

CMHA WW Board of Directors

David Pell, Board Vice-President

Donnamarie Dunk, Board Member Katharina Markowiak, Board Member

Chelsea Woolley, Young Professional on Board

Andrew Best, Board Member

Stacey Rous, Board Member

Meeting Minutes October 30, 2019, 6:00 – 8:00 pm 80 Waterloo Ave, Room 206

Present: Mary Kriksic, President

Anthony DiCaita, Secretary-Treasurer Lynda Davenport, Board Member Dana Hardy, Board Member Julie Nicholls, Board Member

Irene Thompson, Board Member

Helen Fishburn, Executive Director

Alison DeMuy, Director, Strategy and Community Engagement

Barbara Farrell, Acting Director, Finance

Heather Eddy, Director, People & Culture

Recorder: Heather Snider, Senior Executive Assistant

Agenda Item	Discussion and Actions
Board Orientation – Resources	Barbara Farrell and Heather Eddy provided orientation on CMHA WW Finances, People and Culture.
Welcome & Call to Order	
Declarations of Conflict	Julie Nicholls declared a conflict re: voting on OHT motions.
1.0 Approval of Consent Agenda	ACTION: Heather Snider will review the September minutes for legal names.
	ACTION: The Board deferred approval of the September Financial Statements to the November Board meeting.
	It was duly MOVED and SECONDED that the consent agenda be approved (Stacey Rous, Andrew Best). CARRIED .
2.0 PQRE Committee Report	Meaghan Raeburn, Clinical Pharmacy Lead, presented a Medication Reconciliation Audit at the Committee meeting, and will share this in detail at early 2019-20 Board orientation.
	The Committee reviewed and approved the Medical Cannabis policy. CMHA WW remains judgement-free re: cannabis use but does not recommend it as a treatment at this time. We will track and review this policy every six months as new research becomes available.
	It was duly MOVED and SECONDED that the Medical Cannabis policy be reviewed every six months and that the policy be approved. (Katharina Markowiak, Dana Hardy). CARRIED.
	The Committee was presented with a recent Quality of Care (QCC) review. The recommendations made from the review will be carried out. Our QCC process has been reviewed by lawyers. A previous QCC re: Clozaril dispensation disruption has been resolved.
	It was duly MOVED and SECONDED that PQRE Committee report be received. (Irene Thompson, Dana Hardy). CARRIED.

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3.0 System Transformation Update	
3.1 Q&A	A Cambridge Governance session is scheduled in November; Board members can attend if they wish. Ministry of Health OHT Site Team representatives are visiting Cambridge and Guelph on November 1 to review the key deliverables outlined in the applications.
	KW4 OHT work is progressing. This region does not have a large Family Health Team. Joe Lee (Centre for Family Medicine) is leading the process on behalf of primary care providers.
	The Board provided positive feedback about the Oct 26 Board Retreat and Anne Corbett's session on OHT governance. Julie Nicholls clarified the definition of bundled care, as this was discussed at the retreat.
3.2 Rural Wellington Expression of Interest/Self Assessment	Rural Wellington OHT has completed an Expression of Interest, which must be submitted prior to the full submission.
	The two priority populations (COPD, congestive heart failure) were chosen due to data re: hallway medicine in the three hospitals in that area. CMHA WW has a very strong commitment to Here4Hope in Rural Wellington and Helen chairs the Rural Wellington Mental Health & Addictions table, which is likely why MH&A was not identified.
	It was duly MOVED and SECONDED that Board approve, in principle, the Expression of Interest/Self Assessment (Lynda Davenport, Andrew Best). CARRIED.
4.0 Ethics Committee Recommendations	The Ethics Committee meets monthly and comprises approximately 25 front-line staff/leadership and staff from all services areas. Service teams, front-line staff and leadership submit issues for consideration.
	We held an Ethics Forum on September 30. Approximately 75 staff, including physicians, attended. Information gathered at the forum was reviewed by the Ethics Committee, and recommendations were formulated. These recommendations went to the Senior Leadership Team and will be presented to the Board.
	Physician compensation for "Did Not Attend (DNA)" appointments
	The Board reviewed the briefing note and discussed the two recommendations proposed.
	SLT and the Ethics Committee are proposing Option #1: Create a fair and reasonable proactive Medical Staff DNA/Cancellation policy through a quality improvement initiative that takes into consideration the issues raised at the Ethics Forum that is fair to all stakeholders (clients/families, medical staff, community stakeholders).
	The Board discussed this recommendation:
	 Our no-show rate is 7-10%. Physicians are not compensated for DNAs. The current fee structure covers face-to-face billable time (billed to OHIP), and the sessional structure covers non face-to-face billable time. CMHA WW pays all physician overhead.
	Potential that not paying for no-shows would affect retention or recruitment. Page 2 of 4



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	 No-shows can result in clients remaining on waitlists for a longer time. Systemizing automated reminders raises potential concerns with our population due to risk issues with our clients.
	It was duly MOVED and SECONDED that Board approve the Ethics Committee Recommendations (Katharina Markowiak, Julie Nicholls). CARRIED .
	ACTION: Helen will notify the physicians of the Board approval of Ethics Committee recommendations, and then will notify all staff.
	ACTION: We will follow up on this recommendation as a quality-improvement initiative. This issue will also be followed by the PQRE Committee.
	ACTION: Helen will provide information re: estimated cost of DNAs to the Board.
	ACTION: We will present recommendations on the fundraising ethical issue at the January Board meeting.
5.0 New Building Update	We hired Project Managers Tom Ingersoll and Mike Slivinski (Ingersoll & Associates). They are working closely with Robert Eilers (Developer, Vesterra Inc.), Name Hejri (Space Planner, Elemental) and CMHA WW staff.
	Helen sent a letter to Guelph Mayor Cam Guthrie and Guelph City Council requesting the development costs be waived. Mayor Guthrie requested clarification re: building ownership. Helen discussed possible CMHA WW ownership of the building over the course of the lease with Robert Eilers and sent a revised letter to City Council.
	Helen and Robert will present at a City Council Public Delegation on Nov 27. Board members are welcome to attend but are not allowed to participate in Helen's presentation.
	Discussion re: exploring the possibility of building ownership over the course of the lease. Note that there was no option to purchase the building at the time of negotiating the lease. We need to ensure all parties involved have a good understanding of CMHA WW and Robert's intentions.
	It was duly MOVED and SECONDED that the Board directs the Executive Director to explore options with the City of Guelph re: the possible waiving of development fees as it relates to various arrangements that may result in CMHA WW ownership of the building at 737 Woolwich St. (Andrew Best, David Pell). CARRIED.
6.0 Pay Equity Update	It was duly MOVED and SECONDED that the Board move in camera (Stacey Rous/Lynda Davenport). CARRIED .
	It was duly MOVED and SECONDED THAT the Board move out of camera (Katharina Markowiak, Julie Nicholl). CARRIED .
7.0 Engagement Framework & Strategy	Alison gave an overview of the CMHA WW engagement strategy. The goal is to build an engagement framework and a culture of engagement over the coming months. A core team has been created, which is interdisciplinary and representative of the organization. Team members were nominated by Leadership. This fits well with the CMHA WW value of empathy-based, human-centered design.



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	It was duly MOVED and SECONDED that the Board approve the 2019-20 Engagement Plan (Stacey Rous, Andrew Best). CARRIED .
8.0 Show Your Sole	Alison reviewed the key components of the Show Your Sole campaign. Interested organizations can:
	 purchase employee mental health training, delivered by our Promotions & Engagement Team purchase a communication package to help promote employee engagement
	donate to the campaign
Adjournment	It was duly MOVED and SECONDED THAT the meeting be adjourned. CARRIED.