

**WINDSOR ESSEX COMMUNITY HEALTH CENTRE (WECHC)  
BOARD OF DIRECTORS MEETING MINUTES  
Wednesday April 1, 2020 5:30 to 8:00 pm  
Via Teleconference (due to COVID)**

**Present:** Kathryn Hengl (Chair), William McClounie (Vice Chair), Gina Graston (Secretary), Helen Bolton, Robert Fetherston, Ken Stewart, Jackie Dent, Clara Howitt

**Staff:** Rita Taillefer (ED), Sheraz Thomas (Director Data Management & Corporate Services)

**Regrets:**

**Recorder:** Lynn Thomson, Executive Assistant, Recorder

Quorum was achieved. Eight (8) of eight (8) Board Members were present.

- K. Hengl called the meeting to order at 5:31 p.m. and asked members to identify any conflict of interests at this time. None were declared.
- There were no requests made to “unstar” any items therefore the ‘starred’ (\*) items were deemed approved or received.

- \* **Approval of the April 1, 2020 Agenda as presented.**
- \* **Approval of the January 29, 2020 Board Meeting Minutes as circulated.**
- \* **Approval of the March 10, 2020 Board Meeting Email Vote as circulated.**

**1. Accreditation – Interviewers On Site November 3-5, 2020**

- A Power Point oversight was presented with an overview of the accreditation process and Board Standards
- Sample questions were presented and discussed.

**2. President's Report (K. Hengl)**

- Thank you and appreciation was extended to the Leadership Team and the staff at weCHC for all the additional work that everyone is undertaking during this time.
- Introduction of our new Board Member, Clara Howitt, who is joining us for the first Board Meeting.

**3. Board Liaison Report (H. Bolton)**

- February and March 2020 Board to Board Report was included in the agenda package. Reviewed and discussed.
- Webinar in May – H. Bolton will forward information to L. Thomson for distribution

**4. Executive Director's Report (R. Taillefer)**

**Sites Open Hours/Changes:**

- All walk-ins have ceased. Some sites have closed with face to face visits.
- As many staff as possible are working from home providing virtual visits. Non clinical staff are providing wellness checks on all clients across the organization.
- Seeing well babies and urgent clients face to face (those that can avoid ER visits).
- Sandwich site is a COVID testing/assessment site.
- Providing outreach grocery delivery for clients facing food disparities.
- A security guard has been retained for Street Health site due to a rise in safety concerns for staff and clients.
- Social distancing is being enforced at all sites.

**Personal Protective Equipment (PPE – gowns, masks, gloves, face shields):** Significant shortage across the province. Ministry has mandated that we submit daily reports on our stock. The PPE supply has been centralized to one location to ensure accurate counting, tracking and distribution.

**Community Needs/Requests**

- **Work with Mission & City of Windsor:** Working with Health Unit and City of Windsor to develop a plan for the shelters. One NP has been assigned to work on development and rolling out of this project to support this population.
- **Work with Greenhouses:** Working with Health Unit, OGVG and Leamington Mayor on a plan to support the seasonal/migrant workers. Concerns were raised because of living conditions and the need to social distance during COVID. An educational video has been developed by our staff (in Spanish) and provided to the OGVG to share with the workers.

**Non Hospital (Primary Care) Working Group:** R. Taillefer is the co-chair of this group. The working group is tasked with uniting primary care to focus and resolve key issues affecting primary care providers in the community. The most pressing issues are the development of virtual walk in clinic and shortage of PPE.

**Telus Implementation:** Has been put on hold until after the COVID crisis is settled.

**Accreditation:** Still planned for November 2020 but will likely be delayed.

**Motion: A Motion to accept the Executive Director’s Report**

**Moved:** W. McClounie                      **Seconded:** C. Howitt                      No discussion                      Carried

**Motion: A Motion was made send an email on behalf of the Board to the staff commending them for all the dedication and hard work during the COVID crisis.**

**Moved:** B. Fetherston                      **Seconded:** K. Stewart                      No discussion                      Carried

**5. Committee Reports:**

**Finance Committee (Presented by S. Thomas)**

- The Committee last met on February 26, 2020 and will next meet on June 17, 2020. The February 26, 2020 meeting minutes were included in the meeting package.
- Monthly Factual Certificate for February 2020 was included in the Agenda package.

## February 2020 Monthly Factual Certificate

### 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 February 29, 2020.

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 September 6, 2019.
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 June 2019.
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 OHRIS TB) submitted: January 22, 2020
  - Quarterly report to LHIN (SRI) report submitted: February 7, 2020
  - Quarterly reports to Board
  - Annual Reconciliation Report to Various MOHLTC Departments – June 30, 2019
  - CAPS Refresh approved: March 15, 2019

Dated on the 4<sup>th</sup> day of March, 2020 in Windsor, Ontario

  
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Rita Taillefer  
Executive Director

## Q3 Variance Report

WECHC Program Budget Variance Report For Period: Dec, 2019				
Program	Annual Budget	Year to Date		Variance
		Budget	Actual	
<b>CHC Core (LHIN/MOHLTC)</b>				
Restricted				
Physicians	2,258,573	1,693,930	1,649,881	44,049
Non-Insured/Sessional	10,000	7,500	-	7,500
Paymaster SOAHAC	417,000	312,750	312,750	-
	2,685,573	2,014,180	1,962,631	51,549
Unrestricted				
Operating	7,905,840	5,929,380	6,052,729	(123,349)
	7,905,840	5,929,380	6,052,729	(123,349)
<b>Total</b>	<b>10,591,413</b>	<b>7,943,560</b>	<b>8,015,360</b>	<b>(71,800)</b>
<b>Dedicated Funding</b>				
MOHLTC				
Nurse Practitioner-Eating Disorders	202,682	152,012	154,991	(2,980)
Harm Reduction SAP	249,900	187,425	168,646	18,779
Diabetes Wellness	2,417,107	1,812,830	1,724,324	88,508
Chronic Disease Management	1,332,982	999,737	1,012,959	(13,223)
Hepatitis C Virus Team	477,465	358,099	364,854	(6,755)
Ontario Diabetes Strategy	263,400	208,037	190,346	17,691
	4,943,536	3,718,139	3,616,120	102,019
<b>Other Funding</b>				
Substance Abuse Teen	269,493	202,120	197,100	5,020
Diabetes Prevention Program	67,200	50,400	38,698	11,702
	336,693	252,520	235,798	16,722

Unrestricted Surpluses	(48,065)
Other Sources of Fund Type 2 Revenue	182,133
YTD Surplus/Deficit	134,068

### Core Funding

**Physician Salaries:** As of December 31, 2019 physician compensation has a projected surplus of \$44,049. A portion of dollars are as a result in savings from benefits which can be pooled to offset benefit costs in the CHC base funding (approx. \$27,500).

**Non-insured funding:** This funding is for various diagnostic tests for clients who, for various reasons, do not have access to OHIP. These funds have not been utilized to date which could result in a potential surplus of \$7,500 at year end. The Centre has submitted a request to the MOH/LHIN to reallocate this dedicated funding for other client related care activities, e.g. foot care. This has been approved for reallocation for foot care services at Street Health.

**Core Operating Expenses:** At December 31, 2019 there is a \$48,065 deficit in our General Operating funding due to one-time consulting fees. This deficit is offset by the utilization of \$27,500 in physician pooled benefit utilization and \$182,133 from Other Funding Sources (rent, depot, third party billing, HST recovery).

## **Designated Funding**

**Eating Disorders:** The program is currently on budget and is expected to be within budget at year end.

**Hep C Program:** has a Q3 slight deficit of 6,755 due to timing of expenses. It is projected that the program will be within budget at year end.

**Ontario Diabetes Strategy:** has a Q3 surplus due to the timing of events. It is projected that the program will fully utilize the budget by year end.

**Harm Reduction Program:** has a Q3 surplus of \$18,779 due to holdback for mobile unit (to be paid in February). Will be fully utilized by year end.

**Diabetes Prevention Program:** has a Q3 surplus of \$11,702. We are currently awaiting approval of the program and confirmation of funding for the current fiscal year. The program is currently being floated by our operating budget and in the event funding is not received from the ministry these dollars will be assumed within our general operating budget.

## **Summary**

At Q3 we are running an overall surplus of \$134,068 with plans to ensure full utilization by year end via year end allocation, Mobile Unit support, NVCI and Property Tax for the Sandwich site.

**Motion:** A Motion was made to approve the Finance Committee Report.

**Moved:** J. Dent                      **Seconded:** H. Bolton                      No discussion                      Carried

**Governance Committee** (Reported by B. Fetherston)

The Committee last met on March 10, 2020 and will next meet on June 17, 2020. The February 26, 2020 meeting minutes were included in the meeting package.

## **Training Opportunities:**

Upcoming Board training was discussed. There are several opportunities available:

- **Board Self-Assessment Tool:** This is available for completion between March – June 2020. The Board had previously passed a Motion to participate in this survey/tool. The registration has been completed and the link will be sent to the Board following the April Board meeting. Participation in this is at no cost to the organization due to being a member of OHA.
- **Ontario Indigenous Cultural Training:** This training opportunity is available for any Board Members who are interested.
- **Alliance Governance Modules:** This was previously discussed at a previous Board Meeting and there was interest in participating in the modules. The new modules have not been released to date therefore this will be tabled until further information is available.
- **Privacy Training:** Mandatory annual privacy training was scheduled to take place with staff on April 20 and April 21. G. Graston and K. Stewart have indicated they would attend. This has now been cancelled due to the current situation. All staff will complete on line modules this year.
- **United Way Training:** The United Way Training that the Board previously participated in on a variety of different topics is no longer being offered.

**Motion:** A Motion was made to accept the Board Education and Training Plan.

**Moved:** B. Fetherston                      **Seconded:** K. Stewart                      No discussion                      Carried

## **Board Policies to Review**

- **Board Code of Conduct & Ethics (due May 2020):** The policy was reviewed and discussed. There were minor changes suggested (changing President and Vice President to Chair and Vice Chair, updating logo).

**Motion:** A Motion was made to accept the Board Code of Conduct & Ethics Policy as presented with the minor revisions.

**Moved:** B. Fetherston      **Seconded:** G. Graston      No discussion      Carried

- **Form: Board of Directors Meeting Evaluation (due March 2020):** The form was reviewed and discussed. There were no suggested changes.

**Motion:** A Motion was made to accept the Board of Directors Meeting Evaluation as presented.

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

#### **Quality Utilization and Risk Committee** (Reported by H. Bolton)

The Committee last met on March 3, 2020 and will next meet on April 21, 2020. The February 26, 2020 meeting minutes were included in the meeting package.

- **Infection Prevention & Control (IPAC):** The Committee is preparing for site readiness for
- **Non Violent Crisis Intervention (NVCi):** Two staff members have taken the 'train the trainer' course to train the remainder of the staff. It is required to be renewed every two years. Given the current situation the trainers are looking at conducting this training virtually.
- **Data Quality Improvement (DQI):** The Committee is focusing on the implementation of the new EMR.
- **Advanced Access:** Some sites are providing 'advanced access' for walk in clients at the primary care sites.
- **Street Health Site:** A security assessment was completed in conjunction with the police and Chubb security to identify suggested changes to enhance security for the staff and clients. Due to changes in the down town core a Security Guard has been retained to assist with maintaining safety.
- **Leamington Site:** Approaching full capacity. In order to accommodate the demand a provider from another site will be moved to this site if required to eliminate wait lists.

**Motion:** A Motion was made to accept the QUR Report as presented.

**Moved:** H. Bolton      **Seconded:** G. Graston      No discussion      Carried

#### **6. In Camera**

**Motion:** A Motion was made to move In Camera at 7:08 pm

**Moved:** H. Bolton      **Seconded:** G. Graston      No Discussion      Carried

**Motion:** A motion was made to move back to the regular meeting at 7:20 pm.

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

**In Camera Items Discussed:** Information received. There were no further in camera items.

#### **7. Other Business**

There was no other business.

#### **8. Adjournment**

A motion was made by to adjourn the meeting at 7:25 p.m.

**Moved:** C. Howitt      **Seconded:** K. Stewart      No Discussion      Carried

**The next Board Meeting will take place on Wednesday June 3, 2020 at 5:30 by teleconference.**

*Respectfully Submitted by Lynn Thomson*

Approved June 3, 2020

Kathryn Hengl - Electronically signed

Kathryn Hengl, Chair

Gina Graston - Electronically signed

Gina Graston, Secretary

Lynn Thomson - Electronically signed

Lynn Thomson, Recorder

Please note the minutes were electronically signed due to a virtual meeting due to COVID-19. Minutes were approved by the Board at the June 3, 2020 meeting.