

Algoma Nurse Practitioner Led Clinic Chair Report 2019-2020

Good Evening and welcome to the 10th AGM at Algoma NPLC. I present the Chair's report for review. Let's take time to reflect on our work over the 2019-2020 Board year and start planning for our future. The Board has been effective and actively supportive of the activities of the Algoma Nurse Practitioner Led Clinic. Undoubtedly, our strong and trusting relationship with the Executive Director has contributed to our success. Thank you to all board members and to Dominic for your commitment and engagement.

Board Membership

Board members and the ED worked diligently on behalf of the Algoma NPLC this year. We have finally experienced a period of stability and are poised for future growth and development. There were no new board members this year.

Retiring Members:

Stephen Hussey (Executive and Finance Committee)

Cathy Nichols (Nominating Committee)

Wendy Payne (Executive, Strategic Planning and Governance Committees)

All three members above have finished their terms, but we hope they will agree to continue, at least temporarily, as we

transition new board members. Thank-you Stephen for your reliable input into all things financial despite your busy schedule. Cathy, we have appreciated your steady and consistent involvement and input into all things paralegal and political. Thank-you.

Members Remaining:

Christena Laitinen (Human Resources, Executive Committee and Nominating Committee)

Brenda Warnock (Strategic Planning Committee, Governance Committee and Board Liaison with the Alliance for Healthy Communities)

Lyndsay Suurna (Executive, Strategic Planning, Nominating and Finance Committees Member)

Doug Abbot (Finance Committee)

Officers in 2019-2020:

Wendy Payne Chair

Christena Laitinen Vice-Chair

Stephen Hussey Treasurer

Lyndsay Suurna Secretary

New Members:

Terry Scott has been nominated for Election to the Board- She offers a strong background in HR.

We maintained a board of 7 members (out of a potential board of 9) by choice again this year. Several calls for new board members have been made and responses are pending. We are

committed to ensure that we have succession and proper oversight for the future. Previous discussions have included suggestions for new board members: a Clinic Patient (we did have one application) , someone with Police Service Experience (officers are usually quite aware of community issues) , or a Clinician (if NPs aren't available to be on our board maybe a pharmacist, or other allied health professional could be considered) and now as Stephen finishes his term, someone with financial expertise.

Board Accomplishments and Challenges

Strategic Planning:

The Strategic Plan was reviewed and found to be still relevant early in this board year. Our formal Strategic Planning with staff is due next year. The ED reports on Strategic developments and progress regularly at Board meetings. For example we received a report that the Clinic had transitioned successfully to the new Accuro EMR.

The number of patients enrolled at our clinic has been declining slowly but steadily over the past year. This concern was introduced to the board in October and the trend continues. We have two of our permanent NPs on maternity leave which may be a factor. The complexity of our registered patients is complex and registration of new patients has been delayed to

prevent staff burnout. This is something that should be monitored by the board as time goes on. Some thought was given to considering questionnaires for deregistering patients, but no action has been taken to date.

Partnerships and Interaction with Others:

OHT-

Jenn Osesky was a guest speaker who gave a presentation about Ontario Health teams.

Wendy attended the “All Boards” meeting locally and a presentation by the Alliance about the role of the board in governance as a member of an OHT.

Members were asked to view a video about Governors role during OHT implementation.

The Board asked our ED to request a formalized plan for Health Care Organization Board Involvement in OHT Planning.

Alliance for Healthy Communities

Brenda Warnock was highlighted in an Alliance Board to Board report 2020 Issue after she successfully led our endorsement of the Alliance Model of Health and Well Being and the Health Equity Charter and Bill of Rights. The Alliance was developing a video describing the significance of board endorsements. This was to be completed by Spring 2020.

Past Chair Debbie Greystone-
Debbie was honored with a plaque Commemorating her term as inaugural Chair of the Algoma NPLC Board.

Arthritis Society-
The Clinic has formed a partnership with the Arthritis Society and in-house OT services will be provided to our patients.

HR:

The board approved and encouraged contracting a lawyer to review and make recommendations around our employee contracts going forward.

We have encouraged our ED to make a request for a 5th NP.

Finance:

Budget cut of \$63,102 was managed by the ED with measures that included decreasing the RPN position from full time to part time. The board has suggested considering increasing allocation of monies for this position if allowed by a projected surplus.

The last “Recruitment and Retention Funding” increase was applied to staff salaries again this year and we approved the added benefit of an EAP package for all employees.

An estimated figure of \$120,000 was provided to the board as an amount owing to the Ministry for 2018-19. The Ministry has been asked to provide an exact amount.

At year end we had a surplus of \$_____ after donating \$50,000 to Sault Area Hospital to help them with their response to the Covid 19 Pandemic and \$10,000 to the proposed Algoma OHT for administrative staff.

Lease negotiations have been initiated with Sault College.

We received a clear audit.

Capital Expansion Project:

Tab 5 has been completed and the next tab is site selection. We believe this has been deferred due to Covid 19 Pandemic. Our consultant has strongly suggested that we negotiate with the Ministry for a budget increase as we proceed. We have asked for her help with this when the time is right.

Human Resources:

Dr Maloney continues as our Physician Partner and is attending the clinic in person weekly to provide on-site expertise.

Dominic Noel has settled nicely into the role of ED/NP Lead and is able to successfully recruit contract NPs to fill vacancies as required. He has led the projects which offer Holter Monitors and 24-Hour BP Monitoring for our patients and is working on developing a Child psychiatry referral service for our patients. Dominic has also been a strong supporter of the local OHT proposal and his leadership in this area has been very much appreciated by the board. He is a member of the QIP Committee of the local proposed OHT. By all reports, the clinic is running smoothly, staff feel supported and staff retention has drastically improved. Dominic's approach to the Covid 19 Pandemic which concentrated on keeping both staff and patients safe, was supported by the board.

The board recommended the development of a "Relocation Policy" for new staff.

Ministry Reporting:

Operating Plan and Budget were submitted to the Ministry on time. One question arising from the Operating Plan document was "Does the Board have committee structures that focus on information management" We had to respond in the negative. We might want to consider this in future.

QIP report was deferred due to Covid 19 and will be submitted when a new due date is provided by the Ministry.

Budget and Operating Plan were submitted on time.

Governance:

Regular evaluations of our activity as a board have taken place as per the Board Activity Calendar and we are making adjustments in our activities as a result.

The Quality Committee was dissolved, and responsibilities transferred to the governance Committee as suggested in the Standing Committee self-evaluation.

Bylaws, Terms of Reference and the Board Narrative were reviewed and updated this year. Work continues over the summer on the Board policies.

The dashboard is also in need of an update in future.

The amount of work being done by the governance Committee is substantial and another member on this committee would be welcomed.

Risk

Thanks to Dominic and the administrative staff at the clinic a comprehensive Risk Management Plan was developed and presented to the Board for approval. This was an important sign of maturation of the organization.

As I finish my term as board member and chair, I am proud of the contributions of this board. We have moved the clinic forward significantly during the past several years and I hope for future successes as we develop and grow to serve our community.

Respectfully Submitted by

Wendy Payne OutGoing Board Chair of the Algoma NPLC