

BQWCHC Board of Directors Minutes of November 28, 2019 Belleville Boardroom

PRESENT: Sandie Sidsworth, Brad Harrington, Wendy Osborne, Scott Robertson, Deborah Hierlihy, James Huff,

Kathy Baker, Gerry Watts, Sheila Braidek

REGRETS: Lorrie Heffernan, Dawne Brown, Kim Egan

Recorder: Janine DeVries, Executive Assistant

OPEN MINUTES

ITEMS		ACTION
1	Call to Order AND Confirmation of Quorum	
	The meeting was called to order at 5:30 pm and quorum was confirmed with 8	
	members in attendance.	
2	Conflict of Interest	
	None reported	
3	Approval of Agenda & Agenda Notes	
	Agenda and Agenda Notes for November 28-19 were reviewed.	
	MOTION 2019-11-01	
	MOTION To accept the Agenda for the November 28, 2019 meeting	
	Moved by: S. Robertson	
	Seconded by: W. Osborne	
	All in Favor: Yes	
	Outcome: Carried	
	Discussion/changes noted: Small adjustment to the Agenda: Item 5 Consent Items for	
	approval A-6 and A-7.	
4	Program Presentation – No presentation for November	
7	Program Presentation - No presentation for November	
5	Consent Items	
	Consent Items – Committee Minutes included in meeting package for acceptance:	
	Executive Committee minutes of Nov 8-19	
	Community Advisory Committee minutes of Nov 13-19	
	Governance Committee minutes of Nov 19-19	
	23.2225 30	

MOTION 2019-11-02

MOTION to receive the Consent items as listed above <u>and accept</u> their recommendations.

Moved by: G. Watts Seconded by: S. Robertson

All in favor: Yes
Outcome: Carried

Items pulled from Consent (Committee Minutes) for discussion in Consent Items Arising: none

Consent Items – Board Minutes and General Reports included in meeting package for acceptance (A-6 and A-7):

- Open Board minutes of October 24, 2019
- Governance Policies RE: Signing Authority, Banking & Borrowing, Internal Controls, and Donations

MOTION 2019-11-03

MOTION to approve the Consent items as listed above including the Open Board minutes of October 24, 2019.

Moved by: J. Huff
Seconded by: G. Watts
All in favor: Yes
Outcome: Carried

Items pulled from Consent (Reports) for discussion in Consent Items Arising: none

Board Minutes of Oct. 24-19: Minor spelling correction on page 6 under Generative Discussion: "reminiscent"

6 Consent Items Arising (if necessary)

None

7 N Camera Session

MOTION 2019-11-04

MOTION to Move In Camera Moved by: J. Huff Seconded by: W. Osborne

All in favor: Yes
Outcome: Carried

MOTION 2019-11-06

MOTION to move out of In Camera

Moved by: W. Osborne Seconded by: S. Robertson

All in favor: Yes
Outcome: Carried

8 President's Report

- National Housing day event in Belleville on November 22nd was well attended and very successful
- The CHC and CMHA partnered to offer a workshop called Grief is Complicated this was held on November 23rd and 24th at the CMHA office

MOTION 2019-11-07

MOTION to accept the President's Report as presented

Moved by: D. Hierlihy
Seconded by: G. Watts
All in favor: Yes
Outcome: Carried

9 **Executive Director's Report**

Executive Director's report circulated in the Board package. Topics noted:

- Capital
- Electronic Medical Record (EMR)
- 2020-21 Community Annual Planning Submission (CAPS)
- Military Family Resource Centre (MFRC) re Primary Care
- Health Reform
- Quinte Ontario Health Team (QOHT)
- Trenton Community Health Hub
- 161 Bridge Street Lease
- Funding
- Risk Management
- MD Surplus Reallocation

Supplementary to the written report:

- Capital submission went in on Nov. 18th. Sheila is optimistic that we will hear from the Ministry before the 8 week response time is over
- Electronic Medical Records (EMR) update staff are addressing issues and learning the new tools that adapt and shape the work that we do with respect to our EMR. During this phase, we have reduced client facing activity but should be back to 100% by Jan 6th
- Community Annual Planning Submission (CAPS) planning deadline has been extended to Dec. 13th for all Health Service Providers (HSPs) – we do not expect any major changes
- Trenton Military Family Resource Centre (MFRC) Sheila has met with this group to talk about opportunities for collaboration to provide primary care to military family members Sheila noted that soldiers have access to the military health care services but family members, medically discharged soldiers and veterans are not covered for health care and must seek service elsewhere. What the MRFC is looking for is a transitional primary care service delivery clinic where families of soldiers can access health care. This is a population that is dealing with a lot of trauma and many barriers to care. This is a natural fit for a

CHC and both the CHC and VON are capable of providing these services – the next step is to explore the opportunities to work with the MFRC and VON on a business case for a clinic of this kind that would run off the base. To note - This would be a "net-new" service opportunity with new staffing to support this population/clinic. It was suggested that Sheila reach out to MPP Ellis on this topic/issue for further political and local support

The Board validated their support for Sheila to move forward with this potential integration opportunity

- Health Reform update 2 of the 24 OHTs were announced this day:
 Mississauga and Hamilton. It is expected that Northumberland will be
 announced soon as well. Sheila noted that the local work continues and that a
 QOHT Readiness Assessment will be submitted on Dec. 3rd. There has been a
 slight delay with progress and they have pushed the final invitations for final
 submissions to March. The work involved is extensive and groups are thankful
 for the extra time to ensure they "get it right".
- Bill 124 We have heard from the government that compensations approved for 2021 will be honored
- Gathering of the LHINs the 14 LHIN CEO positions were reduced to 5 and new Regional Leads have been appointed. It is expected that the LHIN functions will be transferred to Ontario Health (OH) by the end of March 2020. With respect to Home and Community Care (HCC), it is suspected that the functions will be transferred to OH and then possibly to the OHTs. We know that Cynthia Martineau has announced that she will be staying on as VP of HCC as well as VP Strategy Planning and Integration.
- MD surplus reallocation situation it is understood that the MOH is addressing
 these requests and that the CHC will be hearing soon on a decision to note,
 NP's (and support staff for NP's) have been included in these requests in the
 past this year however, through the course of conversations, it looks like they
 will support reallocation for NPs but not for support staff going forward.

Belleville Lease - BN included in package

- Our Lease expires May of 2020 (in 6 months) and we have until the end of February to exercise our options to renew
- Other properties in the area that have been looked at include:
 - 250 Sidney St location appealing prospect however the space they are offering us is not conducive to our needs and would require a complete renovation
 - Pinnacle and Station intersection location this is a new build with an anticipated completion in 2020 – this is a good option but the timing is not great as they will not be ready for move in by spring

Advising board that we stay in our current building but that in 5 years we start looking for a new location for the Belleville chc

MOTION 2019-11-08

MOTION to exercise our option to renew our lease at Bridge Street for a five year term.

Moved by: G. Watts

Seconded by: W. Osborne

All in favor: Yes
Outcome: Carried

MOTION 2019-11-09

MOTION to accept the Executive Director's Report as presented.

Moved by: S. Robertson
Seconded by: J. Huff
All in favor: Yes
Outcome: Carried

10 Generative Discussion

Digital Health – The current environment and implications

S. Braidek provided the Board with a fulsome overview of the current environment and implications of digital health

Discussion Highlights:

- Health care agencies must embrace the "big move" to a digital environment
- Traditional health care systems (designed to meet acute care) have to catch up – we are moving to a system that is designed to address chronic needs with a primary care focus
- How will this effect access to care for marginalized population there is a risk that people who do not have these resources will slip through the cracks
- We need to test our assumptions of concerns and see if there are ways to work around the barriers
- Ensuring the implications of sharing health information by email is understood by our population
- How do we ensure our vulnerable population has medical access points such as kiosks available in our communities
- These concerns are being addressed as part of this big conversation to help shape the outcome going forward - the goal is timely, responsive, meaningful health care for all
- MOH is asking OHTs to take leadership on making this happen there are expectations that the OHTs will include these discussions on digital health strategies into their plans going forward
- The digital "playbook" provides idea/concepts of client facing tools that have a standardized integration of platforms with common indicators. This is similar to the concept of integrated communication platforms (all in one applications)
- Having Social Determinants of Health (SDOH) imbedding in the datasets at the beginning will be very important to ensure we are capturing the vulnerable – marginalized populations
- There needs to be discussion around capacity and the need to ensure a collective capacity by the OHTs is achievable – what is achievable within the collective
- The idea is that OHTs will have a shared accountability to ensure the desired outcomes are met

	- Fundamentally, everything that is implemented should fit the important	
	interface between provider and client	
11	Other Business	
	11.1 Board Development	
	Accreditation – November 2019	
	 CHCs have a mandate around addressing health disparities and this is an area that we could do a better job on. That said, we do address most of these areas via general and specific targeted programming. We need to improve how we document / highlight these programs with regards to these set standards. We need to link our data with our intentions and work with the QARM Committee to better our efforts on sharing this information with the Board We Just completed our operational planning with the management team – new outcomes focus on leveraging our vision and improve client and provider experience in terms of working with complex populations – this will help with linking data with our intentions 	
	11.2 Alliance for Healthier Communities 2019 Fall Health System Transformation slides shared with board	
	Gerry shared his update from the Alliance Webinar electronically with the board prior to the meeting. The webinar focused on the 2019 Fall Health System Transformation (as provided)	
12	Next Meeting January 30, 2020 NOTE: No meetings in December	
13	Adjournment	
	Moved to adjourn	
	Moved by: G. Watts	

President	Secretary