

Board of Directors Intensive Minutes – DRAFT

November 24, 2020 1:00 – 4:30 pm

Board Intensive – Day 1 – November 24, 2020

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Jasmin TecsonPresidentBounmy InthavongVice PresidentKim Cloutier-HoltzActing Secretary

Mandy Levencrown Treasurer

Liz Fraser Member at Large
Disha Alam Member at Large
Janis Dalacker Member at Large
Sarah Martineau Member at Large
Brittany-Lyne Carriere Member at Large
Melodie Smith Member at Large

AOM Staff

Juana Berinstein Acting Executive Director, Director, Policy & Communications

Ellen Blais Director, Indigenous Midwifery

Nancy Chisholm Director, Human Resources and Operations

Feben Aseffa Director, Healthcare Equity, Quality, and Human Rights

Tasha MacDonald Director, Clinical Knowledge Translation Cara Wilkie Manager, Quality and Risk Management

Anna Ianovskaia Executive Assistant (recorder)

The meeting began at 1:00 pm.

Land Acknowledgement

J. Tecson began the meeting with a land acknowledgement.

1. Welcome and Introductions

J. Berinstein welcomed all board members and led an introduction where board members shared personal experiences during the pandemic, and offered suggestions of ways in which the AOM can continue to grow and improve to support members and move forward strategic objectives during this challenging time.

Personal adaptations included:

- Increased screen time
- Shifting to working from home
- Decreased social life, less support
- Coping with isolation, depression and anxiety
- Caring for elderly parents
- Accessing resources during COVID-19
- Lowering expectations of daily life
- Increasing creativity with levels of connection

- Managing having less control
- Coping with grief on a personal and collective level
- Coping with increased family stressors as a result of COVID-19
- Increased stress from COVID-19 for those with family and ties abroad
- Maintaining health and well-being

Suggestions for AOM's continued growth and improvement included:

- Becoming more agile in response to membership, less reactive
- Growth in terms of ESW program with respect to approvals and clear communication
- Supporting members in resolving power dynamics with regards to bullying
- Increased support for members who are experience marginalization and vulnerability including racialized midwives and midwives with disabilities
- Continuing to keep an open mind and reception to hearing various points of view

Meeting Evaluation

Day 1 Evaluator: L. Fraser

Day 2 Evaluator: D. Alam

2. Approve Agenda

MOTION: To approve the agenda as circulated.

MOVED: K. Cloutier Holtz SECONDED: D. Alam CARRIED.

3. Ingredients for Effective Governance

J. Berinstein facilitated the board through a teambuilding exercise drawing from the Six Ingredients for Effective Governance. Board members were encouraged to share a governance "ingredient" at the AOM that was working well as a strength, as well as one ingredient that may need adjustment.

4. Approval of the Consent Agenda

The September 23, 2020 meeting minutes were amended to note that K. Cloutier Holtz was absent.

The consent agenda was approved as amended.

MOVED: B. Inthavong SECONDED: D. Alam CARRIED.

Recorder's Note: M. Smith joined the meeting at 2:27 pm.

5. President's Report

J. Tecson provided the President's Report.

CAM Update

CAM is exploring how to best work within and alongside groups like the Queer and Trans Midwives (QTM) and Racialized Midwives Group. CAM's KNOVEMBER conference will be held later in the week with a series of workshops.

Midwifery Services Committee Update

At the most recent meeting in October, AOM updated MSC on increased needs and funding usage due to COVID-19 and other factors. The MOH was receptive. It was noted that work with Ministry at the MSC table is distinct from processes relating to HRTO and focused on implementation of the negotiated agreements between the AOM and the MOH.

Ontario Midwifery Services Committee Update

OMSC meetings feed issues and concerns into OMRG meetings attended by Ministry. Impacts and scale of COVID-19 are significant, and not yet fully appreciated. The most recent OMSC meeting was deferred as stakeholders recognized need to hear from the Ministry of Colleges, Universities and Training.

Secretary vacancy

G. Stephen has provided an update regarding a resignation from the Secretary position. January will bring an opportunity for interested Board members to step into the executive position.

6. Executive Director Report

J. Berinstein provided the ED report and reflected on the numerous changes facing the Association, board, and world in 2020. New board and staff members were welcomed, and the contributions of staff and board members who were no longer with the AOM were acknowledged, as well as those who were not in attendance at the meeting. The hard work of the staff and board were acknowledged, as the AOM has continued to juggle the demands that 2020 has brought.

HR and reorganization update

The previous board meeting brought staff recommendations regarding reorganization, which has since been implemented. The most significant changes included disbanding the Events Corporate Partnership department and shifting event planner positions into other departments. The Health Equity Quality Human Rights department was formed, with F. Aseffa as the director. The staff is hopeful to continue to grow this department, pending approval of the 2021 budget. Changes were additionally made to the Human Resources and operations department in order to strengthen and smooth operational processes.

The key functions chart was highlighted to board members to supplement understanding of the reorganization update.

J. Berinstein provided a brief update regarding Kelly Stadelbauer's progress. Her return to the AOM may be as early as April 2021. Kelly is missed and everyone is wishing her good health and for her to return to the AOM.

6.2 COVID-19 Update

C. Wilkie provided the update. There has been an incredibly large and diverse amount of work that midwives have looked for the AOM to take on in light of pandemic challenges. The staff has been incredibly dedicated to respond, where possible. During the first COVID-19 wave, staff were putting in overtime, and becoming very stretched with the female-dominated workplace and family duties that often come with that. Moving into the second wave, staff need to be deliberate about the work that is done, and the work that is not done. A decision-making tool was developed to assist with work prioritization and in order to protect time and resources and to be able to sustain excellent member service over the long haul of the COVID-19 pandemic.

A survey was conducted in October 2020 in order to confirm that no PPE shortages were reported in the early fall. Advocacy solutions with government are an ongoing effort. The AOM has been in touch with suppliers, advocating for funding, and has been supporting midwives in securing PPE through various paths.

7. Closing the gender wage gap

J. Berinstein provided the update.

7.1 Update on Ministry request for leave to appeal

Ministry filed a motion and factum to appeal the Divisional Court decision in August 2020. The AOM countered with a factum, arguing the Divisional court decision should be upheld. The AOM continues to await the decision of the Ontario Court of Appeal as to whether an appeal will be granted. A decision should be received sometime in early 2021. In the meantime, remedy implementation is moving forward, with oversight from the Implementation Steering Committee (ISC).

7.2 Update on Remedy Implementation

7.2.1 Implementation Steering Committee

J. Tecson and J. Berinstein have been heavily involved with the HRTO implementation work with Ministry, including on the Implementation Steering Committee (ISC) and the Joint Compensation Study Steering Committee (JCS SC). There has been incredible effort from the AOM working with legal counsel in order to advocate for adequate and fair implementation of the Tribunal orders. Government has been taking the most narrow view possible towards the orders, and the AOM continues to advocate for midwives' interest.

7.2.2 Injury to Dignity payments

Injury to dignity (ITD) payments are almost complete. Pre-judgment interest on ITD is still outstanding, but will be provided by the third party administrator with retro payments. 998 ITD Payments were distributed by the AOM, with 5 still outstanding. ITD for 39 additional Applicants (who made efforts to become Applicants in a timely way or who had extenuating circumstances) remain to be distributed.

7.2.3 Retro payments on compensation and benefits

Ministry will contract with a third-party administrator (3PA) to issue retro payments, which will use BORN data to calculate the retro damages owed. Applicants will have access to a validation process (midwife can provide evidence for payment from the MPG that differs from BORN billing). The 20% retro payments were order to be applied to: BCCs (experience fee, seconds, retention fee, on-call, rural and remote supplements), Caseload Variables (CVs), and benefits: exact method of payout to be determined.

AOM advocated for a number of inclusions, including:

- Ministry should cover costs of validation process AOM was not successful; disputes about payments will incur a shared cost
- Retro for Schedule P, Q & R, EMCM and IMP; ministry agreed to "go forward" increase but not retro (as not in the remedy orders)
- Disability and Parental Leaves: ISC discussing adjustments to eligible midwives between the period of April 2011 to January 2020. AOM has tabled proposal and awaiting response from Ministry

Board members reflected on possible challenges that may arise during the retro compensation process. Difficulties may arise as the way midwives are compensation is complex. Issues may rest in the CVs portion, as well as with benefits. Existing issues of lateral violence and bullying may be exacerbated and brought to light during this process. B. Inthavong noted that a webinar and resources on how to read documents relevant to these processes should be offered to midwives.

J. Berinstein noted that the retro compensation work has been very complex. It has also been complicated to work through the parental leave program. With regards to disability and parental leaves, the ISC is discussing adjustments to eligible midwives between the period of April 2011 and January 2020. The AOM is accessing advice from a benefits and pensions expert at Cavalluzzo. The AOM has tabled a proposal and is awaiting response from the Ministry. SSQ has agreed to adjust disability leaves starting Feb 2020 and onwards as if midwives were earning +20% (benefits are calculated on past two years of work).

Interest

AOM and MOH have agreed on calculation methodology for pre- and post- judgment interest on lost wages, but not on injury to dignity damages. MOH has asked for a reprieve on post-judgment interest accrual (from August 19, 2020 to at least another 6-7 months). AOM legal counsel advises AOM cannot agree to waive this interest, as it is a right of midwives to receive it.

7.2.4 Gender Based Analysis (GBA)

MOH is retaining expert to conduct GBA of policies and practices re midwifery compensation. Tribunal ordered MOH to pay for and to conduct this work. The GBA study is due in Feb 2021. The AOM has concerns that the company retained, Canadian Equality Consulting, does not have

the expertise needed to conduct the GBA. The Ministry declined to accept a bid for the GBA work form the vendor the AOM proposed.

7.2.5 Joint Compensation Study Steering Committee

Tribunal ordered MOH to pay for joint compensation study (JCS), but study is to have oversight and joint accountability from MOH and AOM. Compensation expert Marianne Love has been retained. As per the orders, the JCS is non-binding, but will inform subsequent negotiations: will cover period 2014 to 2020 and serve as a baseline for reinstating compensation benchmarks.

The JCS is to include:

- "Gender sensitive" lens
- a SERW (skills, efforts, responsibilities and working conditions) analysis;
- account for the specialized nature of the work of midwives;
- onerous on-call duties;
- 1993 principles and methodology;
- comparators set out in Courtyard report (NPs, OBs, CHC Family Physicians)

7.2.6 Addition of Applicants

Ministry has agreed to accept the additional 39 applicants. AOM worked with legal team to produce 39 affidavits, which is part of the cost reflected in the levy. The Ministry rejected one application as they felt they did not meet the threshold established (made efforts to become an Applicant in a timely way or had extenuating circumstances).

Recorder's Note: S. Martineau left the meeting at 3:40 pm.

7.3 Levy fees for 2021

MOTION: To approve the 2021 special levy for 2020 legal expenses, as \$984/per member, to be collected with 2021 membership dues.

MOVED: K. Cloutier Holtz SECONDED: D. Alam CARRIED.

7.4 Past President Stipend

MOTION: To approve the past president stipend.

MOVED: L. Fraser SECONDED: K. Clouiter Holtz CARRIED.

8. AGM Debrief and Resolution Implementation

MOTION: To approve the past president stipend.

MOVED: L. Fraser SECONDED: K. Clouiter Holtz CARRIED.

Board members provided feedback on the virtual AGM format. Board members identified a number of limitations with the virtual format. One board member indicated that it was in some

ways more accessible. More individuals attended, though board members expressed that the AGM felt less personal and more disconnected.

Recorder's Note: S. Martineau rejoined the meeting at 4 pm.

J. Tecson asserted the importance of continuing to give priority to IBPOC voices. Keeping in mind comments about disconnect, it is important to maintain the mechanism and improve virtual meetings.

8.1 Partnership with researchers to support strategic use of BORN data

Some board expressed unease with selecting McMaster as the researcher, noting systemic and structural concerns. T. MacDonald noted McMaster was chosen because they do BORN work.

Recorder's Note: K. Cloutier Holtz left the meeting at 4:30 pm

Recorder's Note: J. Dalacker left the meeting at 4:34 pm

J. Tecson noted that the resolution can be accepted, recognizing the interest of the members, and considering that it is within board purview to determine how to respond.

Recorder's Note: D. Alam left the meeting at 4:40 pm

MOTION: To approve staff recommendation with adjustments to T. MacDonald.

MOVED: L. Fraser SECONDED: S. Martineau CARRIED.

Recorder's Note: T. MacDonald left the meeting at 4:43 pm

8.3 Tools and resources to educate health care providers about informed choice in midwifery

M. Levencrown noted that tools and resources should be broadened to educate healthcare providers about midwifery as a whole. L. Fraser asserted a different understanding of the resolution as essentially requesting advocacy training. Advocacy training for members was identified as a gap. L. Fraser suggested a focus group to identify which tools would be useful for hospital integration, among which advocacy should be highlighted.

MOTION: To approve staff recommendations re: educating health care providers about informed choice in midwifery.

MOVED: M. Levencrown SECONDED: L. Fraser CARRIED.

Recorder's Note: B. Inthavong abstained from the vote.

Meeting Evaluation

L. Fraser conducted the meeting evaluation.

Meeting Adjournment

MOTION: *To adjourn the meeting.*

MOVED: B. Carriere SECONDED: M. Levencrown CARRIED.

The meeting was adjourned at 5:10 pm.

Board Intensive – Day 2 – November 25, 2020

Present

Jasmin TecsonPresidentBounmy InthavongVice PresidentKim Cloutier-HoltzActing SecretaryMandy LevencrownTreasurer

Liz Fraser Member at Large
Disha Alam Member at Large
Janis Dalacker Member at Large
Sarah Martineau Member at Large
Brittany-Lyne Carriere Member at Large
Melodie Smith Member at Large

AOM Staff

Juana BerinsteinActing Executive DirectorEllen BlaisDirector, Indigenous MidwiferyJuana BerinsteinDirector, Policy & CommunicationsCara WilkieManager, Quality and Risk ManagementFeben AseffaSpecialist, Quality and Risk ManagementLwam MehariAdministrator, Quality and Risk Management

Anna Ianovskaia Executive Assistant (recorder)

The meeting began at 1:00 pm.

Land Acknowledgment

J. Tecson opened the meeting with a Land Acknowledgment.

Meeting Evaluator

The meeting evaluator was D. Alam.

Recorder's Note: D. Alam joined the meeting at 1:06 pm.

8. AGM Debrief - cont'd

J. Berinstein shared that a midwifery group who were accused of bullying at the AGM are upset, and feel that the AOM did not protect them and their reputation. Feedback was requested of the board in order to determine a measured response. Board members discussed the events at the AGM and reflected on whether policy change or Code of Conduct changes were needed.

L. Fraser asserted that the optics of coming down heavy handed may be perceived negatively by membership, and did not feel that policy changes were needed. J. Tecson noted that

membership may not have recognized that the events of the AGM pertained to two parties, and that the AOM has a responsibility to both sides of an issue. A concern for members using the AGM as a platform to air personal grievances was noted as problematic and needing to ensure this doesn't happen. L. Fraser noted that while it is reasonable to place limits on the public forum based on some grounds, a professional association will have a certain amount of discussion. M. Levencrown asserted that it is a matter of privacy and safety.

MOTION: To follow staff recommendations for next steps as presented with regards to the 2020 AGM.

MOVED: M. Levencrown SECONDED: B. Inthavong CARRIED.

Recorder's Note: L. Fraser voted against.

8.2 A working group to investigate process for reporting bullying

C. Wilkie presented this agenda item and aknowledge that the QIRM Committee and Board had previously been trying to fix the same problem that the resolution was trying to address: how to eliminate bullying in midwifery. However, the resolution specifically asked that the AOM form a committee to explore a system for reporting and investigating allegations of bullying. At the time it was determined that the Legal Expense Insurance program was the only feasible program that the AOM could implement for allegations of bullying/misuses of power.

However, the resolution demonstrates that this decision did not adequately engage members. As a result, any plan to implement this resolution must:

- Fully engage with members
- Maintain credibility (suggesting hiring an outsider)
- Have the confidence of members, and
- Be transparent

Part of the conflict comes from the AOM representing both the employees and the employers. Staff have reflected on this issue similarly to the IPAC issue, where the AOM became more prescriptive.

Board members asserted that staff recommendations do not fully address the resolution.

J. Tecson proposed a new subgroup to take on this work to decide next steps. It was suggested that newer practice members should be involved, and members who have had different experiences of power imbalances. C. Wilke suggested that board members work with QIRM Committee to explore a new set of recommendations to respond to the resolution that can be brought back to the board in February 2021.

MOTION: To create a subgroup with identified key persons (board members, QIRM Committee members) to bring back recommendations to the Board in February, with recommendations to the board regarding a resolution passed by members which asked for the exploration of a process at the AOM to report and investigate bullying.

MOVED: L. Fraser SECONDED: J. Dalacker CARRIED.

ACTION: As per above, C. Wilkie to bring recommendations to February board meeting.

12. 2021 Budget

Budget discussion will be deferred, and the final budget will be presented in February.

N. Chisholm presented the 2021 Financial Risks to Revenue and Assumptions documents as circulated. It was noted that Group Funded Deductible (GFD) funds have not been included in the budget. If included, GFD funds would change the financial picture considerably. J. Berinstein noted that this will be the first time a GFD return will be received, to be released to the AOM in 2021. J. Berinstein provided an explanation of the GFD for board members. K. Cloutier Holtz expressed appreciation for N. Chisholm's conservative approach to the draft budget.

10. Great Board Members

The board engaged in a teambuilding activity.

13. AOMBT Report

L. Fraser delivered the AOMBT report.

Member Services highlighted:

- New enhanced MFAP (Dialogue) providing telemedicine services for midwives and families
- New disability case management program (Genex) for midwives in the 90-day waiting period or who have finished STD but been declined for LTD
- Parental Leave Program has higher-than-anticipated utilization this year and we are anticipating a deficit for the grant year

Financial services highlighted:

- New investment solutions with HRTO in mind
- New group RRIF for retiring member
- New Non-Registered Investment Plan to provide additional investment options for members who have reached their contribution maximum with GRSP or TFSA

Additional AOMBT initiatives:

- Working with AOM on HRTO retro pay, negotiating with benefits carrier to update disability coverage based on difference in earrings
- New strategic pillar in strategic plan related to equity and inclusion
- Plan member survey underway, should be completed in Q1 2021; seeking member feedback on satisfaction, program use, awareness, member needs, and barriers/challenges/obstacles to use
- Participation in AOM/AOMBT Disability Equity Working Group and Midwifery Wellbeing Meeting Group

Madeleine Clin, currently Chair-Elect, will become AOMBT Chair in April 2021

Meeting Evaluation

D. Alam conducted the meeting evaluation.

Meeting Adjournment

MOTION: *To adjourn the meeting.*

MOVED: B. Carriere SECONDED: D. Alam CARRIED.

The meeting was adjourned at 4:45 pm.