

Present: Jacques Pelletier (Board Chair), Liz Snider, Janet Cosier (via teleconference), Michèle Le Blanc, Terry Lee, Terry Gilhen, Michele Bellows, Peter McKenna (Executive Director), Kelly Robinson, Director of Primary Care, Anne Caron, Director of Corporate Services, Jane Page-Brown (recorder)		
1.	Welcome, regrets & absences	Board Chair, Jacques Pelletier called the Board to order at 5:30pm Regrets: Ian Donald, Bob Long, Deb McGuire
2.	Approval of Agenda	New item: #8. Business arising - d. Board recruitment MOTION: that the agenda be approved. Moved by L. Snider, seconded by M. Bellows, Carried.
3.	Declaration of Conflict of Interest	None declared
4.	Approval of Board minutes	MOTION: That the July 24, 2018 Board meeting minutes be approved. Moved by T. Gilhen, seconded by L. Snider Carried.
5.	Remarks from Board Chair	J. Pelletier noted this will be his last meeting as Chair with P. McKenna as the Executive Director; and he looks forward to the generative discussion later in the agenda on international CHC trends. Two key initiatives under way: - CEO Recruitment - Smiths Falls Services “Village” Other priorities for the Board to monitor include: - MD shortage - Provincial government priorities - Sub region planning – challenges and opportunities The Alliance for Healthier Communities Board is seeking applications for Directors. M. Bellows reported that she is submitting an application. Two Board members from Salt Spring Community Health (British Columbia), a non-profit organization seeking to develop a CHC, are visiting the area on Friday October 5 th . P. McKenna will be touring them around the two CHCs and invites any Board members who are available to join him at any point during the day. T. Gilhen agreed to join the tour in Merrickville for the afternoon segment.
6.	Consent Agenda	The Chair asked if there were any questions or issues; none were identified. MOTION: That the consent agenda be approved as presented. Moved by M. Bellows, seconded by T. Gilhen Carried.

	a. Executive Committee	Minutes included in the Board package
	b. Finance Committee	T. Lee noted that the financial statements ending August 31, 2018 were circulated via email on Monday October 1 st . There were no questions put forward.
	c. Executive Director Report	P. McKenna noted that his verbal report would centre on the generative discussion portion of the meeting and highlights from the Community Health Centre (CACHC) Summit that he recently attended in Victoria, BC.
	d. Board Chair Report	Included in the Board package
7.	Collaborative Governance	<p>The Collaborative Governance (CG) planning committee has selected Friday December 7th as the date for the next CG Forum. (Location is the Free Methodist Church Hall, 573 Hwy 29, south of Smiths Falls).</p> <p>Further details and agenda will follow, however the proposed topics are as follows:</p> <ul style="list-style-type: none"> - SE LHIN Update - LLG Sub-Region Integration Table Update - Privacy: Role of Boards of Directors - Addictions & Mental Health Redesign: Progress & Future Initiatives - Health Links: Successes & Challenges Looking Forward - Homelessness & Housing: 2018 Enumeration Results & Housing Challenges in Lanark, Leeds and Grenville
8.	Business Arising	
	a. Smiths Falls Capital Project Working Group	<p>J. Pelletier reported that the “Capital Project Working Group” is transitioning to the “Capital Development Steering Committee”.</p> <p>T. Lee stated that the project delivery plan outlines the overall approach and governance of the project and that Board approval is required in order to move forward.</p> <p>Motion: To accept the Smiths Falls Integrated Health and Social Services Centre – Project Delivery Plan as presented. Moved by, T. Lee, seconded by M. Bellows Carried.</p> <p>T. Lee recapped discussions re: the need to conduct environmental site assessments as one of the conditions of purchasing the land. Through a competitive process, 3 firms were invited to submit a proposal for a Phase 1 Environmental Site Assessment, a Geotechnical Investigation and a Designated Substance Survey.</p> <p>Motion: To accept the recommendation from the Capital Project Work Group that when ready to move forward with the environmental assessment, the contract be awarded to the firm EXP. Moved by, T. Lee, seconded by L. Snider Carried.</p> <p>It was agreed that the work would not commence until after the committee reconvenes in mid-October and after the upcoming meeting with the local MPP.</p>

		<p>T. Lee suggested that a future Board agenda item address the need for a fundraising committee to support the work of the capital project and the proposed residential hospice.</p> <p>P. McKenna reported that confirmation on a date for a meeting with the local MPP/Minister of Municipal Affairs and Housing – Steve Clark is pending. It is expected that the meeting will take place during the week of October 9th.</p>
	b. Rideau Tay Residential Hospice – Stage One Application	<p>The Stage One Application is still in development, and being vetted by the RCHS senior leadership team. A proposal is also being developed to confirm SE LHIN support in relation to start-up costs and additional funding for the first few years of operation. It is expected that the application will be tabled at the October 30th Board meeting.</p> <p>Discussion followed in regards to revisiting outreach and community engagement activities building on the February 2018 public meeting. J. Pelletier suggested that more emphasis and planning in this area (ie. community advisory committee, fundraising plans) should be addressed as the project evolves and conditions start to align.</p>
	c. CEO Search Committee	<p>J. Pelletier conveyed that the recruitment process is going well. He meets regularly with the consultant who has reported an excellent response to the recruitment ad.</p> <p>Next steps:</p> <ul style="list-style-type: none"> - Oct 9th – Committee will review candidates and develop a short list - Late October/Early November – interviews will be conducted - By end of November – recommendation to the Board for formal approval - An interim plan for the Executive Director role is being considered
	d. Board recruitment	<p>J. Pelletier reminded the Board that there are two Director vacancies to fill. The capital and residential hospice projects and related activities (ie. fundraising) will help identify skills and attributes for these positions. He encourages informal networking until more formal discussions are planned.</p>
9.	New Business	
	a. Board and Committee Meeting Dates (Sept. 2018 – June 2019)	<p>The three documents were reviewed and accepted, understanding that they are all living documents and subject to change as Board conditions evolve.</p>
	b. Draft Board Calendar (Sept. 2018 – June 2019)	<p>M. Bellows will discuss with J. Pelletier her interest in joining a sub-committee of the Board.</p>
	c. Draft Board Organizational Chart (Sept. 2018 – June 2019)	<p>It was agreed to add the following to the Board Organizational Chart: Rideau Tay Residential Hospice Co-Leads – T. Gilhen and M. Bellows.</p>

	d. Board/Staff Christmas Breakfast	Thursday December 13, 2018 – 8:30 – 9:30am - Smiths Falls Memorial Community Centre An invitation will be sent in the next couple of weeks. (After the breakfast - a short board meeting will be held - if needed.)
10.	Generative Discussion	CHC International Trends (Led by Peter McKenna)
		<p>P. McKenna thanked the Board for the opportunity to attend the CACHC National Conference held in Victoria BC. He provided the following highlights:</p> <ul style="list-style-type: none"> - 120 delegates in attendance - American Association of CHCs was invited to attend (US CHCs are federally legislated) - 1 in 12 use CHCs in the US - Majority of US focus on rural population vs in Ontario most are urban focused - US CHCs have never been allowed to deliver needle exchange - Very well developed primary care services in the US – oral health is embedded; - However underdeveloped – in terms of community development, health promotion and community engagement (They want to learn more from Canada in these areas) - Very astute politically in the US; states are clustered to form associations - US delegates reported that the climate for most vulnerable has changed - People are not coming to CHCs for care because of fear – therefore need to do more outreach to find them - Feeling they are not leveraging telehealth, tele-homecare, not using technology well – trying to expand - Have a robust data system; funded well in this regard - Focus is on measuring value better vs measuring volume (demonstrating effectiveness vs efficiency) - Very focused and driven to ensure professionals work to full scope of practice - US and Canadian CHCs agree - believe not moving fast enough towards value (quality) based payments - US has made some gains – in this area - Also US CHCs would like better relationship with public health (much like Canada) <p>CACHC highlights:</p> <ul style="list-style-type: none"> - Priorities for 2019 election: Investment in CHCs, Housing & Homelessness, Pharmacare, Dental Care, Newcomer health, Harm reduction - A national report is being prepared (expected spring 2019) in preparation for the election next fall to promote the CHC model nationally - Next June – an international CHC conference will be in Ottawa (all geared towards the Federal election) <p>Discussion and questions:</p> <ul style="list-style-type: none"> - Focus on value based funding is increasing - Data collection can be costly and data analysis can be complex

		<ul style="list-style-type: none"> - Question may be – Is the investment worth the effort? (ie based on results) - Quality based procedures – data is not robust enough to measure the value <p>Any changes to the RCHS strategic plan and/or collaborations based on conference learnings?</p> <ul style="list-style-type: none"> - P. McKenna suggests that the new CEO role will be key in bringing the needed expertise - Community engagement remains integral to improving the health system - More collaborative work at the sub region level is needed - Public health as a partner at the Sub Region Integration Table was noted as an enabler for more work on prevention side of things <p>Agents of Care, Agents of Change (Survey Results)</p> <ul style="list-style-type: none"> - Top 15 Club – page 6 - Question: Whether there are any gaps or areas where RCHS could or should provide services? - Comparison of the contexts (US and Canada) - Canada has a deeper safety net; therefore there may be a range of partners involved in providing services - For example, the new Smiths Falls Village will be comprised of many partners providing many services - RCHS always assesses who else may be delivering a program or service before establishing new programs - In the US the CHCs may be the only service provider, therefore provide a broader range of services <ul style="list-style-type: none"> - Discussion re: rates of uninsured in Canada vs US - RCHS has a low rate of uninsured clients; but supports are available to assist – care is never denied <p>J. Pelletier thanked P. McKenna for this synopsis and reflections from the conference.</p>
11.	Future Agenda/ Generative Discussion Items	<p>Discussions re: collaboration and role of RCHS Board:</p> <ul style="list-style-type: none"> - Community emergencies (ie. tornados and other disasters) - Opioid Crisis - Public Health – sub region collaboration and prevention efforts
12.	Meeting Evaluation – Terry Gilhen for - Ian Donald	<p>From the July 24th Board meeting evaluation :</p> <p>T. Gilhen reported a participation rate of 60%.; All indicated a rating of 4 (Excellent)</p> <p>Summary:</p> <ul style="list-style-type: none"> - Documentation overall was timely and adequate - One comment was that it was a large package and that it needed to be - Most effective agenda items: strategic discussions (eg capital project discussion) - No least effective items were noted; and no suggestions for improvement - At least one comment re. looking forward to more discussions on health hub and hospice

		T. Gilhen reminded the members in attendance to complete the evaluation for tonight's meeting.
13.	Meeting Adjournment	MOTION: That the meeting be adjourned at 7:30pm Moved by, T. Lee Carried.
14.	Next Board Meeting	Tuesday October 30, 2018 (Merrickville CHC- Community Room) Location: 5:00 Dinner 5:30 Meeting

Approved by: _____

Chair

Secretary

Date

Date