

**Minutes of the Meeting of the Boards of Directors of the 14 Local Health Integration Networks
operating as Home and Community Care Support Services (HCCSS) Board of Directors
January 5, 2022**

A meeting of the HCCSS Boards of Directors (Board) was held on
January 5, 2022, virtually, beginning at 1:00 pm.

PRESENT:

Voting Members:	Joe Parker, Board Chair Glenna Raymond, Vice-Chair Carol Annett, Member Anne Campbell, Member Eugene Cawthray, Member Michael Dibden, Member Stephan Plourde, Member
Regrets:	None.
Staff in Attendance:	Cynthia Martineau, Chief Executive Officer Barbara Bell, VP, Quality and Risk Lisa Burden, VP, Home and Community Care Karin Dschankilic, VP, Finance and Corporate Services Marla Krakower, VP People Services, Employee Experience & Public Relations Jeffrey Simser, Legal Director, Agencies Legal Karen Ho, Agencies Legal Erica Jeffery, Corporate & Board Relations Manager and Executive Assistant to the CEO
Guests:	Kerby Audet, Cathy Kelly, Jutta Schafler Argao, Debbie Roberts, Karen Taillefer, Tini Le, Claire Ludwig, Karyn Lumsden, Lisa Tweedy, Kimberley Floyd, Brock Hovey, Cindy Ward, Mary Grattan-Gielen, Martina Rozsa, Richlyn Lorimer, Sarah Vertlieb, Beverley Kelly

A. Convening the Meeting

A.1. Call to Order

A quorum was present and the meeting was called to order at 1:01pm.

A.2 Land Acknowledgement

The Board Chair shared a land acknowledgment.

A.3 Approval of the Agenda of January 5, 2022

Certificate of Assurance was added under D.2 and Indigenous Cultural Training was added as Item E.2.

It was moved by Joe Parker/Glenna Raymond

That the agenda of January 5, 2022 be adopted, as amended.

This motion was put to a vote and

CARRIED.

A.4 Conflict of Interest

None declared.

B.1 Patient Story

This month's patient story focused on palliative care supports for a patient and caregiver in the community. The patient's goal was to stay at home as long as possible and the story spoke to what was possible when HCCSS worked with family involvement and other supports in the community. The story also highlighted the patient and family's positive experience with reducing the amount of times a patient and family needs to "tell the same story" to different health care providers. As well, the concept of shared medical records for health care providers was identified as a potential area for improvement.

The Board noted this was a good example of what happens for patients who are already in the home care system. A future patient story focusing on how a patient accesses the home care system from the community would be appreciated.

Action: Staff to work towards a future patient story that focusses on how a patient gets into the home care system from the community.

C. Consent Agenda

C.1 Approval of Consent Agenda

The Board requested that the third quarter of fiscal year 2021-2022 (Q3) Broader Public Sector Accountability Act (BPSAA) Attestation and CEO Reports be pulled for discussion.

The CEO advised the Board of a recent meeting with Agencies Legal and VP of Corporate Services where all items in the Q3 BPSAA Attestation and Declaration of Compliance were reviewed to ensure full understanding of all entries for the 14 HCCSS Agencies across the province. The CEO assured that the Attestations were complete and accurate, and recommended that they be approved by the Board.

A question was raised regarding the composition of the Ontario Health Team (OHT) Steering Committee referenced in the CEO Report. This is an internal committee struck to help respond to multiple requests from OHTs across the province by helping to ensure a consistent approach across all HCCSS organizations. The Committee is comprised of VPs representing Corporate Services, Home and Community Care, Human Resources and Information Technology (IT).

The Board also expressed concerns regarding IT Security and Risk and asked that the planned update for the Board include information about how HCCSS will operate if IT systems are compromised, as well as business continuity assurances. The CEO confirmed an update is being planned for an upcoming Board meeting.

It was moved by Joe Parker/ Michael Dibden

That the Consent Agenda of January 5, 2022 be adopted, as amended.

This motion was put to a vote and

CARRIED.

D. Reports from Committees

D.1 Patient Care, Quality and Risk and Innovation Committee

The Committee Chair provided an update regarding the proposed Balanced Scorecard, HIROC Insurance Coverage, Integrated Risk Management Framework, Quality Improvement Plan, Q2 Agencies Risk Report and Patient Safety Incident Reporting.

A proposed Balanced Scorecard was reviewed by the Committee outlining 22 proposed indicators, several of which are under development. Board members acknowledged the inclusion of two indicators about caregiver distress and indicated an interest in understanding the logic of measuring internal promotions. The Board also felt it was important to have benchmark data included to help determine if results are positive or negative.

It was moved by Eugene Cawthray / Stephan Plourde

That the Board of Directors to each of the 14 HCCSS agencies approve the 2021-22 HCCSS Balanced Scorecard.

This motion was put to a vote and

CARRIED.

A follow up discussion and recommendation came forward regarding HIROC Insurance Coverage including a recommendation to move the 14 agencies to the same premium rate and to move towards one fee for all HCCSS agencies.

It was moved by Michael Dibden / Glenna Raymond

The Board of Directors to each of the 14 HCCSS agencies direct the CEO to increase liability coverage to \$25M across all 14 HCCSS agencies with a maximum cost increase of \$65K. Recommend staff negotiate with HIROC for improved rates, recognizing efficiencies across 14 corporations.

This motion was put to a vote and

CARRIED.

Eugene Cawthray opposed this motion.

The Committee reviewed and endorsed a standardized approach for an Integrated Risk Management Framework across the 14 HCCSS agencies as an associated Integrated Risk Management Policy for Board approval.

It was moved by Joe Parker / Stephan Plourde

That Board of Directors approve the Integrated Risk Management Policy.

This motion was put to a vote and

CARRIED.

A Quality Improvement Plan (QIP), one for all 14 HCCSS agencies, is in development. The QIP is a requirement under the *Excellent Care for All Act, 2010*. The focus for this QIP is wound care.

An overview and update regarding the Q2 Agencies and Appointments (AAD) Risk Report was shared for information.

An overview of Patient Safety and Risk Reporting was shared with the Board. The Committee was supportive of the overall approach proposed by staff which outlined the definition for risk as well as the implementation of a consistent approach for risk reporting across all 14 HCCSS agencies. The Committee proposed that a presentation by a person with expertise about patient safety be coordinated.

D.2 Finance, Audit and Information Committee

The Committee Chair provided updates regarding the Certificate of Assurance, two single source procurements for Board approval, as well as a 2021/22 Budget refresh for approval.

The Committee shared an update regarding the Certificate of Assurance which must be submitted to the Ministry of Health (MOH) by February 18, 2022. This certification attests to internal controls that are in place at each HCCSS agency. Staff have raised concerns with some internal controls due to capacity issues and structural changes that occurred due to the transition of HCCSS staff to Ontario Health in 2021 as well as the cross appointments of VPs and leadership teams across the 14 HCCSS agencies.

The Committee supported moving forward with the submission to MOH on February 18, 2022 with an accompanying cover letter from the Board Chair outlining challenges and concerns.

Staff is continuing to work on the 2022/23 Annual Business plan submission and the alignment of internal and aggregate budgets.

The Committee discussed the procurement of an external auditor for the 14 HCCSS agencies. Ontario Health is managing the procurement process but the evaluation will be completed by HCCSS. Due to an actual or potential conflict of interest, an evaluation team for the procurement comprised of members from the Finance, Audit and Information Committee will meet and a summary of their discussion will be reported to the Board at a special meeting to be convened.

The Committee also reviewed and endorsed a single source procurement for labour relations supports through Bass & Associates, who has provided support over the past several years. The contract had moved over to Ontario Health as part of the July 2021 transfer, but as a result of factors such as continuity and the number of collective bargaining issues, it was recommended the contract be held by HCCSS. Funds for this contract will be transferred back to HCCSS from Ontario Health.

It was moved by Eugene Cawthray / Glenna Raymond

That the Board of Directors to each of the 14 HCCSS agencies approves the single source procurement of the existing labour relations supports with Bass & Associates and collective bargaining contract for a period of two years.

This motion was put to a vote and

CARRIED.

The Committee reviewed and endorsed a single source procurement for employee benefits for Board approval.

It was moved by Eugene Cawthray /Michael Dibden

That the Board of Directors of the North Simcoe Muskoka, South East, Champlain, South West, Erie St. Clair and North West HCCSS agencies approves the single source procurement of the existing employee benefits contracts to end on July 31, 2023.

This motion was put to a vote and

CARRIED.

A recommendation was brought forward regarding the amended operating budget which reflects the receipt of in-year funding letters from MOH.

It was moved by Eugene Cawthray/ Carol Annett

The Finance, Audit and Information Committee recommends to the Board of Directors to each of the 14 HCCSS agencies that the fiscal year 2021/22 operating budget be amended to include the following confirmed Ministry of Health funding:

Date	Purpose	Amount
03-May-2021	Temporary PSS Wage Enhancement	\$30,097,700 (One-Time)
26-Aug-2021	Contract Rate Increases	\$40,051,500 (Base)
3-Sep-2021	Expanding Home Care Services	\$128,373,000 (Base)
24-Sep-2021	Residential Hospice COVID	\$19,254,700 (One-Time)
29-Sep-2021	Temporary PSS Wage Enhancement	\$17,860,200 (One-Time)
28-Oct-2021	Transitional Care	\$11,978,400 (One-Time)
15-Dec-2021	Temporary PSS Wage Enhancement	\$22,821,500 (One-Time)

This motion was put to a vote and

CARRIED.

D.3 Human Resources, Diversity, Equity and Communications Committee

The Committee Chair shared an update regarding the labour relations environment as well as Communications and Engagement for HCCSS.

The labour relations overview is useful context for the Board so they are aware of the 26 bargaining units and collective agreements across the 14 HCCSS Agencies. The Board is required to approve a mandate and then ratification of any collective agreements.

The Communication and Engagement overview was shared. The Board felt comfortable with the focus on internal communications and acknowledged the importance of both internal and external communications.

The Board discussed the notion of proactive communications with patients, caregivers and staff.

A Board member expressed some concern regarding recent communications from service provider organization (SPO) staff to patients and caregivers in the community. The CEO advised that the Vice Presidents (VPs) of Home and Community Care have regular touch points with SPOs and can follow up regarding messaging.

Action: VPs HCC to follow up with SPO leaders regarding messaging to patients and caregivers, including the home first philosophy.

E. New Business

E.1 Caretaker Period

Agencies Legal provided an overview of the caretaker period and reminded Board members of their responsibility to follow caretaker principles, applicable LHIN Conflict of Interest Rules, and maintain neutrality.

E.2 Indigenous Cultural Training

The Board discussed the Indigenous Cultural Training that they are all completing. The sessions have been valuable for Board members. A member reflected that approximately 80% of the participants in their cohort for the Training are direct service providers, as opposed to management or Board members. A question was raised whether a future session might be coordinated at a system or policy level to elevate the discussions regarding service provision.

F. Closed Session

It was moved by Joe Parker / Carol Annett

That the Board move to a closed session to discuss a matters of legal, personnel and public interest at 3:22pm.

This motion was put to a vote and

CARRIED.

G. Adjournment

After moving back to open session at 5:20 pm, it was moved by Joe Parker / Eugene Cawthray

That the meeting be adjourned.

This motion was put to a vote and

CARRIED.

There being no further items, the HCCSS Board Meeting adjourned at 5:20 pm.

Original signed by

March 2, 2022

Joe Parker, Board Chair

Date

Original signed by

March 2, 2022

Cynthia Martineau, Corporate Secretary

Date