WATERLOO WELLINGTON BOARD OF DIRECTORS MINUTES

March 2016 Public Board Meeting

DATE/ TIME CHAIR	March 30, 2016 4:30 – 5:30 p.m. Brian Cowan	LOCATION	Board Room of the Waterloo Wellington CCAC Guelph Office, 450 Speedvale Avenue West, Suite 201, Guelph, ON N1H 7G7 Helene Ireton	
PRESENT	Board Directors Brian Cowan, Chair Janet Huber, Vice Chair Glenn Roach, Treasurer Robert Dowhan, Board Director (teleconf.) Patricia Kahle, Board Director Carol Hunter, Board Director Kathryn MacDonald, Board Director Susan Mather, Board Director Jasmine Urisk, Board Director Erika Wulff Gomez, Board Director		Dale Clement, CEO and Secretary to the Board Staff Andrea Binkle, Senior Director, Partnerships & Performance Rob Forbes, Senior Director, Corporate Services Katrina Power, Director, Finance, CFO Kelly Smith, Director, HR and Org Development Helene Ireton, Board Liaison	
REGRETS	Freeman McEwen			

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 that the agenda be approved as distributed. Carried.	

No.	ITEM	COMMENTS	RESPONSIBILITY & FOLLOW-UP
2.00	CONSENT AGENDA	Null	Null
2.10		It was moved that the consent agenda be received. Carried. The Consent Agenda Included: 2.10.0 Previous Minutes – February 24, 2016 – were received. 2.15.0 Report of the CEO was received with some discussion. Coordination of Care Service Delivery Model – it was noted that CCAC is working with contracted service providers as well as broader community health care provider agencies and primary care, LHIN and MOHLTC staff to develop better understanding of the system and process requirements for change.	An overview of the new neighbourhood model with more details about the service provider component will be brought to the next meeting.
		An update was also provided by the Chair regarding the Rural Wellington Health Authority group's action plan that was discussed at a previous meeting. It was noted that with clearer understanding of CCAC's role, the new rural model is being well received by the physicians in North Wellington. Ontario Palliative Care Network was explained further- e.g., used Cancer Care Ontario model to provide consistency and quality.	
		2.30.0 Report of the Quality Committee was received.	
		2.30.1 2016-2017 Quality Dashboard was received.	
		It was moved that the items on the Consent Agenda, be accepted and approved as presented. Carried.	

No.	ITEM	COMMENTS	RESPONSIBILITY & FOLLOW-UP
3.00	BUSINESS	Ensure Program Quality & Effectiveness	
3.10 Employee Engagement Results Presentation	Engagement Results	The Board of Directors received and reviewed a presentation about the Employee Engagement Survey results.	It was noted that staff engagement is on our quality scorecard – will come back to the board on a quarterly basis.
		It was noted the survey results allow for benchmarking within the CCAC sector and that the NRC survey tool is approved by Accreditation Canada.	
		Some context was provided about the environment in which the current survey was conducted affecting both the CCAC sector in general and Waterloo Wellington in particular. It was noted some CCACs had decided not to go forward with the survey at the time, but others, including WWCCAC took the position that the survey was important in order to keep a finger on the pulse of how staff were feeling in the current environment.	
		Some of the themes and patterns that came out of the survey were discussed. There was some discussion about engagement – what it is, how to help staff understand when they are being engaged, work done to build a common understanding of what trust is Continuous Quality Improvement training on engagement on how managers work with front line staff and get back from them the advice needed to help shape the process. Much engagement has been happening and continued hard work is ongoing. Managers are taking survey results to team meetings for further discussions.	
		There was discussion about effects of the high impact practices that were put into practice after the survey was conducted.	
		There was discussion about training for new managers around performance management, absenteeism concepts, and next steps.	
		It was noted that the Quality Committee had reviewed the survey results and pointed out that this survey, along with other data that we receive, allows for provincial comparisons – gives us understanding about where we stand with our peer group and provides a picture of our internal performance relevant to our previous survey. It was also noted there may be specific teams that skew the results and it was noted the data is granular enough to help get the focus needed to remedy the "toxic" team. The Quality Committee Chair noted it is important to take an active interest as a board and senior team as we go through transitional period.	

No.	ITEM	COMMENTS	RESPONSIBILITY & FOLLOW-UP
3.20	French Language Compliance Report	The Board of Directors received and reviewed the annual French Language Compliance Report for 2015-2016 – Year 4 of a five-year French Language compliance plan. It was noted this annual report is required to be submitted with Board approval to the LHIN by April 30, 2016. A new focus on health equity was noted, with some additional questions from the LHIN including questions about how CCAC is addressing health equity and determinants of health, engagement with the Aboriginal community, etc. WW is somewhat diverse, but will work with other more highly diverse communities such as Toronto that have well established health equity plans.	
		It was moved and seconded that the Board of Directors approves the annual French Language Services Compliance Report 2015-16 (Year 4) of a 5-year French Language (FL) compliance plan, due to WWLHIN April 30, 2016.	
		Carried.	
3.30	Accreditation Recommendation	The Board of Directors received and reviewed a report and recommendation to postpone the accreditation survey currently scheduled for November 2017.	
		It was agreed a large amount of resources will be required by the provincial restructuring, including the amalgamation of CCAC and LHIN, as well as, the local re-organization of health services (implementation of the Coordination of Care Model and Geographical Alignment of contracted service providers to the Coordination of Care Model) will require significant resources. Additionally, it was noted time will be needed to adjust and engage under the new entity and new service delivery model.	
		It was noted that generally other CCACs who are already in the accreditation process decided to continue; and those who have not yet started the process are also initiating a postponement request process with Accreditation Canada to delay.	
		It was moved and seconded that the Board of Directors agrees to the postponement of the WWCCAC accreditation on-site survey up to 18 months beyond the currently scheduled November 2017 date. Carried	

No.	ITEM	COMMENTS	RESPONSIBILITY & FOLLOW-UP
4.00	OTHER ITEMS		
	OACCAC Conference	Board directors were advised of the OACCAC Conference and asked who would be interested in attending. Seven board directors expressed interest in attending the OACCAC Conference in June.	Helene will send out the link to the board directors to see the OACCAC Conference. Helene to look at ICD dates and send out dates.
5.00	Meeting Evaluation	Directors were reminded to fill in the meeting evaluations and provide to the Board Liaison – either paper copy or electronic.	
6.00	Conclusion	It was moved and carried that the open board meeting be adjourned at 5:40 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: April 27, 2016