

**Northern Neighbours NPLC
Board Meeting
Wednesday, December 07, 2022
Northern Neighbours NPLC Board Room**

PRESENT:

| | |
|--------------------|---|
| Shawn Dookie | Chair <i>via Video conference</i> |
| Lynne Thibeault | Secretary <i>via video conference</i> |
| Crystal Pirie | Director <i>via video conference</i> |
| Patricia Anglehart | Treasurer <i>via video conference</i> |
| Tina Forsyth | Director <i>via video conference</i> |
| Charles Alderson | Director NNNPLC Board Room |
| Shelly Livingston | Director <i>via video conference</i> |
| Carolyn Burton | Clinic Administrator NNNPLC Board Room |
| Arlene McCorry | Lead Nurse Practitioner <i>via video conference</i> |

RECORDER: Carolyn Burton

Meeting called to order at 6:03 pm EST

1. Approval of agenda:

Motion to approve agenda. Agenda was approved with the correction of the Agenda date of December 07, 2022.

Moved by: Patricia
Seconded by: Lynne
Carried

2. Declaration of Conflict of Interest:

No conflict of Interest declared.

3. Review and Approval of Minutes of previous meeting:

Motion to accept the September 13, 2022 Minutes. The Minutes were approved with the following correction: Patricia was present at the September 13, 2022.

Moved by: Lynne
Seconded by: Patricia
Abstained: Crystal
Carried

4. Standing Items

4.1 Governance

4.1.1 Board-Management Delegation Policy:

The Chair gave an overview of the policy as it provides a proper reporting mechanism to for the NNNPLC staff and NNNPLC Board of Directors. It was queried whether or not the Board of Directors conducted a performance review solely on the Clinic Administrator or if the performance review was conducted on the Executive Team. It was clarified that the Board of Directors conduct a performance review on the Clinic Administrator as well as the Lead Nurse Practitioner.

The Chair moved that we approve the Board-Management Delegation Policy as presented.

Moved by: Shawn
Second by: Lynne
Carried

4.1.2 Job Descriptions:

The Chair reported that draft job descriptions for the various NNNPLC Board of Director roles were developed. These job descriptions were circulated to the Board of Directors for review. The Chair discussed that these job descriptions are not as outlined in the by-laws. It is necessary to update the by-laws prior to approval of the draft job descriptions. The Chair has recommended that we table discussions and decisions related to the job description until after the by-laws have been reviewed and updated where necessary.

4.1.3 Governance Committee:

The Chair has recommended the formation of a Governance Committee. Any director interested in joining this committee is encouraged to contact the Chair. The following directors volunteered to be a Governance Committee Member:

- Shawn Dookie
- Crystal Pirie
- Lynne Thibeault
- Patricia Anglehart

The first meeting of the Governance Committee will be scheduled for some time in January 2023. Once reviewed and updated, the by-laws will be submitted to a corporate lawyer and our auditor for review. A final copy of the by-laws will be prepared and submitted for approval at our June 2023 AGM. The date for the AGM will be confirmed at an upcoming meeting.

4.2 Clinical Report:

Staff changes:

Arlene reported that we have a RPN that is scheduled to write her RN exams in January 2023. We are prepared to hire the candidate as a RPN until she successfully passes the RN exam.

The NNNPLC has been seeking to recruit a Social Worker since July 2022 to date, we have not been successful. An opportunity to enter into a contract, with an outside agency, to provide counselling services one (1) day/month.

Programs and Services:

Spirometry training was delivered to two staff members. The necessary maintenance to the room has been completed and the equipment purchased. However, the delivery of this service has been paused until we are able to hire the R.N.

Although we are very short staffed, the NP and the RPN are committed to our weekly visits to Netmizaaggamig Nishnaabeg. Arlene expressed some concern regarding the lack of janitorial services in the exam rooms and the bathroom. Shelly and Carolyn discussed this previously and it will be rectified.

4.3 Financial Report

4.3.1 The December Financial Report, developed using the November 2022 bank reconciliation, was electronically uploaded on the shared drive for review.

The Clinic Administrator began her report by acknowledging that the NNNPLC is approaching the close of Q3 and that any expenses that have exceeded 75% should be discussed. The focus of the financial report was on the following expenditure items as they exceed the 75% in the “Remaining” category:

- Corp. Social Responsibility/Community engagement – 92% of the budget has been spent;
- Membership Fees – 86% of the budget has been spent;
- Office Furniture/Equipment – 79% of the budget has been spent; *and*
- Repair and Maintenance – 145% of the budget has been spent.

A discussion ensued regarding the overage of each line item. With the exception of Repair and Maintenance, the other expenditures are within their respective anticipated forecasted annual budget. The Repair and Maintenance budget did exceed the forecasted annual expenditure. This was mainly due to the cost to renovate the Spirometry Room and the Cardiac Rehabilitation Room. The Administrator reported that the only 59% of the Total Overhead Forecasted Expenditures has been used to date and that funds can be moved from one budget item to another within General Operating (e.g., only 39% of the Clinic Supply budget

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has been spent and funds and can be used on other General Overhead expenditures). The floor was opened to questions, comments, or feedback. Crystal inquired about the various community events that the NNNPLC has supported. Carolyn identified some events but will follow-up with email confirmation of the list below:

- Pooh Festival;
- Netmizaaggamig Nishnaabeg; *and*
- White River Food Bank.

4.3.2 GIC Investment. The Administrator, as a result of a conversation with the accountant, reported that the interest rates on GICs are currently $\approx 4.5\%$. The accountant suggested that investment in GICs would realize a really good return on investment. Currently, there is a surplus of funds owed to the MOHLTC and until the MOHLTC performs the necessary reconciliations, these funds remain in the chequing account earning minimal interest.

The Administrator had a subsequent meeting with the Ministry of Health and Long-Term Care (MOHLTC) Representative to discuss the potential investment of MOHLTC surplus funds. This activity is permitted however, any revenue generated by the investment of these MOHLTC funds is repayable to the MOHLTC. Any revenue generated by investment can be accessed via submission of an in-year reallocation request. Typically, a project that is in need of additional revenue is identified before investing. The example of a one-time Capital repair is an example of an expenditure that may require funding greater than what is normally provided for General Overhead. Allocating monies generated via return on investment is an acceptable means to generate revenue to support a capital repair.

The floor was opened for questions:

What is the timeframe to return money to the MOHLTC once the province has made the request? The MOHLTC has to complete a reconciliation and confirm the amount that is repayable to the MOHLTC. Subsequently, repayment is realized by the reducing the monthly EFTs from the MOHLTC to the NNNPLC. Any amount deducted from the monthly funding is negotiated with the ET and the MOHLTC.

“I do not understand how the money is repayable to the MOHLTC? Other organizations do as you described but report the monies as ‘Other Income’ and it is no longer repayable to the funder.” The Administrator explained that the process was outlined, initially by the accountant (why he instructed to get MOHLTC permission) and ultimately the MOHLTC rep. outlined the aforementioned process. Other directors commented that their previous experience with a provincial funder was similar to what the Administrator outlined previously.

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The Board Chair recommended that we develop a clear policy regarding investment(s) before investment to ensure the activity is conducted in an ethical and legal manner. The Clinic Administrator confirmed that no money has been invested to date.

- 4.3.2** Line of Credit. The Clinic Administrator reported that we have secured a Line of Credit (LOC) in the amount of \$50,000.00 with the Toronto Dominion Bank. Initially an application for LOC was submitted to the RBC but was not successful. With the assistance of Anthony, of Rossi Suraci Chartered Professional Accountants LLP, the LOC was secured. As a result, the NNNPLC will be changing banking institutions from the RBC to the TD. In addition to our auditor's assistance with securing a LOC, Anthony has supplied us with a generic "Borrowing Policy" template. This template will be used to develop the NNNPLC Borrowing Policy and added to our by-laws. The Clinic Administrator reported that the policy template has been uploaded to the Shared Drive for the NNNPLC Board of Directors' perusal.

Once the transfer from the RBC to the TD is complete, the Clinic Administrator recommended that two members of the Board of Directors (e.g., Board Chair and Treasurer) be added as signing authorities for electronic payments.

- 4.3.2** Temporary Retention Initiative for Nurses (TRIN). The Board Chair outlined the proposed funding for the TRIN. Shawn reported that as the NNNPLC Chair, he signed an updated version of our funding agreement to include the additional TRIN funding. The revised funding agreement has been uploaded on the Shared Drive for review.

- 4.5** Collaboration with Netmizaaggamig Nishnaabeg. Shelly informed the Board of Directors that the NNNPLC service delivery has been very consistent and received very well. Despite the shortage of NNNPLC's staff our consistency has ensured visibility and availability.

Shelly discussed that there may be an opportunity to pair our mental health resources (NNNPLC will contract a psychiatrist and Netmizaaggamig Nishnaabeg plans to contract a psychologist) to improve access to mental health for our patients in both communities.

- 4.5** Collaboration with White River. Carolyn announced that the newly hired Receptionist was recently elected as Mayor of White River. Additionally, Carolyn reached out to Dwijen, liaison for the Town Council of White River and there was nothing new to report.

- 4.6** Strategic Plan. The Chair advised that a meeting with the Clinic Administrator will occur some time in January 2023 to discuss the structure of our meetings to ensure that the meetings align with our Strategic Pillars. This will ensure consistent monitoring of our strategic direction as well as the successful attainment of our strategic plan deliverables.

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Shelly recommended that the restructuring of the board meetings to align with our Strat. Deliverables is an opportunity to include Incident Reporting. This provides the Board of Directors with information relating to potential risk(s).

4.6 Unfinished Business.

| Task | Owner(s) | Deadline | Status |
|---|----------|----------|----------|
| Line of Credit application | Carolyn | TBD | Complete |
| Upload by-laws to shared drive | Carolyn | ASAP | Complete |
| Upload Strategic Plan to shared drive | Carolyn | ASAP | Complete |
| Email Strategic Plan Deliverables to Board of Directors | Carolyn | ASAP | Complete |

5. New Business/New Tasks.

The Clinic Administrator reported that there will be one-time funding from the MOHLTC (to date, amount unknown) for a Mental Health Initiative. These funds must be used by no later than fiscal year end. Approval from the MOHLTC must be acquired prior to the mental health expenditure. A general discussion ensued that identified some of the following barriers:

- Shelter;
- Lack of funding; and
- Communication.

| Task | Owner(s) | Deadline | Status |
|---|------------------------------|-------------------|--------|
| Research Investment Policy Examples | Crystal | TBD | |
| Restructure Board Meetings to align with Strat. Deliverables | Shawn and Carolyn | February 2023 | |
| Review Canadian Patient Safety Tool Kit | Shawn and Carolyn | February 2023 | |
| Acquire written direction from MOHLTC regarding the investment of MOHLTC investment revenue | Carolyn | January 2023 | |
| Confirm and circulate list of community engagement activities | Carolyn | December 16, 2023 | |
| Formation of the Governance Committee | Shawn, Lynne, Crystal, & Pat | January 2023 | |

6. Next Meeting: Wednesday, January 11, 2023 @ 6:30 pm

7. Adjournment: 7:27 pm