

Grey Bruce Ontario Health Team Planning Committee

Date: Tuesday September 8, 2020

Time: 1300-1530 hours

Place: GoToMeeting

Present: Gerry Glover - Co-Chair (BAKFHT), Dana Howes - Co-Chair (HDH), Michael Barrett (SBGHC), Sue Byers (Sauble FHT), Phil Dodd (Keystone Bruce Grey), Stephanie Dudgeon (BAKFHT), Dave Ford (HFHT), Paul Hoban (OSFHT), Dr. Alex Hodgson (Chapman House), Pamela Loughlean (Peninsula FHT), Clark MacFarlane (CMHAGB), Kevin McNab (Grey County EMS), Allan Madden (SEGCHC), Angela Newman (Chippewas of Nawash Unceded First Nation) Steve Schaus (Bruce County EMS), Gary Sims (GBHS), Andy Underwood (Home and Community Support)

Guest(s): Daryl Nancekivell (Vice President, Home and Community Care),

Regrets: Dr. Angela Cavanagh, Jennifer Cornell (Director Long Term Care – Grey County), Brian Dokis (SOAHAC), Lynn Hinds (Vice President Strategy, System Design and Integration, Ontario Health), Dr. Rachel Kieffer

Recorder: V. Cumming

	Topic	Discussion	Action
1	Call to Order	D. Howes called the meeting to order at 1300 hours.	
2	Land Acknowledgement	<p>D. Howes started the meeting by acknowledging the Indigenous Peoples whose traditional territory the group gathered on today.</p> <p>This place where we come together is within the ancestral, traditional and territory of Anishinaabeg, including the Saugeen Ojibwe Nation, and the Metis. She acknowledged the long history of First Nations, Inuit and Metis Peoples in Ontario and asked to show respect to them today.</p> <p>The two First Nations communities in Grey/Bruce are:</p> <ul style="list-style-type: none"> • Chippewas of Nawash Unceded First Nation, and • Saugeen First Nation <p>She also acknowledged the many longstanding treaty relationships between Indigenous Nations and Canada recognizing that all levels of government in Canada have responsibility to honour the Nation-to-Nation relationship, and that individually; we all have a role to play in honouring the treaties, and contributing to reconciliation.</p>	

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3	Approval of Agenda	Moved and Seconded <i>THAT the agenda be approved as presented.</i> MOTION CARRIED	
4	Approval of Minutes –September 3, 2020	Moved and Seconded <i>THAT the minutes from September 3, 2020 be approved as presented.</i> MOTION CARRIED	
5	Business Arising from the Previous Meetings		
5.1	Hiring Subcommittee Update	G. Sims reported that Rebecca Cummings is working on coordinating interview times with the Hiring Subcommittee.	
5.2	Homecare Model Subcommittee Update	There is no update at this time. The group plans on meeting later this month. <i>G. Glover & R. Lux entered the meeting</i>	
5.3	Indigenous Update	G. Glover updated the group that P. Loughlean is still working with Cape Croker. Saugeen First Nation has also recently elected their leadership and the hope is that we will be able to now move forward with the election complete.	
5.4	GBIHC Engagement (Briefing Note) Update	G. Glover let the group know that the briefing note reviewed at the last meeting was submitted to the Grey Bruce Integrated Health Coalition and was well received.	
6	New Business		
6.1	Tentative Timeline for Application Submission	D. Howes explained that an extension has been requested to submit the full application to Ontario Health. Ontario Health is asking for a new timeline. <i>J. Cornell entered the meeting</i> The group was asked to discuss a possible timeline to present to the Ontario Health representatives this week. The hope for the group is to have a GB OHT Transformational Lead hired for October, engagement session to be scheduled and take place throughout October/November. It was also noted that the timeline should be flexible in the case of a possible wave 2 of COVID-19. A December	

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		<p>deadlines was suggested and agreed upon.</p> <p>Moved and Seconded <i>THAT the GB OHT request an extension with a deadline of December 11, 2020 to Ontario Health for the submission of the GB OHT Full Application.</i> MOTION CARRIED.</p> <p>It was noted that the GB OHT would like the Ministry to know that work is continuing while the Transformational Lead is being hired. It was suggested to put a timeline of potential engagement sessions together as well.</p> <p>D. Howes questioned the group if two meetings per week were still needed with the extension request. The group agreed to keep these meetings scheduled going forward until December.</p> <p>It was then questioned who will be doing the work of the engagement sessions, the application changes etc. It was confirmed that A. Madden and G. Glover will continue to work on the application changes. A. Madden did meet with the Mental Health & Addictions group and is working on incorporating feedback from that meeting and returning it back to the group for review.</p> <p>C. MacFarlane let the group know that in the last meeting it was discussed that the application being completed be referenced to as a “consultation document” until all engagement groups have reviewed. There were no objection by the group on this.</p> <p>The group then discussed the various engagement sessions breaking them down into sections;</p> <ul style="list-style-type: none"> • Patient/Client/Caregiver Engagement <ul style="list-style-type: none"> ○ The group agreed to utilize representative from current patient/client committees that already exist. Most organizations already have these committees in place; ○ Develop a slide deck to keep a consistent message; ○ Plan multiple virtual engagements that will be communicated to existing patient/client committee through the GBIHC utilizing the same presenters to keep the messaging consistent; ○ Use the engagement sessions as a recruitment tool for a future Grey 	

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		<p>Bruce Patient/Client/Caregiver Committee to be developed by the application submission deadline. Members for this committee can be developed from the GB OHT Planning Committee Terms of Reference Document. The group would like to review this document at the next meeting; and</p> <ul style="list-style-type: none"> ○ An Engagement Subcommittee was developed to create the slide deck and plan sessions which includes M. Barrett, J. Cornell, D. Howes and C. MacFarlane. <p><i>D. Nancekivell entered the meeting</i></p> <ul style="list-style-type: none"> ● Community Engagement <ul style="list-style-type: none"> ○ The group discussed virtual platforms that are available and that the general public is more accepting of virtual since the beginning of the pandemic. Zoom and Facebook Live were discussed based off some previous engagements put on by Bruce Power and Grey Bruce Public Health; ○ The group also discussed an electronic survey that could be posted and advertised as well if particular information is needed from the community; and ○ It was advised to ask Ontario Health for guidance around what other OHT's have done as well. ● Physician Engagement <ul style="list-style-type: none"> ○ In earlier meetings a geographic approach to engagement was developed. It was suggested that to reach specialists specifically that presenting at a regularly scheduled rounds would be beneficial and convenient. The group discussed who should be engaged out of the physician and NP group as a whole. There have already been some engagement sessions and the group can continue to build on this. This will be discussed again when Dr. Kieffer and Dr. Cavanagh are in attendance; and ○ The group thought that a standard slide deck could be used for all of the engagement sessions and will be developed by the Engagement Subcommittee. 	

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7	Round Table	<p>G. Glover Confirmed with the group the next step would be to reach out to the newly elected Chief of Saugeen First Nations to request a delegate sit on the GB OHT Planning Committee. The group agreed with moving forward with extending the invitation as done previously.</p> <p>D. Nancekivell Engagement group with the service care providers of the homecare sector were suggested. Service providers would like to understand the potential homecare model more. The group agreed there is a benefit to transparency. The group would also like to talk about this with the relationship manager at Ontario Health to see what other OHT's are doing. This item was agreed to be discussed further by the Homecare Subcommittee.</p>	
8	Date of Next Meeting	The next meeting is scheduled for September 10, 2020 at 0800 hours	
9	Adjournment	The meeting adjourned at 1447 hours	