

# **BOARD MEETING AGENDA**

Date: September 23, 2021

Location:

Virtual

Meeting: 5:00 p.m. – 7:00 p.m.

Board Members							
F. Consiglio (C)							
J. Butchereit (VC)		Video Conference:					
М. Ма (Т)			Click here to join the meeting				
P. Greenwood (DAL)							
L. Colman	Board M	embers	Present: F. Consiglio (C), J. Butchereit (VC), M. Ma (T), P. Greenwood (DAL), L. C	Colman, M. Westg	ate, D.		
M. Westgate	Bakti, A.	De Jage	er				
L. Shapiro	Guest : F	Patricia k	Kay, Michael Schlesinger				
D. Bakti	<b>Regrets:</b>	L. Shap	biro				
A. De Jager	Staff Pre	sent: L.	Huizer, L. Lavallee, K. Chagti				
	Recorde	<b>r:</b> K. Cha	agti				
Guest	Time	Item	Meeting Minutes	Action	Person		
Patricia Kay		1					
Michael Schlesinger	5:05PM	1.	Call to Order- FC called the meeting to order at 5:05PM		FC		
Ctoff					50		
Staff			1.1 Approval of Agenda – Sep 23, 2021	For Approval	FC		
L. Huizer			Put forward by LC, seconded by PG, approved by all.				
K. Chagti			1.2 Conflict of Interest Declaration	For Approval	FC		
L. Lavallee			No Conflict was declared				
			<b>1.3 Approval of Minutes –</b> June 3, 2021, Aug 24, 2021	For Approval	FC		
			<ul> <li>June 03, 2021- Put forward by LC, seconded by PG, approved by all</li> </ul>				
			• Aug 24, 2021- LC shared that meeting minutes need to be proofread and				
			offered to proofread them for future				
			Minutes approved by LC, seconded by JB				
	5:08PM		1.4 Business Arising –		FC		
			Action Item: Decision on mandated full-vaccine policy				



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		On hold until a new direction comes along Current policy- Mandating education session on vaccines for unvaccinated staff LH confirmed that staff running the Exercise classes vaccinated are all vaccinated, however, they do not have to be First Vaccine education session happened on Sep 14, 2021 Next session happening on Sep 27, 2021		
5:16PM	2.	LBCG	Informative	PK & MS
		2.1 Organizational Design		
		MH suggested one director for all programs & services with clear targets internally and externally Managers and Supervisors to implement those targets in their respective teams and handle day-to-day functions MS shared the importance of clarity and distinction between CEO and Manager roles and how they are often mixed-up for non-profit organizations		
		<ul> <li>Three Leader Model (Senior Leadership Team) <ol> <li>Corporate Services Leader- Handling finance, IT, HR, and facilities-finding ways to increase staff efficiency</li> <li>Programs &amp; Services Leader - Aligned with growth, mission, and vision of the organization</li> <li>Organizational Development &amp; Quality Leader- Strategically working on improving processes and quality, effective program management, using data for research and better decisions</li> </ol> MS- Good organizational structure assures that correct person is held accountable for their responsibilities/work-not-completed</li></ul>		
		Accountability Framework-		



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	<ul> <li>A consistent and equitable performance management system to hold</li> </ul>
	staff accountable for outcomes
	- Board setting clear and measurable yearly strategic objectives to hold the
	CEO accountable to
	MS- Lumacare CEO performance is based 50% on competencies and 50% on
	targets achieved
	MS suggested basing the performance evaluation on only achieving goals and
	not on competencies
	MS- Multi-Radar approach to check the competencies and overall performance
	of the CEO
	Littlehened thet One short was represented to the staff with 2 Leader readel but with
	LH shared that Org chart was presented to the staff with 3 Leader model but with
	different roles as per Lumacare requirement
	Lumacare currently working towards creating a common goal for all the staff and
	working in the same direction
	MS added that multi-radar review of the CEO is in Lumacare by-laws and should
	be more about general performance improvement of CEO and should not be
	based entirely on numbers
	2.2 CEO Compensation
	PK walked everyone through the complete CEO Market Analysis on
	Compensation Report explaining the research parts and the outcome
	PK shared that it is less typical for annual increase in CEO salary, but every few
	years based on the external comparative market review results
	Considerations for Lumacare CEO compensation Policy:
	- To formalize the CEO performance evaluations expectations including the



EST, 1974		- Salary range instead of single market rate of pay- target bonus should be a % of salary and defined maximum bonus for overachieving of performance	
		Things to include if adding relative comparative market in CEO Compensation policy- Relative comparators must be in the same sector as well as similar organisational size, subject to funding availability	
5:56PM	3.	Accreditation Review	LL
		LL shared that speaking on ROPs (Required Operational Practices) can help with accreditation as they are non-negotiable LL walked everyone through all the ROPs mentioned in the report. Examples that can be shared during Accreditation showing how Lumacare has analyzed and resolved the situations Quality Analysis- Moving ADP staff to other programs when required to cover all Lumacare clients Incident & Risk Analysis- Maglock failure and how Lumacare fixed and prepared staff for any future similar situations for safety LH- Quality Compass is good diagram that covers all the quality aspects that Lumacare follows, and members can use that to refer to all aspects of quality management LL shared her concern about Lumacare Scorecard which is not very good or clear visually During last accreditation, auditor liked the scorecard summarising what the Board does and all Organizational Risks Currently looking for a suitable person who knows the design program to make a visually clear and attractive scorecard	



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		LL clarified for PG that some of the documents shared with Board members	
		need to be updated and will be shared again once completed again	
		LL shared that she is happy to meet the members one on one to discuss further	
		on Accreditations and to clarify any of the documents shared	
6:10PM	4.	CEO Report-	LH
		4.1 Action Plan	
		<ul> <li>Organizational Chart has been completed after suggestions from Michael (LBCG)</li> </ul>	
		- Creating SMART Goals for all the staff members as per their job	
		descriptions	
		- No performance reviews done for last two years	
		<ul> <li>Performance appraisals happening- Oct01-Oct 31 which will be covering the period of 01Apr2021 to 30Sep202</li> </ul>	
		- One SMART Goals for each position	
		- After Accreditation, we will be implementing the 9-block- possibly	
		November, December & early January	
		- Looking for new HR Person to get high quality staff	
		<ul> <li>LH is managing the HR department herself</li> <li>Compensation-</li> </ul>	
		<ul> <li>Salary Grid has been updated and will be shared with EC during next meeting</li> </ul>	
		<ul> <li>Looking at the options to see the impacts of 5%, 10% raise in RSW wages and where it stands in the industry     </li> </ul>	
		<ul> <li>PSW wages and where it stands in the industry</li> <li>Looking to hire a Director of Operations, Marketing Coordinator, Critical</li> </ul>	
		Nurse, IT Lead	



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	<ul> <li>Support level positions have been hired, ongoing hiring for PSWs and Care navigators</li> </ul>	
	Action: PSW wage increment decision to be shared with board in the next Board meeting	
	4.2 Operational Plan	
	Deferred until next Board Meeting LH to discuss the Operational plan with FC during next EC meeting	
	Action: To be shared in next Board meeting	
	4.3 Organizational Chart	
	LH walked the members through the updated Org chart and the modifications done	
	Merged ALS & home support into 2 zones, divided geographically Each zone has an in-home manager with identical staffing	
	Standardized PSW hourly wages for all programs Org chart now aligns with Northwest Ontario Health Team requirements	
	Data & Application Admin, as per Michael's suggestion, would be under Director of Operations but currently it will stay under Director of Finance & IT before all the required positions are hired with required skillsets	
5.	Committee Reports-	
	7.1 Executive Governance Committee Update	FC
	○ Executive Search	



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	JB shared that PG was not involved in agency selection	JB
	JB confirmed KCI is finding suitable CEO candidates after their research and	LC
	internal interviews	
	LC and MW have offered to help with the interviews	
	LC asked if there will be written expectations and roles in the contract to avoid	
	any situations and JB confirmed that yes it will all be documented	
	FC- KCI suggested surveying the entire board and some of Lumacare staff	
	before starting a candidate search	
	FC confirmed that all the board members will receive the survey	
	<ul> <li>Board Policies- B.6 &amp; Section D</li> </ul>	
	FC shared that EC members decided to defer reviewing any adjustments to	
	policies for now due to Accreditation and the current transition going on in the	
	organization	
	FC- LH suggested going through all the policies slowly in every meeting so that	
	they're not piled up to be reviewed all at the same time	
	7.2 Stewardship Committee Report Update	
	JB shared briefly about Stewardship Committee meeting held on Sep 15, 2021	
	11% increase in fully vaccinated staff	
	20% staff not working because of COVID-19	
	Gradual re-engagement of volunteers slowly	
	LH clarified that we are only going to have a limited number of volunteers due to	
	COVID-19 restrictions and safety	
	Risk Reports are within acceptable ranges-	
	Two incidents reported-	
	16 Covid cases documented	
	Maglock Failure due to Fire Alarm going off- Corrective Action taken already	



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	Committee Name:	
	JB shared that during the EC meeting, members decided on keeping the name	
	as Stewardship Committee instead of Quality Subcommittee.	
	JB added that original rationale to change the name from Stewardship to Quality	
	was for accreditation	
	FC confirmed that Quality Matrix also falls under the umbrella of Stewardship	
	Committee	
	<b>Conclusion:</b> Quality Subcommittee changed back to Stewardship Committee	
	7.3 PFAC Report Update	
	LC shared that LL has been phenomenal at supporting the committee and	
	making sure the members are aware of what is going on	
	<ul> <li>Risk Codes have not been updated as frequently in the past-</li> </ul>	
	- Salary for PSWs in home making is different from PSWs in personal	
	care- salaries to be standardized for all programs, irrespective of program	
	funding	
	- JB added that wage increment needs to happen soon, and members	
	agreed	
	FC asked if 1% increment rule for CEO compensation also implies to PSW	
	wages	
	LH clarified that CEO wage falls under high-level compensations so the same	
	rule would not help measuring PSW wages as 1% wouldn't make any relevant	
	change in their salaries,	
	LH- we are currently looking at a 10% raise, at least, for our PSWs	
	DB asked about risk of Unionisation	
	LH shared that there has been no known/heard risk of unionisation, probably	
	because it is difficult to organize the employees as there is a lot of diversity in the	
	organization	



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	6.	<b>AGM-</b> To be held on October 21, 2021 at 5:00PM-7:00PM virtually on MS Teams		
		AGM will be followed by a short business meeting on appointing EC members		
		C 4 New Read Members		
		6.1 New Board Members		
		FC- A few people have shown interest in joining the board		
		FC suggested creating a nomination committee in January to start interviewing		
		people for Board Members and asked for any objections		
		PG added that deferring till Jan 2022 would also help involving the new CEO in selection of members		
		No objections were raised		
		6.2 Appointing EC Members		
		Usually after AGM, a short meeting is scheduled to appoint the new EC Members		
		FC shared that EC has decided on not making changes to EC member roles for		
		this year and asked for any objections		
		No objections were raised		
6:42PM	7.	Adjournment	For Approval	FC
		The meeting was adjourned at 6:42 pm		
		<ul> <li>In- Camera- Board has moved to an in-camera session</li> </ul>		
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