

**WINDSOR ESSEX COMMUNITY HEALTH CENTRE (WECHC)**

**BOARD OF DIRECTORS MEETING MINUTES**

**Wednesday September 27<sup>th</sup> from 5:30 – 8:00 pm**

**Teen Health Site – 1361 Ouellette Ave., Windsor**

*Teleconferencing is available upon request*

*Teleconference: dial 1-866-213-1666 Conference ID 7764169*

**Present:** Angie Deneweth (Secretary), Robert Fetherston, Kathryn Hengl (President), William McClounie (by teleconference), John Mowat (Vice President)

**Regrets:** Elaine Clark (Treasurer) Toni Scislowski

**Staff:** Hardeep Sadra, Executive Director, Patrick Brown, Director Corporate Services, Judy Ellis, Director Clinical Services Sandwich, Beth Kinnaird-Iler, Director Clinical Practice Teen Health/Street Health, Line Lauzon, Clinical Director Chronic Diseases, Kevin Webb, Director Clinical Practice Leamington/Pickwick, Lynn Thomson, Executive Assistant, Recorder

Quorum was achieved. Five (5) of seven (7) members were present.

- K. Hengl called the meeting to order at 5:45 p.m. and asked members to identify any conflict of interests at this time. None were declared.
- Introduction of two new members of the WECHC Leadership Team – Line Lauzon, Clinical Director, Kevin Webb, Director Clinical Practice.
- There were no requests made to "unstar" any items therefore the 'starred' (\*) items were deemed approved or received.

\* **Approval of the September 27, 2016 Agenda as presented.**

\* **Approval of the June 28, 2016 Board Meeting Minutes as circulated.**

**Directors' Presentation on Programs & Services**

- H. Sadra, Executive Director: Power point presentation on the Client Satisfaction Survey Results - 3 year over year comparison (2013-16) was deferred to November 2016 board meeting due to time constraints.

**President's Report:** K. Hengl

- **Community Health Foundation of Windsor Essex AGM:** K. Hengl attended the 3<sup>rd</sup> Annual CHF of WE AGM on September 7, 2016. Minutes and financial statements were circulated in the agenda package. The Board was reminded they are members of the Foundation and the expectation is attendance at the AGM or sending a proxy if unable to attend. On this occasion, the 10 day notice period for the AGM was not provided. The intent of the Foundation is to raise funds for capital projects. The Foundation Board is now at full membership.
- **LHIN Governance Advisory Committee (GAC) Dinner:** K. Hengl and J. Mowat attended the GAC dinner and meeting on September 22, 2016. There were approximately twenty organizations represented by Chairs, Vice Chairs or Board Members. The purpose of the meeting was to discuss and clarify the purpose of the sub LHINs. The LHIN will identify planning areas (sub LHINs) within the LHIN as a means to improve health system planning, coordination, and evaluation to ensure that the residents improve their health status. Work will be done with the input of residents, patients, and health care providers to ensure that the system is responsive to the unique local communities within Erie St. Clair (ESC). While ESC residents can continue to receive health care wherever they need it, focusing on smaller areas to plan health service will improve delivery as the region is large, diverse, and a mix of urban and rural areas. At the GAC it was shared that there will be 4-5 sub LHINs in the Windsor area.

➤ **Professional Development Opportunities:**

- **Media Training:** H. Sadra spoke with St. Clair College regarding the Board attending a media training session (2-3 hours). The Leadership Team attending this recently. Consensus was training to take place in February. The Foundation Board Members will be invited to attend.
- **Low Speaking German Culture Presentation:** This will be done during a full Board Meeting. There is a representative from the Central Mennonite Community and a Pastor from a church in Leamington who could provide the presentation.  
**Recommendation:** To hold a Board Meeting in the Spring in Leamington area and invite a representative to provide the presentation. Agreed.

**Professional Development Planned:**

- Cultural Competency Workshop Part 3 will take place October 25, 2016 at 5:30 (Teen Health Board Room). This was rescheduled from May 17, 2016.

**AOHC Liaison:** Deferred until next meeting due to T. Scislowski's absence.

**Executive Director's Report:** H. Sadra

- **Community Health Foundation of Windsor Essex Update (CHF of WE):** L. Thomson is now administratively supporting the Foundation. There are 3 sub committees set up (Fund Management/Investment, Disbursement and Marketing). Under CRA guidelines disbursements are required to be paid to WECHC based on a percentage of the investment income. Capital needs are being prioritized for review at the Disbursement Committee on October 5. A more structured schedule for meetings is in place and policies are being developed. The foundation board members are dedicated to WECHC.
- **French Language Service Report:** In place due to an agreement with LHIN. This forms part of the QUR Work Plan. A yearly a report is required to be submitted and signed off by the Board President. Updates are located in QUR Minutes.
- **LHIN Presentation at LHIN Board:** H. Sadra presented Leamington and LAMB services at the Board today. Positive feedback was received about the presentation. The meetings are also offered as a live webcast. In future, the Board will be notified if WECHC will present to provide an opportunity to view the webcast.
- **Leamington Open House:** Formal Open House takes place tomorrow in Leamington. The LHIN will make the funding announcement. J. Mowat will open the meeting. Speakers include Ralph Ganter and Martin Girash from LHIN. H. Sadra will make closing remarks.
- **WECHC Strategic & Implementation Plan (updated September 2016):** Included in agenda package. Reviewed and updates were provided.  
Program and Services highlights included: Extended hours at Street Health, extended dental program at Street Health, the much needed psychiatry support at SCH and Street Health on a bi-weekly basis is working very well, new Insulin Pump Program at Diabetes Wellness will provide after hour support for clients (funding received from LHIN for new positions to support this program due to hospital cutting services) and work is ongoing transitioning teen diabetic clients to adult services at Diabetes Wellness. Back office support started at Chatham Kent Health Alliance (CKHA and CMHA) in August 2016 on a one year contract. An MOU is pending with Hospice for back office support.  
The Governance Committee of the board had requested H.Sadra share her vision of WECHC. In summary, to build on what has been established over the last three years during G. Bartlett's tenure. Recommendations to adjust the Strat Plan take into account the gains made over the last three years, our current MSA, the pending Patients First Legislation and the ESC LHIN IHSP4. The adjusted Strat Plan is enclosed with the minutes.
- **Bill 210 – Patient's First Act:** The new legislation, behind the sub LHIN work, passed first reading in June. No further progress to date. Engagement sessions and surveys are ongoing. This will be a standing agenda item for future meetings. Any updates regarding Bill 210 will be put in the Board Portal under LHIN Information. The board portal will have a section on ESC LHIN resources.
- **WECHC Q1 Executive Dashboard and Definitions:** Included in agenda package. Reviewed. Normal variances as expected for Q1.



**Physician Salaries:** As of June 30, 2016 physician compensation is underspent by \$32,180 due to benefit costs being under the budgeted rate. Physician recruitment continues for the Leamington site and some physician's hours will be increased to fully utilize the funding.

**Non Insured Funding:** This funding is for various diagnostic tests for clients who, for various reasons, do not have access to OHIP. We have made arrangements with a couple of labs with the intention of utilizing these dollars in 16/17.

**Leamington Core Operating Expenses** are under budget by \$180,139. Funding for the Leamington clinic was effective April 1, 2016, however, due to the relocation and extensive renovations that were required, the new clinic did not open its doors until August 15, 2016.

Therefore spending in Q1 represents only minimal new staff and some minor capital expenditures. By the end of Q2 we expect to be nearly complete with recruitment and have all capital purchases spent. Any surpluses that are created during the year will be used to pay all or a portion of the leasehold improvements, which will reduce annual interest and facility costs. Any unpaid leasehold improvements will be financed as part of the lease.

**Other Core Operating Expenses:** There is currently a surplus of \$90,894 due mainly to vacancies and differences in job rates. The leadership team has been reviewing the surpluses and strategies that will improve services to our clients and fully utilize the funding.

**Designated Funding:**

**Eating Disorders:** The program is currently under budget due in part from a wage differential and under spending in various operating expenses. It is anticipated that this budget will be fully utilized by year end.

**Diabetes Wellness** is currently experiencing surpluses due to job rates and lesser program expenses in the summer. This trend should begin to reverse in Q2.

**Chronic Disease Management** is currently under budget due to a wage variance from vacancies and wage rates. This surplus can be utilized for other direct program costs.

**Hep C Program** is experiencing a surplus due to a vacancy in the RN position. Approval has been received to hire a NP with reduced hours. The NP position will fully utilize this surplus.

**Ontario Diabetes Strategy:** The ODS program has a small surplus that will be utilized as workshops began to be scheduled in the fall.

**Non MoHLTC Funded Programs:**

All of these programs have only minor variances that will not be an issue by year end. The Substance Abuse program has the largest surplus due to an unpaid leave by a Social Worker. Staff are being reallocated to fill this vacancy and utilize the unspent dollars.

**Summary**

All restricted and designated funding programs are in a surplus position. Q1 surpluses are typical and are comparable to previous Q1 reports. Leadership continues to monitor the situation and implement plans to utilize the surplus and reduce the necessity for major year-end spending.

**WECHC**  
**Program Budget Variance Report**  
**For Period: June, 2016**

Program	Annual Budget	Year to Date		Forecast	Variance
		Budget	Actual		
<b>CHC Core (LHIN/MOHLTC)</b>					
<b>Restricted</b>					
Physicians	2,230,330	557,583	525,403	-	32,180
Non-Insured	10,000	2,500	80		2,420
Paymaster SOAHAC	122,700	30,675	30,675		-
	2,363,030	590,758	556,158	-	34,600
<b>Unrestricted</b>					
Leamington	1,072,260	288,065	87,926		180,139
Operating	5,555,454	1,388,864	1,297,970		90,894
	6,627,714	1,656,929	1,385,896	-	271,033
<b>Total</b>	<b>8,990,744</b>	<b>2,247,686</b>	<b>1,942,054</b>	<b>-</b>	<b>305,632</b>
<b>Dedicated Funding</b>					
<b>MOHLTC</b>					
Nurse Practitioner-Eating Disorders	189,651	47,413	42,040	-	5,373
Diabetes Wellness	1,943,346	485,837	461,097		24,740
Chronic Disease Management	1,472,390	368,098	362,847		5,251
Hepatitis C Virus Team	463,365	115,841	97,251		18,590
Ontario Diabetes Strategy	263,400	65,850	63,738		2,112
	4,332,152	1,083,038	1,026,973	-	56,065
<b>Other Funding</b>					
Substance Abuse Teen	269,493	67,373	58,336		9,037
Diabetes Prevention Program	67,200	16,800	14,132		2,668
	336,693	84,173	72,468	-	11,705

Windsor Essex Community Health Centre  
 Centre de santé communautaire de Windsor Essex



**WECHC FINANCIAL DASHBOARD**

	2014/15	2015/16	2016/17			Benchmark
			Q1	Q2	Q3	
<b>Operational Metrics</b>						
Working Capital Ratio		1.87	1.74	2.04		1.00
% of MOHLTC Funding		93%	95%	96%		TBD
Total Annualized Revenue Growth		1.04%	2.25%	6.87%		1.5%
<b>Program/Initiatives</b>						
Administration as % of Total Expenses		19.3%	19.1%	18.4%		18.9%
<b>Direct Cost per client:</b>						
Primary Care		\$ 931.20	\$ 620.54	N/A		TBD
Counselling		\$ 495.54	\$ 387.18	N/A		TBD
Chronic Disease		\$ 276.58	\$ 122.78	N/A		TBD
Health Promotion		\$ 88.49	\$ 39.75	N/A		TBD
Benefit to Salary Ratio		16%	21%	23%		25%
Productivity Ratio		84%	83%	N/A		84%
Administration Staff Development/Travel as % of Salaries		3%	3%	2%		5%

## MONTHLY FACTUAL CERTIFICATE

**To: Board of Directors  
Windsor Essex Community Health Centre (WE CHC)**

The undersigned hereby certifies that, to the best of his/her knowledge, information and belief after due inquiry, as at July 31, 2016.

1. The WE CHC is in compliance, as required by law, with all statutes and regulations relating to the withholding and/or payment of governmental remittances, including, without limiting the generality of the foregoing, the following:

- All payroll deductions at source, including Employment Insurance, Canada Pension Plan and Income Tax;
- Ontario Employer Health Tax;
- Harmonized Sales Tax
- Workplace Safety and Insurance Board (WSIB)

and they believe that all necessary policies and procedures are in place to ensure that all future payments of such amounts will be made in a timely manner.

2. The WE CHC is in compliance with all applicable Health and Safety legislation and all applicable Pay Equity legislation.
3. The WE CHC is in compliance with the requirements of the Corporations Information Act and has updated and verified its corporate public record, by submission of Form 1 within 15 days of any change to Board membership; last submission July 7, 2016.
4. The WE CHC is in compliance with the requirements of the Income Tax Act, and date of last filing of form T3010, Registered Charity Information Return is July 26, 2016.
5. The WE CHC is providing the prescribed standard of service in the performance of its functions and following the prescribed procedures and practices in accordance with our funding agreements, as reported to the Board of Directors of the WE CHC through the following reports:
  - Monthly Financial Report reviewed with Executive Director
  - Quarterly report to MOHLTC (MIS OHRS TB) submitted: May 6, 2016
  - Quarterly report to LHIN (SRI) report submitted: February 3, 2016
  - Quarterly reports to Board
  - Annual Reconciliation Report to Various MOHLTC Departments – June 29, 2016
  - CAPS Refresh submitted: November 23, 2015

Dated at Windsor, Ontario the 17<sup>th</sup> day of August, 2016



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Hardeep Sadra  
Executive Director

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Dated at Windsor, Ontario the 1<sup>st</sup> day of September, 2016

  
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Hardeep Sadra  
Executive Director

**Governance Committee:** B. Fetherston, Chair

- The Committee met on June 22, 2016 and will next meet on October 26, 2016.
- The approved April 20, 2016 Meeting Minutes were included in the Agenda package.
- **Board Recruitment Update:** The Governance Committee is recruiting for one (1) vacant position. Currently looking for a candidate from the Leamington area with the appropriate skill set. H. Sadra approached two members in the Leamington area who are unable to commit the time at this point.
- **Policy Update:** In Camera Sessions & Conflict of Interest and Declaration.

**Recommendation:**

A recommendation was made by the Governance Committee to approve the revised In Camera Session Policy at the September 27, 2016 Board Meeting.

**Motion:**

A Motion was made to approve the revised In Camera Session Policy.

**Moved:** B. Fetherston      **Seconded:** A. Deneweth      No Discussion      Carried

**Recommendation:**

A recommendation was made by the Governance Committee to approve the Conflict of Interest and Declaration Policy as presented with no changes at the September 27, 2016 Board Meeting.

**Recommendation:**

To accept the Conflicts Register to comply with 2.5 of the WE-BG-07 Conflict of Interest and Declaration Policy.

**Motion:**

A Motion was made to approve the Conflict of Interest and Declaration Policy and accept the Conflicts Register to comply with 2.5 of the WE-BG-07 Conflict of Interest and Declaration Policy.

**Moved:** B. Fetherston      **Seconded:** J. Mowat      No Discussion      Carried

**Motion:**

A Motion was made to accept the Governance Committee Report.

**Moved:** B. Fetherston      **Seconded:** W. McClounie      No Discussion      Carried

**Quality Utilization and Risk Committee:** A. Deneweth

- The Committee last met June 21, 2016 and will next meet October 18, 2016.
- The approved April 19, 2016 meeting minutes were included in the Agenda package.
- The Q1 Incident Report and Q1 Client Compliment & Complaints Report were included in the Agenda package.
- **Accreditation Governance Standards:** The Board will review the updated Governance Standards at their next meeting on October 18, 2016. The Governance Standards have not changed since last reviewed. On target for maintaining the standards.

**Motion:**

A Motion was made to accept the Quality Utilization and Risk Committee Report.

**Moved:** A. Deneweth      **Seconded:** B. Fetherston      No Discussion      Carried

**In-Camera – HR/Personnel/Finance Issues**

**Motion:** A motion was made to move in-camera at 7:07 p.m.

**Moved:** A Deneweth      **Seconded:** J. Mowat      No discussion      Carried

**Motion:** A motion was made to move back to the regular Board meeting at 7:26 p.m.

**Moved:** B. Fetherston      **Seconded:** J. Mowat      No Discussion      Carried

**Motion:** A motion was made to arrange a mutually acceptable date for the meeting of the two Boards that could coincide with the Media Training – likely in February.



Moved: W. McClounie

Seconded: A. Deneweth

No Discussion

Carried

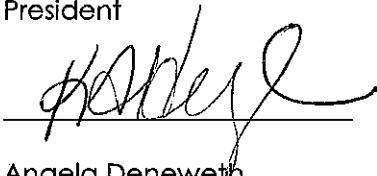
There were no other in-camera agenda items.

Adjournment: A motion was made by K. Hengl to adjourn the meeting at 7:30 p.m.

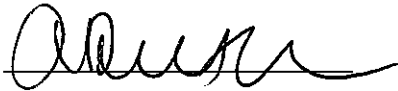
	Action	Agent	Date of Completion
1.	<b>Board Development Opportunities</b> ✓ Presentation from a Low speaking German Group in Leamington ✓ Media Training ✓ Quality Workshop Facilitator: provide two (2) or three (3) top tools the Board could use for decision making	H. Sadra Governance Committee	April 2017  February 2017
2.	<b>Community Health Foundation of Windsor and Essex County Board</b> ✓ Arrange a mutually convenient date for the two Boards to meet	The Board	Ongoing
3.	<b>Leamington District Memorial Hospital (LDMH) Board Presentation</b> ✓ LAMB (formerly the Navigation Centre).	K. Hengl	To be determined
4.	<b>Cultural Competency Tool</b> ✓ Include in Board Orientation Manual when revised.	Human Resource	Summer 2016
5.	<b>WE CHC/AOHC Board Liaison</b> ✓ Email Board members the webinar link for viewing online. ✓ Provide brief synopsis of key issues in the webinar	T. Scislowski	September 2016

Respectfully submitted by Lynn Thomson, Recorder

Kathryn Hengl  
President



Angela Deneweth  
Secretary



Lynn Thomson  
Recorder



