



## Minutes

Family Council Meeting  
September 17, 2018 6:00pm-8:00pm  
CMHA Waterloo

Present: Wanda, Teresa, Sonya, Angela H., Holly, Katrina, Barb, Susan, Kate, Linda, Jayne, Eva

Regrets: Helen, Angela S. , Lynne

Recorder: Holly

<b>Agenda item discussed:</b>	<b>Action Item (including responsible person):</b>
1. Welcomes and Introductions	
2. Approval of agenda	
3. Approval of minutes – Wanda & Teresa	
4. Systems/Processes – Heather Eddy, Senior Director, People, Culture and Quality <ul style="list-style-type: none"><li>• How things work, how funds are allocated, decision making processes, how things work behind the scenes at a mental health organization.</li><li>• Portfolio: HR, Health information management, risk, privacy, quality, communications</li><li>• 2012-13 \$27Million; 2018-19 \$42 million (55% increase in revenue)</li><li>• Greatest funding from WW Local Health Integration Network (59%); MCYS/MCSS (25%)</li><li>• Over 30% growth in staff over the past 6 years</li><li>• CMHA WW – over 400 staff = 350 front line staff, 35 management, 22 non-union (physicians, psychiatrists)</li><li>• WWLHIN (Ministry of Health) – increasingly more prescriptive</li><li>• MCYS/MCSS – Moving on Mental Health (Lead Agency – CMHA)</li></ul>	

<p>in Guelph Wellington, Lutherwood in Waterloo)</p> <ul style="list-style-type: none"> <li>• Family council – provides experience, quality, provides feedback on how services were delivered, innovative solutions – getting the information to the decision making group to make changes (through Helen)</li> <li>• Increased fundraising will provide CMHA with the ability to be flexible with their funding</li> <li>• Questions for Heather: <ul style="list-style-type: none"> <li>○ Does CMHA advocate for people going into the mental health profession (psychiatrists)?</li> <li>○ How can we get more publically funded mental health providers?</li> <li>○ Greater need for continuity amongst service providers at CMHA (difficult when there are “student” or “residents” working at CMHA)</li> <li>○ It would be good to have mandatory training for nurses to take mental health training</li> <li>○ Where is mental health research taking place? CMHA’s mandate isn’t really research.</li> <li>○ How does CMHA allocate their funding dollars? Past history, general services required by the community, regional programs (early psychosis program, eating disorders team)</li> </ul> </li> <li>• It might be a good idea to have Anna come to the Family Council to speak about privacy</li> <li>• CMHA brings in approx. 50 students a year to support their education and training</li> <li>• Recently recruited 2 new psychiatrists for CMHA (one for children’s psychiatry)</li> <li>• It might be a good idea to bring someone into speak to the family council about advocacy and enacting change.</li> <li>• CMHA delivers over 150 different programs from the funding provided.</li> </ul>	
<p>5. Experience mapping exercise</p>	<p>Angela to record all “stickies” and provide summary to the</p>

<ul style="list-style-type: none"> <li>• Angela S. is going to come do the family engagement training in the future</li> <li>• November &amp; January – the counsel will start making suggestions and proposed ideas for goals</li> </ul> <p><b>AFTER CARE</b></p> <p>Successes:</p> <ul style="list-style-type: none"> <li>• CMHA connections with other agencies (to another city, or program)</li> <li>• Safetalk session helpful</li> </ul> <p>Challenges:</p> <ul style="list-style-type: none"> <li>• No follow-up after program completion and no plan</li> <li>• More holistic approach</li> <li>• Need for “tune-up” and “check-in” afterwards</li> <li>• Back at square one – ER if in crisis again</li> <li>• Wait times</li> <li>• Care giver burnout</li> </ul>	<p>group</p>