

## **SRCHC BOARD OF DIRECTORS' MEETING**

### **MINUTES**

**June 19, 2025**

**Present:** B. Bereket, P. Berger, M. Cheng, A. Hamidian, E. Hill (Chair), R. Ho, R. Pradhan, R. John, E. Speicher, A. Simard

**Staff:** S. Wiens, K. Bataa (recorder), S. Puri (recorder), K. Foley, R. Merritt

**Regrets:** N. Hariharan

#### **1.1-1.4 Welcome, Conflict of Interest, Confidentiality, Code of Conduct**

The Chair welcomed the Board and reminded Directors of Code of Conduct & Confidentiality.

The Chair read the Land Acknowledgment and shared two calls to action related to healthcare.

#### **1.5 Confirmation of Quorum and Approval of Agenda**

##### **MOTION TO APPROVE THE AGENDA**

**(1) R. JOHN**

**(2) M. CHENG**

**CARRIED**

#### **2.0 Communication and Counsel**

##### **2.1 CEO C & C**

The CEO expanded on key highlights from her written report.

- Significant work is being done around manager essential coaching program. The objective is to build leaders across the organization in order to plan for succession and provide opportunities for learning and growth. There are currently nine leaders (managers and coordinators) registered in the coaching program.
- HHR challenges remain, particularly challenges with hiring registered health professionals.
- The Director of Integrated Primary Care will be taking a 3 month leave of absence. An Interim Director has been hired two days per week. Part of the work of the interim director will be to review our mental health supports and services for clients and staff.

The CEO also shared an open invitation to SRCHC's pride celebration event on Thursday June 26th from 1:30-4:00pm in the courtyard beside 955 Queen St E.

##### **2.2 Board Self Evaluation Survey Summary**

The CEO briefed the Board on the survey results, highlighting an overall positive Board experience.

R. Ho reminded the Board that they can reach out to the Executive if they have any concerns or feedback throughout the Board year.

### **3.0 Committees & Workgroups**

#### **3.1 CEO Performance Appraisal**

The Executive and the CEO met earlier this week to conduct the CEO's annual performance review.

#### **3.2 Audit Committee**

The Chair of the Audit Committee provided a brief review of the Audit result. SRCHC has been commended for its financial policies and practices. No issues have been identified. At the June 2<sup>nd</sup> 2025 Audit Committee meeting, the auditors had an in-camera session with the audit committee, no significant issues were raised.

The Chair of Finance reviewed all reports with the Board, and provided the Audit committees recommendation that the Board approve the Consolidated Financial Statements, the Annual Reconciliation Report and the four Program Annual Reconciliation Reports.

#### **MOTION TO APPROVE THE DRAFT MINUTES OF THE AUDIT COMMITTEE MEETING OF FEBRUARY 6, 2025 AND JUNE 2, 2025**

1) A. SIMARD	2) P. BERGER	CARRIED
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#### **MOTION TO ACCEPT THE AUDITOR'S REPORT FOR FISCAL YEAR 2024-2025**

1) A. SIMARD	2) P. BERGER	CARRIED
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#### **MOTION THAT BOARD APPROVE THE AUDITED CONSOLIDATED FINANCIAL STATEMENTS FOR FISCAL YEAR ENDING MARCH 31<sup>ST</sup> 2025**

1) A. SIMARD	2) P. BERGER	CARRIED
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#### **MOTION TO APPROVE THE ANNUAL RECONCILIATION REPORT DATED MARCH 31, 2025**

1) A. SIMARD                      2) P. BERGER                      CARRIED

**MOTION TO APPROVE THE ANNUAL RECONCILIATION REPORT STATEMENTS FOR THE AIDS, ASTHMA, CONSUMPTION TREATMENT SERVICES, AND HEPATITIS C PROGRAMS FOR THE YEAR ENDING MARCH 31, 2025**

1) A. SIMARD                      2) P. BERGER                      CARRIED

### **3.3 Alliance (G2G)**

The Alliance resolutions were passed at the AGM on June 3<sup>rd</sup> 2025.

The CEO highlighted that SRCHC and CTS providers across the province received the Community Health Champion Award: Consumption and Treatment Services and Supervised Consumption Services sites for Harm Reduction Advocacy. The Community Health Champion Award is one of several Transformative Change Awards that recognizes individuals, teams and organizations that have made extraordinary contributions to improving the health and wellbeing of people and communities in Ontario. This year's recipients demonstrated the many ways they are working to deliver equitable, low-barrier, wraparound primary health care services to underserved and marginalized communities across the province.

### **3.7 Advocacy Workgroup**

The Chair shared three key action items stemming from the advocacy workgroup:

- 1) **Environmental Scan:** Prepare an environmental scan of provincial and national organizations, actions, and activism taking place to advocate for the rights of people who use drugs to access safe consumption sites. The CEO is following up with colleagues from across the country who may have already conducted a scan and can provide us with some elements of the environmental scan.
- 2) **Public Statement:** SRCHC Board to develop and seek support in issuing an open statement on the health rights of people who use drugs. This work would start by talking to the Board chairs and CEOs of Regent Park and Parkdale Queen West, and if agreed upon, drafting a statement for other CHC's to sign on and distribute to various channels.
- 3) Advocate for an **Alliance Resolution:** Work towards a resolution for consideration at the Alliance AGM in June 2026. We will need to look at past resolutions and how they can be built on or revised to reflect the current environment.

#### **4.0 Financial and Funding Motions**

**MOTION TO APPROVE ONE-TIME FUNDING FROM ONTARIO HEALTH OF UP TO \$1,443,882 FOR THE FISCAL YEAR 2025-26 FOR HOMELESSNESS AND ADDICTION RECOVERY TREATMENT (HART) HUB**

**1) A. SIMARD                      2) A. HAMIDIAN                      CARRIED**

**MOTION TO APPROVE ONE-TIME FROM ONTARIO HEALTH OF UP TO \$5,000,000 FOR EACH OF THE FISCAL YEARS 2025-26, 2026-27, AND 2027-28 FOR HOMELESSNESS AND ADDICTION RECOVERY TREATMENT (HART) HUB**

**1) A. SIMARD                      2) A. HAMIDIAN                      CARRIED**

**MOTION TO APPROVE UP TO \$55,000 IN OPERATING FUNDS AND \$4,420 IN SPECIAL GRANT FUNDING FROM THE MINISTRY FOR SENIORS AND ACCESSIBILITY FOR THE SENIORS ACTIVE LIVING CENTRES (SALC) PROGRAM FOR CRESCENT TOWN FOR THE 2025-26 FISCAL YEAR**

**1) A. SIMARD                      2) A. HAMIDIAN                      CARRIED**

**MOTION TO APPROVE UP TO \$55,000 IN OPERATING FUNDS AND \$4,420 IN SPECIAL GRANT FUNDING FROM THE MINISTRY FOR SENIORS AND ACCESSIBILITY FOR THE SENIORS ACTIVE LIVING CENTRES (SALC) PROGRAM FOR HARMONY HALL FOR THE 2025-26 FISCAL YEAR**

**1) A. SIMARD                      2) A. HAMIDIAN                      CARRIED**

**MOTION TO APPROVE UP TO \$55,000 IN OPERATING FUNDS AND \$4,420 IN SPECIAL GRANT FUNDING FROM THE MINISTRY FOR SENIORS AND ACCESSIBILITY FOR THE SENIORS ACTIVE LIVING CENTRES (SALC) PROGRAM FOR SENIOR TAMIL CENTRE FOR THE 2025-26 FISCAL YEAR**

**1) A. SIMARD                      2) A. HAMIDIAN                      CARRIED**

**MOTION TO APPROVE BASE FUNDING OF UP TO \$2,190 FOR THE 2025-26 FISCAL YEAR TO SUPPORT COMMUNITY SERVICES INCREASE**

**1) A. SIMARD                      2) A. HAMIDIAN                      CARRIED**

**MOTION TO APPROVE UPDATED 2025-26 SRCHC BUDGET**

**1) A. SIMARD                      2) R. HO                      CARRIED**

**5.0 Consent Agenda**

**MOTION TO APPROVE CONSENT AGENDA**

1) A. HAMIDIAN                      2) R. JOHN                      CARRIED

**6.0 Monitoring Reports not in Consent Agenda**

**6.1 Operational Monitoring Report**

K. Foley reviewed 1.3 Operational Monitoring Report.

**MOTION TO ACCEPT OPERATIONAL MONITORING REPORT AS PRESENTED.**

1) R. JOHN                      2) R. HO                      CARRIED

**MOTION TO APPROVE CHANGES TO KPI'S FOR FISCAL YEAR 2025-26 OUTLINED IN THE OPERATIONAL MONITORING REPORT.**

1) R. HO                      2) A. SIMARD                      CARRIED

**6.2 Financial Condition**

The CEO reviewed 4.10 Financial Monitoring Report and its variances.

**MOTION TO APPROVE Q4 4.10 FINANCIAL CONDITION MONITORING REPORT AND ACKNOWLEDGE ITS VARIANCES**

1) R. PRADHAN                      2) E. SPEICHER                      CARRIED

**6.3 Compliance with Accountability**

**a) 4.15 Compliance with Accountability**

The CEO provided a quick review of 4.15 Compliance with Accountability and highlighted changes in the report.

The Board flagged a typo on the last paragraph of the monitoring report. The typo will be amended.

**MOTION TO ACCEPT 4.15 COMPLIANCE WITH ACCOUNTABILITY MONITORING REPORT WITH AMENDMENT**

1) R. HO                      2) R. PRADHAN                      CARRIED

**b) MSAA Declaration of Compliance**

The CEO reviewed the 2024-25 Multi-Service Accountability Agreement Schedule F – Declaration of Compliance.

**TO MOVE, AFTER MAKING INQUIRIES OF SHANNON WIENS, CHIEF EXECUTIVE OFFICER, AND OTHER APPROPRIATE OFFICERS OF THE SOUTH RIVERDALE COMMUNITY HEALTH CENTRE AND, SUBJECT TO ANY EXCEPTIONS IDENTIFIED ON SCHEDULE F, TO APPROVE SCHEDULE F OF THE 2024-2025 M-SAA AS AMENDED, DECLARATION OF COMPLIANCE, BEING THAT TO THE BEST OF THE BOARD’S KNOWLEDGE AND BELIEF, SOUTH RIVERDALE COMMUNITY HEALTH CENTRE HAS FULFILLED ITS OBLIGATION UNDER THE SERVICE ACCOUNTABILITY AGREEMENT (THE M-SAA) IN EFFECT DURING THE APPLICABLE PERIOD, APRIL 1, 2024 TO MARCH 31, 2025.**

**1) A. HAMIDIAN**

**2) R. HO**

**CARRIED**

**7.0 Community Feedback Report**

R. Merritt discussed the May 2025 Community Feedback report and the new format of the quarterly reports.

R. Merritt shared a piece of positive feedback from one of the chiropractor students, who complimented the value of SRCHC’s programming and services.

**8.0 In-Camera Session**

The Board went in camera.

**9.0 Meeting Feedback**

Meeting feedback was postponed given the time of the meeting. The Chair thanked outgoing Board members for their work over the past years.

**10.0 Meeting Adjournment**

**MOTION TO ADJOURN MEETING AT 7:43 PM**

**1) R. HO**

**2) A. HAMIDIAN**

**CARRIED**

*Rebecca Ho*

**Rebecca Ho, Chair**

*Matthew Cheng*

**Matthew Cheng, Secretary**