



**Board of Directors**  
**Tuesday, April 25, 2023 at 5:30 p.m.**  
**In-person** at 643 Park Road North

or by Zoom: <https://us02web.zoom.us/j/86979313280?pwd=VXQxT1M4TWNjZWYjU4RGtUZz09>

**Agenda for Open Meeting**

1. **Call to Order**
2. **Land Acknowledgment**
3. **Agenda - Additions, Deletions, Approval** **Decision**
4. **Conflict of Interest Declarations** **Declaration**
5. **Auditor**
6. **Approval of Minutes – March 28, 2023** **Decision**
7. **Business Arising from Minutes**
  - a. Directors Terms and Executive Succession **Decision**
  - b. Annual Board Self-Evaluation
8. **Executive Reports**
  - a. Chair's Report **Information**
  - b. Treasurer's Report – March 31, 2023 **Decision**
  - c. CEO's Report **Decision**
9. **Committee Reports**
  - a. Policy Review Committee – update on By-Laws & Governance Policies
  - b. Nominating Committee – Jill Esposto **Decision**
10. **New Business**
  - a. Strategic Priorities Work Plan 2022-23 Final Report **Decision**
  - b. CEO Job Description – revised **Decision**
11. **Correspondence**
  - a.
12. **In-Camera - Motion to move in-camera** **Decision**
13. **In-Camera Reports (as appropriate)** **Decision**
14. **Adjournment – Motion to adjourn** **Decision**

**Next Meeting: Tuesday, May 23, 2023 at 5:30 p.m.**

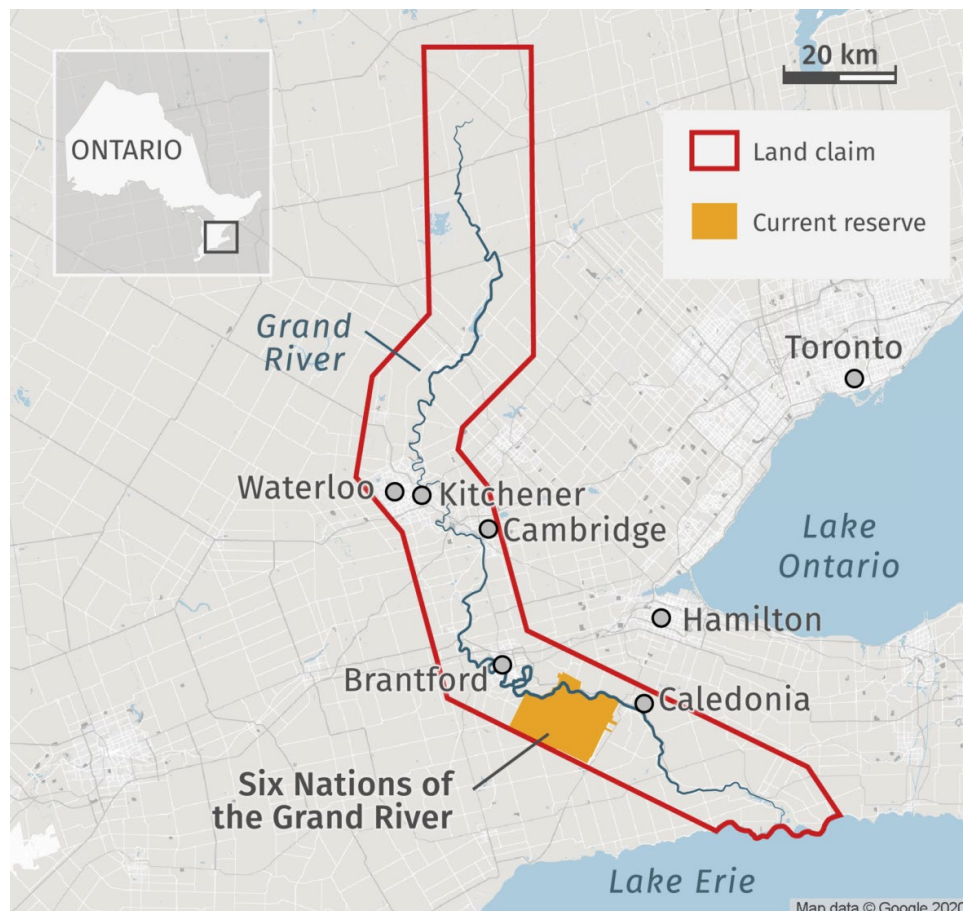
## Land Acknowledgment

We acknowledge that we are on the traditional territory of the Mississaugas of the Credit First Nation, the Haudenosaunee and the Neutral.

Territory acknowledgement is a way that people insert an awareness of the Indigenous presence and land rights in everyday life as well as recognize the history of colonialism and the need for change. However, these acknowledgements can easily be a token gesture rather than a meaningful practice.

Please join me in a moment of reflection to acknowledge the harms and mistakes of the past, and to consider how we can, individually and collectively, move forward in support of reconciliation, justice, and respectful collaboration.

*(Pause)*





**Board of Directors Minutes for the Open Meeting  
Tuesday, March 28, 2023**

**Present:**

Chair:	Susan Fitzgerald
Vice Chair/Treasurer:	Kelly Skrzypek
Directors:	Laura Miedema, Emily Miller, Jenn Tonnie

Chief Executive Officer:	Jane Angus
Manager of Service Coordination	Alison Hilborn
Executive Assistant:	Cindy Landry (recorder)

**Regrets:** Jenna Dierick, Brian Konst, Elizabeth Abraham, Greg Hackborn

**1. Call to Order and Welcome Jennifer**

Susan Fitzgerald called the meeting to order at 5:31 p.m. Introductions were made, and we welcomed Jenn Tonnie to the Board.

**2. Land Acknowledgment**

Susan read the Land acknowledgment.

**3. Agenda – added Open Report from the Chair**

**Motion:** To approve the agenda.  
Laura and Kelly. **Carried.**

**4. Conflict of Interest Declarations**

None declared.

**5. Approval of Minutes – February 28, 2023**

**Motion:** To accept the minutes from February 28, 2023.  
Kelly and Laura. **Carried.**

**6. Business Arising from Minutes**

a. Directors Terms and Executive Succession

The Board needs to plan annually for Nominations of the slate of Directors and the election of Officers at the June meeting. Susan Fitzgerald, Chair, has given her resignation notice effective May 1, 2023, and Kelly will step in as Chair until the June meeting. Kelly has indicated she would be interested in the Chair position for the next term. This requires more discussion at the next meeting.

b. Annual Board Self-Evaluation – please complete the Annual Board Self-Evaluation and a roll-up will be presented next month.

**ACTION:** Cindy will send out a reminder.

## 7. Executive Reports:

- a. Chair's Report – Email decision was made but will not be recorded as MCCSS indicated they no longer wanted current reimbursement of the URS surplus. MCCSS is considering whether we should accrue these funds for clients who have established budget commitments. We have 101 currently active, which means April 1, 2023, we will have 101 active cases – this is 50% of our 202 target for the year, and reflects close to 50% of the Purchased Client Services budget.
- b. Treasurer's Report – February 28, 2023  
**Motion:** To approve the Treasurer's report as presented.  
Kelly and Emily. **Carried.**
- c. CEO's Report  
Jane shared the new bookmarks for CSP and URS.  
Agreement to have Donna Debolt as the guest speaker for the AGM.  
**Motion:** To approve CEO's report as presented.  
Laura and Emily. **Carried.**

## 8. Committee Reports

- a. Policy Review Committee  
Jane will set up a Policy Review meeting re Bylaws and Governance Policies.
- b. Nominating Committee  
Jane received a call from Jill Esposto, a retired FACS Director, who is interested in being on the Board. Jill indicated she will submit an application.

## 9. New Business

- a. 2023-24 Budget  
**Motion:** To approve the 2023-24 budget.  
Kelly and Laura. **Carried**
- b. Draft 2023-24 Strategic Priorities Work Plan – reviewed the plan. Directors were supportive of the work plan.

## 10. Correspondence - none

## 11. In-Camera

- Motion:** To move in-camera at 6:03 p.m.  
Emily and Kelly. **Carried.**

## 12. In-Camera Reports

- Motion:** To approve the in-camera reports.  
Jenna and Greg. **Carried.**

**13. Adjournment** - Susan adjourned the meeting at 6:20 p.m.

Next Meeting: Tuesday, April 25, 2023, at 5:30 p.m.

\_\_\_\_\_  
Date

\_\_\_\_\_  
Chair's Signature



## Contact Brant Board of Directors Terms

### Nomination of Executive Positions until June 2023

Susan Fitzgerald, Chair, has given her resignation notice effective May 1, 2023, resulting in a need to also plan for Executive positions for May and June 2023. Kelly Skrzypek has indicated she will step into the Chair; she is currently Vice Chair and Treasurer. Until June, we need to have someone identified as Vice Chair.

**Recommendation:** Effective May 1, 2023, approve Kelly Skrzypek as Chair and Treasurer, and xx as Vice Chair.

### ***Decision***

Nominations of the Slate of Directors need to be planned by the Board in advance of the June AGM Board meeting.

### *By-Law 8.6:*

- Members shall indicate annually to the Board of Directors their intention to continue as members for the next Board term, June 2023 to June 2024.

### *By-Law 20: Number of Directors*

- The Board shall be comprised of a minimum of Eight (8) and a maximum of Twelve (12) elected Directors
- The Board shall strive to ensure that membership includes at least one (1) parent member and one (1) youth member, and shall limit the number to two (2) members who are connected to Ministry-funded service provider agencies as a Board member or employee, as well as the parents, siblings, children, spouses, common-law partners and partners of these individuals

**Action:** Identification by Members of their plan to stay on the Board.

Yes/ No		Director	Start Date	End of First 3-Year Term	End of 2 <sup>nd</sup> 3-Year Term	End of 3 <sup>rd</sup> 3-Year Term
	1	Kelly Skrzypek	Feb./15	June/18	June/21	June/24
	2	Greg Hackborn	April/16	June/19	June/22	June/25
	3	Susan Fitzgerald	June/18	June/21	May 1/23	
	4	Laura Miedema	June/21	June/24		
	5	Brian Konst	June/21	June/24		
	6	Elizabeth Abraham	Jan./22	June/25		
	7	Emily Miller	June/22	June/24		
	8	Jenna Dierick	June/23	June 25		
	9	Jennifer Tonnies	March/23	June/26		
	10	Jill Esposto				

Consideration for the Election of Officers also needs to be planned for the June meeting:

***By-Law 21: Term of Office of Directors***

- Newly elected Directors shall be elected for three-year terms. The Board shall strive for a balance of experienced Board members and new Board members.
- The maximum number of terms a Director may be elected for is three full terms or ten (10) years, whichever is greater. A Director who has served the maximum terms can be re-elected a Director following a break of at least one year.

***By-Law 24: Appointment of Officers***

- No Director may serve for more than three consecutive years in one office, provided however, that following a break in the continuous service of at least one year the same person may be re-elected or re-appointed to any office.

	Director	Executive Position	Executive Date	Fiscal Changes
1	Kelly Skrzypek	Vice-Chair & Treasurer	June 2021	Chair and Treasurer: May 1, 2023
2	Greg Hackborn	Secretary	June 2021	
3	Susan Fitzgerald	Chair	June 2021	April 30, 2023
4	Laura Miedema			
5	Brian Konst			
6	Elizabeth Abraham			
7	Emily Miller			
8	Jenna Dierick			
9	Jennifer Tonnies			
10	Jill Esposto			

***Discussion*** regarding Executive positions effective June 27, 2023 – June 2024.

## Annual Board Self Assessment

Instructions: Check the appropriate column, then add any ideas/questions/actions needed to the comments column.

	Activities	Yes	No	Some- what	Not Sure	Comments
1	The Board understands that its' accountability includes financial responsibility, accounting, and control of social/ethical decisions.	5				The CEO keeps board apprised of financial/fiscal responsibilities.
2	Suitable printed materials about the organization are available in an attractive and up-to-date format, and publicity appears in appropriate media with sufficient frequency and quality.	5				Electronic material displayed online through website appears appropriately displayed
3	Are you familiar with your Board's policies regarding operating, making decisions, evaluating staff, recruiting new members, and managing finances?	4.5		.5		These topics are discussed monthly at BOD meetings. We've spent a lot of time reviewing and updating policies this year.  New member, still learning
4	The Board approves the selection of outside counsel (lawyer).	5				
	Relation to Chief Executive Officer	Yes	No	Some- what	Not Sure	Comments
5	The Board selects a Chief Executive Officer and delegates to their full responsibility for all duties except those reserved for the Board.	5				
6	The Board establishes an annual performance plan for the Chief Executive Officer and monitors and evaluates it annually.	5				The BOD has recently completed a performance appraisal for the CEO and shared feedback  The CEO plays a key/significant role specific to the function/duties of the board.
7	The Board has a succession plan for the Chief Executive Officer	3		2		We have started this planning. Members of the BOD have reached out to other

	and other designated key officers.					organizations and a recruiting company to gather some information.
	<b>Approves Mission, Policies, Goals and Plans</b>	<b>Yes</b>	<b>No</b>	<b>Some-what</b>	<b>Not Sure</b>	<b>Comments</b>
8	The mission, purposes, and values of the organization are clearly defined and approved by the Board.	5				Policies regularly reviewed
9	The Board approves the annual operations plan (Work Plan).	5				
10	General operating policies, personnel policies and job descriptions are in writing, are easily accessible and are regularly updated.	5				
11	Is the organization's progress and effectiveness in meeting its goals and objectives clearly, comprehensively and meaningfully assessed on a regular basis?	5				Reviewed at board meetings
	<b>Monitors Financial Structure and Activity</b>	<b>Yes</b>	<b>No</b>	<b>Some-what</b>	<b>Not Sure</b>	<b>Comments</b>
12	The Board receives regular reports on finances/budgets.	5				This is reviewed and discussed at every BOD meeting and sometimes through email if changes are being requested.
13	The Board approves a revenue and expense budget in line with policy.	5				
14	The organization's resources are used effectively (good value for money spent).	5				
15	Insurance coverage for the Board, staff, facilities, programs, etc., are monitored regularly.	5				
16	The Board authorizes an annual independent financial audit and reviews the report with the auditor.	5				Facilitated by CEO
17	The Board attends to policy-related decisions, which effectively guide operational activities.	5				

18	The Board reviews and approves compensation for staff.	5				A lot of time has been spent this year trying to ensure that we are creating a grid that is fair and competitive (with other organizations). We have also tried to provide benefits that are fair and competitive.
	Monitors the Performance of Management	Yes	No	Some-what	Not Sure	Comments
19	The Board receives and monitors – at least quarterly- financial, statistical and operations reports.	5				Regularly reviewed
20	The Board does a good job of evaluating the performance of the Chief Executive Officer (measuring results against objectives).	5				
	Responsible For the Management of the Board	Yes	No	Some-what	Not Sure	Comments
21	The Board operates with a clear and current set of bylaws with which all members are familiar.	5				
22	Roles and responsibilities of the Board and committees are well defined and understood, with descriptions for each.	5				
23	All members of the Board are informed, active participants in the governance process.	3		2		The BOD has had some challenges with finding a meeting time that allows all members to participate in meetings. Members have been given the option to attend in-person or virtually to try to accommodate schedules. Some decisions are also made through email if needed.
24	New Board members receive orientation in all aspects of the Board's work.	4		1		
25	The Board creates committees of the Board, defines their functions and dissolves them as appropriate.	5				
26	Training for Board work is a regular part of its annual plan.	3		1	1	There is an orientation process for new Board members, but I'm not aware of training for Board work as being a regular part of its annual plan.

27	An annual appraisal of the Board's performance is done at least annually.	5				
28	Board meetings facilitate focus and progress on important organizational matters.	5				
	Board Meetings	Yes	No	Some-what	Not Sure	Comments
29	All members actively participate in each meeting of the Board and committees to which they are assigned.	1		4		Board meeting absences prevent this from being true.
30	Board meetings are effective; the Board has an effective procedure for decision-making, which it follows; all appropriate persons are involved in the process.	5				
31	The Board has Board Only sessions (without staff) as needed.	5				
32	The Board has a regular report from the Chair, as well as from the Chief Executive Officer.	5				Chair's report is on as-needed basis
33	What is especially positive about how the Board presently functions?	<p>CEO is always prepared and provides useful information and guidance to ensure BOD members fulfil responsibilities and duties in an informed manner. Generally, BOD members actively participate and are collaborative and supportive towards one another.</p> <p>There is always thoughtful discussion about issues and concerns; all important facts and information are shared before decisions are made; decisions are not made hastily. Current Board members represent diverse backgrounds, which allows for many points of view to be shared at meetings.</p> <p>Decision making is focused on creating the best possible outcomes for clients/families as well as the staff that are supporting them. The BOD recognizes the hard work that all Contact Brant employees do everyday. Members are committed to helping the organization meet the needs of the community it supports.</p> <p>Connection to CEO.</p> <p>The overall board function is significantly and positively impacted by the current CEO.</p>				

34	What would you recommend to help the Board function more effectively?	<p>Giving Board members the option of attending Board meetings virtually has been very effective in reducing absences, and should continue as an option for all future meetings.</p> <p>I have benefited from opportunities throughout the year in which staff provide direct feedback/input, thereby educating the board about agency function and process.</p>
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Board of Directors  
**Open Report from the Chair**  
April 25, 2023

Email approval was received for the following:

April 13, 2023:

Approval to pay Genesis Community Rehabilitation Inc. (a URS respite provider) \$31,976.00. This is for 16 different children/youth involved in the URS program in March. The individual invoices range from \$224.00 up to \$3,024.00. Staff have been pleased with the respite services Genesis provides and are increasingly using them. They also provide their services across the 4 URS communities (Brant, Haldimand-Norfolk, Hamilton and Niagara).

**Recommendation:** Approve the payment of \$31,976.00 to Genesis Community Rehabilitation Inc. for URS respite services in March 2023.

Laura, Kelly, Jennifer, Elizabeth, Susan, Jenna, Brian, Greg



March 31, 2023

	2021-2022 Actual	2022-2023 BUDGET	2022-23 MCCSS YTD	2022-23 MOH YTD	2022-2023 YTD
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REVENUE

Access - Children's (MCCSS)	1,200	1,200	1,200		1,200
DS Children's Specialized (MCCSS)	185,315	185,315	185,315		185,315
RPAC (MCCSS)	692	692	692		692
Coordinated Service Planning (MCCSS)	261,100	261,100	261,100		261,100
Complex Needs (MCCSS)	65,280	65,280	65,280		65,280
FASD (MCCSS)	180,000	180,000	180,000		180,000
Urgent Response Service (MCCSS)	138,160	3,776,999	3,404,453		3,404,453
Access Intake Service Planning (MOH)	351,493	351,493		351,493	351,493
Service Coordination Process (MOH)	14,566	14,566		14,566	14,566
<b>Sub-Total Ministry Actual Revenue</b>	<b>1,197,806</b>	<b>4,836,645</b>	<b>4,098,040</b>	<b>366,059</b>	<b>4,464,099</b>
Off-Setting Revenue Info Services (211-\$43,753; Findhelp \$1,844.98)	45,953	44,518	45,598	0	45,598
Off-Setting Maternity Leave Group Benefits			224		224
Off-setting Revenue - SLT Osborne Group			12,473		12,473
DSO (off-setting revenue in Access Intake Serv Planning)	10,000	0	0		0
Amortization Deferred Capital Contributions	0	0			0
<b>TOTAL Revenue</b>	<b>1,253,759</b>	<b>4,881,163</b>	<b>4,156,334</b>	<b>366,059</b>	<b>4,522,393</b>
<b>Applied from Projects</b>	<b>698</b>		<b>0</b>		<b>633</b>

less 372546 URS funding \$3,776,999  
less operating 656,027 \$3,120,972  
Less March MCCSS funding \$ 372,546

\$ 656,027 operating budget  
\$ 2,748,426 revised Purchase Service Budget  
\$ 3,404,453 Revised revenue (March - no payment)

EXPENSES


	2021-2022 Actual	2022-2023 Budget	2022-23 MCCSS YTD	2022-23 MOH YTD	2022-2023 YTD
<b>Total Salaries</b>	<b>861,454</b>	<b>1,224,688</b>	<b>1,118,950</b>	<b>265,317</b>	<b>1,226,194</b>
Staff Salaries	861,454	1,070,101	960,877	265,317	1,226,194
ACA Salaries	0	154,587	0	0	0
<b>Benefits</b>	<b>137,302</b>	<b>202,000</b>	<b>158,073</b>	<b>43,328</b>	<b>201,401</b>
Mandatory Benefits (CPP, EI, EHT)	57,851		68,236	19,667	87,902
Benefits Other (WSIB, group benefits )	79,451		89,837	23,661	113,499
<b>Training (education, meetings, recruitment - staff &amp; board)</b>	<b>10,365</b>	<b>14,000</b>	<b>42,539</b>	<b>7,235</b>	<b>49,774</b>
Staff Development	7,285		19,252	1,371	20,623
Staff and Board Expenses	3,080		23,287	5,864	29,152
<b>Transportation &amp; Communication</b>	<b>107,439</b>	<b>69,600</b>	<b>154,667</b>	<b>21,028</b>	<b>175,797</b>
Travel	473		1,392	108	1,500
Communication - (Postage, Bell, Cozzmic)	16,892		11,295	5,543	16,882
Promotion and Membership Fees	15,773		65,718	2,790	68,566
IT software & IT equipment & photocopier	40,633		31,064	4,893	35,957
IT - Maintenance and DataBase Service (Backup Server,KCL, EMHware)	33,669		45,198	7,694	52,892
<b>Building Occupancy (Lease, Insurance, Repairs &amp; Mtce)</b>	<b>46,672</b>	<b>63,855</b>	<b>34,279</b>	<b>19,362</b>	<b>53,641</b>
Lease and Building Maintenance	33,610		25,735	12,849	38,584
Insurance Expense	13,062		8,544	6,513	15,058
<b>Professional/Contracted-out (legal, audit, bank, payroll services, consultant fees)</b>	<b>52,886</b>	<b>27,063</b>	<b>21,895</b>	<b>6,591</b>	<b>28,486</b>
Audit, Legal, Bank Charges, Payroll, Other	23,131		17,657	5,411	23,067
Consulting	29,755		4,238	1,180	5,418
<b>Other Program/Service Expenditures ( Dues/Fees for Memberships, all other not classified)</b>	<b>1,593</b>	<b>3,248,160</b>	<b>1,823,787</b>	<b>0</b>	<b>1,823,787</b>
Purchased Client Services	1,593		1,815,968	0	1,815,968
Interpretation and Translation Services			7,820	0	7,820
<b>Supplies &amp; Equipment</b>	<b>36,747</b>	<b>31,797</b>	<b>28,290</b>	<b>3,197</b>	<b>31,487</b>
Furniture and Office Supplies	36,747		28,290	3,197	31,487
Amortization Deferred Capital Contributions	0		0	0	0
Contingency					0
<b>TOTAL Ministry Expenses</b>	<b>1,254,457</b>	<b>4,881,163</b>	<b>3,224,407</b>	<b>366,059</b>	<b>3,590,568</b>
<b>Ministry Surplus (Loss)</b>	<b>0</b>		<b>931,927</b>	<b>0</b>	<b>932,458</b>

Underspent in this budget line

URS Purchase Service SURPLUS

Quick Books Cash Balance*	965,312
Internally Restricted BHN	16,374
QuickBooks Balance	948,938
TD Account Actual Balance	1,234,253
Outstanding Transactions	268,941
Cash Balance (TD - Outstanding)*	965,312
Restricted Lease Funds	26,464
Unrestricted Funds Balance	10,527

GIC bank statement balance \$27,240.08 (Difference \$776.08)  
Increase \$301 from Projects Surplus

 <b>March 31, 2023</b>	<b>PROJECT FUNDS</b>				<b>Notes</b>
	<b>2021-2022 Actual</b>	<b>2022-2023 BUDGET</b>	<b>2022-2023 Forecast</b>	<b>2022-2023 YTD</b>	
<b>REVENUE</b>					
Your Guide	23,240	23,240	23,240	23,240	\$23,239.78 deferred from 2022/23
FASD Caregiver Support Group	4,500	4,500	4,500	4,500	
Health Spending Account				5,000	
Group Benefits - Mat Leave Reimbursement (1119)				582	Defer 358.30 from 2022/23 for April to June 2023
SLT Osborne Group Contract				12,473	
Other (Accrued, Interest Earned, Staff payments, <b>GIC Interest</b> , Miscellaneous)	521	1,000	1,000	948	off-setting revenue
Non-Ministry Amortization Deferred Capital Contributions	0	0	0	0	
<b>TOTAL Projects Revenue</b>	<b>28,261</b>	<b>28,740</b>	<b>28,740</b>	<b>46,742</b>	
<b>EXPENSES</b>					
Your Guide	23,240	23,240	23,240	23,240	Defer to 2023/24
FASD Caregiver Support Group	4,592	4,500	4,500	4,514	
Health Spending Account				5,000	Defer to 2023/24
Group Benefits - Mat Leave Reimbursement				582	
Off-setting Revenue for SLT Osborne Group				12,473	\$582 received from Lauren - 223.70 for Jan-March 2023 to offsetting revenue: 358.30 deferred to 2023-24
Other Expenses	18	1,000	500	0	
Non-Ministry Amortization Deferred Capital Contributions	0	0	0	0	
<b>Applied to Ministry</b>	<b>411</b>	<b>0</b>		<b>633</b>	
<b>Total Projects Expenses</b>	<b>27,850</b>	<b>28,740</b>	<b>28,240</b>	<b>45,808</b>	
<b>Projects Surplus (Loss)</b>	<b>0</b>	<b>0</b>	<b>500</b>	<b>301</b>	

#### TOTAL MINISTRY AND PROJECTS

<b>TOTAL REVENUE</b>	<b>1,282,020</b>	<b>4,909,903</b>	<b>4,909,903</b>	<b>4,569,136</b>
<b>TOTAL EXPENSES</b>	<b>1,282,307</b>	<b>4,909,903</b>	<b>4,909,403</b>	<b>3,636,377</b>
<b>TOTAL Surplus (Loss)</b>	<b>-287</b>	<b>0</b>	<b>500</b>	<b>932,759</b>

<b>ACCRUED EXPENSES 2022-2023</b>	<b>Amount</b>	<b>Amount Paid</b>	<b>Date Paid</b>
Audit Expenses - 2022-2023 Fiscal Year	10,000.00		
VISA - Zehrs - Meeting Costs	500.00		
VISA - 4imprint - Promotional Items CSP	2,259.15		
Service Provider - Innovative Occupational Thereapy Services	672.00	672.00	April 13, 2023
<b>TOTAL ACCRUED</b>	<b>13,431.15</b>	<b>672.00</b>	

<b>AMORTIZATION</b>	<b>Annual 20/21</b>
Equipment/Furniture	4,256
Computers	11,615
Software	37,029
<b>Amortization MCCSS</b>	<b>52,900</b>

<b>HST Refund</b>	10,371.17
<b>HST Paid/yet to be Refunded</b>	26,826.09

HST is paid at time of cheque issued, yet bookkeeping & financial report take out the rebate which will be refunded; this reflects the rebate which balances the cheque written to the bookkeeping/financial report.

<b>Month's Transaction Totals</b>	
Total revenue deposited	31,247.68
Total cheques written	528,460.46
Total withdrawals	697,108.48



**Board of Directors**  
**Report from the Chief Executive Officer - Open Meeting**  
**March 28, 2023**

**Communication and Counsel to the Board**

**Quarterly Report for Q4, January 1 to March 31, 2023**

Ministry Reporting Data	2022-23 Q4	2022-23 Q3	2022-23 Q2	2022-23 Q1	2021 - 2022	Notes
Total Unique Children & Youth	4,488	4,289	4,034	3,835	4,088	We have served 10% more unique children and youth than we did the previous full fiscal year; this may be directly related to URS. We have served almost 19% more in the mental health sector (this would not be impacted by the URS program), and 6% more in the developmental sector.  <b>TAY</b> = Transitional Aged Youth, age 14 – 18
CMH Access & CMH Service Coordination Unique Target 2,200	3,172	2,964	2,687	2,505	2,673	
Direct Hours	1,818	1,352	897	542	2,190	
Indirect Hours	7,195	5,474	3,594	1,953	7,791	
Unique Males	1,532	1,442	1,301	1,222	1,242	
Unique Females	1,589	1,473	1,338	1,238	1,388	
Unique Other	51	49	48	45	43	
Unique Aged 0 – 5	300	264	211	187	242	
Unique Aged 6 - 10	935	887	806	764	791	
Unique Aged 11 - 14	962	915	853	816	785	
Unique Aged 15 - 18	975	898	817	738	855	
CMH Eligible for Transition	592	459	328	198	531	
CMH Ended Service	298	231	128	59	225	
Unique <b>Complex</b> Clients Target: 120	172	170	168	165	197	
CDS Access - Unique Target 1,200	2,068	1,989	1,857	1,792	1,945	
Direct Hours	714	534	332	190	628	
Indirect Hours	5,206	3,978	2,503	1,338	5,355	
TAY with Developmental Disability	298	254	223	217	197	
RPAC Target 10	4	4	4	4	0	
Additional Data						
Total Intakes/Response	1,029	795	517	285	1065	'Intakes completed by Contact Brant were 9% fewer than last fiscal year. This would be directly related to Woodview completing their own intakes, and not referring children and youth requiring other sector services.
CMH (Children's Mental Health)	610	482	341	205	807	
CDS (Child. Developmental Service)	87	71	35	15	45	
Both	332	242	141	65	213	
Intakes Completed by RC/SC's	683	533	368	207	772	
Total Referrals	676	505	314	181	1,002	
Service Coordination Activity	14,167	10,757	7,022	3,969	16,377	
Case Conferences	59	45	20	13	31	
CMH	12	11	5	4	11	
CDS	2	3	2	1	0	
Both	14	11	6	5	7	
CSP	5	5	0	0	4	
FASD	26	15	7	3	9	
Case Resolution Reviews	47	32	21	4	40	



## Coordinated Service Planning Brant

CSP Ministry Report 1	2022-23 Q4	2022-23 Q3	2022-23 Q2	2022-23 Q1	2021 - 22	Notes Accumulative stats
# New Referrals Target: 60	<b>36</b>	27	18	10	20	We almost doubled the referrals for CSP compared to last fiscal year.
# New SPC FTE Target: 0	<b>0</b>	0	0	0	0	
Total Coordinated Service Plans	<b>106</b>	104	100	97	100	
Total SPC FTE	<b>6.1</b>	6.1	6.1	6.1	6.1	
Total Waiting for CSP Target: 0	<b>5</b>	9	7	9	4	
Total Days Waiting Target: 0	<b>1,037</b>	1,591	992	1,144	584	



FASD Service Coordination						
	Q4	Q3	Q2	Q1	2021-22	Notes
# Referrals	<b>11</b>	6	0	0	17	A 35% decrease in referrals.
# Served Target 60	<b>285</b>	59	54	50	268	
# Active on Caseloads	<b>44</b>	40	35	34	47	
# FASD Capacity Building	<b>62</b>	54	11	16	178	
Direct Hours	<b>614.75</b>	397.5	228.75	160.5	643	
Indirect Hours	<b>1,536</b>	1127	795.75	424.25	1,752	
# Discharged	<b>8</b>	6	5	3	14	
# Waiting Target 0	<b>0</b>	0	0	0	1	
Wait Time Target 0	<b>0</b>	0	0	0	8	
# Service Plans	<b>27</b>	19	19	18	18	



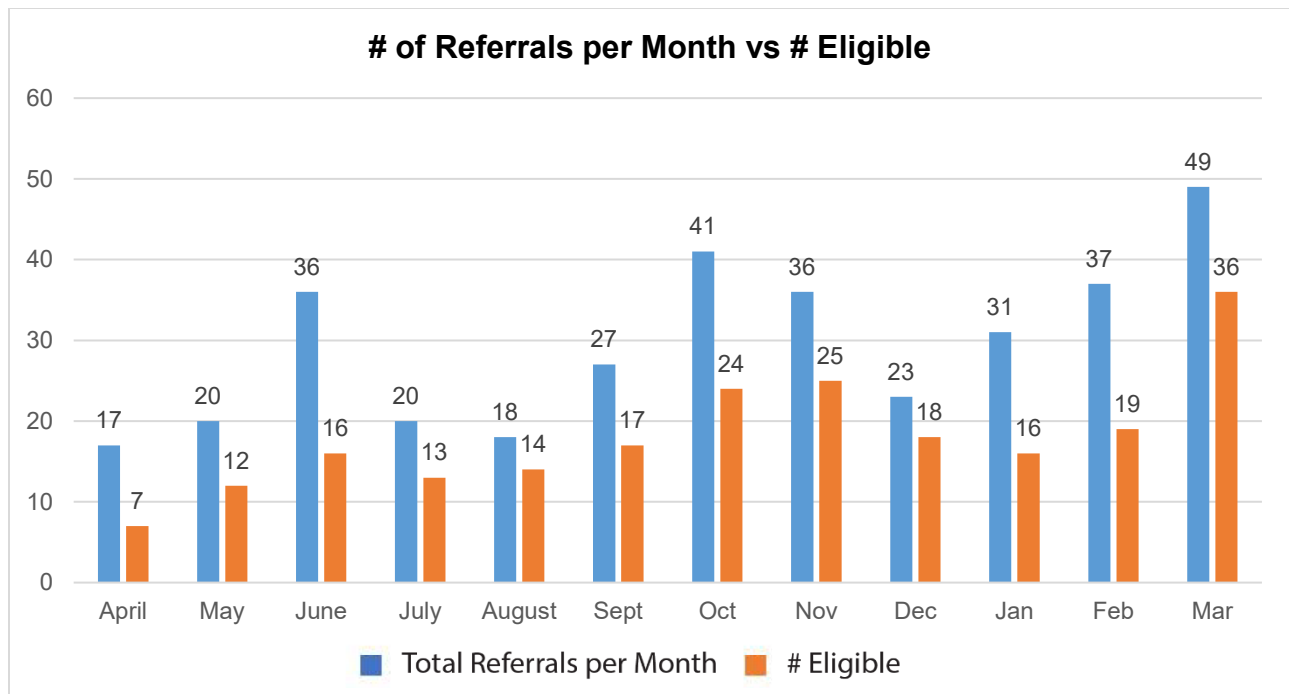
www.info-bhn.ca	2022-23 Q4	2022-23 Q3	2022-23 Q2	2022-23 Q1	2021-22	Notes
Total Records in CIOC	<b>2,222</b>	2,317	2,366	2,433	2,561	Other Data Providers no longer share records in CIOC resulting in lower numbers. <b>Data</b> is not comparable in CIOC & iCarol. 4% increase in Public Views over the last fiscal year. Unique Viewers in Q4 is based on IP address not an accumulative total previously reported.
- 211 Records	<b>1,699</b>	1,741	1,751	1,808	1,881	
Total Records in iCarol	<b>5,291</b>	5,607	-	-	-	
% Up-to-date Records	<b>78.31%</b>	87.9%	86.6%	97.7%		
Public Views (YTD)	<b>1,237,162</b>	930,249	628,870	329,759	1,182,497	
Unique Viewers (YTD)	<b>121,524</b>	428,226	91,074	44,285	187,829	

For each record we have in CIOC, there are at least 4 records created in iCarol (agency, site, services, program at sites). The iCarol work is significantly impacting LeaAnn's ability to keep CIOC records up-to-date.

Social Media						
# Twitter Followers - CB	<b>1,271</b>	1,255	1,238	1,216	1,196	Current promotion: Atomic Spark created videos; Octopus Red created Google ads; Citrus Owl to create templates to use on social media postings; joined Chamber of Commerce.
# Twitter Followers Info-BHN	<b>116</b>	104	100	93	85	
# Facebook Followers	<b>664</b>	649	633	619	599	
# Instagram Followers	<b>641,</b>	585	575	553	530	
# Linkedin Followers	<b>78</b>	75	71	18	-	
<a href="http://www.contactbrant.net">www.contactbrant.net</a> Views	n/a	4,850	n/a	n/a	16,846	
CB Website Unique Viewers	n/a	1,671	n/a	n/a	6,338	



URS	2022-23 Q4	2022-23 Q3	2022-23 Q2	2022-23 Q1	Notes
<b>Referrals</b>	<b>355</b>	238	141	71	We exceeded targets in our implementation year.  40% of families served in URS were supported by the Peer Support Navigator.
<b>Eligible</b>	<b>216</b>	146	78	33	
<b>% of MCCSS Annual Target (190 eligible)</b>	<b>113%</b>	76%	41%	17%	
<b>Current Active</b>	<b>101</b>	82			
<b>In Screening Process</b>	<b>-</b>	1			
<b>Discharges</b>	<b>127</b>	67			
<b>Peer Support Navigator</b>	<b>88</b>	51	22	0	



**Information**

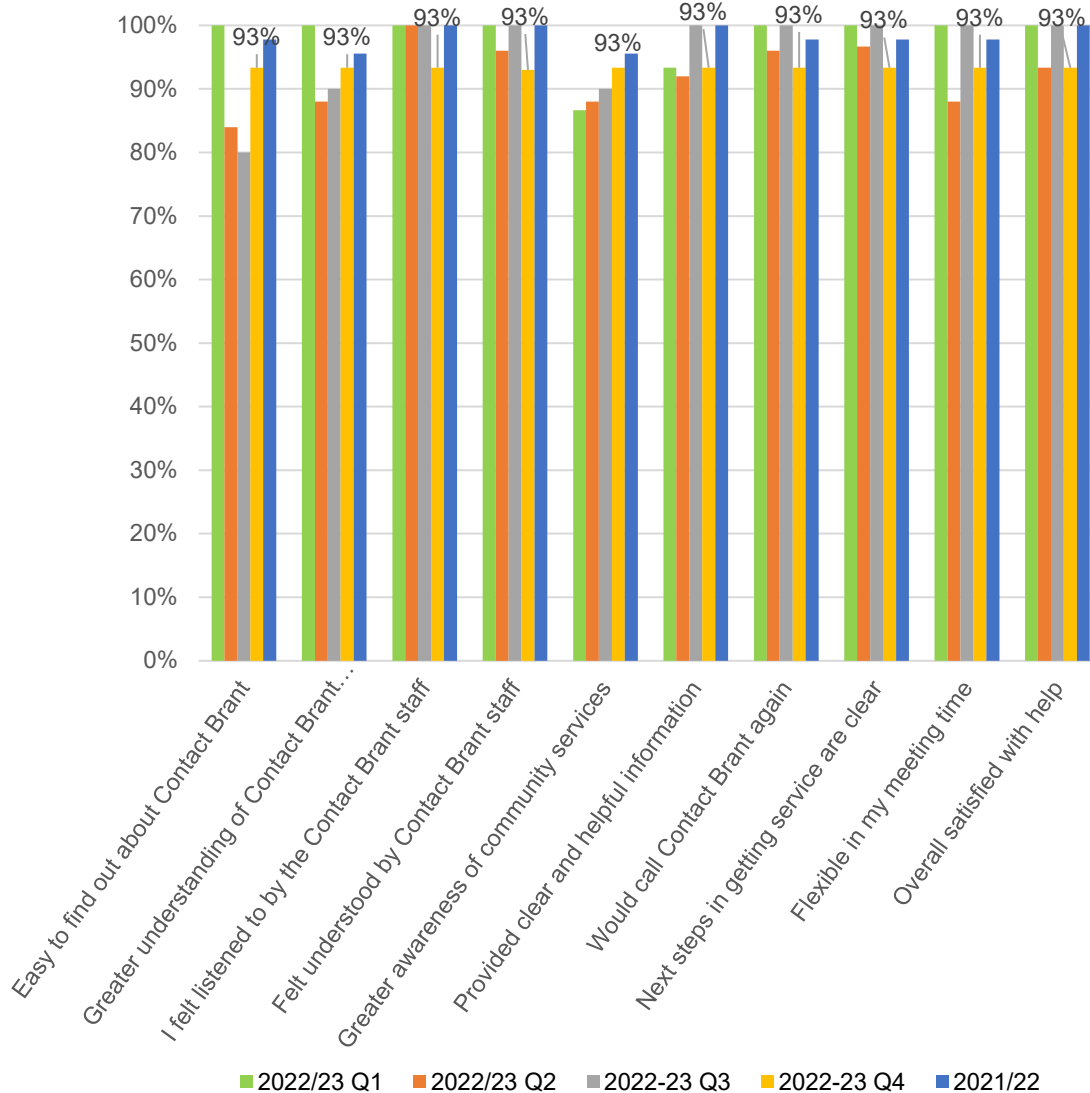
## Quality Satisfaction Survey for Access Services (QSS) results:

QSS Distribution	2022-23 4 <sup>th</sup> Q	2022-23 3 <sup>rd</sup> Q	2022-23 2 <sup>nd</sup> Q	2022-23 1 <sup>st</sup> Q	2021-22	Notes
Response Rate	4%	4%	5%	3%	6%	
QSS Responses	14	11	9	3	28	
QSS Distributed	357	268	188	108	493	
Ratio Distribution to Intakes	52%	50%	51%	52%	64%	

### Quality Satisfaction Survey Client Comments Q4

No comments in Q4!

### Satisfaction Survey Results 2022-23



## **URS Feedback**

Attached is the URS Family Experience Survey, including data and comments. The Response rate was 55% (27 surveys were sent and 15 responded).

### ***Information***

## **French Language Services Act**

The Ministry has clarified that the newest regulation was for “government agencies” and the Contact Agencies are not within that definition. However, within the Hamilton-Niagara Region, there are French Language-designated communities (Hamilton and Niagara) and we moved forward with the plan to answer phones with both an English and French greeting.

### ***Information***

## **Coordinated Service Planning Steering Committee**

The CSP Steering Committee will change to a ‘Service Coordination’ Network to promote service coordination by all professionals. The name of the committee is yet to be determined. Contact Brant as the Coordinating Agency for Brant will remain in a leadership role.

### ***Information***

## **Health and Safety - Ergonomics Assessments**

All employee’s home workstations will receive a virtual ergonomics consultation this month. We also will have ergonomics assessments completed on all the office workstations. This will help inform staff and our organization on healthier work methods and resource needs.

### ***Information***

## **Operational Policies – Information Services Overview**

Information Services policies are based on the AIRS Standards (Alliance of Information and Referral Systems) as well as guidelines from Ontario 211. Additionally, the CIOC database includes a ‘Terms of Use Policy’ statement for users.

### **1. Information Services Policy**

**POLICY:** Contact Brant will maintain a web-based Database of accurate, comprehensive, unbiased information about community, social, health and government programs and services available in Brant, Haldimand and Norfolk. Procedures outline the Information Services Coordinator’s role to manage, research, collect, aggregate, organize, update, and seek continual improvement of information in the database.

### **2. Inclusion-Exclusion Policy**

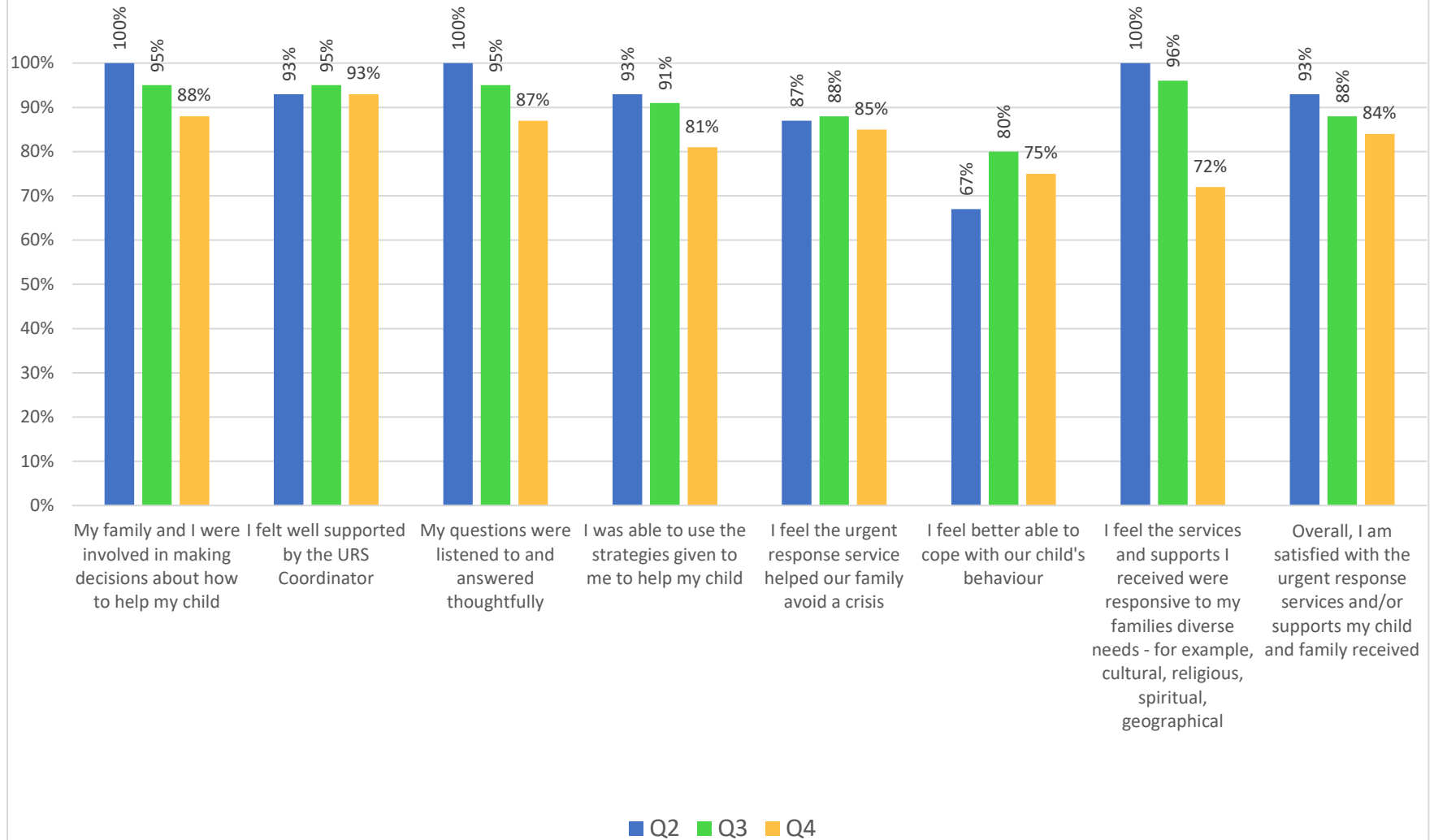
**POLICY:** Contact Brant will have clear inclusion and exclusion criteria for the Community Information Database Brant Haldimand Norfolk. Every effort is made to have comprehensive listings of all eligible services.

### **3. Terms of Use**

This policy is posted on the info-bhn website and covers: Data collection, eligibility for inclusion, disclaimer, access and use right, restrictions, copyright and other proprietary and privacy protection for other users content on site, no resale of service, independent contractors, enforcement, and waiver.

### ***Information***

## URS Family Feedback Survey Results 2022-23



**Things that I found most helpful about this service are (please comment)**

- Everything seems well occurring to our Children's needs I and my entire family are fully happy to get such a nice program we will greatly appreciated we wish you the best wishes Tnks
- I do not believe this program was helpful at all. In fact the lack of continuity of care harmed my child. Our care providers lacked integrity and the skill set to properly treat my child.
- We got to continue using the BT we already had in place.
- Overall all services were good. With the exception respite.
- They went out out of the way to connect us with services.
- Found the service coordinator and the Peer support very helpful
- Positive Strategies for behaviours
- Everything
- Leah was incredible.
- My child like many other kids have been on waiting list for services and funding. URS came to our rescue with their knowledgeable, supportive and understanding workers..... whether it was on the phone or in person in form of therapists. Thank you for helping my baby

**Things that could have been done better to support my child and family are (please comment)**

- Although our some not yet started the program we hope he will enjoy
- Better communication between contact & the care providers and families. Hiring more skilled providers. Better vetting & training of the providers.
- Unfortunately was not able to utilise respite services as the provider was unable to be available outside school hours.
- Offering new and different strategies.
- Would have liked more service provider options.
- Nothing
- Being told that respite was available at the beginning not half way through.
- I wish the duration was longer than 12 weeks.

**Please provide any other comments about your experience**

- Well we are hoping everything will be good.
- I am extremely disappointed with how this service was implemented. This program was not ready for roll out to clients.
- No further comments.
- Overall no complaints.
- Thanks for the help
- The 12 week schedule be more flexible based on needs
- I would recommend this program to others. Very positive experience.
- It was good experience
- Thank you for being so supportive of my family. I absolutely adored working with our coordinator Andi Dimashkie. Super kind, knowledgeable, understanding and caring.

Response rate: 55%

- Total Survey's Sent – 27
- Total Survey's Received – 15

## Strategic Priorities 2022 – 2023 Work Plan Report

PRIORITY	GOALS	PERFORMANCE INDICATORS	TIMELINE and UPDATE
1. Examine efficiencies, processes and services to address the growing demand for service.	a) Streamline intake process to meet service demand	<ul style="list-style-type: none"> <li>Clear process identified with CYMH sector for coordinated access across Core Service providers</li> </ul>	<ul style="list-style-type: none"> <li>Replaced standardized screening tool, the interRAI, with a simpler tool, HEADS-ED that takes less time and provides good triaging information</li> <li>Coordinated access across Core Child &amp; Youth Mental Health Services – families and professionals' feedback regularly identify confusion; need to continue to work on this!</li> <li>Receiving NO referrals from other CYMH providers for children with needs beyond mental health; developmental and complex needs clients not being connected to Contact Brant is significantly impacting our service coordination mandate. McMaster identifies their most complex kids (which are significantly increasing in numbers) are not primary mental health; however, all these referrals go to Woodview and COAST now.</li> </ul>
	b) Decrease the need for families to unnecessarily repeat their story	<ul style="list-style-type: none"> <li>Established MOU with Lansdowne regarding their new SmartStart Hub role and our Access role for sharing common intake information</li> <li>Established MOU with Woodview and St. Leonard's for Child and Youth Mental Health</li> </ul>	<ul style="list-style-type: none"> <li>Signed SmartStart Hub MOU with Lansdowne December 2022; supports sharing intake information to reduce families telling their stories and ensure connection to appropriate services. Still not receiving fulsome information from Lansdowne but this is a work in progress.</li> <li>No discussion for CYMH sector MOU which is an expectation outlined in Ministry Guidelines; Woodview has ended CYMH Core Service meetings.</li> </ul>
	c) Work with our community partner agencies to improve coordinated services for each client.	<ul style="list-style-type: none"> <li># CSP COP, CSP Steering Committee, CSP Providers meetings, and broad stakeholder networking meetings about service coordination (e.g. SLT)</li> <li>Review current community protocols with stakeholders annually, and establish new as appropriate, that focus on coordinated services</li> </ul>	<ul style="list-style-type: none"> <li>3 CSP Steering and Provider meetings; 4 CSP COP meetings; and 4 SLT meetings. Do these stats actually provide any meaningful data?</li> <li>MCCSS has indicated CSP Steering Committees no longer be required and communities can rely on other tables. (Brant is changing the CSP Steering to a Service Coordination Network to promote service coordination. This table will review and provide community training on protocols.)</li> <li>Strategic Leadership Table moving towards focusing on a single community-identified priority; need to</li> </ul>

			confirm how to proceed with coordinating/reviewing community protocols
	d) Recognize and support employees for the work they do	<ul style="list-style-type: none"> <li>• # Board and Staff opportunities to work together</li> <li>• # staff appreciation events</li> <li>• Staff and Board review policies and practices</li> </ul>	<ul style="list-style-type: none"> <li>• Board and Staff attended the agency's AGM on September 27, 2022 and staff presented at the December 20, 2022 Board meeting.</li> <li>• A staff appreciation event was held on June 13 and December 2, 2022.</li> <li>• Board recognized staff through more competitive salary grid increases January 24, 2023.</li> <li>• Staff review policies monthly at staff meetings; the Board annually reviews policies. Significant revisions were made to Human Resource and Health and Safety Policies this fiscal year.</li> </ul>
2. Identify various ways to best engage clients, partners and the community.	a) Enhanced family and youth engagement processes established	<ul style="list-style-type: none"> <li>• Quarterly review of QSS feedback on performance re "Overall satisfied with help"</li> <li>• Quarterly review and planning by Board and Staff of all feedback received</li> <li>• # FASD newsletters</li> </ul>	<ul style="list-style-type: none"> <li>• The Board and staff review the QSS and Customer Thermometer feedback quarterly. The province stopped using the MPOC for CSP and FASD on March 31, 2023, allowing us the opportunity to return to using the Family Feedback Surveys for these programs in 2023-24.</li> <li>• The FASD Coordinators publish a virtual newsletter monthly which is sent to families.</li> <li>• The FASD Coordinators support monthly FASD Caregiver Support Group meetings (18 members)</li> <li>• Hired a Peer Support Navigator for URS who brings a family voice to staff meetings.</li> <li>• Revised website, with a focus on simplifying the information.</li> </ul>
	b) Enhanced community partner engagement processes established	<ul style="list-style-type: none"> <li>• # in-service sessions with partners about Contact Brant</li> <li>• # social media followers</li> </ul>	<ul style="list-style-type: none"> <li>• In-Service Data not available from EMHware.</li> <li>• Social Media data provided to the Board quarterly.</li> <li>• LinkedIn account added for the agency.</li> <li>• Contact Brant website views are not comparable to last fiscal year due to no stats being available for Q1 &amp; Q2 following website revisions.</li> </ul>

3. Improve inclusivity within the organization, including enhancing cultural safety and a continuous commitment to learning.	a) Continue to develop effective strategies to meet the needs of the ever-diversifying population.	<ul style="list-style-type: none"> <li>• Diversity Equity &amp; Inclusion Committee meets regularly</li> <li>• # meetings with FL School Boards to better understand how we can support clients to identify cultural preferences in services</li> <li>• Board and staff to review policies and service practices to ensure they support diversity, equity and inclusion</li> </ul>	<ul style="list-style-type: none"> <li>• The Diversity, Equity and Inclusion Committee is working on redrafting the Intake Report.</li> <li>• DEI Committee drafted a DEI Policy for Board approval February 2023.</li> <li>• French Language School Board presentation October 2022.</li> <li>• Communication Strategy Committee made recommendations for job postings to recruit new employees reflecting greater diversity; 2 new employees are multi-lingual.</li> <li>• Increasing staff diversity with new hires.</li> </ul>
	b) Staff to continue commitment to learning re cultural competency	<ul style="list-style-type: none"> <li>• # training sessions received on (i) Indigenous culture, (ii) culture of safety re 2SLGBTQ, (iii) culture of safety re marginalized populations</li> </ul>	<ul style="list-style-type: none"> <li>• Staff training information not available from EMHware.</li> </ul>
4. Heighten awareness of Contact Brant's services with a variety of audiences.	a) Develop a Communication Strategy	<ul style="list-style-type: none"> <li>• Create a Communication Strategy Committee</li> <li>• Develop a plan for promotion of the agency and services</li> <li>• # Promotion events attended</li> <li>• Complete Community Partner Survey bi-annually and distribute survey to broader stakeholders.</li> </ul>	<ul style="list-style-type: none"> <li>• Contact Brant Communications Strategy Committee meets regularly with Board and Staff representation; developed a promotion plan that has included: <ul style="list-style-type: none"> <li>- Website revisions completed</li> <li>- Revised and new promotional materials and give-aways mainly completed</li> <li>- Social media postings being developed still, and Google ads have been implemented</li> <li>- Short videos of our services should be ready to distribute in May.</li> </ul> </li> <li>• Targeted outreach to doctors through mailings of promotional materials completed.</li> <li>• # promotion events data not available in EMHware.</li> <li>• Community Partner Survey to be distributed January 2023 – not completed</li> </ul>
	b) Increase the number of the general public who know to call Contact Brant.	<ul style="list-style-type: none"> <li>• Increased # of unique clients served</li> <li>• QSS Survey responses show increases re "Easy to find out about Contact Brant" and</li> <li>• Increased # visits to Contact Brant's website</li> <li>• Increased # views to Contact Brant's records in Community Information</li> <li>• Increased # of Unique Viewers in Community Information</li> </ul>	<ul style="list-style-type: none"> <li>• <b>Increase</b> will be due to new URS program</li> <li>• 'Easy to find out about Contact Brant' data continues to be flagged through feedback as a challenge.</li> <li>• Data for visits to our website was not available in Q1 or Q2 due to the changes made to the website.</li> <li>• Views to Contact Brant's record in the Information Database, as well as Unique Viewers</li> </ul>

**Recommendation:** Approve acceptance of the Strategic Priorities Report for 2022 – 2023.

**Decision**



## **Job Description: Chief Executive Officer**

### **Reporting Relationship:**

Direct reporting and accountability to the Contact Brant Board of Directors.

### **Summary of Role:**

The Chief Executive Officer will oversee daily operations ensuring the successful operation of the organization's mandates; report to the Board of Directors; manage the organization's mission and strategic priorities; direct and oversee services and human resources; ensure financial responsibility and accountability; and build and maintain positive internal and external relationships with stakeholders. The Chief Executive Officer will lead continued organizational development, implementation, administration, and management of the mandate as given by the province.

The Contact Brant Board of Directors has established policies under a Policy Governance framework to govern the Corporation, including executive boundaries that the Chief Executive Officer will adhere to, report on and be evaluated against on a regular basis.

### **Hours of Work:**

The Chief Executive Officer manages a 37.5-hour workweek, with flexible scheduling expected to meet the needs of the organization.

### **Qualifications:**

1. Bachelor's or Master's in social sciences or business administration.
2. 10 years of progressive leadership experience.
3. Capable in Strategic Planning leadership and Board/Management relationships.
4. Proven skills in critical thinking, organizational and system planning, service implementation and program evaluation.
5. Demonstrated capability to effectively manage human resources and meet legislative requirements.
6. Proven abilities and accountability in financial and statistical management and reporting.
7. Sound knowledge of the child/youth interdisciplinary system and the importance of an integrated and collaborative service approach; skilled in facilitating consensus.

### **Competencies**

In all activities, the following competencies will be displayed:

1. *Supporting Governance* – Comprehensive understanding and experience in Board/Management relations, managing human resources and financial systems (including budgeting), strategic planning development, upholding an organization's mission, meeting service and organizational objectives, planning and implementation of risk management, marketing and social media, and managing technology.
2. *Transparency and Communication* – Strong written, oral, listening and non-verbal communication skills; engage in positive, productive, and proactive conversations; emotional intelligence (awareness, control, and expression of one's emotions while

handling interpersonal relationships judiciously and empathetically); digital literacy.

3. *Interpersonal Collaboration* - Strong interpersonal skills in the areas of facilitation and collaboration that support the development and maintenance of positive internal and external relationships such as the Board of Directors, funders, employees, community stakeholders; managing staff and cultivating teamwork; mentorship; co-leadership with the Board of Directors.
4. *Judgement and Accountability* - Learn from mistakes; weigh costs, benefits, and risks; take responsibility; be open to and encourage new ideas; respond to time-sensitive information; be responsive to the needs of the people served.
5. *Strategic Thinking* – Strategic thinking and action for the organization and for the community system; critical thinking and analysis of each situation; establish efficient practices; align the tasks with set goals in order to achieve the required timely result; lead the organization's development and future.
6. *Facilitative Decision-Making and Problem Solving* – Ability to make rational and unbiased decisions that consider internal and external factors; find, perceive and analyze information; ask questions, probe for answers, conduct thorough research; work to build consensus while recognizing the right problems to work on; active problem solving and decisiveness; conflict management.
7. *Clinical Judgement* - Maintain sound understanding of child, youth and family issues and needs to inform and support development of strong services as well as agency and system planning; demonstrate respect and promote family-centered practice; be responsive to the needs of clients.
8. *Role Modeling* - Lead by example; champion the principles and practices of inclusion and equity; exemplify honesty and integrity; strong ethical code including adhering to policies and legislation; share expertise and act as a resource to others; professionalism and work ethic; exhibit strong organizational skills as well as the highest professional and confidentiality standards.
9. *Implementation* – Determine appropriate processes to get things done with sufficient attention to detail to ensure a high level of accuracy and timeliness; use and report data; give others the tools and motivation to perform well in their jobs; digital literacy; introduce new and efficient practices and methods to optimize the work process; provide insight and guidance where necessary; build employee loyalty and motivation; develop trust - build a safe environment where stakeholders understand that they will be treated fairly; nurture future leaders; flexibility and a sense of humour.
10. *Continuously Learning* - Be an active learner; responsible for own professional development and acquisition of skills, applying newly acquired knowledge to your work.

### **Conditions of Employment:**

1. Valid Ontario driver's license and current clear driver abstract with a reliable automobile and sufficient insurance for use on company business;
2. Acceptable police Vulnerable Person Record check; maintaining no criminal convictions for which a pardon has not been granted;
3. Proof of full COVID-19 vaccination, or medical exemption with compliance to requirements for regular antigen testing.

## **Responsibilities:**

### **1. Reporting and accountability to the Board**

- Support effective Board-management relations.
- Regular and transparent communication and counsel to the Board
- Keep the Board abreast of issues that could impact Contact Brant both operationally or strategically
- Develop required reports to the Board of Directors and funders

### **2. Strategic leadership and planning**

- Provide leadership, direction and daily management to Contact Brant framing all key decisions and strategic directions within the mission and values of the organization
- Ensure appropriate systems and structures are in place for the effective management and control of the Corporation and its resources
- Establish goals and objectives for the organization in an annual work plan together with evaluative measures and reporting schedules within a fiscally responsible framework
- Monitor policy and administrative requirements regularly to ensure that Contact Brant and the services it provides are relevant to the Brant community
- Facilitate planning and decision-making related to client and systems' services and address operational issues related to client service delivery.
- Support quality assurance by establishing frameworks for client feedback as well as implementing evaluation strategies to assess the service impact.

### **3. Financial management and accountability**

- Demonstrate sound accounting and fiscal management practices in determining and managing the annual budget.

### **4. Human Resource management and accountability**

- Address all aspects of Human Resource management to ensure that requisite policies, protocols, and practices are current and enacted.
- Create the organizational structure to ensure the accountability of all Contact Brant employees for fulfilling the mission, objectives and strategic directions.
- Promote effective teamwork and communication through appropriate structures that reflect the values of the organization.
- Supervise staff through consultation, mentorship, formal and informal supervision meetings, and performance reviews.

### **5. Leadership and accountability regarding Policies**

- Draft policies and revisions based on legislative requirements and best practices for Board approval.
- Implement policies; provide leadership to support employees understanding of policies.

### **6. Privacy Officer**

- Fully understand privacy legislation and act as the organization's Privacy Officer
- Ensure employees are knowledgeable and fulfill the expectations of a health information custodian.

### **7. Communications and Relationships**

- Foster open and attentive communication with clients, service providers, staff, Board members, the Ministry, and the media

- Influence positive relationships and collaboration with community service providers, government agencies, and the broader community
- Seek and accept community input to resolve issues, effect change, and shape service responses
- Increase the public's awareness, understanding and enthusiasm about Contact Brant
- Work with community partners to develop interagency processes that support transparent, seamless, effective and efficient delivery of client services.

This job description may evolve with the changing operational requirements of Contact Brant. With this in mind, the position is not limited to the duties outlined above.

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Chief Executive Officer

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Date

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Chair of the Contact Brant Board of Directors