Regional Planning Table Minutes

Teams Meeting, February 20, 2024



Participation at the Meeting

Present:

Sue Merrill, community member
Karen Luyendyk, community member
Jonathan Schmidt, FSO (facilitator)
Astrid Fournier, community member
Stephanie Carter, CHEO
Rebecca Fromowitz, FSO (guest)
Holly Brown, CCHC
Ryan Lamb, community member
Alex Tesolin, system planner (notetaker)
Jesse Pyne, community member

Regrets/Did not attend: Oliver Thorne, community member; Noah Parchment, community member; Arlynne Belizaire, Ontario Health East (on leave); Kathryn Owens, Youth Services Bureau; Stephanie Hemmerick, Seaway Valley Community Health Centre.

1. Welcome and Acknowledgement of Algonquin Territory

We, the members of the Champlain Regional Planning Table for Trans, Two Spirit, Intersex, and Gender Diverse Health, Mental Health and Social Services (RPT), live, work, and learn on the unceded, unsurrendered traditional lands of the Algonquin Anishinaabe and the Haudenosaunee including the Mohawk community of Akwesasne. These lands are now also home to many other First Nations, Inuit, and Métis. With deep gratitude we acknowledge those who have held relationship with these lands since time immemorial.

We, the members of the Champlain RPT, commit to action by building relationships with Indigenous peoples and these lands which sustain us, working together for change within the health system and health education system(s) towards respecting and celebrating gender diversity.

In response to a question asked during the meeting's opening, members can share the surgery FAQs developed by CCHC as widely as they want. Most up to date version of the document includes note on 18+.

2. Introductions

We were joined by Rebecca Fromowitz, the Associate Executive Director at FSO – works across the programs. Here to learn a little bit more about how the RPT has been working over the last couple years.

2. Minutes

The minutes of the January 2024 meeting of the RPT were approved.

3. Terms of Reference, including Land Acknowledgement

Land Acknowledgement

Karen shared her screen with the most recent ToR.

Karen, Ollie, and Alex had rewritten the RPT's previous land acknowledgement and gathered comments and contributions from the CAT. The draft was run by several of Karen's Indigenous friends and colleagues who commented that it had shifted from being a land acknowledgement to being more of a statement of our values/principles.

Responding to this feedback, the land acknowledgement was shortened and the information on the RPT's values has been incorporated into the ToR under principles.

Membership

Members want to strike a balance between flexibility regarding terms and temporary leaves while still maintaining quorum.

Members discussed the importance of being able to meet quorum. While quorum can often be achieved asynchronously over email – this is not possible for decisions that require more substantial discussion and can lead to decisions being delayed for a month or more.

As a possible solution to challenges with meeting quorum, members discussed quorum be calculated as a percentage based on active membership (excluding those who have communicated that they are on a temporary leave). This calculation should also maintain a balance of at least 50/50 community members to service providers.

Members discussed revising the ToRs to include a note on members having a term of three years, with possibility of extension.

Community Member Honoraria

The RPT has previously discussed providing differential honoraria on an opt-in basis for those experiencing intersecting forms of oppression to increase the diversity of community members participating at the table. Jonathan asks if we would want to solicit information from similar tables to learn how they approach honoraria.

Members acknowledge the need to identify the maximum honoraria rate possible within the current budget. Need to be able to pay everyone at the maximum rate in order to adopt this model in a sustainable way.

FSO clarified that the current honoraria budget accounts for the number of community members x expected hours in meetings, plus some wiggle room. This fiscal there is leftover honoraria funds because of low participation, but the table cannot necessarily plan to overspend on the assumption that folks will not attend.

Members discussed the honoraria amounts offered at similar tables and advisory groups. MAX Ottawa is able to offer a much higher rate, but this is due to their funding model (short-term and project-based). The scale of community member honoraria offered by the health teams and health advisory groups mentioned spanned \$0-\$75/hour with the most common rate seemingly falling between \$30-40/hour.

Identifying health teams/health advisories with rates of \$30/hour for community members provides FSO with a rationale to advocate for an increased community member honoraria budget.

4. Concern from GRS Montreal about post-op care in our region

Holly received a call from GRS – they are having some issues with post-op care for folks who have been traveling from Ottawa. This is an issue that has been experienced by at least 1 community member on the RPT. These folks would benefit from an NP, RN, Doc who could support post-op.

They have training spots available – looking to take people on for learning and shadowing. After training, these folks could expect three patients a month. Holly asked members to let them know if they know someone who would be interested.

TOH is going to do their own post-op care – most of the Ottawa flow will eventually stay in Ottawa. This feels like a temporary issue.

System Planner offered to support Holly in sharing any recruitment and promotional materials.

5. Responding to situations like the Alberta announcement

Members discussed releasing a statement in response to Alberta Premier Danielle Smith's proposed anti-trans policies. Members in attendance agreed upon releasing a positive statement on the importance of access to gender affirming care, including and especially for youth. It was agreed that the statement should acknowledge that Ontario Health and Premier Ford have taken a different stance.

Without quorum, it was tentatively decided that Alex would write the statement, pulling language from the RPT's ToRs and linking out to CHEO's statement. This statement will then be uploaded to the RPT's website in a new section titled "Statements". Quorum will need to be reached over email prior to the statement going live.

6. Priorities and Workplan: preliminary discussion

With limited time remaining, Alex provided a brief review of the emerging workplan priorities for next fiscal year. The System Planner will bring forward proposed workplan items at the next RPT meeting.

7. Membership: discussion on potential new service provider members

Not discussed due to limited time.

8. Honoraria for community members of intersectional identities: presentation of budget implications and options

The principal points had already been covered under earlier agenda items.

9. Update from W2A

Not provided due to limited time. Key points had been covered under earlier agenda items.

10. Discussion of next steps re: facilitation of the RPT

RFP is out. FSO is working to identify the table's next facilitator. Jonathan clarified that as an independent contractor to FSO, the facilitator would need to be a member of a registered organization/business and/or be able to provide confirmation of insurance.

11. Updates and announcements

FSO highlights the need for an in-camera discussion at the next RPT meeting regarding the System Planner role.