Sandy Hill Community Health Centre / Centre de santé communautaire Côte-de-Sable

Board of Directors Meeting
Réunion du conseil d'administration

February 19 février 2025
5:30 – 8:00 p.m. / 17 h 30 – 20 h 30
Virtual Meeting / Réunion virtuelle

Approved Minutes / Procès-verbal approuvé

PRESENT:	Glen Barber – Board Chair; Elizabeth Sanderson – Vice-Chair; Karen Capen – Board Secretary; Hubert Paulmer – Treasurer; Sonia Granzer, Noor Hameed, Nives Ilic, Gaya Jayaraman, Hélène Laperriere, Aynsley Morris, Stéphanie Pelletier, Chantal Rioux, Rodney Stehr, Swapna Stephen – Board Directors
ABSENT WITH REGRETS:	David Clements – Vice Chair Kyle Robinson – Board Director Robin McAndrew – Executive Director
STAFF GUESTS:	Michelle Spencer and Wendy Stewart – Co-Acting Executive Directors Kendra Jones – Director of Quality Improvement and Performance Management Pascale Saturne – Quality Improvement Lead in Primary Care Jessica Menard and Banks Zero – Staff Representatives
OTHER GUESTS:	Monica Armstrong – Director, Ottawa Health Team - Équipe Santé Ottawa Betsy Schuurman – Action Sandy Hill Board President
MINUTES:	Cristina Coiciu – Executive Assistant

The meeting was held virtually via TELUS Business Connect platform.

	ITEM	ACTION
1.	**Verification of Quorum / Vérification du quorum** A quorum was achieved for this meeting. / Le quorum a été atteint pour cette reunion.	**- Glen Barber**
2.	**Declaration of Conflict / Déclaration du conflit d'intérêt** No declaration of conflict was made. / Aucune déclaration de conflit n'a été faite.	**- Glen Barber**
3.	**Approval of Agenda / Adoption de l'ordre du jour** *It was moved by Aynsley M. and seconded by Karen C. to approve the agenda as presented. / Il a été proposé par Aynsley M. et appuyé par Karen C. d'approuver l'ordre du jour tel que présentée.* **ALL IN FAVOUR – CARRIED / TOUS EN FAVEUR ET LA MOTION EST ADOPTÉE**	**- Glen Barber**

4.	**Presentation on the OHT-ÉSO Model and Priorities / Présentation sur le modèle et les priorités de l'OHT-ÉSO** **- Monica Armstrong** Ms. Monica Armstrong, Director with Ottawa Health Team - Équipe Santé Ottawa (OHT-ÉSO) offered a comprehensive overview of the Ontario Health Teams (OHTs) model, its objectives, structure, and ongoing efforts to improve healthcare delivery in Ontario. Here are some of the key points covered: - Introduction to Ontario Health Teams (OHTs): o The OHT model was developed by the Ministry of Health in 2019, with input from various governing bodies, including the Ontario Medical Association and OntarioMD. o Ottawa Health Team - Équipe Santé Ottawa (OHT-ÉSO) is one of the first OHTs created in 2029, it is the 5th largest in the province, and collaborates with neighboring OHTs. o Objectives and focus areas have quintuple aim: improving population health, patient and caregiver experience, work life of service providers, value of healthcare, and health equity. o Integrated care: collaboration with various health providers, including primary care, mental health, addiction services, and long-term care. - Structure and governance: o Guiding tables: includes a client partner table, collaborative leadership group, and a primary care network. o Partner organizations: over 70 partner organizations working together on various initiatives. - Data and performance measurement: o Access to data: utilizes data from different organizations to guide initiatives and measure performance. o Priority areas: focus on integrated care, health equity, digital health, and performance measurement. - Primary Care Networks: o Primary Care Network guidance: released in January 2024, focusing on improving access and attachment to primary care. o Clinical priorities: improving access and attachment, integrated chronic disease management, and local priorities. - Challenges and future directions: o Attachment model: efforts to attach patients to primary care providers within their communities. o Sustainability: addressing administrative burdens and ensuring access to necessary services for healthcare providers. The presentation was followed by a Q&A period, and Ms. Armstrong emphasized the importance of community collaboration, strategic planning and advocacy to advance the goals of the OHT model.
5.	**Action Sandy Hill – Introduction and Current Priorities / Action Côte-de-Sable – Introduction et priorités actuelles** **- Betsy Schuurman** The Board President of Action Sandy Hill (ASH), Ms. Betsy Schuurman, offered an overview of the community association and their current priorities. Here are some of the key points covered: - ASH was founded by community members to address changes in the community, such as the influx of students and development projects. - ASH is a not-for-profit membership organization with about 200 members who pay an annual fee of $8. Membership is open to Sandy Hill residents and businesses. - Sandy Hill includes the University of Ottawa and extends to the Rideau Canal. - ASH works through committees, hosts events, and liaises with the government and community partners. They also respond to community requests and complaints. - The Board of Directors consists of 12 members who chair various committees. The Board is elected by the members at the Annual General Meeting (AGM). - Key committees include Community and Social Services, Environment, Membership and Outreach, Heritage, and Town and Gown.

- ASH hosts volunteer-led events such as the Winter Carnival, AGM, Eco Fair, community garage sales, and craft fairs. They also maintain a skating rink in the winter.

New initiatives:
- Focus on increasing outreach and engagement with the community through socials, discussion groups, and forums.
- ASH is open to partnering with other organizations for events and initiatives.

Committee priorities:
- By-law: Sandy Hill has a specific by-law related to issues like garbage and noise.
- Community and Social Services: focuses on housing and social services policies.
- Environment: engages in hands-on projects like removing invasive species and planting native species.
- Membership and outreach: aims to expand membership and manage social media.
- Heritage: focuses on preserving the historical aspects of Sandy Hill.
- Town and Gown: liaises with the University of Ottawa.

Communications:
- Newsletter: ASH publishes a popular monthly newsletter.
- Social media: active on various social media platforms.
- Image newspaper: a separate editorial Board publishes a newspaper for Sandy Hill.

The presentation was followed by a Q&A period about the relationship between ASH and SHCHC. Here are some of the key points covered:
- Community perception: the health centre is primarily associated with the Consumption and Treatment Services (CTS), despite CTS being a small part of its operations.
- Primary care services: limited availability of primary care services for new residents, leading to a lack of awareness about the health centre's broader offerings.
- ASH Board is focused on representing the diversity of Sandy Hill and engaging with the community through various sessions and outreach efforts.
- There is a need for better communication about SHCHC's programs and services that are open to the public. Suggestions include updating the website and promoting available programs through ASH.
- ASH is working on increasing outreach and engagement with the community through events and partnerships. There is a suggestion to create a Google group or mailing list for community partners to share information and coordinate efforts.
- Engaging the business community in Sandy Hill to address their issues and involve them in community activities.
- There was a discussion about the effectiveness of the Community Liaison Committee and the need for clear goals and consistent communication. The possibility of integrating the committee's work into ASH's existing structure was mentioned.
- There is interest in promoting SHCHC's programs that are open to the public, such as smoking cessation, fall prevention for seniors, and other health promotion activities.
- Both ASH and SHCHC are committed to maintaining open dialogue and collaboration to address community needs and concerns.
- SHCHC’s Board members are encouraged to participate in community activities and events to foster a stronger connection with the community.

6. **Program Presentation on Quality Improvement - Kendra Jones/Pascal Saturne**
Présentation du programme sur l'amélioration de la qualité

Kendra Jones and Pascal Saturne offered a presentation on the draft Quality Improvement Plan (QIP) for 2025-2026. Here are some of the key points covered:

- Board's role includes providing feedback and approving the QIP priorities, which are developed by the Senior Leadership Team, based on guidance from Ontario Health, and input from employees.
- The QIP is required by the Excellent Care for All Act and the terms of accountability agreements. It supports improvement and demonstrates the organization's commitment to learning and improving.
- Documents Included in the QIP:
    - Progress report: a report on the previous year's QIP.
    - Narrative: describes ongoing work in areas such as administrative burden, equity, and client safety.
    - Workplan: outlines the focus areas for the upcoming year.
- Last year, 2024-2025, QIP's focus was:
    - The primary focus was on improving the collection of socio-demographic data to better understand client needs and address disparities.
    - The initiative brought together three teams (Health Services, Oasis and Central Reception) to work collectively on the project.
    - The completion rate improved from 44% to 49%, with a target of 65% by January 2026.
- Key learnings and challenges from last year:
    - Reception staff now better understand their role in the data collection process and can explain its importance to clients.
    - The project fostered collaboration and encouraged the sharing of ideas and testing of changes.
    - There is a need for a standardized yet flexible approach to data collection across different reception areas.
    - Limited staff capacity has been a challenge, highlighting the importance of testing new strategies for sustainability.
- 2025-2026 QIP priorities:
    - Completion of socio-demographic data collection: aim to achieve a 65% completion rate.
    - Equity, Diversity, and Inclusion (EDI) training: focus on completing EDI and anti-racism training for relevant leadership, employees, and Board Directors, with a target of 75% completion.
    - Reducing no-show rates: aim to decrease no-show rates from 11% to 8% by implementing appointment reminders, improving phone access, and reviewing no-show policies.

Kendra Jones continued with a presentation of the Q3 Performance and Accountability Reports:

- M-SAA report: reports on clinical best practice indicators and financial indicators. The report includes targets set by Ontario Health and performance trends.
- CAT report: projects performance for Q4 based on current performance and compares it to targets set by Ontario Health. It highlights areas where performance is above or below the target by more than 10%.

In the final part of the presentation, Kendra Jones addressed a question about why Ontario Health hasn't made the adjustments that SHCHC would like to see.

- Wendy Stewart mentioned that the targets set by Ontario Health have been in place for a long time and are based on how data was historically measured. These targets have known flaws and may not reflect the current reality of the complexity of clients being seen. She suggested that there are opportunities to challenge these targets, especially given the relationship with OHT-ÉSO. The Centre is already taking deeper dives into the data to help shift some of the ideology behind these targets.

The Board Chair thanked Kendra and Pascal for their efficient presentation and for covering a great deal of information in a short period of time.

7.	**Presentation/Refresher: How to Interpret Financial Reports / Présentation/Rappel : Comment interpréter les rapports financiers** **- Michelle Spencer** Michelle Spencer provided a comprehensive overview of how to read financial statements and the current financial status of the center. Here are the key points covered: - Understanding financial statements: o Board responsibilities: ▪ Ensuring adequate financial support and appropriate allocation of funds. ▪ Meeting all legal financial requirements and adhering to policies. o Fiduciary duty: a legal obligation to act in the best interests of another party, typically involving the care of money or property. - Purpose of financial statements: o Required by the Canada Not-for-Profit Corporations Act (CNCA), funders, and the Canada Revenue Agency (CRA). o Inform members, funders, donors and service users about how funds are being spent. - Components of financial statements: o Auditor's opinion: validity and completeness of the statements. o Statement of financial position: snapshot of assets and liabilities at a specific point in time. o Statement of operations: summary of revenue and expenses. o Statement of net assets: balances of various funds. o Statement of cash flows: changes in cash position throughout the year. o Schedule of funds repayable to funders: funds that need to be returned to funders. o Notes to financial statements: additional information and narrative. The second part of the presentation focused on the details of the Q3 financial report: - Breakdown by funder - Surplus and deficit: detailed breakdown of surpluses and deficits in various funding buckets o A small overall surplus of $7,268, with specific surpluses in certain areas like the City of Ottawa funded programs. o Expected deficit in CHC operations due to unfunded compensation increases. - MD protected funds: efforts to use surplus funds before the end of the fiscal year. - Management monitors reports monthly to ensure financial health and address any issues. In conclusion, the Board Treasurer indicated that the Centre is in good financial health, with plans in place to address any deficits and ensure balanced operations. At the moment, there are no significant risks or issues that the Board needs to be concerned about.
8.	**Consent Agenda / Résolutions en bloc** **- Glen Barber** The Consent Agenda included the following items: - Item 8.1 Approval of Minutes of the Meeting on January 15, 2025 / Approbation du procès-verbal de la réunion du 15 janvier 2025 : *To approve the draft minutes of the meeting on January 15, 2025, as presented. / Approuver le projet de procès-verbal de la réunion du 15 janvier 2025, tel que présenté.* - Item 8.2 Quality Improvement Plan (QIP) 2025-2026 – BRF25-009-B / Le plan d'amélioration de la qualité (PAQ) pour 2025-2026 : *To approve the submission of the QIP for 2025-2026, as recommended. / Approuver le PAQ pour 2025-2026, tel que recommandé.* - Item 8.3 FY2024-2025 Q3 Financial Results / Résultats financiers du troisième trimestre de l'exercice 2024-2025 – BRF25-006-B: *That the Board accepts the financial results for the third quarter, as presented. / Que le conseil d'administration accepte les résultats financiers du troisième trimestre, tels que présentés.* - Item 8.4 Quality and Performance Committee (QPC) Terms of Reference Review / Examen du mandat du Comité de la qualité et de la performance (CQP) : *To approve the reviewed and revised terms of reference, as presented. / Approuver le mandat révisé, tel que présenté.*

- Item 8.5 Board Policies Review / Examen des politiques du conseil – *To approve the following reviewed and revised policies and procedures, as presented / Approuver les suivantes politiques et procédures révisées, telles que présentées :*
    - *Violence and Harassment Policy – annual review / Politique sur la violence et le harcèlement – examen annuel*
    - *Advocacy Policy / Politique de plaidoyer*
    - *Consent Agenda Policy / Politique relative aux résolutions en bloc*
    - *Social Media Policy / Politique relative aux médias sociaux*
    - *Reporting Requirements Policy / Politique relative aux exigences en matière de rapports*

It was moved by Gaya J. and seconded by Chantal R. to approve the Consent Agenda, as presented. / Il a été proposé par Gaya J. et appuyé par Chantal R. d'approuver les résolutions en bloc, tel que présentées.

ALL IN FAVOUR – CARRIED / TOUS EN FAVEUR ET LA MOTION EST ADOPTÉE

9. Board Committees Reports / Rapports des comités du conseil

9.1 Nominations and Governance Committee (NGC) / Comité des nominations et de la gouvernance (CNG) **- Karen Capen**

The Board Secretary offered the following updates:

- The team is busy with accreditation-related reviews and comparing notes from recent meetings.
- Discussion about the Board's self-evaluation survey, which is required every second year by policy. There's a plan to schedule an informal evaluation assessment discussion at a future Board meeting.
- Upcoming meetings:
    - March 5th: routine NGC meeting at noon (virtual).
    - March 12th: likely the last accreditation review meeting at noon (in-person or virtual).
- Membership applications: there has been a recent uptake in membership applications, including some from community stakeholders who have previously voiced opposition. The next committee meeting will review the membership process and applications to ensure fairness and transparency. Michelle Spencer, in her role as Co-Acting ED, has reached out to legal counsel for suggestions regarding the membership process.

9.2 Audit and Finance Committee (AFC) / Comité d'audit et des finances (CAF) **- Hubert Paulmer**

In meeting report.

9.3 Quality and Performance Committee (QPC) / Comité de la qualité et de la performance (CQP) **- Glen Barber**

In meeting report.

9.4 Emerging Issues Committee (EIC) / Comité des questions émergentes (CIE) **- Elizabeth Sanderson**

Vice-Chair Elizabeth S. offered the following updates:

- The constitutional challenge: The court accepted the group's intervener status along with eight others. The hearing is scheduled for February 24th and 25th. The applicants are seeking an injunction to prevent the legislation from taking effect before the end of March.
- The intervener group is known as the Harm Reduction Services Provider Coalition.
- Three affidavits were provided by community members in support of the application.

	- Stakeholder engagement: the presentation by ASH Board President was well-received. The EIC is considering engaging with other stakeholders like Ottawa Public Health and police services.
10.	**Executive Director's Report / Rapport de la directrice générale - Michelle Spencer** Michelle Spencer offered additional updates, which were not previously included in the written report: - CTS exemption certification: the application was submitted, but the Exemption Office was requesting additional information, mostly around operating hours and stakeholder relations. Michelle has requested an extension for submitting the required information due to her upcoming vacation. - Michelle mentioned that the initial vibe from Health Canada was positive, but recent questions and the tight timeline are causing some concern. The final decision is expected by April 30th. - Elizabeth reminded Michelle about the 2011 Supreme Court of Canada case that deemed it unconstitutional to remove harm reduction options for people with physical disabilities, which could be a strong precedent in their favor.
11.	**Information Items** **11.1 Board Workplan Update / Mise à jour sur le plan de travail du conseil - Glen Barber** The Board Chair indicated that the activities included in the workplan were on track and/or completed. **11. 2 Compensation Advocacy Update – for reading/information /** **Mise à jour sur la défense des droits en matière d'indemnisation – pour lecture/information** Briefing note to provide an update on the compensation advocacy work that is being undertaken by a subcommittee of Board Directors from across the 6 Ottawa CHCs, the ED group and the Alliance.

Adjournment: 8:00 p.m.

NEXT MEETING – March 19, 2025