

WATERLOO WELLINGTON BOARD OF DIRECTORS MINUTES OF THE PUBLIC BOARD MEETING

March 22, 2017, from 4:45 - 6:00 p.m.

Board Room of the Waterloo Wellington CCAC Guelph Office,
450 Speedvale Ave., W., Suite 201, Guelph, ON N1H 7G7

Board Chair: Brian Cowan

Recorder: Helene Ireton, Corporate Liaison

PRESENT:

Board Directors

- Brian Cowan, Chair
- Janet Huber, Vice Chair
- Glenn Roach, Treasurer
- Carol Hunter, Board Director
- Patricia Kahle, Board Director
- Kathryn MacDonald, Board Director
- Jasmine Urisk, Board Director
- Dale Clement, CEO and Secretary to the Board

Staff

- Rob Forbes, Senior Director, Corporate Services
- Martina Rozsa, Senior Director, Patient Services
- Helene Ireton, Corporate Liaison

REGRETS:

- Robert Dowhan, Susan Mather, Board Directors

1.00 CALL TO ORDER

Item 1.00 Meeting called to order by Brian Cowan, Chair, at 4:45 p.m.

Item 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.

Item 1.20 Approval of Agenda: **It was moved that the agenda be approved as distributed. Motion carried.**

2.00 CONSENT AGENDA

Item 2.00 Consent Agenda included the following items:

Item 2.10 Previous minutes (January 25, 2017)

Item 2.20 Report of the CEO

Item 2.30 Q3 Governance Dashboard

Item 2.40 Q3 Quality Dashboard

Item 2.50 Report on Implementation of Requirements of the Accessibility for Ontarians Disabilities Act (AODA)

Item 2.60 Annual Ethics Overview

Item 2.70 Revision to Policy IV-4 Asset Protection

It was moved that the items on the Consent Agenda be accepted and approved as amended (AODA Briefing Note). Carried.

Discussion –

It was noted that the Ministry of Health has been keeping the union leaders up to date and because of the nature of the transition – i.e., all staff rolling over into the new organization – there have been no significant flags.

It was noted that there had been no reference to the Board directors' completing the AODA training in the AODA briefing note. A reference to the completion of AODA training by board directors will be added to the briefing note.

It was clarified that the attendance tracking displayed in the Governance Dashboard is in the context of percentage of meetings attended over the full board year; so to the end of Q3, all directors were still tracking towards compliance to the attendance requirement of 75% attendance of all required meetings over the year.

3.00 BUSINESS

Item 3.10 – Patient Story: Patient stories are presented over the board year as an educational component related to the Board's patient safety and quality focus. The March patient story was brought forward to demonstrate the increasing complexity of needs of residents in retirement homes and opportunities to improve how we deliver care to patients with complex needs in the retirement home setting – e.g., coordinated care plans to ensure continuity and communication to the care team. It was reported that about 80% of residents in RHs are receiving CCAC services.

There was discussion to clarify what the term "assisted living" means in relation to different housing types, such as retirement homes vs. subsidized housing, etc., and who is responsible for care in different care settings.

There was interest in how these pieces of the puzzle would transition into the LHIN world, and noted this is patient services, an evolving service

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delivery model - so this will continue beyond transition. There was detailed discussion about the model, with note of the benefits gained.

Item 3.20 – Quality Improvement Plan (QIP) 2017-18: The Board received and reviewed the 2017-2018 Quality Improvement Plan to be submitted to Health Quality Ontario (HQO), by April 1, 2017. The QIP included a written narrative report which gives a high level overview of the plan, a progress report which gives an overview of the previous year's plan (2016-2017) on implementing the activities outlined, and a work/action plan of activities/projects for the upcoming year. It was pointed out that this is a Health Quality Ontario report and the template is an HQO template. It was noted this Plan builds upon the 2016-17 QIP, with changes for this year's QIP noted. Projects and strategic partnerships were referenced.

It was also noted that the LHIN was provided with the draft plan in November 2016, and that upon transfer of the WWCCAC to the WWLHIN, the LHIN will assume responsibility for execution and oversight per Bill 41.

Context was provided to clarify the goal regarding communication of coordinating care plans for new long stay community patients to primary care.

Re-ordering of rankings and terminology on p. 2 of the QIP was suggested and there was discussion and explanation provided about the targets as noted in p. 6; but it was noted CCAC is unable to change the template which is set by HQO.

It was moved and seconded that the Board of Directors approves the 2017-2018 Quality Improvement Plan to be submitted to Health Quality Ontario by April 1 2017. Carried.

The Chair and Vice Chair signed the Quality Improvement Plan to be submitted to Health Quality Ontario.

Item 3.30 – Performance Measurement Framework (PMF) 2017-18: The Board received and reviewed the draft measures for the 2017-18 PMF that were brought forward for approval. It was noted the PMF projects are aligned to the objectives in the 2016-2019 Strategic Plan. Strategic initiatives and PMF projects (with justification and targets) were presented showing how they cascade from The Five Success Factors of the Strategic Plan.

It was moved and seconded that the Board of Directors approves the 2017-2018 Performance Measurement Framework (PMF). Carried.

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Item 3.40 – Transition Update: The Board of Directors received, reviewed and discussed an update from the CEO regarding the CCAC/LHIN transition preparation to achieve operational readiness for Transition Day. Background information about the process and vision was provided, along with an overview of activities that have taken place. It was noted that the Ministry of Health is working with Deloitte, HSSO and the LHINs to determine the transition schedule, and plans to notify all CCACs of their transition day on April 7, 2017. It was reported that all requirements have been met. It was reported the LHIN board has not been fully appointed yet and that is under responsibility of the Ministry and Public Appointments Secretariat process.

It was reported that education sessions focussed on supporting staff and board members through the transition have been provided for management and board directors and, starting tomorrow, to all staff.

Postcards to be given to service provider agencies to prevent mixed messages and confusion about the transition were distributed to the Board.

It was noted that the year-end audit will be approved by the LHIN, not the WWCCAC board, unless the transfer date is later in June.

Board directors talked about their efforts to smooth the transition process, including joint LHIN and CCAC meetings over the past year, noting the most recent meeting on March 20 where they provided the LHIN board with a comprehensive set of governance documents in a manual format, along with the offer of providing the manual to LHIN board directors electronically on memory sticks if they would like them. These are tools that the WWCCAC board uses to provide governance and oversight to the organization, and LHIN directors were invited to approach the CCAC board directors to ask any questions. As well, the LHIN board had been invited to attend CCAC board meetings, although to date, had not done so.

4.00 OTHER ITEMS: No further business was brought forward.

5.00 CONCLUSION: It was moved and carried at 5:15 p.m. that the open board meeting be adjourned at 5:45 p.m., to move to an in-camera session of the Board.

NEXT MEETING: Wednesday, April 26, 2017