



Minutes of the Board of Health Regular Meeting  
 Thursday, October 25, 2018  
 Leeds and Grenville Room  
 458 Laurier Blvd., Brockville  
 4:00 p.m. – 6:08 p.m.

Present:

Anne Warren, Chair	Harsh Patel - teleconference
Doug Malanka, Vice Chair	Sherryl Smith
Aubrey Churchill	Toni Surko
William Fayle	Absent: Joe Gallipeau, David LeSueur
Teresa Jansman	
Candace Kaine	Paula Stewart, Medical Officer of Health
David Nash	Heather Bruce, Executive Assistant

Jackie Empey, Business Manager - QCIS	Jane Hess, Director - HLD
Claire Farella, Manager - CHP	
Shani Gates, Director - QCIS	Tawnya Boileau, Susan Healey

**1. Call to Order**

Anne Warren called the meeting to order at 4:00 p.m. and welcomed everyone.

**2. Traditional Land Acknowledgement Statement**

Anne Warren read the Traditional Land Acknowledgement Statement.

**3. Approval of the Agenda**

The agenda items were reviewed.

*Motion: That the agenda of the October 25, 2018 Regular Meeting be approved as circulated.*

**4. Conflict of Interest Declaration**

None declared.

**5. Presentation:**

**5.1. The Walking School Bus**

Tawnya Boileau, School Health Coordinator, presented on the Walking School Bus Project. She explained the meaning of active school travel – a human powered way to get to school - and the walking school bus – a group of children walking together with an adult leader.

The benefits of active school travel (AST) are healthier children, less traffic and pollution and safer school zones along with better academic performance.

The Health Unit received \$100,000 over two years to pilot community tailored Walking School Bus programs in Brockville, Smiths Falls and Mississippi Mills. Twelve communities throughout Ontario were successful in receiving this funding. The purpose is to increase the number of students/families who choose AST and develop some best practices for our area that we can share.

The biggest reason for children not walking to school is distance. Parental fears are also a reason but parents have said that they would allow their children to walk to school if they were supervised. The keys to the program's success are having an AST facilitator, education, encouragement, engineering (safe infrastructure), enforcement (police partners at the table, speed radar signs) and evaluation (classroom hands up survey with kids and parents survey).

Anne Warren thanked Tawnya Boileau for her presentation.

## **6. Consent Agenda**

*Motion: The following items on the consent agenda be approved as circulated:*

*6.1. Approval of the Minutes from the Board of Health Regular Meeting held on September 20, 2018*

*6.2. General Correspondence*

*6.3. MOH CEO Duty of Care Report*

*6.4. Governance and Quality Assurance Committee Duty of Care Report*

*Motion Carried.*

## **7. New Business:**

### **7.1. LGL 2019-2022 Strategic Plan**

The 2019 Strategic Plan is built on the work we do with our community. Our hope is that it creates a vision for us to work with the community and public. The Board members on the Steering Committee provided valuable input to the plan.

Shani Gates spoke about the Health Unit identity and advised that a lot of work was done at Think Tank meetings to brainstorm ideas about the mission, vision and values to come up with changes. Our values did change significantly. We had eight values before (best practice is three-four). The group wanted a set of values that were motivating to staff and our community. The newly created values are: integrity, optimism, connectedness and compassion.

The quality principles are from Excellence Canada and they expect organizations to adopt and model them. They round out the picture of expectations for our staff and the ways in which we are going to work. These fit nicely with our values and our journey for continuous quality improvement. A question was raised about the word agility in the Principles from Excellence Canada. Being agile means that you can move quickly to be responsive as the situation changes.

- **Recommendation:** That the page with the external and internal mission statements, the vision and values page be reorganized to group the external vision, mission and values together, and then put the internal vision and principles under a new section that describes the companion document that outlines the work to be done to achieve Organizational Excellence.
- **Recommendation:** The integrity value will be changed to: choosing courage; doing what's right; practicing values.

Health Equity was reviewed. Given that is a fundamental paradigm for how the Health Unit does its work; we felt it was important to put health equity first.

- **Recommendation:** Simplify the vision statement to: Individuals have opportunities to have a healthy life while realizing their own potential in a supportive community that effectively responds to the social determinants that affect health and quality of life.

Healthy Infants and Children - The definition of healthy growth and development was reviewed.

- **Recommendation:** Add to strategies advocacy for infant child friendly communities (e.g. breastfeeding friendly)

Healthy Youth was reviewed. The suggestion was made to consider 4H as a good partner.

Healthy Communities was reviewed. Promoting healthy environments and health people are included in this section.

Infectious Diseases was reviewed. It has its own section in this plan as it is core public health work.

#### **7.1.1. Communication Plan**

Susan Healey, Communications Co-ordinator, presented the Communication Plan. The Strategic Plan will be approved at the November 15 Board of Health meeting, a media release will go out on November 16 and the plan will be posted on the front page of our website. It will be sent to our partners and all municipalities. Paula Stewart will offer to present the plan to all obligated municipalities and others who are interested.

#### **7.2. Organizational Excellence**

In the past we have included health goals and organizational goals in one document. We received feedback from the Steering Committee that it made sense to separate them out because the audiences are quite different. The organizational goals one is more of our internal administrative work and has a different audience and purpose - our Strategic Plan for Organizational Excellence.

Part of our process was to review the new accountability framework and organizational requirements released in January in the new OPHS. When we did our assessment we are meeting most of the requirements and the areas for improvement have been incorporated into the document.

As members of Excellence Canada we are on a continuous quality improvement journey. We adopted their framework and standards that reflect our ongoing commitment. It is now a set of standards for excellence and innovation. The quality drivers are: leadership, planning, client, partner, people, and process management.

There is a staged approach to certification to make it easier to implement improvement initiatives. As part of our assessment for the strategic plan, we identified gaps and strategies for the plan. We would like to pursue certification with Excellence Canada within the timeframe of the strategic plan and are in good shape for a bronze certification or possibly silver.

There is a page for each of the six drivers with goals and strategies for each driver. We also reviewed any staff surveys done since the last strategic plan, did a SWAT analysis, some focus groups and a staff survey. We are building on the work we have done in our previous strategic plan. This is about putting in a purposeful CQI framework and strategy.

The planning driver was reviewed. With the Annual Service Plans there needs to be a systematic process with an accountability framework and indicators. We have developed a planning pathway and need to ensure we have the right tools in place to identify our priority populations. We are looking at doing training for staff around quality improvement methodology and implementing a new HR/Payroll system.

The client driver was reviewed. This driver looks at client engagement and the client experience and how we measure/listen to feedback and incorporate it into our programs and services. It is setting our standards so that we achieve and measure on our promise. Staff talked a lot about serving clients where they are at; in the stage of readiness for change and measuring and responding to that. It is about evaluation and the broader client experience.

The partner driver was reviewed. Most of the work we do is in collaboration with our partners. A new element in the OPHS is meaningful engagement with our indigenous populations. We have drawn that out to be training and building cultural competency of our staff. We can always improve and build on engagement tools and processes.

The people driver was reviewed. This is about our employees and our strength is employee engagement and protection of physical safety. It is about the development of a workforce management plan and looking at capacity and working on succession planning. We want to focus on dealing with difficult situations and give staff skills to work on conflict resolution and concentrate on workplace mental health and promotion.

- **Recommendation:** Develop an evaluation framework for how we are doing with the People Driver.

The process driver was reviewed. This speaks to the importance of a prevention based approach and being proactive rather than reactive, and having good process management in place. We do map a lot of our key processes and want to expand to ensure consistency and make improvements. We have identified records management, filehold and procurement as areas of focus over the next three years.

Anne Warren thanked Shani Gates for her presentation.

## **8. Time, Date and Location of Next Meeting**

- Thursday, November 15, 2018 in Brockville

**9. Adjournment**

*Motion: That the meeting adjourn at 6:08 p.m.*

*Motion Carried.*

\_\_\_\_\_  
Anne Warren, Chair

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Date

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Heather Bruce, Executive Assistant

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Date

c: Board members