

**Algoma NPLC
Chair's Report 2015-2016**

Introduction:

Good evening and welcome to the ANPLC Annual General Meeting for 2015-2016. I present the Chair's Report for your review. The report was designed to allow the Board of Directors to reflect on the work that they have undertaken in the last year and help plan for our future activity.

The board and leadership team endeavored to improve our working relationship this year, reengaged old and created new committees to move forward with governance and provide long term oversight to the Clinic. We faced multiple challenges such as a diminished board size, a new board chair, absence of the Admin lead until 2/16 and NP recruitment and retention difficulties with courage and engagement. Please take time to review this report in detail at your leisure.

As Chair I thank board members and the leadership team for your hard work on behalf of the ANPLC this year. All of your contributions both large and small have been appreciated and contributed to our success. I respect and appreciate our dedicated team of exceptional individuals; Thank-you to all of you.

Particular tribute goes to inaugural board member Debbie Graystone whose legacy will benefit citizens of Sault Ste. Marie for many years to come. Together with the board, leadership team and staff of the clinic, I applaud Debbie's generous involvement and commitment leading the clinic from conception to what it is today; Thank-you Debbie.

1. Describe the Algoma NP-Led Clinic's progress in 2015-2016 regarding Board Membership and Policy Development.

The Annual General Meetings for the Algoma NP-Led Clinic's Board took place on June 8, 2015.

Retiring Members:

Mary Tasz - President –term ended Spring 2015
Jean Feagan - Vice-President term ended Spring 2015

Members Remaining:

Debbie Graystone - inaugural board member – (Term ending 2016) - Governance and Nomination Committees, Quality Committee involvement
Max Liedke – Treasurer, Executive and Finance committees
Eric McCooeye - Accepted Secretary Role and Executive and Governance Committees
Giulian DiLuzio - Finance Committee
Justin Reid – Accepted Vice-President Role - resigned Oct 2015
Wendy Payne – Accepted Role of President, Governance and HR Committee , Strategic Planning Team

New Members:

Christena Laitinen - HR and Quality Committees, Strategic Planning Team
Karen Barban - Nurse Practitioner Quality Committee (resigned June 2016)
Kelly Rutland - Nurse Practitioner (resigned September 2015)

We spent the majority of the year as a board of 7, making an active decision not to bring additional board members into the current environment. This increased the work load for the few remaining members and I acknowledge your hard work on behalf of the ANPLC. Thank-you.

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We reluctantly say goodbye to Karen Barban whose valuable perspective of a community NP was respected and appreciated. Thank-you Karen.

The term of an inaugural member of the board is also expiring after 7 years, Debbie Graystone. Debbie has obviously participated on many (if not all in some manner) board committees. Without her, the clinic would not exist. She has been the heart of the board since our inception and has worked tirelessly during the development of the clinic, has seen it sprout, mature and blossom into a valuable contributor of primary health care service in the Sault Ste. Marie community health sector. Thank-you for your many years of service Debbie. Debbie has generously offered to continue on the board as an ex-officio member. We will bring her offer to our regular meeting following the annual meeting.

Board evaluation survey was completed and a need for additional board education was identified. Wendy Payne attended "Engage and Refocus Your Board" by David Hartley sponsored by Volunteer SSM. Consideration will be given to having guest speakers for education of the board or sending members for outside education in future.

Board asked for clear definition of tasks to be done at board meetings and timely distribution of board documents required for regular meeting preparation. Improvement in this area has been accomplished. Process for Minutes was defined and improved throughout the board year. Admin Assistant now provides secretarial support for minute taking so leadership and board members are able to fully participate in board activity.

A Governance Committee was formed and Terms of Reference developed with a Nomination subcommittee:

Corporate Documents: Board Manual, Bylaws, Terms of Reference and Policies were reviewed, updated by the Governance Committee. Amendments made with the goal of making a complete set of corporate documents for board members completed and submitted for approval by the board. Work is ongoing on improving our corporate documents. It is hoped to have a complete updated board manual complete with appendices early this summer. Consideration to reflecting our MOHLTC contract in board documents needs to be considered next year as well as a financial policy for the board. Thanks goes out to Debbie Graystone who took the lead on this project.

An extensive slate of potential board members was created and 4 names are being presented with application forms at the 2016 AGM for consideration for board membership starting in the fall. We are committed to ensure we have succession and proper oversight for the future .

2. Describe the financial and legal/risk strategies used by the Algoma NP-Led Clinic in 2015-16.

- Auditor Report with KPMG (M. Marinovich) took place June 8, 2016 and report brought to the board with advice about credit card statements - related policy is needed around this advice.
- Board approved an "accrual based" rather than "cash based" financial report on the request of the treasurer.
- The board remains cognizant of the MOHLTC refund owing from prior to 2014. Goal has been set to have this amount owing reconciled with the Ministry by the end of 2016-17 board year. There are additional significant monies due (mainly from unused compensation packages) from more recent years and we are in a position to cover these. This year we paid the amount owing from 2013-14.
- Cyber Coverage was added to our current insurance package.
- A 5 year lease was renegotiated with Sault College and brought to the annual meeting for approval.

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- A Stipend for the NP Lead was approved by the board to recognize the hours of extra work done to care for registered patients during a period of extreme NP shortage.
- A report on third party billing by NP was prepared and submitted to the board by the finance committee. A report on vacation, incentive and float leaves for leads was also prepared and submitted to the board by the HR committee. These reports will require review and discussion at a future date.

3. Describe the Algoma NPLC's Strategic Planning Activities.

- Quality Committee Terms of Reference were amended and a new dashboard was defined for reporting to the board on a monthly basis at general meetings in hopes to get a clearer picture of the activity at the ANPLC.
- Strategic doing session took place Nov 21, 2015 at which the board became aware of a deteriorated board/clinic relationship. Strategic planning was put on hold and instead work was done to improve the relationship between the board and the clinic leadership. Board Representatives met with clinic leaders 1-2x between general meetings and the communication improved significantly. These meetings will continue throughout the summer months.
- A second well attended strategic planning session was held April 2/16. Information was collected from both staff and board members to be used to update our mission/vision/values and create a living strategic plan document. A strategic planning team will continue to work on this throughout the summer months as a high priority.
- A Quality Improvement Plan was written by the Leadership Team and reviewed and amended by the Quality Committee and submitted to meet the MOHTLC requirements in a timely fashion.

4. Provide an overview of the Algoma NPLC administrative and clinical policy development.

- The administrative lead was welcomed back from maternity leave in Feb/16.
- The board did not review the clinic policies this year, leaving this to the clinic leadership team at this stage of development.

5. Provide an overview of Human Resource Management.

A performance evaluation form was approved for the board manual to be used consistently for leadership evaluations. Ali Pettenuzzo (NP Lead) has completed her form and initiated formation of objectives for the coming year. Her performance appraisal with the HR committee will follow input from the board.

Sandra's performance appraisal (last done 2013) is planned for early in the next board year.

We continue to experience challenges in recruiting and retaining Nurse Practitioners. This is of grave concern and high priority. Work continues on this at an organizational level. Operational Details: Nurse Practitioner was hired 6/ 2015, but subsequently terminated in Jan/16. Nurse Practitioner David Burgan was hired 2/2015 as a novice NP and continues to perform as part of the clinic team. In the meantime NP funds are backfilling extra hours for social work, RNs and pharmacies who are meeting the needs of our patients with a team approach,

Dr. Steven Smith has been a steadfast source of support as a collaborating physician since August 2013.

6. Describe any Community Partnerships/Agreements made with the Algoma NPLC

The ANPLC participates as a partner in the new "Health Links Project" which serves high need patients in the Sault.

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Ali Petenuzzo participates NELHIN eHealth Advisory Council.

7. Describe the Nurse Practitioner-Led Clinic patient enrolment goals including timelines:

A patient enrollment goal from our MOHLTC contract of at least 800 patients per NP remains. We want to be able to offer consistent services to our clients and our March/16 target of serving 2400 patients is not being met. However human resource variability has impacted the NPLC's ability to fully meet this goal. The clinic currently serves 1551 active patients as of March (down from 1567 in Jan/16) and 160 patients are wait listed (down from 172 in Jan/16). In 2014 we had 2400 active patients.

8. If the NPLC serves a specific non-enrolled patient population, please describe it including the source/method for estimating the number of patients served by the Algoma NP-Led Clinic.

A Pap clinic was held for registered and non-registered patients

Chronic Disease Self Management Education

Stop program (NRT for smoking cessation)

Immunization Clinic for Sault College Students

Provided placements for RPN consolidating students, 3rd year RN community placements and RN consolidating students.

9. Provide MOHLTC Updates that occurred that impacting the Algoma NPLC.

The MOHLTC agreement to allow flexible use of NP Funding to improve NP salaries had a limitation of non- publication. This may affect our ability to attract NPs to apply for our positions.

The underfunding of NP led clinics was mentioned in the Ontario Budget in 2016 and funds were allocated but details are yet to be announced. We look forward to hearing more about this as funds are rolled out.

The Quality committee assisted with the QIP Submission (a MOHLTC requirement) in a timely fashion.

10. What are the challenges in recruiting and retaining health care professionals for the Algoma NP-Led Clinic?

Despite funding flexibility to improve NP wages at our NPLC we continue to have difficulty with NP Recruitment and Retention. The reasons for this are unclear. There are other NP postings at community settings within our community at present.

11. Information Technology – Describe the challenges regarding data collection and quality assurance related to the EMR.

Mechanisms for data mining and data collection for strategic planning purposes continues to challenge us. Data collection for our new dashboard may need to be collected manually. This takes time away from direct patient care.