



OUR MISSION

To provide high quality, family centred and community-based residential and respite care for individuals with complex care needs.

MINUTES

BOARD OF DIRECTORS MEETING

May 14, 2019

1173 Bloor St. W. Boardroom, 6:30 PM – 8:30 PM

DIRECTORS	PRESENT
<i>Alfar, Khalil</i>	✓
<i>Clarke, Eric</i>	✓
<i>Fowler, Noela</i>	✓
<i>Kennedy, Sacha</i>	✓
<i>Litwack-Goldman, Judy</i>	Telephone
<i>Peterson, Mary</i>	✓
<i>Singh, Gaurav</i>	✓
<i>Smith, Sandra</i>	✓
<i>Zingaro, Tony</i>	✓
REGRETS	
<i>Marques, Ana Cristina</i>	
<i>Stelmacovich, Kim</i>	
STAFF and GUESTS	
<i>Bisaillon, Susan, CEO</i>	✓
<i>Tkadletz, Lorraine – Recorder</i>	✓

1. Call Meeting to Order:

Meeting called to order at 6:35 pm by Noela Fowler.

1.1 Quorum and Welcome

A quorum was declared.

1.2 Declarations of Conflicts

No conflicts were declared.



1.3 Approval of Agenda

Approval of Agenda

Motion: Eric Clarke

Second: Sacha Kennedy

Carried: To approve the Agenda for the May 14, 2019 Board meeting of Safehaven.

1.4 Client Stories

Noela shared three stories with Board members as follows:

MW is a new client who started to come for respite March 2019. MW's father passed away a few years ago and her mom is a single mom with 3 children. MW and her twin brother both have special needs. MW's mom was able to go away for 3 weeks in April, which she said was well needed. MW is verbal and fully cognitive and has expressed to mom that although she goes to a few respite places, Safehaven is her favourite and she would much rather come here.

KK is also a new client who started coming in April. Following KK's visit, mom sent an email indicating everything was excellent! "VERY happy with his stay and would like to book two weekends every month for the next few months. The respite rest I got from this was life changing!"

Lastly, another new respite user, LL came for respite May 9, 2019. LL was assessed last year and mom was very hesitant to use respite. It has taken her 1.5 years to book LL to respite and her feedback was that she was very excited when she came to pick up LL. LL was so happy and making noises and laughing that she did not want to leave. Mom has already booked respite on LL's birthday so that mom can bring in food and cake and have staff and other peers help to celebrate LL's birthday. She was very happy with her care.

2. QAM Board Education

Susan introduced Mark Brown, Program Advisor for QAM, who spoke with the Board about their accountability as it relates to QAM and the overall process. QAM is based on The Services and Supports to Promote the Social Inclusion of Persons with Developmental Disabilities Act, 2008 which is a law created to give people with a developmental disability more independence and choice. Mark explained that the law and QAM allows for more flexibility with respect to the specific needs of individuals and includes individual as well as behaviour support plans. Service across the province is more standardized due to the similar tools being used. QAM was developed within the act to ensure that funded agencies cover all the necessary markers and there are up to 350 different indicators that agencies are measured against. Mark advised that we will be given three weeks' notice that a review will take place and the review itself will last approximately one week.

Mark advised the Board on specific sections of QAM that relate to Board members and for which all new Board members must receive orientation including the organization's Mission, Vision and Values. Additionally, there is an annual review of these that is required and it can be done either in a group setting, or policies can be sent to Board members for their review



and sign off. Concrete evidence, including a completion date is required to confirm that Board members have completed the annual review of the Mission, Vision and Values.

Another indicator Mark highlighted for the Board is the review of abuse prevention policies. This is required at orientation when joining the Board as well as annual review with signoff. In addition the organization's abuse prevention policies must be reviewed annually to ensure the policies continue to meet the organization's needs.

The Privacy and Confidentiality indicator requires that Board members receive orientation on policies; however, this is not an annual requirement.

Financial records are required to be audited annually for clients and can be reviewed either internally or by an external agency along with the organizational audit process and Safehaven may consider having someone externally perform this audit. The process for this indicator is currently in development and will be discussed at the next Finance committee meeting. The annual audit will be presented at the AGM and includes a statement indicated that client finances have been audited. If we consider an external review, Mark advised that Community Living Toronto, and Oshawa as well as York South all have good processes in place.

The agency must obtain references for Board members who have direct contact with persons who receive supports from the agency. Mark advised that if we require police checks for Board members, that we have these checks on file for ALL Board members.

During the weeklong inspection process, the Ministry Program Advisor will be interacting with clients and staff, however will not be interviewing them. There will be an exit meeting during which non-compliance will be determined. If there are highrisk non-compliances the organization will have 10 business days to comply and if there are low to moderate risk non-compliances there will be an additional 30 days allowed to come into compliance. There will be a letter of non-compliance posted which will be removed once the organization is in compliance. Compliance is determined at each location and if there is the same compliance issue at more than one location, this will only count as one non-compliance.

There is a whistleblower line set up called ReportON and if there is a complaint, the Ministry can come into the organization unannounced but there are only two reasons for this to happen and they involve either a real threat to health and safety of people or financial misappropriation. Anyone from staff, to families to community members can make reports and in Mark's experience, these are usually genuine. Mark advised that the majority of agencies reviewed are in non-compliance for less than 10 days. Areas that take some time to attain compliance include police checks and CPI and/or First Aid Training as these take time to obtain.

An organization must be QAM compliant if there is one (1) adult living in the location whereas for pediatric licencing the minimum is three (3) children at a site. Mark advised us to call him if we have any questions regarding QAM.



3. Consent Agenda Matters

- 3.1 April 9, 2019 Board Meeting Minutes
- 3.2 Governance PP 1-1.6 Ethical Practices
- 3.3 Governance PP 1-1.7 Recruitment and Selection
- 3.4 Governance PP 1-1.8 Orientation

Motion: Connie Lombardi
Second: Sandra Smith
Carried: To approve the Consent Agenda Matters

4. Quality Report

Complaints and Feedback

Susan reported that there were a total of five complaints, most of which involved communication around care plans and handoffs.

Scorecard

Occupancy Rate of Residential Beds/Days of Care Residential: A client was discharged from services at the end of Dec. and the residential bed remains vacant.

Occupancy Rate of Bloor Respite/Days of Care at Bloor Respite: Some families cancelled as their child became ill and could no longer attend respite; some visits were cancelled as families had large outstanding bills and unwilling to reconcile them despite receiving SSAH. Some families did not book as they had their SSAH frozen.

A new Development Officer joined the organization in February so we anticipate *Grant Applications* will improve going forward.

Communication & Teamwork Collaborative with CPSI (Canadian Patient Safety Institute)

This 18 month initiative is a partnership to create a safer environment with a focus on communication and team work utilizing an approach that was developed using a military process. The goal is to create tight seamless communication involving front line staff and will involve the staff at Bloor which is a suitable location for this project since there is constant change in clients on a daily basis.

5. Committee Updates

Philanthropy and Communications Committee

There has been a lot of positive feedback on the May 2 Illumination event which was a "Friendraiser" more than a fundraiser. In spite of this, there were some donations raised and the silent auction results were good. Susan and Sonia will be following up individually with Board members and will adhere to people's wishes about reaching out to contacts. Overall,



this was a very professional first event and Judy would like to see some smaller meetings as well.

Kudos to Laura, Tony's niece and to Sonia for their work on this event and a very special shout out to Jean Bisailon for everything that Scotiabank donated which was valued at about \$25,000. In total we netted approximately \$20,000 after expenses, although the event was designed to raise our profile and the fundraising was a secondary benefit. This was a first attempt and we did get some feedback on what can be improved. Susan has received emails from some of the executives at Scotiabank and Khalil suggested that we need a partnership strategy. Khalil has experience with corporate partnerships and he feels there is more potential for us to partner with corporations. We are planning to have another similar event in Vaughan and we will be including the mayor of Vaughan in that event.

Finance Committee

The Finance committee has recommended making revisions to our financial reporting format, splitting the almost \$10.9M (as at March 31, 2019) Charitable Fund into two separate funds to position Safehaven better to external stakeholders, including potential donors. This split is aligned to best practice and allows for transparency and clarity.

- *Operating Reserve Fund:* Six-month operating reserve fund of \$2.5M. This fund will be internally restricted and require Board approval for expenditures from this fund
- *Restricted Charitable Fund:* Will hold the balance of the current Charitable fund, and will be hold internally or externally restricted donor funds

It is important how the charitable fund is described in the financial statements; our auditors were consulted and they are pleased with the recommended setup of the funds. Detailed policies are being developed that will outline the specific purpose, scope, procedure, approval process, usage, accounting, reporting and monitoring for each of the funds. These policies/procedures will be approved by the Finance Committee and brought to the Board for approval.

Our investment policy is relatively conservative and this split will help with accountability.

Motion: Connie Lombardi

Second: Gaurav Singh

Carried: To approve the separation of the Capital Fund and the Operating Reserve Fund

Talent Management

Ana Cristina has decided to resign from the Board of Directors due to many competing priorities, including family and business interests. She does however, want to continue to be involved with Safehaven and will therefore continue to sit on the Property Committee of the Board.

A new Board candidate has been interviewed and both Sandra and Mary are recommending her as a Board member. Her name is Jennifer Briscoe and she is a lawyer with a vast amount of experience. She is a strategic and bright individual and is very interested to become a member of our Board. Jennifer had a job when she was a student at a group



home similar to ours and has a perspective on the work we do at Safehaven. The next step is to invite her to attend the June Board meeting and then approval at the AGM in June.

Eric suggested that Jennifer Lovrics, the Finance Committee member may well be a good candidate for Board membership, as she has capital and development experience. Susan advised that she was approached by Holland Bloorview as their CFO is looking for Board experience. This may be someone who could be considered to work on the business case for the new building, but it may be a conflict of interest for her to sit on Safehaven's Board of Directors.

6. Government Relations and Partnerships

This section is covered thoroughly in Susan's CEO report.

7. Ontario Health Team (OHT)

Ontario is one of the last provinces to go through transformation and the Ontario Health Teams are the first attempt at integration. We were invited by SickKids to participate in discussions regarding a submission to become part of an Ontario Health Team (OHT) for Medically Complex Children. Nineteen agencies across the continuum of care came together to collaboratively identify a new approach to care delivery for this vulnerable population that is integrated, client and family focused. Ontario Health Teams are a new way of organizing and delivering services for patients that is considered Integrated Care. Local health care providers will be empowered to work as a connected team and Susan has found that collaboration with our partners is stronger with this new call for OHT submissions. In addition to being part of the formal alliance, we will also be applying as part of the support group and Susan advised that there may be more than 100 applications and the acceptance rate could be as low as 10%. There will be resources that come with this partnership and leadership development will be one of them.

Noela advised that the Board will need to support moving this initiative forward as the next step will require a lot of Susan's time. The Board asked Susan to determine the roles and resources required to support her and the increasing programs we are involved in and to ensure Safehaven can successfully be a part of the health system transformation.

8. CEO Report

On April 24th, the Deputy Premier and Minister of Health and Long Term Care, Christine Elliott, visited our Aurora location. The visit was very positive and she had the opportunity to learn about the organization, our successes and future plans as well as meet clients and our Board President, Noela. She was impressed with our work and the ability to align with our health care partners and had several suggestions regarding opportunities for further transformation to support the goals of the province. The meeting was scheduled for 30 minutes, but went on for almost an hour. Eric mentioned his concern about the complexity and the potential time commitment for Susan, especially considering that the organization wants to get going on the building campaign. He also voiced his concern about how Susan can be involved in this and other time consuming initiatives and asked if we should consider



either hiring someone to assist or consider delaying the initiative. In addition, members identified the need for support with our government relations strategies and that this would also be of assistance.

Gaurav added that we should identify what gaps there would be in structure and to that end he suggested that a strategy to structure discussion is needed. Everything is coming together at the same time, the OHT accelerated partnership and integration as well as organizational design and the new build. The Board will look at a broader discussion at the June Board meeting.

Susan advised the Board that we still do not know what the 2019/2020 budget will be for this year and she has spoken to our ministry supervisors and been advised that it will be forthcoming in June. We have fortunately built a lot of credibility over the last three years. Eric noted that there are several big initiatives at play and it is critical to get them right and he voiced his concern that this may end up being excess work for our CEO to manage at one time.

9. Date of Next Board Meeting: June 11, 2019 at 1173 Bloor St. W. Toronto

Adjournment

Motion: Connie Lombardi
Second: Sandra Smith

Carried: That the May 14, 2019 meeting was adjourned at 9:00 pm.

Recorder: Lorraine Tkadletz, Executive Administrative Assistant

Noela Fowler, President

Connie Lombardi, Secretary