

**WATERLOO WELLINGTON BOARD OF DIRECTORS
MINUTES**

April 2016 Public Board Meeting

DATE / TIME	April 27, 2016 4:30 – 6:15 p.m.	LOCATION	Board Room of the Waterloo Wellington CCAC Guelph Office 450 Speedvale Ave., W., Suite 201, Guelph, ON N1H 7G7
CHAIR	Brian Cowan	RECORDER	Helene Ireton
PRESENT	<u>Board Directors</u> Brian Cowan, Chair Janet Huber, Vice Chair Glenn Roach, Treasurer Patricia Kahle, Board Director Carol Hunter, Board Director Kathryn MacDonald, Board Director Susan Mather, Board Director Freeman McEwen Jasmine Urisk, Board Director Erika Wulff Gomez, Board Director		Dale Clement, CEO and Secretary to the Board <u>Staff</u> Andrea Binkle, Senior Director, Partnerships & Performance Rob Forbes, Senior Director, Corporate Services Martina Rozsa, Senior Director, Patient Services Katrina Power, Director, Finance, CFO Danielle Van Duzer, Director, Communications Helene Ireton, Board Liaison Guest: one member of the public
REGRETS	Robert Dowhan, Board Director		

No.	ITEM	COMMENTS	RESPONSIBILITY & FOLLOW-UP
1.00	CALL TO ORDER	The meeting was called to order by the Chair at 4:30 p.m.	
1.10	Declaration of Conflict	Based on the meeting agenda and package received by board directors, no director declared a conflict of interest under Bylaw No. 6.10-16 and Policy V-B-14.	
1.20	Approval of Agenda	It was moved and seconded that the agenda be approved as distributed.	
		Carried.	

No.	ITEM	COMMENTS	RESPONSIBILITY & FOLLOW-UP
1.30	Chair's Remarks	<p>The Chair gave an overview of topics of the meeting.</p> <p>The CEO noted that the CEO Report addresses topical changes only – details of some activities we have been doing, but not reporting on areas where nothing has happened since previous meeting.</p>	
2.00	CONSENT AGENDA		
2.10		<p>It was moved that the consent agenda be received. Carried.</p> <p>The Consent Agenda Included:</p> <ul style="list-style-type: none"> 2.10 Previous Minutes – March 30, 2016 (approved) 2.20 Report of the CEO. 2.30 Governance Policies for Review <ul style="list-style-type: none"> • I-4 Board Goals • II-2 CEO Direction • III-4 Resource Management • V-B-8 Evaluation of Board, Committee and Individual Performance (revision approved) 2.40 Board Compliance with Bylaw Report 2.50 Q4 Governance Dashboard (2015-16) 2.60 Board Education (approved) <p>It was moved that the items on the Consent Agenda, be accepted and approved as presented. Carried.</p>	<p>Rapid Recovery Pilot – explanation was given – e.g., includes patients from restorative care as well as post-surgical.</p> <p>Typo – “orientation” spelled incorrectly in bookmark pertaining to Policy V-B-8.</p>
3.10	PRESENTATION		

No.	ITEM	COMMENTS	RESPONSIBILITY & FOLLOW-UP
	2016-17 Communication Plan	<p>The Board of Directors received a presentation and briefing note introducing the 2016-2017 Communication Plan. It was noted the Plan was developed with the current health care environment in mind and the need to be flexible and adaptable. The focus was on three key areas – media relations (both pro-active and reactive); community care model; and transformation of home and community care. Communication tactics (external and internal) were explained and described.</p> <p>It was mentioned that there have been some blips in number of MPP calls - not large numbers but of interest that some may be reacting to uncertainty by calling their MPPs. CCAC staff is booking MPP visits again.</p> <p>There was discussion about consistent messaging with partners- hospitals, directors of nurses, contracted service providers, community support service agencies. It was noted the CEO and/or Senior Director of Patient Services meet with LHIN staff, physician groups, directors of nursing groups. Also the OACCAC and LHIN Communications Directors sit together. It was noted there isn't anything concrete to share until the legislation comes out but these parties can be the purveyor of the message to reassure and answer questions.</p> <p>Noted: <i>Heroes in the Home</i> will be held on alternate years Staff recognition is planned for the fall this year (Sept)</p>	Re: media releases to the broader community - Wellington Advisor to be added..
4.00	BUSINESS	<i>Ensure Program Quality & Effectiveness</i>	

No.	ITEM	COMMENTS	RESPONSIBILITY & FOLLOW-UP
4.10	Patient Story	<p>As part of its quality focus, the Board of Directors received and reviewed the story of a patient suffering with a complex venous leg ulcer. Implications for the patient and the system had the care not been successful were described.</p> <p>A description of the work of the Wound Care Council that the CCAC was leading was provided – especially the development of clinical multi-disciplinary pathways in sync with best practices.</p> <p>It was noted WWCCAC recognizes wound care as a high priority - with venous leg ulcers in particular a significant problem for a large number of patients. These wounds have major implications to quality of life and significant financial impact on the health care system. WWCCAC established a quality indicator on its performance management framework re: venous leg ulcers to drive and monitor the implementation of evidence-based wound care practices, and assumed the role of regional leader through the Regional Wound Care Network.</p> <p>The CCAC worked with partners in the development of five cross-care-setting wound care type care and continues to implement high impact practices that support the care for patients living with complex wounds.</p> <p>Sustainability of best practices, gaps, specialty oversight by clinical nurse practitioner, etc. was discussed. Description of mechanisms of knowledge transfer to other jurisdictions across the province was discussed – CCAC tapping in to OACCAC and HQO groups and sharing learnings. Also transfer of knowledge achieved through liaisons with hospitals, etc., as part of the continuum of care. CCAC care coordinators and nurse clinicians liaise with primary care physicians and build collaboration.</p>	

No.	ITEM	COMMENTS	RESPONSIBILITY & FOLLOW-UP
4.20	2016-17 Governance Dashboard	<p>The Board of Directors received and reviewed the revised 2016-17 Governance dashboard. It was noted that with the rolling up of the board standing committees into a committee-of-the-whole format, individual Standing Committee indicators and explanatory pages have been removed from the dashboard. The indicators as previously identified will continue to be monitored on behalf of the board as presented in the dashboard.</p> <p>It was moved and seconded that board would adopt the revised 2016-2017 board governance dashboard as presented.</p> <p style="text-align: right;">Carried.</p>	
5.00		<i>Ensure Board Effectiveness</i>	
5.10	Board Work Plan	<p>The Board of Directors received and reviewed a revised board work plan for 2016-2017. This work was done as a result of the decision to roll up the responsibilities of the Board's Standing Committees into a committee of the whole format. It was felt this format would better enable all board directors to stay up-to-date in the present fast-paced change environment relating to the provincial and local restructuring and transformation as well as the significant work on high impact practices. The purpose of the review and process to be followed were outlined.</p> <p>It was moved and seconded that board would adopt the revised 2016-2017 board work plan as presented.</p> <p style="text-align: right;">Carried</p>	
6.00	OTHER ITEMS		
7.00	Meeting Evaluation	Directors were reminded to fill in the meeting evaluations and provide to the Board Liaison – either paper copy or electronic.	

No.	ITEM	COMMENTS	RESPONSIBILITY & FOLLOW-UP
8.00	Conclusion	It was moved and carried that the open board meeting be adjourned at 5:30 p.m., to move to an in-camera session of the Board.	

APPROVAL OF MINUTES

On a motion duly made, seconded and carried unanimously, the above-noted minutes were approved.

Brian Cowan, Chair

Dale Clement, CEO

Date: _____