

Pinecrest-Queensway Community Health Centre

BOARD OF DIRECTORS **Minutes of Meeting Held January 19, 2021**

PRESENT: Gerry Harrington President, (Arrived 5:35pm) Katherine Cole
Jill Skinner, Vice President Sapna Mahajan
Adrienne Coddett Stephen Williamson
Janet Bowes Meng Jin
Loyal Younes Dewolf
Cathy Doolan

STAFF: Christopher McIntosh, CEO Katherine Doucette, Minute taker
Scott Miller, Director, Corporate
Leigh Couture, Director, Community Health Services,
Rhonda Beauregard, Manager, Employment Services

REGRETS: Nayelah Siddiqui, Mete Pamir, Wayne Ng,
Parm Bahniwal

GUESTS:

ITEM

Welcome

Jill Skinner, called the meeting to order at 5:30pm with quorum established. No conflicts were declared.

1. APPROVAL OF AGENDA

Motion: That the agenda was approved unanimously as presented.

2. APPROVAL OF MINUTES

Motion: The minutes of November 17th, 2020 were approved unanimously as presented.

3. BOARD ORIENTATION

Rhonda Beauregard and Leigh Couture joined the meeting and shared the latest information related to Employment Services Transformation. The government announced its plan to transform the province's employment services, making Ontario's employment services more efficient, more streamlined and outcome focused.

Rhonda also shared that ES has been approved for Skills advance Ontario project which involves training 120 individuals as PSWs within the next year. The first 40 individuals will commence training on March 29th with 6 months to complete a full PSW certification. This project is intended to support workforce development in identified key growth sectors. It funds partnerships that connect employers with the employment and training

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services required to recruit and advance workers with the right essential, technical, and employability skills. It also supports jobseekers to obtain employment by providing them with sector-specific employment and training services and connecting them to the right employers.

4. BUSINESS

a) 2021 Renewable Funding Submission

Scott provided an update related to the addendum received from The City regarding the Renewable Funding Agreement. Preparations are currently underway for submission by January 31st.

b) Investment and Cash Management Policy

Scott reviewed the Investment and cash management policy revisions with the Board. Upon reviewing the policies, the Board agreed with Scott that minor modifications will be amended and bring the brought back to the Board to approve at the next meeting in February.

5. COMMITTEE MEMBERSHIP

- a) Gerry advised that the meeting of the Governance Committee took place on December 1st, 2020, at which time the Committee reviewed recommendations based on overall results of the annual board evaluation and next steps for 2021. The Committee also reviewed revisions related to Board policies for accreditation with recommendation to the Board.
- b) Sapna shared that the Finance Committee held its first meeting on December 8th, 2020. They reviewed the meeting structure, TOR and workplan based on the Board workplan. The next meeting of the Committee is scheduled for January 26th.
- c) Cathy Doolan shared a briefing note with the Board along with recommendation from the Governance Committee pertaining to the revised policies for approval. Cathy advised that next steps are to populate the accreditation standards with pre-site evidence by May 28th, 2021.

Motion: That the Board approve the Board Governance policy revisions as presented.

Moved by: Sapna

Seconded by: Adrienne

6. CHIEF EXECUTIVE OFFICER'S REPORT

a) CEO's Report

Christopher provided a briefing note that was included in the Board package which included updates on OHT, program updates, and key operational highlights for the centre during this period.

ITEM

b) Multi-Sector Accountability Agreement (MSAA)

Christopher provided the Board with information related an amended agreement that will keep existing schedules intact for the remainder of the 2020/21 fiscal year, until ending March 31, 2021.

7. PRESIDENT'S REPORT

- a) A round table discussion pursued based on the Boards desire to send employees Board appreciation feedback. Gerry and Christopher will work together to draft a message to All Employees with positive feedback on their continuing efforts.
- b) Gerry also informed the Board that we currently have a new opening on the Board as Nayelah has resigned for personal reasons.
- c) CEO Review Update
Gerry advised that he will be reaching out to the Executive Committee in preparation for next steps related to the CEO Review.

8. BOARD MEETING REFLECTIONS / EVALUATION

No in-camera session was held.

9. ADJOURNMENT

Motion: The meeting adjourned at pm.

Moved by all unanimously.

Pinecrest-Queensway Community Health Centre

BOARD OF DIRECTORS **Minutes of Meeting Held February 16, 2021**

PRESENT: Gerry Harrington, President
Jill Skinner, Vice President
Parm Bahniwal, Secretary
Sapna Mahajan, Treasurer
Adrienne Coddett,
Loyal Younes Dewolf

Katherine Cole,
Stephen Williamson,
Meng Jin,
Wayne Ng

STAFF: Christopher McIntosh, CEO
Scott Miller, Director, Corporate
Leigh Couture, Director, Community Health Services,
Marta Clark, Community House Coordinator
Laura Kelly, Manager, Organizational Development

Katherine Doucette, Minute taker

REGRETS: Cathy Doolan, Janet Bowes, Mete Pamir,
Katherine Cole

GUESTS:

ITEM

Welcome

Gerry called the meeting to order at 5:30pm with quorum established. No conflicts were declared.

1. APPROVAL OF AGENDA

Motion: The agenda was approved unanimously as presented.

2. APPROVAL OF MINUTES

Motion: The minutes of January 19th, 2021 were approved unanimously as presented.

3. BOARD ORIENTATION

Marta Clark, Morrison Gardens Community Health Coordinator, provided an exuberant presentation of the impacts on the 5 Community Houses. She highlighted how the Community Houses have stayed connected with families and residents, with a particular focus on programs and supports offered during the pandemic.

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4. BUSINESS

a) Quality Review 2021

As per the workplan, the Quality Review Report is shared with the Board bi-annually.

Laura Kelly, Organizational Development Manager, presented the framework around the Quality Improvement plan for 2021.

5. COMMITTEE MEMBERSHIP

a) Finance Committee

Sapna shared that the Finance Committee met on January 26th and reviewed Q3 financials in detail. Sapna also shared that Scott is working on a more high-level format which would include visual charts and graphics highlighting revenues and expenses instead of line-by-line reporting. The timeframe is to have this new format ready for Board consideration by March 31st, 2021. The next meeting of the Committee is scheduled for April 27th, 2021.

b) 3rd Quarter Financials

Scott discussed the briefing note with Board which outlined the 3rd quarter financials for recommendation and Approval.

Scott shared that another key component for the centre is employment services transformation. ES is in the preliminary stages of submitting an application for a service system manager (SSM) who will be responsible for managing integrated employment service delivery and for operating and achieving employment outcomes for a wide range of clients across 15 proposed catchment areas. If awarded, the overall dollar amount for this is between \$50-60 million, which will mean that the finance department will have to ramp up services by hiring more employees to handle the day-to-day transactions and functions.

Part of the application process is to ensure we have a line of credit in place to handle the amount of transactions that will be initialized if awarded the SSM. Scott is currently working with the bank to initialize a LOC and will reach out to the Board for approval and signatures as required to support this.

Scott asked that the Investment and Cash Management Policy be deferred for approval until the next meeting and until such time that we have more information regarding the SSM and LOC.

Motion: That the Board approve the 3rd Quarter Financials as presented.

Moved by: Sapna Mahajan

Seconded by: Stephen Williamson

6. CHIEF EXECUTIVE OFFICER'S REPORT

a) CEO's Report

Christopher provided an update related to key operational highlights for the centre during this period. Christopher also shared that we are still waiting to hear from the ministry based on centre roll out for vaccinations and how this might affect employees for PQ. For now, PQ remains as status quo, operating programs virtually and only offering in-person appointments to clients deemed as urgent care or essential.

Christopher also shared that there are some virtual Leadership training sessions taking place pertaining to OHT. The Convening Partners group nominated colleagues to represent OHT and participate in a Leadership Coaching Academy. Christopher and Honorata, Chief Strategist with Ottawa Hospital, were nominated for these roles. The advanced coaching sessions review an approach with ways to apply elements of the collective impact framework in our collaborative work, while creating opportunities to meet and engage with coaches from other OHTs.

The Board went in-camera at 6:58pm to discuss the City of Ottawa Fraud and Waste Complaint and PQ Response documents. *(In-camera minutes are held in a separate confidential depository along with the City complaint and PQ response documentation)*

7. PRESIDENT'S REPORT

(The Board remained in-camera)

8. BOARD MEETING REFLECTIONS / EVALUATION

(The Board remained in-camera until 7:13pm)

9. ADJOURNMENT

Motion: The meeting adjourned at 7:14pm.

Moved by all unanimously.

Pinecrest-Queensway Community Health Centre

BOARD OF DIRECTORS **Minutes of Meeting Held March 16, 2021**

PRESENT: Gerry Harrington, President
Jill Skinner, Vice President
Sapna Mahajan, Treasurer
Adrienne Coddett,
Layal Younes Dewolf,
Cathy Doolan
Katherine Cole,
Stephen Williamson,
Meng Jin,
Janet Bowes
Katherine Cole
Wayne Ng

STAFF: Christopher McIntosh, CEO
Scott Miller, Director, Corporate
Katherine Doucette, Minute taker

REGRETS: Mete Pamir, Parm Bahniwal, Secretary

GUESTS: Dr. Azaad Kassam, Mental Health Services

ITEM

Welcome

Gerry called the meeting to order at 5:30pm with quorum established. No conflicts were declared.

1. APPROVAL OF AGENDA

Motion: The agenda was approved unanimously as presented.

2. APPROVAL OF MINUTES

Motion: The minutes of February 16th, 2021 were approved unanimously as presented.

3. BOARD ORIENTATION

Dr. Azaad Kassam, Psychiatrist with Mental Health Services, shared the impacts of mental health on newcomers.

4. BUSINESS

a) Line of Credit-Bank of Montreal

At the last meeting of the Board, Scott shared that Employee Service is in the preliminary stages of submitting an application for a service system manager (SSM). Part of the application process is to ensure we have a line of credit in place to handle the amount of transactions that will be initialized if awarded the SSM. Scott met with BMO and they advised that we need to have a reserve fund to offset the LOC. Since this meeting with BMO, Scott scheduled a mtg with another financial banking institution to see what they can offer. It would

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make sense to look at other offerings and options while negotiating with BMO. Scott is not intending to change banks; we work well with BMO but feels it is worth at least having a conversation with another institution to confirm our status.

The Board has concerns around the magnitude of the LOC and other implications, risks, and benefits that they feel they need to be aware of before approving this. They asked to see a high-level briefing note providing information for these areas of concern and outlining the required resources that will need to be ramped up to help with the day-to-day transactions if the SSM is granted. The Board also asked that we provide clarity around how this will fit with the organization's mandate. Management will prepare a briefing note and presentation for the Board at the next meeting in May.

5. COMMITTEE MEMBERSHIP

a) Alliance for Healthier Communities Update Approval

Cathy provided an update related to the Alliance board-to-board report that was sent out last week. She also advised that if members are interested in registering to receive the weekly Alliance Newsletter that you can do so at the link provided in the report.

Cathy provided a list of upcoming events scheduled for the Alliance. If you are interested in attending any events, please reach out to Cathy or check out the Alliance for Healthier Communities website.

- Board Liaison Webinar – April
- Changes in the Health System – May
- Annual Board Liaisons and Chairs meeting – June
- Alliance AGM – June 15th
- Power in Community Virtual conference – June 16-17

Advocacy: Urgent call to Action (Clean Water-First Nations & Inuit Communities)

Cathy Doolan shared the latest information from the Alliance initiatives and the urgent call to action advocacy to our local MP related to Clean Water for First Nations & Inuit Communities.

Cathy asked for Board approval to submit the letter for call to Action. Katherine will retrieve Gerry's signature and email an electronic copy to MP Anita Vandenberg.

Motion: That the Board approve the call to action for clean drinking water for First Nation and Inuit Communities with minor amendments.

Moved by: Cathy Doolan

Seconded by: Sapna

6. CHIEF EXECUTIVE OFFICER'S REPORT

b) CEO's Report

Christopher Shared the latest information pertaining to the primary focus of OHT activities which have been assisting with the community pandemic response. Christopher also

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shared that we anticipate that PQCH will serve as a potential vaccination site for the local area given the vulnerable client populations and the prevalence of infection. As more information is received, this will be shared with the Board.

Christopher advised that CHCs are now deemed to be an organization qualifying for one of the first waves of the Covid-19 vaccination. Our employees who meet Phase 1 criterion have been prioritized and now beginning to get their vaccination (i.e., nurses, physicians).

We were advised on March 9th that our funding agreement and reporting requirements with the LHIN remain unchanged and have been extended by one year to March 2022.

Additionally, our annual Quality Improvement Report deadline has been extended with more information on the reporting requirements expected within the coming months.

Preparations for accreditation continue with both employees and members of our Board dedicating their time and efforts to reviewing policies and populating evidence in the format provided by CCA. We are on track as per the schedule of timelines prepared by management for uploading information to CCA Portal.

7. **PRESIDENT'S REPORT**

The Board went in-camera at 6:31pm. (In-camera minutes are held in a separate confidential depository along with pertinent information related to the discussions).

8. **BOARD MEETING REFLECTIONS / EVALUATION**

(The Board remained in-camera until 7:12pm)

9. **ADJOURNMENT**

Motion: The meeting adjourned at 7:15pm

Moved by all unanimously.

Pinecrest-Queensway Community Health Centre

BOARD OF DIRECTORS **Minutes of Meeting Held April 20th, 2021**

PRESENT: Gerry Harrington, President
Jill Skinner, Vice President
Sapna Mahajan, Treasurer
Parm Bahniwal, Secretary
Cathy Doolan,
Stephen Williamson,
Meng Jin,
Janet Bowes,
Katherine Cole,
Wayne Ng,
Metem Pamir

STAFF: Christopher McIntosh, CEO
Scott Miller, Director, Corporate
Katherine Doucette, Minute taker

REGRETS: Adrienne Coddett, Layal Younes
Dewolf,

GUESTS: Vitaly Brajnik, Manager, Information
Technology

ITEM

Welcome

Gerry called the meeting to order at 5:30pm with quorum established. No conflicts were declared.

1. APPROVAL OF AGENDA

Motion: The agenda was approved unanimously as presented. Sapna/Cathy

Moved by: Sapna Mahajan

Seconded by: Cathy Doolan

2. APPROVAL OF MINUTES

Motion: The minutes of March 16th, 2021 were approved unanimously as presented.

Moved by: Janet Bowes

Seconded by: Wayne Ng

3. BOARD ORIENTATION

Vitaly Brajnik, Manager, Information Technology, presented PQ's year in review for technology and how the centre has adapted to this new virtual service delivery.

4. BUSINESS

ITEM

a) Fiscal YE Review

Scott provided a briefing note highlighting the key areas of operational expenditures for Q4 for the centre as they work towards the scheduled May 10th external audit. A consolidated budget will be ready for the May meeting for approval. As Finance is still concluding overall results for year-end, the Finance Committee will be reviewing end results and making recommendation for approval at the next meeting in May. The Finance Committee are scheduled to meet on April 27th.

b) Line of Credit-Bank of Montreal

At the last meeting of the Board, Scott shared that Employee Service is in the preliminary stages of submitting an application for a service system manager (SSM). The Board shared concerns around the magnitude of the LOC and other implications, risks, and benefits. Scott provided an update to this process and advised that Leigh Couture and Rhonda Beauregard will be presenting informative background evidence and the process to date at the next meeting in May. Scott also advised that all remittances are up to date.

5. COMMITTEE MEMBERSHIP

a) Governance Committee

The Governance Committee met on April 13th and reviewed recruitment process as well as the Board Matrix.

Gerry advised that we will be recruiting new recruits for the fall term, with three members up for re-election. We will also be looking for nominations for the roles of President and Vice President.

Gerry also presented an amended version of the Board Matrix to the committee for review and discussion. Gerry advised that at the last meeting in December, Janet and Wayne recommended an assessment of the matrix to corroborate if any gaps were present.

Motion: To approve the amended Board Matrix with an anonymous survey being sent out to Board members in the next few days with a request for full Board participation.

Motion moved by: Wayne Ng

Seconded by: Jill Skinner

The Governance Committee will review the Board Matrix survey results and work with HR for next steps in the recruitment process.

6. CHIEF EXECUTIVE OFFICER'S REPORT

- a) Christopher provided an overview of the key highlights for the centre's operations along with an update related to the pandemic response. PQCHC employees are continuing to assist with testing at community locations as well as continuing community health outreach and education activities. Additionally, we are supporting mobile community vaccination initiatives.

Four Rivers OHT application:

Christopher shared that we have been monitoring the development of a western-Ottawa focused OHT application scheduled for submission at the end of April. Our primary care services, particularly those housed at our South

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Nepean satellite location, as well as our long relationship with Queensway-Carleton Hospital, make it appropriate that we continue to remain engaged as a contributor while acknowledging our capacity and leadership with the Ottawa Health Team. Christopher will provide updates on the western-Ottawa submission as information is received.

Christopher also shared that the Coalition is investing research into non-police responses to non-violent crises in the City of Ottawa project. The goal is to put forward funding options that would focus on scaling-up social services to prevent and respond to non-violent crises in Ottawa more effectively while maintaining our important partnership with Ottawa Police Services.

OHT Funding Application:

PQCHC receives funding from the City of Ottawa that supports the work in the following areas: community houses and community development, children's programming, volunteer administration, and organizational infrastructure. PQ pre-qualified under the Community Hubs stream and were eligible to apply to the Community Funding Framework Sustainability Fund with the City of Ottawa. This five-year renewable funding would support our core funding, children's programming, and Community Houses and is set to begin during the next annual budget cycle in January 2022. A submission was sent in advance of the April 15th deadline. An update will be provided at the next meeting in May.

7. **PRESIDENT'S REPORT**

The Board went in-camera at 6:56 PM. (In-camera minutes are held in a separate confidential depository along with pertinent information related to the discussions).

8. **BOARD MEETING REFLECTIONS / EVALUATION**

(The Board remained in-camera until 7:34 PM)

9. **ADJOURNMENT**

Motion: The meeting adjourned at 7:35 Pm

Moved by all unanimously.

Pinecrest-Queensway Community Health Centre

BOARD OF DIRECTORS **Minutes of Meeting Held May 18th, 2021**

PRESENT: Gerry Harrington, President
Jill Skinner, (*Joined the meeting at 6:43pm*)
Sapna Mahajan, Treasurer
Parm Bahniwal, Secretary
Cathy Doolan,
Adrienne Coddett

Stephen Williamson,
Janet Bowes,
Wayne Ng,
Layal Younes Dewolf

STAFF: Christopher McIntosh, CEO
Scott Miller, Director, Corporate

Katherine Doucette, Minute taker

REGRETS: Meng Jin, Mete Pamir, Katherine Cole

GUESTS: Leigh Couture, Director, Rhonda
Beauregard, Manager, ES

ITEM

Welcome

Gerry called the meeting to order at 5:30pm with quorum established. No conflicts were declared.

1. APPROVAL OF AGENDA

Motion: The agenda was approved unanimously as presented.

Moved by: Cathy Doolan

Seconded by: Steve Williamson

2. APPROVAL OF MINUTES

Motion: The minutes of April 20th, 2021 were approved unanimously as presented.

Moved by: Janet Bowes

Seconded by: Wayne Ng

3. BOARD ORIENTATION

Leigh Couture and Rhonda Beauregard presented and update on province's realignment of employment services and the preparations underway for the service system management (SSM) application from PQCHC. Leigh and Rhonda provided clarity around how this fits with the organization's mandate with the ultimate goal of designing an approach for the catchment that is in accordance with the collaborative's values. They provided an overview of what the SSM role would look like, and what the expectations of the Ministry will be.

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A discussion took place around risks and opportunities and Leigh advised that they are continuing to monitor what changes would be required as a service provider and as an organization.

The Board inquired about 20% of funding that the Ministry could hold back related to performance indicators. Scott confirmed that the line of credit request is not specific to the 20% but applicable to the whole program and in the event of funding delays, that we can still manage to deliver funding on schedule to our partners.

The Board asked if the Ministry has given a sense of the duration for the program?

Leigh advised that the understanding is that this is a 5-year minister plan, but due to the pandemic, not 100% sure. Leigh and team are still waiting for information and updates from the ministry as to where Ottawa fits into the application timelines.

The Board asked, how do you feel about the operational hurdle for this?

Christopher advised that the team is mindful of what these opportunities mean for our infrastructure is always a consideration, especially given our organizational leadership with the Ontario Health Team. We are reviewing our current and future infrastructure needs and planning ahead in the event that we are successful with the application. We will continue to update the Board as more information is received.

4. BUSINESS

a) 2020-21 Budget

Scott provided an overview for the 2020-21 budget sharing that despite all the uncertainty brought on by Covid-19, all of program funding remains unchanged when compared year over year with our last fiscal except for Pathways. We continue to provide service delivery where possible virtually and have some in-person services occurring. The budget will look very similar to that of our 2020-21 Consolidated Budget with Revenues of just over \$26 million. Program expenditures have remained consistent with the levels seen in the previous fiscal. The Board was curious about salary increases and Christopher shared that the Alliance has been an effective advocate with supporting CHC salary increases and ensuring that we align appropriately with the market as indexed to the Korn Ferry Salary Scale recommendations (previously the Hay Report. Management will continue advocating for cost-of-living increases with our funders while working together with our networks, including the Alliance, for ongoing recruitment and retention advocacy.

Motion: That the Board approve the 2020-21 budget as presented.

Moved: Sapna Mahajan

Seconded by: Wayne Ng

b) Fiscal YE Financials

Scott provided highlights of key areas of operational expenditures for fiscal year-end.

We will be returning some funds this year which is the result of some LHIN funded services that we were unable to perform online due to staffing gaps for city run

ITEM

Families First programs, as well as some Employment Services Employer Incentives that were not reached.

As previously shared in the briefing note, there is a small surplus of funds related to the core budget which will be carried over into 2021-22 to offset any future renovation expenses and other unanticipated costs.

All funding agreements have been satisfied through the receipt of those funding dollars for the fiscal year ended March 31, 2021.

Final statements will reflect overall Centre spending of just under \$27M.

c) Compliance with Legal Remittance

The Centre has met all legal statutory and mandatory government remittance required as of March 31, 2021.

5. COMMITTEE MEMBERSHIP

a) Finance Committee

Sapna provided a verbal overview of the Finance Committee meeting held on April 27th with key highlights which included a review of the fiscal year-end budget, scheduling for the year-end audit and a review of the cash management investment policy amendments which were approved unanimously by the committee.

Sapna shared that there was an opportunity to raise concerns around surplus funds, other than that there were no issues.

The next meeting is scheduled for June 22nd with the auditors to review the draft financial statements.

As a sub-committee to the Board, we recommend the 2020-21 Budget for approval.

b) Alliance Advocacy Issues Information

As our Board representative to the Alliance, Cathy reviewed the Alliance resolutions with amendments with the Board and will vote on PQCHC's behalf, while putting forward questions raised by PQCHC where possible to do so. The Board approved or abstained as per the below.

By-Law Resolution #1: Replace rainbow communities with 2SLGBTQ+.

Moved by: Gerry Harrington

Seconded by: Wayne Ng

Governance Resolution #1: Add Ableism and Disability to Health Equity Charter Rights and Responsibilities (*Board require more specifics on the resolution.*)

Nay Vote, Moved By: Janet Bowes

Seconded by: Sapna Mahajan

#1 Policy Resolution: Long-Term Care

Moved by: Wayne Ng

Seconded by: Jill Skinner

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#2 Policy Resolution: Right to food

Moved by: Adrienne Coddett

Seconded by: Janet Bowes

#3 Policy Resolution: Liveable financial support for all Ontarians

Moved by: Janet Bowes

Seconded by: Adrienne Coddett

#4 Policy Resolution: Paid sick days under the Employment Standards Act for all Ontarians.

Moved by: Loyal DeWolfe

Seconded by: Sapna Mahajan

NEW #5 Policy Resolution: Support Healthcare of Ontario Pension Plan (HOOPP) from Fossil Divestment Fuel to Combat Climate Change (*Board was concerned about potential conflicts of interest and requires more specifics on the resolution.*)

Nay Vote, Moved by: Gerry Harrington **Seconded by:** Jill Skinner

#6 Policy Resolution: Integration of low-barrier Overdose Prevention Services in CHC Service Model (*Board require more specifics on the resolution and potential impacts on operations.*)

Nay Vote, Moved by: Jill Skinner

Seconded by: Wayne Ng

#7 Policy Resolution: No and Low Touch Medication Abortions. (*Board require more specifics on the resolution and potential impact on operations.*)

Nay Vote, moved by: Jill Skinner

Seconded by: Janet Bowes

It was approved unanimously that Cathy Doolan will represent the BOD at the Alliance AGM on a voting capacity for the resolutions presented above.

c) Alliance Health Equity Charter Review Information

Christopher reviewed the foundation provided in the Alliance Health Equity Charter with the Board. He advised that this is about aligning the CHCs in maintaining the highest attainable standard of health equity for our communities. Christopher would like to review and assess the information provided within the Charter before asking the Board for approval to move forward with adapting the Charter Commitments for our organization.

We would like to review the tools and resources provided throughout and look at some ways on how we might improve our work. Christopher will provide an update for feedback and recommendations when additional materials are provided by the Alliance.

6. CHIEF EXECUTIVE OFFICER'S REPORT

The CEO provided an overall report of key operations since the last meeting in April 2021. Christopher highlighted areas such as PQ's on-going outreach to vulnerable populations, including clients identified through the LHIN's Home and Community Care services.

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Outreach continues with door-to-door support of Ottawa Community Housing vulnerable populations. PQ is collaborating with its partners wherein on-going outreach in higher-density buildings using an 'airplane model' to offer vaccination appointments within the buildings the day after. This has proven to be very successful thus far.

Christopher also shared that the OHT-related pandemic response collaborations continue to prioritize outreach and vaccination efforts to the most highly impacted communities in the city. Additionally, the team has recently posted for newly funded infrastructure positions to help support the work of the actions teams and have partnered with the University of Toronto to onboard a research fellow to help with the collection, interpretation, and implementation of data resources to further inform our work.

Christopher provided the board with an update related to the Accreditation interviews which will be scheduled for Aug 24-25th. Administration will send out calendar invites for you to hold those days. Administration will also send out an email to canvass members for their availability in July for a mock interview session with Laura Kelly and Katherine related to accreditation indicators. More information to come.

7. **PRESIDENT'S REPORT**

Gerry discussed the Board evaluations and the comments related to conflict of interest.

The Board went in-camera at 7:26pm. (In-camera minutes are held in a separate confidential depository along with pertinent information related to the discussions).

8. **BOARD MEETING REFLECTIONS / EVALUATION**

(The Board remained in-camera until 7:30PM)

9. **ADJOURNMENT**

Motion: The meeting adjourned at 7:30pm

Moved by all unanimously.

Pinecrest-Queensway Community Health Centre

BOARD OF DIRECTORS **Minutes of Meeting Held June 15th, 2021**

PRESENT: Gerry Harrington, President
Jill Skinner,
Sapna Mahajan, Treasurer
Adrienne Coddett
Katherine Cole

Stephen Williamson,
Janet Bowes,
Layal Younes Dewolf
Meng Jin
Metem Pamir

STAFF: Christopher McIntosh, CEO
Scott Miller, Director, Corporate

Katherine Doucette, Minute taker

REGRETS: Cathy Doolan, Parm Bahniwal,
Secretary, Wayne Ng

ITEM

Welcome

Gerry called the meeting to order at 5:30pm with quorum established. No conflicts were declared.

1. APPROVAL OF AGENDA

Motion: The agenda was approved unanimously as presented with slight modification. Additional information received yesterday related to the SSM announcement for Employment Services and an Operational update related to the bridging action plan was added for discussion.

Moved by: Sapna Mahajan

Seconded by: Layal Younes Dewolf

2. APPROVAL OF MINUTES

Motion: The minutes of May 18th, 2021, were approved unanimously as presented.

Moved by: Janet Bowes

Seconded by: Meng Jin

3. BOARD ORIENTATION

a) Program Report & Operational Plan Update

The Board reviewed the centre's overall program report for January to May 2021 period. The report provided key operational highlights with specific reference to the ongoing work around the COVID-19 community response and virtual service delivery.

ITEM

Christopher presented the Board with the operational plan update for the 2021 bridging action plan. A discussion ensued based on the three pillars and how this will align with the strategic plan coming in early 2022.

4. BUSINESS

a) 2020-21 Budget

Scott advised that the annual draft audited financial statements and Auditor's report will be presented by Welch LLP to the Finance Committee on June 24th. Scott advised that after the first review of the statements received, the auditors have provided a clean opinion with no internal deficiencies.

An update with electronic approval will be sent to the Board following the Finance Committee meeting on June 24th.

5. COMMITTEE MEMBERSHIP

a) Governance/Nominating Committee (Board Member recruitment - Fall Term)

Gerry shared that the posting for the volunteer board positions closed on May 31st. We are pleased to share that we have some solid applicants that come with governance experience and who are reflective of the broad diversity of communities we serve. We will be having initial conversations next week to confirm interest and will then be providing the applicant profiles to the committee for their review and decision regarding upcoming interviews.

6. CHIEF EXECUTIVE OFFICER'S REPORT

a) CEO Report

The CEO provided an overall report of key operations since the last meeting in May 2021.

Christopher highlighted areas such as PQ's on-going outreach to vulnerable populations, including a pop-up clinic offered onsite to support the efforts of Ottawa Public Health in Bay Ward. Christopher also shared that as the vaccination rates continue to trend upwards, the centre will continue to monitor and assess return to in-person services.

Accreditation continues in-house and interviews have been scheduled with employees and Board members.

Co-Chairs of the OHT, PQCHC and the Ottawa Hospital have concluded meetings with the Co-Leads of mental health, frail older adults, primary care providers, and digital health teams. On-going work continues as recruitment for additional resources is underway and interviews are being scheduled for possible candidates.

b) MSAA Board Briefing Declaration of Compliance

The President of the Board is required to report to the Board of the Champlain LHIN on a semi-annual basis concerning the CHC's compliance with fulfilling its obligations under the service accountability agreement (the "M-SAA").

ITEM

This was presented to Board and approved unanimously as presented on June 15, 2021.

Motion: The Board approved the declaration of compliance.

Moved by: Jill Skinner

Seconded by: Sapna Mahajan

CARRIED

c) Executive Limitations

Christopher provided the annual 2020-21 Executive Limitations report to the Board.

7. **PRESIDENT'S REPORT**

Gerry discussed the Annual Board evaluation and comments received with the committee.

The Governance committee will be reviewing the overall results at the next meeting. A discussion ensued around Board orientation for new members and implementing a 6-month evaluation as a check-in with new board members for each new term. The Governance committee will also put this on the agenda for the next meeting.

The Board went in-camera at 6:48pm (In-camera minutes are held in a separate confidential depository along with pertinent information related to the discussions).

8. **BOARD MEETING REFLECTIONS / EVALUATION**

(The Board remained in-camera until 7:08pm)

9. **ADJOURNMENT**

Motion: The meeting adjourned at 7:30pm

Moved by all unanimously.

Pinecrest-Queensway Community Health Centre

BOARD OF DIRECTORS **Minutes of Meeting Held September 21, 2021**

PRESENT: Janet Bowes (Chair) Katherine Cole
Sapna Mahajan (Vice-Chair) Meng Jin
Stephen Williamson (Treasurer) Rahil Dattu
Layal Younes Dewolf (Secretary) Kwame Amoako
Gerry Harrington Wayne Ng
Adrienne Coddett
Cathy Doolan

STAFF: Christopher McIntosh, CEO (Ex-Officio)
Scott Miller, Director, Corporate Services

REGRETS: Parm Bahniwal

GUESTS: N/A

ITEM

Welcome

Janet Bowes called the meeting to order at 5:30pm with quorum established.
No conflict of interests were brought forward.

1. ELECTION OF OFFICERS

The Election of Officers the 2021-22 term was conducted, and the following slate of members were discussed and presented for election:

Chair: Janet Bowes

Vice-Chair: Sapna Mahajan

Treasurer: Stephen Williamson

Secretary: Layal Younes Dewolf

MOVED by Wayne, **SECONDED** by Gerry, **THAT** the slate officers for the 2021/22 Board of Directors be approved as presented.

CARRIED

2. APPROVAL OF AGENDA

Motion: That the agenda be approved as presented.

Moved by: Gerry Harrington **Seconded by:** Cathy Doolan

CARRIED

Accreditation

PQCHC is accredited with the Canadian Centre for Accreditation in keeping with our obligations to our health funder. Accreditation reviews occur every four years, and our latest onsite and document review occurred in late August. The process involves a thorough policy and document review as well as interviews with employees and volunteers, including members of our Board. The reviewers were extremely impressed by the Centre's work. They said the passion, expertise and dedication of our teams really came through. Our commitment to quality improvement and the range of quality improvement initiatives taking place across the organization was noted. As was our investment in knowledge and learning – whether it be training, evaluations, or research. Our evidence-informed planning, programming and decision-making was considered a true strength. Our support for our employees and teams was highlighted. The initial COVID response evaluation and use of Guarding Minds at Work to assess and address psychological health and safety in the workplace were mentioned as examples.

For our primary care team, their community-based, client-focused supports and services were highlighted. During the site visit, the reviewers spoke to a few clients who shared how their providers “went above and beyond” to meet their health and social needs. The team's work in migrating and optimizing the new EMR system was also noted.

Lastly, and most importantly, our wide range of accessible programs that address the social determinants of health, health equity, and the diverse needs of our clients and communities was commended.

As always, there were a few areas of improvement noted in our preliminary report we received on September 13th. Overall, the report listed we met 23 out of 23 Leading Practice Standards and 33 out of 37 Mandatory Standards. Of the 350 indicators we were asked to meet, we met 345 giving us an overall score of 99% which is something for us all to be proud of together! The items requiring more evidence pertain to:

- A 12-month diversity, equity and inclusion plan for volunteers;
- A summary of occupational health and safety workplace inspections;
- A policy confirming procedures for disposing of any unneeded or expired medication that may be brought into the centre;
- A written 12-month schedule for any equipment that requires regular or period inspection, testing, maintenance or calibration; and,
- A sample volunteer feedback survey on their performance and experience.

We'll make the necessary changes and provide additional feedback/evidence before receiving our final accreditation decision and report in our response due by October 25, 2021.

Ontario Health Team (OHT)

As Co-Chairs of the OHT, PQCHC and the Ottawa Hospital continues to support the development of new care pathways for our priority populations of frail older adults and adults living with substance misuse and mental health concerns. We have completed our quarterly reports and have met with Ministry staff to discuss our strengths and areas for development. The team continues to build their infrastructure capacity with the on-boarding of two, temporary project and engagement supports that are funded through our dedicated OHT funding stream.

Employment Services Transformation

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In partnership with regional service sites located in Eastern Ontario, we have put forward a collaborative proposal to serve as regional Site Services Managers (SSM) as part of the province's transformation of employment services. On September 10th we were notified that we were successful applicants in the first stage of application, the Request for Qualifications (RFP). We move forward with preparing a submission for the Request for Proposals (RFP) expected to be launched in early 2022 as part of the rolling out of SSM implementation across the province. This is an exciting development in keeping with our collaborative and values-based ways of working.

COVID-19 Update

In compliance with provincial requirements, we have developed and implemented a COVID-19 vaccination policy which was implemented on September 13th to meet with directives. We are pleased with the high uptake of vaccination from our team and we will continue to provide accommodations in accordance with the Ontario Human Rights Code.

7. PRESIDENT'S REPORT

The Board discussed the role of organizational and collective advocacy and agreed to place the item onto the October meeting agenda for further discussion.

8. ADJOURNMENT

Motion: The meeting was adjourned at 7:05pm.

Moved by: Wayne Ng

Seconded by: Katherine Cole

CARRIED

Pinecrest-Queensway Community Health Centre

BOARD OF DIRECTORS
Minutes of Meeting Held October 19, 2021

PRESENT: Janet Bowes (Chair) Katherine Cole
Stephen Williamson (Treasurer) Meng Jin
Layal Younes Dewolf (Secretary) Rahil Dattu
Gerry Harrington Kwame Amoako
Adrienne Coddett Wayne Ng
Cathy Doolan Parm Bahniwal

STAFF: Christopher McIntosh, CEO (Ex-Officio)
Scott Miller, Director, Corporate Services

REGRETS: Sapna Mahajan

GUESTS: N/A

ITEM

Welcome

Janet Bowes called the meeting to order at 5:30pm with quorum established.
No conflict of interests were brought forward.

1. APPROVAL OF AGENDA

Motion: That the agenda be approved as presented.

Moved by: Rahil Dattu **Seconded by:** Gerry Harrington
CARRIED

3. APPROVAL OF MINUTES

Motion: That the minutes of September 21, 2021, be approved as presented.

Moved by: Cathy Doolan **Seconded by:** Gerry Harrington
CARRIED

4. BOARD ORIENTATION

- a) The orientation and education session for this month included the viewing of the Alliance for Healthier Communities first of two training modules on Health Equity followed by a discussion on how Health Equity is the north star of our organization's community service mandate.

5. BUSINESS

a) Insurance Coverage

Scott provided an overview of our insurance coverage for information.

- Tendering process for market insurance quotes is to be done at a minimum every 5 years following regulations set forth under the Broader Public Sector Accountability Act. This was previously conducted back in June 2015.
- We did go to market prior to renewing our 2021-22 Coverage with little success and we encountered challenges in having one insurer cover the full breadth and scope of our organization. As a result our broker recommended remaining with our existing insurer.
- No changes were made to our coverages and the new contract was agreed upon for the April 1, 2021 to April 1, 2022 period. We experienced a 6.9% increase in our annual premiums for the current period on our regular coverage. The coverage in place includes a significant bump in the amount of Cyber insurance coverage. We now have \$5M coverage (previously \$2M) which speaks to the current threats and risks that are associate with our increasingly virtual world. This additional coverage also opens the door for our Clinicians to access the EMR portal at the Ottawa Hospital.
- During the past 12 months, we have not submitted any claims arising out of operations or otherwise.

b) 2nd Quarter Financial Statements

Scott provided an overview of the 2nd quarter financial statements.

- Our funding streams have remained solid despite all of the uncertainties brought about by Covid-19. We have not experienced any reductions in funding directly related to Covid this fiscal. All our major funding streams have been received in accordance with our funding agreements that are in place for 2021-22.
- Our overall fiscal budget now stands at \$28.1M which is \$1.7M higher than the Board approved budget for 2021-22. There are 3 major program increases that lead us to this number. We have an additional \$424k for our First Words program through the MCCSS, an additional \$322k for our PSW program through the MLTSD as well as in year funding that is supporting our work with the Ottawa Health Team of \$989k.
- Q2 revenues were \$15.5M compared to Q2 approved budget of \$14.5M. Included in these revenue figures were \$332k of additional funding for our PSW program with the MLTSD, a \$468k payment received in September for our Families First programming that was budgeted for Q3 as well as \$90k for Food Security received from the Ottawa Food Bank. All major funding streams have been received in their entirety including the LHIN, City of Ottawa, MCCSS and MLTSD.
- Salaries and benefits, and program expenditures are each running favourable variances.
- Monthly statements are circulated to Program Leads and Directors and are reviewed at the Finance level continuously to ensure they are in line with funding agreements and

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yearend expectations. At various intervals throughout the fiscal year we meet directly to finalize costs and make sure the statements are complete and accurate.

- All statutory and mandatory government remittances have been done as required as of September 30, 2021.

MOVED by Wayne Ng, **SECONDED** by Gerry Harrington, **THAT** the 2nd Quarterly Financial Statements be approved as presented.

CARRIED

c) Risk Management Monitoring

Scott reviewed the briefing note updating the Board on current risk factors facing the organization and our plan to monitor and address these risks. The relocation of our Employment Services site, the preparations for submission of our application to serve as a Site Service Manager for Employment Services, mandatory vaccination policy, recruitment, and returning to onsite staffing and programming were discussed.

d) Program Update

Christopher provided highlights from the program update summary capturing client service activities from May to October 2021.

e) Legislation Review

Christopher reviewed highlights from changes anticipated to be passed by the legislature shortly regarding the Ontario Non-Profit Corporations Act and preparations the Centre has undertaken to ensure we are prepared.

6. CHIEF EXECUTIVE OFFICER'S REPORT COVID-19 Update

We have all worked hard to keep our families, colleagues, community members, and clients safe throughout this pandemic – by wearing masks, increasing handwashing, physical distancing, and getting the vaccines when they were available to us. The COVID vaccines are an essential line of defence in our efforts to keep the spread of COVID-19 undercontrol and ultimately turn the corner on this pandemic.

A few weeks ago, the provincial government announced minimum standards regarding COVID-19 vaccination for those working in health care settings. At PQCHC, we strive to meet the needs of the diverse communities we serve. Our supports and services pay particular attention to those facing barriers to access, including those most vulnerable and at risk. As such, in line with our health and social service partners here in Ottawa, PQCHC has implemented a new policy requiring all employees, contracted services, volunteers, and students to be fully vaccinated by October 30, 2021.

Accommodation in Accordance with the Ontario Human Rights Code PQCHC is committed to providing a workplace free from discrimination and harassment in accordance with the

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Ontario Human Rights Code. PQCHC will accommodate Employees who cannot obtain a vaccine due to a protected ground of discrimination up to the point of undue hardship. Employees who are not able to obtain a COVID-19 vaccine for reasons related to a protected ground under the Ontario Human Rights Code, can request accommodation and by cooperating with the accommodation process as set out in PQCHC's Accommodation Policy, which may include providing information to establish the existence of a protected ground, related restrictions, and possible methods of accommodation. Consequences of Non-Compliance with Policy Subject to accommodations under the Ontario Human Rights Code as referenced above, employees who do not comply with this Policy may be subject to disciplinary measures. Any employees who refuse to disclose vaccination status to PQCHC and/or refuses to get vaccinated in accordance with this Policy, will be asked to provide written reasons for the refusal (e.g., personal choice, religion, medical grounds, etc.). PQCHC will review the information provided and may implement control measures up to and including restricting access to the workplace, restricting access to the public or other employees, imposing regular testing requirements, placing the individual on an unpaid leave of absence, and/or modifying or terminating their contract of employment.

Funding Update: City of Ottawa

In the Spring, PQCHC responded to a request for funding applications from the City of Ottawa's Sustainability Funding – Community Funding branch. The City has recently revamped its funding priorities and review process to provide new five-year funding agreements. On September 23rd, we received notice that the Allocations Committee reviewed our Request for Offer application for 2022 and \$1,540,486 is approved (\$10,000 increase from December 2021 funding). These funds support our Community Houses, dedicated programs for racialized youth (outside our Pathways to Education Program), and our organizational infrastructure. Negotiations for our new funding agreement including the purpose of the funding and expected outcomes and reporting requirements were initiated by the City during a first meeting on October 12th.

The Community Funding Unit received over 300 applications totaling \$66M. The Allocations Committee approved proposals from 95 different organizations for a total of \$25.8M.

Alternatives Responses to Community Crisis (ARCC Report)

As referenced at the September meeting of the Board, PQCHC is part of the Ottawa Coalition of Community Health and Resource Centres (The Coalition) which commissioned a research report entitled 'Rethinking Community Safety in Ottawa'. (Please refer to Board meeting portal for the full report.) The Coalition Co-Chairs and Coordinator have shared the findings of the report with City staff, representatives of the Ottawa Police Service, City Councillors, and community partners in the hopes of continuing an ongoing dialogue.

7. PRESIDENT'S REPORT

Advocacy: The Board discussed organizational and collective advocacy and the role of governors. Members will review the briefing note and background documents supplied in order to continue the conversation at the November meeting.

8. ADJOURNMENT

Motion: The meeting was adjourned at 7:11pm.

Moved by: Gerry

Seconded by: Kwame

CARRIED

Pinecrest-Queensway Community Health Centre

BOARD OF DIRECTORS

Minutes of Meeting Held November 16, 2021

PRESENT: Janet Bowes (Chair) Katherine Cole
Sapna Mahajan (Vice Chair) Cathy Doolan
Layal Younes Dewolf (Secretary) Wayne Ng
Gerry Harrington Paramjit Bahniwal
Rahil Dattu Adrienne Codette

STAFF: Christopher McIntosh, CEO (Ex-Officio)
Scott Miller, Director, Corporate Services
Brandy Smith, Executive Assistant
Laura Kelly, Manager, Organizational Development

REGRETS: Stephen Williamson (Treasurer) Kwame Amoako
Meng Jin

GUESTS: N/A

Welcome

Janet Bowes called the meeting to order at 5:30pm with quorum established.
No conflict of interests were brought forward.

1. APPROVAL OF AGENDA

Motion: That the agenda be approved as presented

Moved by: Gerry Harrington **Seconded by:** Sapna Mahajan
CARRIED

2. APPROVAL OF MINUTES

Motion: That the minutes of October 19, 2021, be approved as presented.

Moved by: Gerry Harrington **Seconded by:** Sapna Mahajan
CARRIED

3. BOARD ORIENTATION

Cathy Doolan and Christopher McIntosh presented options to help the Board define the role of governors in organizational advocacy. The Board agreed that the CEO will advise the Board on advocacy initiatives that fit with our mission and values and as aligned with our governance model. Advocacy will be included as a standing item on the Board Agenda to review any items proposed by our networks (Ottawa Coalition of Community Health and Resource Centres and Alliance for Healthier Communities).

4. BUSINESS

a) Quality Review Monitoring

Laura Kelly presented an update on Quality Improvement. Highlights from the presentation were:

- An additional 18 employees have completed LEAN training.
- 41 improvements have been completed to date including 22 in infrastructure, 2 in access and 17 in quality.

b) Operational Plan Monitoring

Laura Kelly presented a progress report on the Operational Plan. Highlights from the report were:

- Access:
 - We supported and promoted Neighbourhood Vaccination Hubs and developed and implemented a vaccination policy for their employees.
 - We are increasing in-person services while keeping employees and clients safe.
 - We will continue to offer virtual services where it is effective.
- Quality
 - Many programs have begun offering in-person services (I.e., Early Years play groups, after school programming and adult social programming at our Community Houses and First Words speech and language therapy).
- Infrastructure
 - We successfully completed Accreditation
 - We are undergoing a website review to make it easier to access information.

c) Strategic Plan

The Board discussed the guiding principles for strategic planning next year. Christopher McIntosh and Laura Kelly will prepare options for discussion at the next meeting in January.

5. CHIEF EXECUTIVE OFFICER'S REPORT

Accreditation

The accreditation process was successful, and we were granted accreditation on October 27th. We have met all standards for Accreditation.

Integrated Healthcare Update

We've been working with our teams to better integrate our services and internal referrals. Earlier in 2021 we realigned our mental health and primary care services within one department. As part of our efforts to increase client access, we've been working with our employees to stabilize work schedules as part of our need to increase the amount of clients assigned to providers, reduce wait times, and plan for better client outcomes.

We will continue to:

- Work with our team to create more full-time opportunities for providers and reduce the need for overtime;
- Adjust our schedule to create more availability for client visits;
- Ensure that each team member is able to bring forward scheduling considerations for review and formalized accommodation plans are implemented as appropriate;
- Realign administrative support staff and shifting resources to enhance mental health supports for clients based upon provider feedback that mental health is a prime reason for visit; and,
- Launch a Client and Family Advisory council to assist with the development of how services should be delivered.

The Director of Integrated Care will join the Board in January as part of the ongoing *Board Orientation and Education* portion of the agenda.

6. PRESIDENT'S REPORT

A Governance Committee meeting will be planned for December. Board members are reminded that the next meeting will take place on January 18, 2022.

7. ADJOURNMENT

Motion: The meeting was adjourned at 6:58pm.

Moved by: Gerry Harrington **Seconded by:** Katherine Cole
CARRIED