards to SAE kits. AHI did not receive any FOI requests for 2021. Hospitals are required to report FOI requests annually to the Information and Privacy Commissioner. This year's deadline is March 31, 2022.</p> <p>There is no new business to address.</p> <p><b><u>MOTION:</u></b>  <b>Moved by Stephanie Nevins</b>  <b>Seconded by Ian Blain</b></p> <p><b>RESOLVED to move into the in-camera session at 6:54 pm to receive reports on items pursuant to the Board of Director's In-camera policy. Carried.</b></p> <p>The meeting terminated at the completion of the closed session.</p>	



Mike Bastow,  
Interim President and CEO



Don Campbell,  
AHI Joint Board Co-Chair