AGENDA

Board of Trustees - OPEN Meeting

September 10, 2026 18:00 - 20:00

G. Elliott Boardroom

Chair: Wilkie, Kathy **Secretary:** Spindler, Julie

Confirmed: Lise Betteridge, Justine Garner, Joanne Hohenadel, David Kennedy, Kathy Wilkie, Lisa Woolley, Martin Ruaux, Ted Sehl, Katherine Hauser, Al Van Leeuwen, Kimberley Wilson
Declined: Naeem Mir
Requested: Michelle Karker, Tanya Watton, Thomas Hunter

					Pages
18:00	1	WELCOME AND CALL TO ORDER		Wilkie, Kathy	
18:00	1.1	Disclosure of Pecuniary Interest and General Nature Thereof (open items)			
	1.2	Approval of the Agenda			
		• **Att 1 OPEN Board Agenda.September 10, 2026**			**3 - 4**
	1.3	CEO's Statement of Compliance and Territorial Acknowledgment		Karker, Michelle	
	2	BOARD GOVERNANCE AND POLICY DEVELOPMENT - Karen Fryday-Field, Consultant		Wilkie, Kathy	
	2.1	New Governance Policies for Approval			
	2.1.1	Governance Philosophy and Approach Policy (GP #IV-01)	Approval		
		• **Att 2 BR_Governance Philosophy Policy V4**			**5 - 15**
	2.1.2	Critical Outcomes Policy (CO-01)	Approval		
		• **Att 3 Board Report on Critical Outcomes for Sep Board Meeting (V2026-Sep-10)**			**16 - 26**
	3	CONSENT AGENDA - OPEN	Approval		
	3.1	Approval of the Previous Minutes - June 3, 2026 and July 23, 2026			
		• **Att 4 a Open Meeting Minutes.June 3 2026 draft KW approved with attachments**			**27 - 40**
		• **Att 4 b Open Minutes.July 23, 2026 d r a f t**			**41 - 42**
	3.2	Corporate Affairs Committee Highlights June 10, 2026		Sehl, Ted	
		• **Att 5 Committee Highlights CAC June 10, 2026**			**43 - 44**
	3.3	Governance and Nominating Committee Highlights August 19, 2026		Wilkie, Kathy	
	3.3.1	2026 Board and Individual Effectiveness Self-		Wilkie, Kathy	

	Evaluation Survey Results and Findings			
	• **Att 6a Briefing Note - Annual Board Effectiveness Self-Evaluation Survey Results - KW**			**45 - 58**
	• **Att 6b Briefing Note - Annual Board Effectiveness Self-Evaluation Survey Results - attach**			**59 - 150**
4	The Elliott LTC Residence Quarterly Report Q2 2026		Ruaux, Martin	
	• **Att 7 Q2 LTC Report to the Board.September 10, 2026**			**151 - 152**
5	NEW BUSINESS - OPEN MEETING			
5.1	CEO's Report September 2026	Approval	Karker, Michelle	
	• **Att 8 10-09-2026 CEO Report September 2026 OPEN FINAL**			**153 - 155**
6	CORRESPONDENCE FOR INFORMATION	Information		
6.1	GW OHT Integrated Care Council Meeting Key Messages May 2026 (deferred from June)			
	• **Att 9 GW OHT ICC Meeting Key Messages May 2026**			**156 - 157**
6.2	COM Report Q1 2026 (deferred from June)			
	• **Att 10 The Elliott Long-Term Care Residence Quarterly Report 2026-Q1.Final**			**158 - 162**
6.3	COM Report Q2 2026			
	• **Att 11 The Elliott Long-Term Care Residence Quarterly Report 2026-Q2.Final**			**163 - 167**
7	UPCOMING MEETINGS	Information		
7.1	Board of Trustees October 1st, Corporate Affairs September 23rd, Governance and Nominating September 16th			
8	ADJOURNMENT - OPEN MEETING AND AUTHORITY TO MOVE INTO CLOSED MEETING	Declaration as Required		
9	MOTION(S) FROM CLOSED MEETING	Approval		
10	CHAIR'S ANNOUNCEMENTS & ADJOURNMENT		Wilkie, Kathy	
10.1	The Great Harvest Event			
	• **Att 12 Board Briefing Note - The Great Harvest 2026 - Building New Relationships**			**168 - 169**

NOTICE OF OPEN BOARD OF TRUSTEES MEETING

THURSDAY, SEPTEMBER 10, 2026 - 6:00 PM

G. ELLIOTT BOARDROOM

A G E N D A

1.	**WELCOME AND CALL TO ORDER**			
	1.1	Disclosure(s) of Pecuniary Interest and General Nature Thereof (open items)		
	1.2	Approval of the Agenda	*(Motion)*	Att 1
	1.3	CEO's Statement of Compliance and Territorial Acknowledgment		
2.	**BOARD GOVERNANCE AND POLICY DEVELOPMENT**			
	2.1	New Governance Policies for Approval:		
	2.1.1	Governance Philosophy and Approach Policy (GP #IV-01) Approval (K. Wilkie, Gov & Nom Committee Chair/ K. Fryday-Field, Consultant)	*(Motion)*	Att 2
	2.1.2	Critical Outcomes Policy (CO-01) Approval (K. Wilkie, Gov and Nom Committee Chair/K. Fryday-Field, Consultant)	*(Motion)*	Att 3
3.	**CONSENT AGENDA (OPEN)**		*(Motion)*	
	3.1	Approval of the Previous Minutes – June 3, 2026 and July 23, 2026		Att 4
	3.2	Corporate Affairs Committee Highlights June 10, 2026 (T. Sehl)		Att 5
	3.3	Governance and Nominating Committee Highlights August 19, 2026 (K. Wilkie)		
	3.3.1	2026 Board and Individual Effectiveness Self-Evaluation Survey Results and Findings		Att 6
4.	**THE ELLIOTT LTC RESIDENCE QUARTERLY REPORT Q2 2026** (M. Ruaux)		*(Motion)*	Att 7
5.	**NEW BUSINESS – OPEN MEETING**			
	5.1	CEO's Report September 2026 (M. Karker)	*(Motion)*	Att 8
6.	**CORRESPONDENCE FOR INFORMATION**		*(Motion)*	
	6.1	GW OHT ICC Meeting Key Messages May 2026 (deferred from June)		Att 9
	6.2	COM Report Q1 2026 (deferred from June)		Att 10

"Quality choices in a caring and inclusive, home-like community. A tradition of promoting dignity and independence for those we serve and their families."

6.3 COM Report Q2 2026 Att 11

7. UPCOMING MEETINGS

Board of Trustees – October 1, 2026

Corporate Affairs – September 23, 2026

Governance and Nominating – September 16, 2026

8. ADJOURNMENT – OPEN MEETING AND AUTHORITY TO MOVE INTO CLOSED MEETING *(Motion)*

9. MOTIONS FROM CLOSED MEETING FOR APPROVAL *(Motions)*

10. CHAIR'S ANNOUNCEMENTS & ADJOURNMENT

10.1 The Great Harvest Event Att 12

BRIEFING REPORT TO THE ELLIOTT COMMUNITY BOARD OF TRUSTEES

REPORT TOPIC	**Proposed Governance Philosophy and Approach Policy (GP #IV-01)**
REPORT DATE	August 29, 2026
REPORT FROM	Governance and Nominations Committee supported by Karen Fryday-Field, BScPT, MCPA, MBA, GSP Senior Consultant, Meridian Edge Leadership & Governance Consulting

REPORT PURPOSE:

☒	**Board Policy Development, Review, and Approval**	☐	**Monitoring Report**
			☐ Critical Outcomes (Ends)
	☐ Critical Outcomes (Ends) Policy		☐ Executive Boundaries
	☐ Executive Boundaries Policy		
	☐ Board-CEO Relationship Policy	☐	**Careholdership Linkage Report**
	☒ Governance Process Policy	☐	**Incidental Report**
☐	**Board Implementation of Policy**		☐ CEO
	☐ Board-CEO Relationship Policy		☐ Board Chair
	☐ Governance Process Policy		☐ Other:

BACKGROUND

This Briefing Note presents the proposed Governance Philosophy and Approach Policy (GP #IV-01), for consideration and approval by the Board of Trustees. The policy articulates the Board's overarching beliefs, principles, and values regarding governance; defines its chosen governance approach; and establishes the foundation for the processes and practices through which the Board will carry out its governing responsibilities.

The Board began its governance modernization journey in the fall of 2025 with an initial governance orientation session and a Board questionnaire focused on strategic direction and governance. This work continued through the Board's February 2026 retreat and subsequent discussions aimed at clarifying the Board's governance philosophy, strengthening its approach, and moving toward an integrated set of leading governance practices.

The proposed policy has been developed through this work and informed by the Board's evolving discussions and direction. Successive drafts have been reviewed by the Governance and Nominations Committee, Board Officers and the CEO. Feedback from these discussions has been incorporated into the current draft.

The Governance Philosophy and Approach Policy is intended to serve as an overarching governance policy within the Board's policy framework. It establishes the foundation for how the Board understands and exercises its governance role and provides a coherent and integrated set of principles to guide the development and application of its governance policies, processes and practices.

Approval of this policy represents an important next step in the Board's governance modernization work. Once approved, it will provide the foundation for reviewing and updating other governance-related Board policies and for developing additional policies where required to complete a coherent and contemporary policy framework governing how the Board governs.

Board Considerations
Trustees are asked to review the proposed policy, as outlined in Figure 1, in advance of the September 10, 2026 Board meeting and consider the following questions:

- Clarity: Is the policy clear and understandable?
- Alignment: Does the governance philosophy and approach reflect the Board's recent discussions, decisions and emerging beliefs about how it intends to govern?
- Completeness: Is anything important missing that should be addressed in this overarching policy?

The September 10, 2026 Board meeting will provide an opportunity for final discussion and consideration of any refinements before the Board is asked to approve the policy at that meeting.

RECOMMENDED MOTION That the Board of Trustees approve the new Governance Philosophy and Approach Policy, GP #IV-01, as presented.

FIGURE 1

POLICY TITLE: GOVERNANCE PHILOSOPHY AND APPROACH	
POLICY SECTION:	GOVERNANCE PROCESS
POLICY NO:	GP #IV-01
BOARD POLICY REVIEW FREQUENCY:	EVERY FOUR YEARS
DATE APPROVED BY BOARD OF TRUSTEES:	Ready for September 10, 2026
DATE REVIEWED/REVISED:	
BOARD CHAIR'S SIGNATURE:	

BACKGROUND

The Elliott Community (The Elliott) Board of Trustees recognizes that it has the responsibility of being the primary force pressing The Elliott to be accountable to the broader Elliott community and to achieve The Elliott Purpose and Critical Outcomes Policies. The Board ensures that all business of The Elliott is conducted in a transparent, legal, prudent, ethical, equitable, inclusive, and just manner.

In the fulfillment of this responsibility, the Board is committed to rigorous, continual improvement of its capacity to govern.

POLICY PURPOSE

The purpose of this policy is to describe the Board's beliefs, approach, principles, and values for its governance role and processes. The Board, in its governance, shall ensure that it fulfills its mandate as the representative of the community, by assuring that The Elliott achieves the results described in The Elliott Critical Outcomes Policies and operates within the governance of values and risk parameters described in The Elliott Executive Boundaries Policies.

Legal and Governance Framework

The Board of Trustees exercises its governance responsibilities aligned with the legal and municipal framework established by applicable legislation and agreements, including:

- the "Elliott Act, 2002",
- the "Fixing Long-Term Care Act, 2021" (FLTCA), and related regulatory requirements,
- the "Retirement Homes Act, 2010" (RHRA),
- the Long-Term Care Services Agreement,
- applicable City by-laws,
- the City's delegation of authority, and,
- the Elliott Board's By-laws and policies.

The Board governs within this statutory and municipal framework. The Board's authority and responsibilities are exercised collectively and in accordance with these governing instruments. Policy Governance is the governance system and framework through which the Board exercises its governance responsibilities; the Board, as a collective body, has responsibility for strategic direction, connection with the careholdership and ownership, stewardship, and fiduciary oversight and accountability.

THE POLICY

Board's Governance Commitment, Beliefs, Philosophy, and Values

The Board is responsible for ensuring that:

- Its actions are consistent with the relevant legislation,
- The Elliott achieves the results described in its Purpose and Critical Outcomes Policy,
- The Elliott operates within parameters described in its Governance of Values and Risk, Operational Boundaries Policies, and,
- The Elliott business is conducted in a transparent, legal, ethical, equitable, and just manner.

Governing Philosophy

The Board of Trustees governs the organization using the Policy Governance® system and framework, a comprehensive and integrated framework for governing that is designed to enable the Board to lead with clarity of purpose, strategic focus, accountability, and ethical stewardship. The Board recognizes that Policy Governance is not a collection of independent practices, but rather a coherent and integrated governance system in which all elements are intentionally interconnected and mutually reinforcing.

In carrying out its governance responsibilities, the Board practises in accordance with the ten integrated principles of Policy Governance. These principles guide how the Board defines organizational impact, delegates authority, establishes accountability, exercises oversight, and governs itself. The Board acknowledges that the effectiveness of the governance system depends upon the consistent application of all principles as an integrated whole.

The ten principles of Policy Governance practiced by the Board are:

1. **Purpose Before Activity**
   The Board defines the intended long-term impact, outcomes, and benefits the organization exists to achieve for those it serves.

2. **Careholdership Accountability**
   The Board acts on behalf of the organization's careholders, residents and families, interested parties, and the broader communities served. The Board remains accountable for ensuring organizational purpose is fulfilled.

3. **Board Leadership of Strategic Direction**
   The Board determines the organization's strategic direction and desired outcomes while respecting the distinction between governance and operational leadership.

4. **Values and Risk-Based Boundaries**
The Board establishes clear ethical, prudential, and risk-management boundaries within which the Chief Executive Officer (CEO) may exercise authority.

5. **Unified Delegation to One CEO**
The Board delegates operational authority and accountability to a single CEO, avoiding fragmented direction through committees or individual trustees.

6. **Executive Authority Within Defined Boundaries**
The CEO has the authority and flexibility to determine all reasonable means, methods, and operational strategies necessary to achieve Board-defined outcomes while operating within Board-established limitations.

7. **Monitoring Organizational Performance and Compliance**
The Board regularly monitors organizational performance and compliance with Board policies through systematic, evidence-based evaluation.

8. **Board Decisions Made Collectively**
The Board exercises authority only as a body. Individual trustees, officers, and committees possess no authority to direct staff or organizational operations unless explicitly delegated by the Board.

9. **Deliberate and Disciplined Governance**
The Board governs through written policies, defined responsibilities, strategic foresight, and disciplined governance processes rather than through involvement in operational decision-making.

10. **Continuous Governance Improvement**
The Board commits to ongoing learning, evaluation, reflection, and renewal of its governance practices to ensure continued effectiveness, relevance, and impact.

Governing Approach
Given the governance philosophy used by The Elliott, the governing style or approach of the Board is visionary, strategic, transparent, and focused on equity, inclusion, and accountability. The Board, through example, will set a standard of excellence and integrity for the organization.
In order to carry out this role effectively, the Board is committed to functioning in a manner that will retain and enhance the confidence and trust of The Elliott's residents, families, and other careholders.

The Board's governing approach will:
- Emphasize clarity of Purpose and Critical Outcomes (outcomes, results, impact, effects).
- Focus on and demonstrate forward thinking, strategic direction, and visionary leadership.
- Encourage diverse perspectives to uncover/mitigate potential fixed ideas, future opportunities, and ensure an equitable, inclusive approach while building consensus.

- Be proactive rather than reactive using generative thinking to explore new possibilities/opportunities, ways of seeing things.
- Practise collaborative, collective decision-making.
- Clearly distinguish between governance (Board) and management roles (CEO).
- Demonstrate a commitment to engagement with the broader Elliott community and other key careholders.

Accordingly,

1. The Board cultivates a sense of group responsibility by working in partnership with the CEO, staff, and the communities served. The Board (not the CEO or staff) is responsible for excellence in governance. The Board uses the expertise of individual Trustees to enhance the ability of the Board as a whole but does not substitute individual Trustees' skills and perspectives for the Board's collective values and decisions.

2. The Board holds itself accountable for governing with excellence. This self-discipline will apply to attendance, preparation for meetings, policy-making and decision-making principles, respect of roles, strategic direction design and processes, governance of risk, and ensuring the continuity of governance capability. Annually the Board sets goals and an Integrated Strategic Board Agenda/Work Plan to achieve its specific goals including appropriate governance metrics.

3. The Board relies on each Trustee and Board Committee to fulfill its commitments and does not allow any individual Committee or sub-part of the Board to be an impediment to fulfilling the Board's commitments.

4. The Board directs and inspires The Elliott through the careful establishment of written policy direction reflecting the Board's values principles and strategic direction. The Board's major policy focus will be on the intended long-term impacts (Critical Outcomes) not on the administrative or programmatic means of achieving them.

5. The Board regularly reviews, updates, and monitors its policies. The Board, by majority vote, may revise or amend its policies at any time. (Note: In addition, the Board policies will normally be reviewed and monitored, by the Board, as scheduled in the Board's Annual Integrated Board Strategic Agenda/Work Plan and the Boards Policy Review Schedule).

6. The Board recognizes that its role is in governance, not management. As such, the Board is an initiator of policy, not merely a reactor to staff initiatives. The Board is clear in its delegation to the CEO and expects the CEO to appropriately interpret, implement, and achieve the Board's policy direction. The Board is also committed to persistent due diligence through monitoring the CEO's policy implementation to support the achievement of organizational results.

7. The Board enforces upon itself whatever discipline is needed to govern with excellence and equity. The Board maintains a structure and process that enhances its effectiveness. It regularly reviews its governance structure (i.e. Board and Committees).

8. The Board continuously develops its governance capacity through:
   - detailed/intentional/required orientation of new Trustees to the Board's approach and process,
   - regular Board Continuing Education regarding leading governance practices.
   - periodic discussion and at least an annual evaluation of the Board and the impact it is having to assure understanding of governance best practices, the governance system, and continued improvement in The Elliott's governance capacity and results, and
   - the Board speaks with one voice once Board decisions have been thoroughly explored, discussed, and made (i.e. approval by a motion).

Rescinding Part of a Current, Relevant Board Policy

As part of the Board's policy refresh process, legacy Board policies or sections of legacy policies will be rescinded as new policy content is developed. This avoids the situation where there could be competing or differing policy directions in the Board policy set. The relevant Board policy in this case is titled Board Governance 1-2014.

Figure 2, below presents the legacy policy with a proposal to the Board of what sections should be rescinded in September once the new Governance Philosophy and Approach Policy is approved. In Figure 2 the sections of the policy to be rescinded at the September Board meeting are struck out with a line and shaded in yellow.

RECOMMENDED MOTION
That the Board of Trustees of The Elliott Community moves to approve the rescinding of part of the Board Governance 1-2014 Policy as outlined in Figure 2.

The remainder of the Board Governance 1-2014 Policy will continue to be the governing authoritative policy on the matters that it covers until the Board is able to address refreshed policies in these areas.

FIGURE 2	
Board Governance	**Board Policy 1-2014**

~~POLICY:~~
~~The Elliott Community is governed by a Board of Trustees who is ultimately accountable for all strategic outcomes of the organization. Under the Long-Term Care Services Agreement of November 2014, the City of Guelph has delegated its authority for the management and operation of the 85 bed LTC Home to the Board of Trustees of The Elliott. All other areas of the organization (Retirement and Life Lease) are directly overseen by the CEO who is responsible to the Elliott Board.~~

PURPOSE:
To clearly set out the Board of Trustees' roles and responsibilities ~~within a governance framework as it applies to The Elliott Community~~.

PROCEDURE:
~~Governing Style~~
~~The Board intends to be proactive, to provide leadership, to strive for consensus in decision making and to keep The Elliott Community's interests front and centre in their deliberations.~~

~~As a governing body, the Board believes in the basic principles of governance as they apply to The Elliott Community. As such, the Board:~~

- ~~Directs its attention toward strategic rather than operational issues and concerns;~~
- ~~Approves all reports and motions of the Committees of the Board (Governance and Nominating, Finance and Audit, Risk Management and Quality, and Fundraising and Community Engagement); and~~
- ~~Ensures that all decisions and actions are in keeping with the Strategic Directions of the organization.~~

~~Manages any risks to the organizations' reputation and integrity.~~

Board Role
In its leadership role, the Board sets the organization's direction and advocates on behalf of The Elliott Community to funders. In doing so, the Board will:

1. Promote and advocate for the organization with its respective constituents to ensure it has sufficient resources to achieve its mission (e.g. City Council, member residents, Ministry, Ontario Health, etc.);
2. Provide written governing policies related to the Strategic Directions;
3. Foster and support an active working relationship with The Elliott Community's Chief Executive Officer (CEO); and
4. Monitor the CEO's performance against the Strategic Directions and the annual work plan connected to the Strategic Directions.

Board Responsibilities

1. Develop and approve the Strategic Directions of the organization in partnership with staff;
2. Approve short and long-range plans for the organization to carry out its goals;
3. Review and approve the capital and operating budgets and once approved, advocate for the same with funders;
4. Monitor the ongoing financial performance of the organization;
5. Represent the organization with integrity and with full and active support;
6. Report to the Board about constituent interests and concerns; and
7. Recruitment, performance management, and compensation of the Chief Executive Officer.

Delegation to CEO

The Board delegates all operational matters to the CEO, who has authority to make all decisions and take all actions required to ensure that Board outcomes are realized and achieved.

In carrying out the duties prescribed by the Board, the CEO will:

- promote and model ethical and fair business practices and effective implementation of the policies and procedures of the organization;
- reinforce the critical importance of the health, safety, and wellbeing of staff, residents, families, and visitors;
- ensure that the organization enters into agreements or contracts that are fair and are in the best interests of the organization;
- focus on the financial health of the Elliott Community
- use sound business practices in the administration and management of The Elliott Community; and
- ensure that the organization complies with the Long-Term Care Homes Act, Retirement Homes Act, and other legal obligations.

Expectations of Trustees

Trustees must work together as a team and share collective legal and fiscal responsibilities. Trustees are expected to contribute to discussions and to participate fully and respectfully in each other's contributions.

The following ground rules reinforce this spirit:

- Practise mutual respect,
- Accept different viewpoints and tension as healthy and handle both creatively,
- Deal with problems promptly and with courtesy and consideration,
- Encourage and affirm each Trustee's unique potential and viewpoint,
- Keep an open mind and give one another permission to make mistakes and to brainstorm,
- Never monopolize, interrupt or intimidate during discussions,
- Be prepared for meetings by reading agenda packages in advance and bringing them to meetings,
- Declare conflicts of interest,
- Take advantage of opportunities to learn about The Elliott Community and Retirement & Long-Term Care sectors,
- Respect and support any decisions of the Board, and,
- Actively participate in all discussions, sharing your unique perspectives and experiences.

Obligations and Liabilities

1. Trustees shall never permit themselves to be placed in a conflict of interest situation, where their self-interest is contrary to that of the organization or where they might otherwise have something to gain by a Board position or decision,
2. Trustees are expected to consider, represent and always act in the best interests of the organization as a whole in preference to any other interests which that Trustee may also have or represent,
3. Trustees shall fulfill their duties with honesty and loyalty and with the care, diligence and skill that a reasonably prudent person would exercise in a comparable circumstance,
4. Trustees must be familiar with the organization's by-laws, rules, regulations, and policies as a minimum base knowledge.

Board Chair

The Board Chair:

- Takes a leadership role within the Board;
- Ensures that all meetings are conducted in an orderly manner and keeping with established Rules of Order;
- Acts as the liaison between the Board and the CEO;
- Speaks for the Board in the public domain, including with the media; and
- Serves as Chair of the Governance and Nominating Committee.

Vice-Chair

The Vice-Chair acts in the Chair's absence and may perform other responsibilities at the Chair's request. Serves as Chair of the Risk Management and Quality Committee.

Secretary/Treasurer

The Secretary/Treasurer reports the monthly financial statements to the Board, as presented to the

Finance and Audit Committee. Serves as Chair of the Finance and Audit Committee.

The positions of Board Chair, Vice-Chair, and Secretary/Treasurer are held for a term of 2 years, re-affirmed annually by the Board.

Membership
Board membership is determined by appointment as recommended by the Governance and Nominating Committee to Guelph City Council.

Closed Meetings
Reference Board Policy 1-2012

Monitoring/Tools
The Board continues to identify tools for use in monitoring its policies. Present below are a sample of such tools:

- Financial Statements
- Annual Audit Reports
- Risk Management and Quality Reports
- Resident and Staff Surveys
- CEO Reports to the Board

Board Committees
Board members are expected to sit on and take active roles in various Board Committees. These committees review and approve management decisions in the various areas to ensure alignment with strategic direction and sound operational practices. A Board Member serves as Chair of the Community Engagement and Fundraising Committee.

Board Evaluation
The Board conducts annual self-evaluation of its internal processes in keeping with the principles of Continuous Quality Improvement (CQI).

~~Respectfully Submitted,~~	~~Approved by Motion of the Board of Trustees,~~
~~Michelle Karker~~ ~~CEO~~ ~~March 20, 2024~~	~~Peter Barrow~~ ~~Chair, Board of Trustees~~ ~~April 4, 2024~~

BRIEFING REPORT TO THE ELLIOTT COMMUNITY BOARD OF TRUSTEES

REPORT TOPIC	Strategic Direction (Critical Outcomes Policies) – The Key Work of the Board
REPORT DATE	September 5, 2026
REPORT FROM	Karen Fryday-Field, BScPT, MCPA, MBA, GSP Senior Consultant Meridian Edge Leadership & Governance Consulting

IMPORTANT NOTE: This document provides an overview of the history of the work The Elliott Board has done to develop a future-focused strategic direction. It also provides an overview reminder of about what critical outcomes are, including the CEO's interpretation of the Critical Outcomes Policy. Given, the short timelines the most important part for Trustees to read prior to the Board meeting is Figure 3, which is Version 6 of the Critical Outcomes Policy and the recommended motion for approval of the policy.

BACKGROUND

In February 2026, The Elliott Community (The Elliott) Board of Trustees initiated deliberate steps in their governance continuous improvement to define The Elliott community's strategic future through a "Critical Outcomes" Policy that the Board believes the organization should achieve. This Critical Outcomes policy is a significant part of the Board's Strategic Direction to the CEO and organization. Critical Outcomes are intended to address the human impact on persons served and the broader community. Critical Outcomes Policies also address "who is being served" and the "value or cost of achievement of those outcomes."

As part of this work, the Board engaged in a focused orientation, in October 2025, on governance—specifically clarifying the distinct role and responsibilities of the Board within a policy-driven governance framework and including the Board's job in defining Critical Outcomes Policies.

Central to the Board's dialogue, at its February 2026, Strategic Thinking Retreat, was the Board's fiduciary and strategic obligation to clearly design and articulate the organization's Purpose and its desired Critical Outcomes for the future. Trustees explored the importance of defining, at a high-level and specifically as the Board believes is necessary, the impact that The Elliott exists to achieve, for whom, and at what value. The session included an initial, deep dive generative discussion in which Board Trustees shared perspectives on the most significant long-term outcomes the organization should pursue, with particular attention to The Elliott's future-focused role and influence within the community of people served and the broader health and social care sectors.

The Board explored in detail the human needs which The Elliott should be working to serve and impact. Further the Board developed the resulting first draft Critical Outcomes that the Board believes The Elliott should work to achieve.

The Board then took the opportunity to review, through late March and early April, the first and second drafts of The Elliott Community "Critical Outcomes" Policy. At the April Board meeting, the Board held a brief discussion, providing preliminary insights and responses to the draft of this new Board Policy. Subsequent to that meeting the Critical Outcomes Policy was further updated using Board feedback. A consultation was held with the Board Chair, Vice Chair, Treasurer, and the CEO to seek further clarification on Board feedback and further validate the policy draft. The updated draft was also shared with the Board of Directors and senior executive team who responded to a questionnaire seeking further consultation in validation of the draft Critical Outcomes Policy. The results of these two consultations were incorporated in Version 5 of the draft of The Elliott Community Critical Outcomes Policy. The Board received a further update in May and conducted further discussion at its mini-retreat in June 2026.

The draft policy has also had further feedback from the CEO and Executive Team, and the Board Chair. Relevant comments which are aligned with The Elliott's refreshed governance philosophy and approach have been incorporated.

CRITICAL OUTCOMES – A REMINDER ON THE CONCEPT

It is the Board's primary responsibility to define the organizational purpose and define the expected critical outcomes that the organization will work to achieve for a defined group of people (beneficiaries).

Strategic Direction from the Board

Most governing Boards ask the question, "What is our job in setting the strategic direction of our organization?" This reflection is key governance consideration is a pivotal component of the governing body's approach.

> It is more important to know where you are going, in terms of impact, than to get there quickly. Do not mistake activity for achievement/impact. – adapted from Mabel Newcomber

People and organizations can seem and be very busy yet being busy does not guarantee that the desired results/impacts will be accomplished. Boards that are intentional about directing what "Critical Outcomes for whom, at what value or return on investment," see their organization evolve to align its activities with achievement of the specific desired outcomes/results/effects. The Board has four (4) major roles in strategic direction as outlined in Figure 1.

FIGURE 1 - Four Major Strategic roles for the Governing Body in Strategic Direction

1. **STRATEGIC DIRECTION PLANNING – GENERATIVE THINKING**
   - Create clear, high-level, future-focused, and relevant critical outcomes/vision for impact that address the needs of your beneficiaries

2. **STRATEGIC DELEGATION – FIDUCIARY THINKING**
   - Delegate with clarity the expectation that the CEO will translate the Board's big ideas on Critical Outcomes into achievable operating outcomes.

3. **STRATEGIC ALIGNMENT – STRATEGIC THINKING**
   - Evaluate the CEO plan for operational outcomes for alignment and value (i.e. the CEO's Critical Outcomes Interpretation – is it relevant, clear, measurable? Are the planned operational outcomes aligned with the Board's Critical Outcomes Policy direction, and is the proposed impact/result sufficient to justify the cost?)

4. **STRATEGIC ACCOUNTABILITY – FIDUCIARY THINKING**
   - Monitor/evaluate actual results achieved against the CEO Critical Outcomes Interpretation planned achievement (can also seek CEO incidental information on Strategic Action Plan progress – which is all about 'how to').

The Concept of Critical Outcomes

The concept of Critical Outcomes Policies is one of the most unique and useful parts of policy-driven governance if used effectively. Critical Outcomes Policies are designed to contain the Board's high-level wisdom on:

- "what good/outcome/impact/effects" the organization should work to achieve – in other words, what conditions will be different because the organization exists
- for and with the people it serves
- the value or return on the investment – do the outcomes achieved warrant or justify the cost? – how is this to be sustained?

Critical Outcomes are specifically focused on the human impact of those people served and with whom the outcomes (effects) are achieved. They do not address all the organizational conditions and capacity building goals needed to achieve the outcomes. Those types of goals are called "enabling goals." In a Critical Outcomes Policy, the causality is already implicit. The Board is specifically declaring the results for which the organization exists – adding how this work happens or the underlying premises of the operational style are not relevant in this governance document.

> "High-level" wisdom refers to the Board articulating Critical Outcomes at a level where the expected outcomes are clear and the Board can support any reasonable CEO interpretation of the Critical Outcomes Policies (i.e. aligned with the Board's direction).

FIGURE 2 - Important Components of Strategic Outcomes Wisdom

1. Outcomes/Impacts/Effects
   - Clearly identify the high-level list of the critical outcomes the Board expects the organization to achieve.
   - These ideas should be clear, future-focused, purpose-driven, achievable, and stated at a high-level. They are focused on outcomes achieved with the people being served.

2. People Benefiting
   - A clear description of who the Board believes the organization should serve (the beneficiaries).
   - The extent of who will benefit from the work of the organization, i.e. who is to be served and will benefit from the work of The Elliott.
     - What are the benefits to the beneficiaries?

3. The Value of the Results/Outcomes/Impact to be Achieved
   - A clear statement regarding the value that the Board and broader community place on the results/impact of The Elliott.
   - Are the results achieved worth the investment to achieve these results and how are they sustainable?

The Level of Critical Outcomes Direction from the Board
The level of the Board's direction is intended to be high-level and yet at the same time very clear and specific. The intention is that the Board write the critical outcomes at a level where the CEO has flexibility and freedom to build operational outcomes that they believe are the most important under the Board's direction. This avoids a situation where the Board gets so specific that it is essentially creating the operating outcomes instead of that work being done by the CEO; who is in the appropriate position to perform this function.

The Concept of the CEO Interpretation of the Board's Critical Outcomes Policy
Once the Board has articulated the strategic direction (Critical Outcomes, for whom [the beneficiaries], and the value or worth), then the CEO has the important job of interpreting these Critical Outcomes to determine:

- What measurable and achievable operational outcomes/observable conditions will be achieved, what targets or levels of achievement will be accomplished, and what the rationale is to support this plan.

Further, the CEO must then develop/align the strategic plan (and strategic pillars) to create achievement of these outcomes. This also involves defining and setting "enabling" or "capacity/condition" setting goals which relate to the organizational capacity and conditions needed to 'enable' and advance the achievement of The Elliott Community Critical Outcomes.
Two Examples of the CEO Interpretation of Critical Outcomes Policies

Example 1: The Hope Cancer Foundation Critical Outcome Policy and Interpretation

Policy

The Hope Cancer Fund exists for the elimination of cancer as a cause of human suffering and death within the U.S. Eastern Seaboard.

Interpretation

I interpret that the Critical Outcome will be achieved over this cycle when the impact of the 5 most common categories of cancer is reduced. This is as far as we can reach with $400M investment annually. Research indicates that there is significant opportunity to achieve this benefit in all 5 diagnostic categories we have selected. Our specific targets are outlined in the chart below.

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PURPOSE, FOCUS, AND COURAGE IN BOARD LEADERSHIP

Critical Outcome Policy	Operational Definition/Interpretation Operating Definition	Good to be Done in the Period (i.e. return on the investment)	Measures / Indicator
Cancer is eliminated as a cause of human suffering and death	Over the next 4 years, the top 5 cancers will be reduced and/or eliminated as a cause of human suffering and death		
	• Colon	Reduction of deaths	5% decreased mortality rate
	• Prostate	Increased longevity	50% of cases have life span of greater than 10 years after diagnosis
	• Lung	Reduced incidence	20% decrease in population incidence
	• Breast	Reduction of deaths within 5 years	25% more cases diagnosed in period live longer than 5 years
	• Uterine/Ovarian	Earlier detection	50% of cases will be diagnosed before any mastitis is diagnosed

Example 2 – The Elliott Critical Outcomes Policy – THIS IS FOR EXAMPLE PURPOSES ONLY

Critical Outcomes Policy and Interpretation

Critical Outcome Policy Statement (Board Policy Statement)
1.1 Further, persons served have choice, control, and familiarity in their daily lives.

CEO Interpretation
The CEO interprets this policy to mean that individuals across all living environments (long-term care, seniors' independent/condo living, and alternative levels of care) experience daily life in ways that are *person-directed, relationship-centered, culturally and personally meaningful, and socially connected*, such that their preferences meaningfully shape their routines, environment, relationships, and participation in community life.

Observable Condition/Operational Outcomes

Choice and Control
- Individuals actively participate in decisions affecting their daily routines (e.g., meals, activities, care timing, living environment).
- Care and service plans demonstrably reflect individual preferences, values, and goals.
- Individuals report having meaningful options and the ability to influence outcomes that matter to them.

Familiarity
- Living environments and routines reflect continuity with individuals' prior lifestyles, identities, and cultural backgrounds.
- Staff interactions demonstrate knowledge of each person's history, preferences, and important relationships.
- Transitions between care levels preserve continuity and minimize disruption.

Sense of Belonging
- Individuals experience meaningful relationships with staff, peers, family, and the broader community.
- Opportunities for social participation, contribution, and community integration are consistently available and utilized.
- Individuals report feeling respected, valued, and included as members of a community.

Equity of Experience Across Care Settings
- These outcomes are experienced consistently regardless of level of care, cognitive or physical ability, or socio-economic-cultural status.

Measures

Quantitative Measures

- % of individuals reporting they have “a high degree of choice and control” (survey-based)
- % of care/service plans with documented individualized preferences and goals
- Frequency of resident-directed choices exercised daily (e.g., flexible scheduling uptake)
- Participation rates in social, cultural, and community activities
- Staff continuity indicators (e.g., consistency of caregiver assignments)

Qualitative/Experience-Based Measures

- Narrative feedback from residents and families (interviews, focus groups)
- Observational sample size audits of daily life (e.g., evidence of choice in routines, personalization of space)
- Case studies demonstrating preservation of familiarity during transitions

Equity Measures

- Disaggregated data (e.g., by care level, cognitive status, cultural background) to assess consistency of experience

Targets

- ≥ 85% of individuals report high levels of choice and control in their daily lives
- ≥ 90% of care/service plans include individualized, documented preferences and goals
- ≥ 80% participation rate in at least one self-selected social or community activity per week
- ≥ 85% of individuals report a strong sense of belonging and meaningful connection
- No statistically significant disparities (>10% variance) across care levels or demographic groups

Rationale

- **Alignment with Board Intent:** These outcomes operationalize the Board’s intent that life within the community is not merely safe and efficient, but **person-directed and meaningful**.

- **Evidence-Informed Practice:** Research in seniors’ care, disability support, and quality-of-life frameworks consistently demonstrates that autonomy, continuity, respect, and social connection are primary drivers of well-being, health outcomes, and dignity.

- **Risk and Values Balance:** The interpretation balances **choice and control** with appropriate safeguards for safety and clinical care, consistent with the organization’s values and risk tolerances.
- **Measurability and Accountability:** The selected measures combine subjective (experience-based) and objective indicators, enabling the Board to assess whether outcomes are **actually experienced**, not just programmatically offered.

- **Equity and Inclusion:** Explicit attention to consistency across populations ensures the organization does not unintentionally create disparities in experience, particularly for individuals with higher needs or vulnerabilities.

Summary for the Board

This interpretation defines success as **lived experience**, not service delivery alone. The organization will demonstrate achievement when individuals can **see, feel, and exercise** choice, continuity, and belonging in their everyday lives—consistently, measurably, and equitably.

THE REFRESHED DRAFT ELLIOTT COMMUNITY CRITICAL OUTCOMES POLICY (V6)

Figure 3 below is Version 6 of The Elliott Critical Outcomes Policy draft. Thank you to all Board Members and all of the senior executive team and CEO who have provided input over several discussions. The Board's Critical Outcomes thinking has definitely been strengthened!

Please review Figure 3, Policy Version 6, prior to the Board meeting. There will opportunity for a few final questions/observations. Given all the deliberations, ideas, discussion, this policy is now presented for Board approval.

Recommended Motion: That The Elliott Community Board moves to approve the new Elliott Community Critical Outcomes Policy as current and relevant to provide strategic direction and accountability for the CEO (and executive team).

NEXT STEPS

Following approval of The Elliott Community Critical Outcomes Policy, the CEO (and team), with support from the consultant, will be delegated the responsibility of developing the CEO's Interpretation of this new policy from which the refreshed Strategic Plan can flow. The Board will also have the opportunity to share this new high-level strategic direction clarity with the broader community (the careholdership).

The interpretation that is required will include:

- the operational observable outcomes or conditions which will be achieved initially over the first year (including any longer-term outcomes, which the CEO wishes to)
- a description of the measures which will be used to provide evidence that these outcomes are being achieved (objective and subjective evidence)
- a target or statement of how much of the observable outcome can be achieved over the business cycle
- CEO rationale for all of the above.

There will then be opportunity for the Board to discuss and review this CEO Critical Outcomes Policy Interpretation to ensure that the interpretation is lined up with the intention of the Board's strategic direction and that the interpretation represents enough positive achievement.

The Board does not approve the CEO's interpretation, rather, it indicates to the CEO as to whether the interpretation is reasonable at the present time. This is recorded in the Board minutes. The CEO then can amend the interpretation over time within one-year if conditions change or learning takes place which indicates an amendment to the interpretation would be appropriate. For material changes, the CEO would be expected to update the Board.

Timing of this interpretation and its connection to the strategic directions plan refresh will be under discussion in the very near term and shared with a Board shortly.

FIGURE 3

V6

POLICY TITLE: THE ELLIOTT COMMUNITY CRITICAL OUTCOMES	
POLICY SECTION:	CRITICAL OUTCOMES
POLICY NO:	CO # I-01
BOARD POLICY REVIEW FREQUENCY:	EVERY FOUR YEARS
BOARD MONITORS CEO PERFORMANCE FREQUENCY:	TWICE PER YEAR
DATE APPROVED BY BOARD OF TRUSTEES:	
DATE REVIEWED/REVISED:	
BOARD CHAIR'S SIGNATURE:	

FIGURE 3

POLICY PURPOSE

The Board developed this policy to define the collective vision for the impact of The Elliott Community (The Elliott) and the critical outcomes to be experienced by the residents and community members served (the beneficiaries).

THE POLICY

The Elliott Purpose - Vision for Impact

In a community, people are proud to call home, the residents and community members served experience purpose, healthy living, optimal ageing, and key relationships and connections. They are known, valued, and respected for who they are, their stories, preferences, culture, and identities.

The Elliott Community serves people who are ageing and/or have other health or social needs, in surrounding communities and the region.

Critical Outcome 1 —A Dignified Life in a Place of Belonging

1. People served experience respect, autonomy, and comfort in their daily lives, consistent with their identities, preferences, and life histories. They feel truly at home and continue their life journey with dignity.
    - 1.1 People served have choice and control in their daily lives.
    - 1.2 People served feel valued and included and experience a sense of belonging in a culturally responsive environment.

Critical Outcome 2 —Living Well

2. People served feel their best physically, emotionally, and psychologically.
    - 2.1 People served maintain their abilities, strengths, and independence to the extent possible.
    - 2.2 Ageing is experienced as a time of continued growth, meaning, and hope.

Critical Outcome 3 – Connected Care

- 3.1 People served are safe and make informed choices about safety that respect their autonomy.
- 3.2 People served experience coordinated and seamless care across levels of care and as their needs change.
- 3.3 Families and caregivers are connected and engaged as trusted partners in care and support.

FIGURE 3
Critical Outcome 4 – Community Understanding, Respect, and Support 4. Older adults are valued, respected, and supported to live meaningful lives within broader communities that better understand and embrace ageing. **Critical Outcome 5 – Integrated and Sustainable System** 5. Older adults and vulnerable people experience a stronger, more connected, integrated, and sustainable system of health and social care within their communities. **At What Value/Worth – Sustainability** These critical outcomes are achieved at a fair, transparent, and competitive cost that balances organizational financial sustainability with affordability and value for residents and families.

MINUTES OF OPEN BOARD MEETING

BOARD OF TRUSTEES MEETING

WEDNESDAY, JUNE 3, 2026

G. ELLIOTT BOARDROOM

Board: Kathy Wilkie (Chair), Lise Betteridge (Vice-Chair), Ted Sehl (Secretary/Treasurer), David Kennedy, Lisa Woolley, Justine Garner, Joanne Hohenadel, Katherine Hauser, Naeem Mir, Thomas Hunter, Kim Wilson

Staff: Michelle Karker (CEO), Martin Ruaux (Chief of Resident Care Services and Administrator), Tanya Watton (Chief of HR and Community Services), Al Van Leeuwen (CFO), Julie Spindler (Executive Assistant / Board Liaison)

Guests: Danna Evans – General Manager Culture and Recreation, Karen Fryday-Field - Meridian Edge Consulting

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1. WELCOME AND CALL TO ORDER

K. Wilkie called the meeting to order at 3:00 pm. Introductory remarks were made.

1.1 Disclosure of Pecuniary Interests

There were no disclosures of pecuniary interest.

1.2 Approval of the Agenda

Moved by D. Kennedy, seconded by N. Mir that the June 3, 2026 agenda be accepted. CARRIED.

1.3. CEO's Statement of Compliance and Territorial Acknowledgement

The CEO confirmed that all government statutory deductions have been calculated and remitted, that all payroll-related statements of account are in good standing, and that The Elliott Community's Directors & Officers insurance policy is in effect with its current policy valid to July 2026.

The CEO provided a territorial acknowledgement.

2. Board Strategic Directions and Governance Development – K. Fryday-Field

2.1 The Refreshed Elliott Governance Approach

The document "High Level Comparison of Models of Governance" was in the meeting package and reviewed by K. Fryday-Field. General discussion followed. Results of the survey completed earlier in the year were highlighted by K. Fryday-Field. Results of the surveys have been shared with the Board during the various governance presentations. A copy of the full survey report has been requested from Meridian Edge.

2.2 A Governance Philosophy and Approach

K. Fryday-Field presented the ten principles of policy governance as noted in Handout #1 (attached) "Governance Philosophy and Approach".

- ✓ Purpose Before Activity
- ✓ Careholdership Accountability
- ✓ Board Leadership of Strategic Direction
- ✓ Values and Risk-Based Boundaries
- ✓ Unified Delegation to One CEO
- ✓ Executive Authority Within Defined Boundaries
- ✓ Monitoring Organizational Performance and Compliance
- ✓ Board Decisions Made Collectively
- ✓ Deliberate and Disciplined Governance
- ✓ Continuous Governance Improvement.

The Board completed a group exercise to examine various governance models and approaches, including policy-driven governance.

Board members agreed that the principles of policy-driven governance outlined in the presentation material and explored in the Board exercise align with the direction the Elliott Board of Trustees wishes to follow.

The Board discussed what additional information was needed to support the key principles. K. Fryday-Field responded to Board members' questions and provided clarification.

Handout #2 (attached) "Connecting the Dots Regarding All The Elliott Community Strategic Elements" was highlighted. This document was shared to show the linkage between Critical Outcomes Policies, the CEO Interpretation of Critical Outcomes Policies, the resulting Strategic and Operating Plans and measurement and monitoring results.

T. Hunter left the meeting at 6:15 p.m.

The organization's readiness to adopt the Policy-driven Governance Approach and how to align the current strategic plan cycle and the Board's desire to get working on the Critical Outcomes Policies were discussed.

M. Karker noted the organization aligns its cycle with the City's 4-year budget cycle. The new cycle starts January 1, 2028.

K. Fryday-Field provided a summary of the Board's work to date and reviewed the proposed next steps:

1. Karen will provide the Board with a proposed draft of a Governance Philosophy and Approach Policy for feedback and agreement prior to September.

2. The Critical Outcomes Policy will be circulated again for agreement and approval, then the CEO and team can create an Interpretation of the Critical Outcomes Policy and Strategic Plan with these outcomes.

3. Karen will meet with the Executive Leadership Team (ELT) to map out the Board Governance Development Work Plan, the timing for development of the CEO Interpretation and the Strategic Plan alignment and refresh, working towards a new strategic framework for 2028. This will be presented back to the Board for approval.

K. Wilkie noted that it is now time for the Board to move forward with implementing its governance philosophy and approach and emphasized the importance of establishing clear timelines for the work ahead.

M. Karker requested clarification on the Work Plan, noting it was presented as a draft example at the previous meeting of what's possible from a conceptual perspective. K. Fryday-Field confirmed that the previous version of the Work Plan was used as an example for the Board. Version 2, presented today, has been updated based on Board questions and could be used as a possible governance development Work Plan. (Note: Karen will work with ELT and the Board Chair to finalize the Work Plan.)

K. Wilson left the meeting at 6:45 pm. K. Fryday-Field left the meeting at 6:45 pm.

No motions were presented for the above discussion. All agenda items following were deferred until September.

2.3 The Role of the Board and Board Trustees and the Role of the CEO

2.4 Continuing the Critical Outcomes Policy Direction Discussion

3. CONSENT AGENDA

Items on the Consent Agenda included the Minutes of the May 7, 2026 Open Meeting of the Board of Trustees, and the Minutes and Open Meeting Requirement of the Municipal Act for Local Boards (D. McMahon) and Meeting Summary (K. Wilkie).

4. NEW BUSINESS – OPEN MEETING

5. CORRESPONDENCE FOR INFORMATION

5.1 GW OHT ICC Meeting Key Messages May 2026

5.2 COM Report Q1 2026

6. UPCOMING MEETINGS

K. Wilkie noted that the Governance & Nominating Committee meeting may be rescheduled to precede the September 10th Board meeting.

7. CHAIR'S ANNOUNCEMENTS & ADJOURNMENT

Having no other business raised, it was moved by K. Wilkie that the Board of Trustees open meeting adjourn at 6:48 pm. CARRIED.

Respectfully Submitted,

Julie Spindler
Executive Assistant
June 4, 2026

Approved by Motion of the Board of Trustees,

Kathy Wilkie
Chair, Board of Trustees
September 10, 2026

POLICY TITLE: GOVERNANCE PHILOSOPHY AND APPROACH

POLICY SECTION:	GOVERNANCE PROCESS
POLICY NO:	GP #IV-____
BOARD POLICY REVIEW FREQUENCY:	EVERY FOUR YEARS
DATE APPROVED BY BOARD OF TRUSTEES:	DRAFT READY FOR JUNE 2026
DATE REVIEWED/REVISED:	
BOARD CHAIR'S SIGNATURE:	

BACKGROUND

The Elliott Community (The Elliott) Board of Trustees recognizes that it has the responsibility of being the primary force pressing The Elliott to be accountable to the broader Elliott community and to achieve The Elliott Purpose and Critical Outcomes Policies. The Board ensures that all business of The Elliott is conducted in a transparent, legal, prudent, ethical, equitable, inclusive, and just manner.

In the fulfillment of this responsibility, the Board is committed to rigorous, continual improvement of its capacity to govern.

POLICY PURPOSE

The purpose of this policy is to describe the Board's beliefs, approach, principles, and values for its governance role and processes. The Board, in its governance, shall ensure that it fulfills its mandate as the representative of the community, by assuring that The Elliott achieves the results described in The Elliott Critical Outcomes Policies and operates within the governance of values and risk parameters described in The Elliott Executive Boundaries Policies.

THE POLICY

Board's Governance Commitment, Beliefs, Philosophy, and Values

The Board is responsible for ensuring that:

- Its actions are consistent with the relevant legislation
- The Elliott achieves the results described in its Purpose and Critical Outcomes Policy
- The Elliott operates within parameters described in its Governance of Values and Risk, Operational Boundaries Policies and
- The Elliott business is conducted in a transparent, legal, ethical, equitable, and just manner

Governing Philosophy

The Board of Trustees governs the organization using the Policy Governance® system, a comprehensive and integrated framework for governing that is designed to enable the Board to lead with clarity of purpose, strategic focus, accountability, and ethical stewardship. The Board recognizes that Policy Governance is not a collection of independent practices, but rather a coherent and integrated governance system in which all elements are intentionally interconnected and mutually reinforcing.

In carrying out its governance responsibilities, the Board practices in accordance with the ten integrated principles of Policy Governance. These principles guide how the Board defines organizational impact, delegates authority, establishes accountability, exercises oversight, and governs itself. The Board acknowledges that the effectiveness of the governance system depends upon the consistent application of all principles as an integrated whole.

The ten principles of Policy Governance practiced by the Board are:

1. **Purpose Before Activity**
   The Board defines the intended long-term impact, outcomes, and benefits the organization exists to achieve for those it serves.

2. **Careholdership Accountability**
   The Board acts on behalf of the organization's careholders, residents and families, interested parties, and the broader communities served. The Board remains accountable for ensuring organizational purpose is fulfilled.

3. **Board Leadership of Strategic Direction**
   The Board determines the organization's strategic direction and desired outcomes while respecting the distinction between governance and operational leadership.

4. **Values and Risk-Based Boundaries**
   The Board establishes clear ethical, prudential, and risk-management boundaries within which the Chief Executive Officer may exercise authority.

5. **Unified Delegation to One Chief Executive Officer**
   The Board delegates operational authority and accountability to a single Chief Executive Officer, avoiding fragmented direction through committees or individual trustees.

6. **Executive Authority Within Defined Boundaries**
The Chief Executive Officer has the authority and flexibility to determine all reasonable means, methods, and operational strategies necessary to achieve Board-defined outcomes while operating within Board-established limitations.

7. **Monitoring Organizational Performance and Compliance**
The Board regularly monitors organizational performance and compliance with Board policies through systematic, evidence-based evaluation.

8. **Board Decisions Made Collectively**
The Board exercises authority only as a body. Individual trustees, officers, and committees possess no authority to direct staff or organizational operations unless explicitly delegated by the Board.

9. **Deliberate and Disciplined Governance**
The Board governs through written policies, defined responsibilities, strategic foresight, and disciplined governance processes rather than through involvement in operational decision-making.

10. **Continuous Governance Improvement**
The Board commits to ongoing learning, evaluation, reflection, and renewal of its governance practices to ensure continued effectiveness, relevance, and impact.

Governing Approach
Given the governance philosophy used by The Elliott, the governing style or approach of the Board is visionary, strategic, transparent, and focused on equity, inclusion, and accountability. The Board, through example, will set a standard of excellence and integrity for the organization. In order to carry out this role effectively, the Board is committed to functioning in a manner that will retain and enhance the confidence and trust of The Elliott's residents, families, and other careholders.

The Board's governing approach will:
- Emphasize clarity of Purpose and Critical Outcomes (outcomes, results, impact, effects).
- Focus on and demonstrate forward thinking, strategic direction, and visionary leadership.
- Encourage diverse perspectives to uncover/mitigate potential fixed ideas, future opportunities, and ensure an equitable, inclusive approach while building consensus.
- Be proactive rather than reactive using generative thinking to explore new possibilities/opportunities, ways of seeing things.
- Practise collaborative, collective decision-making.

- Clearly distinguish between governance (Board) and management roles (CEO).
- Demonstrate a commitment to engagement with the broader Elliott community and other key careholders.

Accordingly,

1. The Board cultivates a sense of group responsibility by working in partnership with the CEO, staff, and the communities served. The Board, not the CEO or staff is responsible for excellence in governance. The Board uses the expertise of individual Trustees to enhance the ability of the Board as a whole but does not substitute individual Trustees' skills and perspectives for the Board's collective values and decisions.

2. The Board holds itself accountable for governing with excellence. This self-discipline will apply to attendance, preparation for meetings, policy-making and decision-making principles, respect of roles, strategic direction design and processes, governance of risk, and ensuring the continuity of governance capability. Annually the Board sets goals and an Integrated Strategic Board Agenda/Work Plan to achieve its specific goals including appropriate governance metrics.

3. The Board relies on each Trustee and Board Committee to fulfill its commitments and does not allow any individual Committee or sub-part of the Board to be an impediment to fulfilling the Board's commitments.

4. The Board directs and inspires The Elliott through the careful establishment of written policy direction reflecting the Board's values principles and strategic direction. The Board's major policy focus will be on the intended long-term impacts (Critical Outcomes) not on the administrative or programmatic means of achieving them.

5. The Board regularly reviews, updates, and monitors its policies. The Board by majority vote, may revise or amend its policies at any time. (Note: In addition, the Board policies will normally be reviewed and monitored, by the Board, as scheduled in the Board's Annual Integrated Board Strategic Agenda/Work Plan and the Boards Policy Review Schedule).

6. The Board recognizes that its role is in governance, not management. As such, the Board is an initiator of policy, not merely a reactor to staff initiatives. The Board is clear in its delegation to the CEO and expects the CEO to appropriately interpret, implement, and achieve the Board's policy direction. The Board is also committed to persistent due diligence through monitoring the CEO's policy implementation to support the achievement of organizational results.

7. The Board enforces upon itself whatever discipline is needed to govern with excellence and equity. The Board maintains a structure and process that enhances its effectiveness. It regularly reviews its governance structure (i.e. Board and Committees).

8. The Board continuously develops its governance capacity through:
   - detailed/intentional/required orientation of new Trustees to the Board's approach and process,
   - regular Board Continuing Education regarding leading governance practices.
   - periodic discussion and at least an annual evaluation of the Board and the impact it is having to assure understanding of governance best practices, the governance system, and continued improvement in The Elliott's governance capacity and results, and
   - the Board speaks with one voice once Board decisions have been thoroughly explored, discussed, and made (i.e. approval by a motion).

RECOMMENDED MOTON:
1) Be it resolve that The Elliott Board of Trustees moves to adopt the Policy Governance system using the Policy Governance principles outlined in the Governance Philosophy and Approach Policy.
2) Be it resolve that The Elliott Board of Trustees moves to approve the new Governance Process Policy entitled "Governance Philosophy and Approach."

Connecting the Dots Regarding All The Elliott Community Strategic Elements

COLLECTING INSIGHT	**ENVIRONMENTAL SCANNING, NEEDS ASSESSMENT** • Careholder consultation, Government Policy Direction on needs to be served and expected impact • Internal and external business trends **BOARD AND CEO COLLABORATION**
BOARD STRATEGIC DIRECTION	**BOARD DIRECTED CRITICAL OUTCOMES** • Strategic Direction on The Elliot purpose, impact, outcomes ○ What good will The Elliott work to achieve, for and with what groups of people, at what cost/worth/return on social investment **BOARD DESIGNED, CEO INPUT, BOARD APPROVED/OWNED** *Note: Designed to direct and guide the CEO.*
CEO STRATEGIC INTERPRETATION	**CEO CRITICAL OUTCOMES INTERPRETATION** • Strategic/operational outcomes (observable conditions) ○ Targets, measures, evidence of results **CEO DESIGNED, BOARD REVIEWED, FEEDBACK ON REASONABLENESS (ALIGNED AND ENOUGH)**
CEO MAKING IT HAPPEN PLAN	**CEO STRATEGIC OPERATING PLAN** • Specific goals, targets, strategies, tactics, action plans, work assignments for transactional and transformational work, measurement/feedback systems, staff accountabilities **CEO AND TEAM DESIGNED AND CONTINUOUSLY UPDATED**
ACCOUNTABILITY /EVIDENCE /MONITORING EVALUATION	**METRICS/MEASURES SYSTEM FOR ACCOUNTABILITY AND COURSE CORRECTION/LEARNING** • Based on CEO Interpretation – actual evidence of results for each observable outcome target/analysis of process **CEO DESIGNED, BOARD EVALUATED, BOARD CONCLUSIONS**

The Elliott Strategic Framework – Summarizes The Elliott Community Strategic Approach and Content – Who is The Elliott, The Elliott Governance, Critical Outcomes, Operational Impacts and Targets, Commitment to Evaluation and Fiscal Responsibility

Connecting the Dots Regarding All The Elliott Community Strategic Elements

COLLECTING INSIGHT

ENVIRONMENTAL SCANNING, NEEDS ASSESSMENT

- Careholder consultation, Government Policy Direction on needs to be served and expected impact
- Internal and external business trends

BOARD AND CEO COLLABORATION

- Understanding the context and environment in which The Elliott is operating and how context and business environmental changes are evolving is a key Board role in order to periodically evolve the Board's strategic direction to the CEO.
- This is a shared responsibility of the Board and CEO in that both entities need this information.
- The CEO and team can be instrumental in providing related information, as can:
  - Other experts in the field
  - Trustees.
  - Futurists, economists, health policy experts.
- The information gleaned is used by the Board to update strategic direction, i.e., what good should The Elliott strive to achieve over time.

BOARD STRATEGIC DIRECTION

BOARD DIRECTED CRITICAL OUTCOMES

- Strategic Direction on The Elliot purpose, impact, outcomes
  - What good will The Elliott work to achieve, for and with what groups of people, at what cost/worth/return on social investment

BOARD DESIGNED, CEO INPUT, BOARD APPROVED/OWNED

Note: Designed to direct and guide the CEO.

- One of the Board's most important jobs is using the information from environmental scanning and needs assessments to direct the strategic future of The Elliott.
- This includes first and foremost, providing strategic direction on what good or impact The Elliott will work to achieve with what groups of people and at what cost or value.

- The Board should be continuously thinking about Critical Outcomes. Most Critical Outcomes in today's world have about a 3-to-4-year shelf life which means after approximately 2 1/2 years the Board needs to begin reframing and shaping updated Critical Outcomes.
- The Board, in between the setting of Critical Outcomes cycle, may decide to make specific updates to the Critical Outcomes in any one year and it will continue to study the needs and environmental scanning information to inform Critical Outcomes of the future - this is the Board of Trustees' most significant strategic job.
- The Elliott Board of Trustees first began discussing Strategic Direction through Critical Outcome in October 2025.

CEO STRATEGIC INTERPRETATION

CEO CRITICAL OUTCOMES INTERPRETATION

- Strategic/operational outcomes (observable conditions)
  - Targets, measures, evidence of results

CEO DESIGNED, BOARD REVIEWED, FEEDBACK ON REASONABLENESS (ALIGNED AND ENOUGH)

- This is the primary strategic objective for the CEO.
- The CEOs role in this strategic element is to work to interpret the Board strategic direction; i.e., Critical Outcomes Policy and translate it to strategic and operational outcomes which are observable conditions that define what success looks like on the ground.
- This CEO (and team) interpretation is the primary tool to move from the Board's big ambitious vision for impact to actually creating observable conditions and success; i.e., real world change on the ground.
- This work is designed by the CEO and discussed with the Board, the Board role is to provide feedback on the strategic alignment of this interpretation - in other words is the interpretation lined up with the Critical Outcomes that the Board intended to be achieved and is enough progress being targeted to justify the investment that is being made to achieve the outcomes.
- The CEO may update the Strategic Critical Outcomes Interpretation at any time - if substantive material changes are made the CEO would be expected to identify this for Board and then have a further conversation with the Board on the reasonableness of the new interpretation.

- There are many reasons why the CEO would update the Critical Outcomes Interpretation in any one year (for example, material external or internal government policy changes, funding changes, substantial healthcare policy changes, etc.).
- Updating this interpretation is something that is at the discretion of the CEO as a CEO knows when they need to flex or modify the expected outcomes based on internal and external conditions.

CEO MAKING IT HAPPEN PLAN

CEO STRATEGIC OPERATING PLAN

- Specific goals, targets, strategies, tactics, actions plans, work assignments for transactional and transformational work, measurement/feedback systems, staff accountabilities

CEO AND TEAM DESIGNED AND CONTINUOUSLY UPDATED

- The CEO Strategic Operating Plan is the component of The Elliott Strategic Framework which could identify the key strategies, specific goals in targets, tactics, and action plans to accomplish both the transformational and transactional work needed to accomplish the interpretation of the Critical Outcomes Strategic Direction.
- This Strategic Operating Plan is a live and continuously updated plan as the organization learns what is being effective, brings on new programs, and creates course corrections as needed.
- This would be strictly an operational document and is aligned directly with the CEO Critical Outcomes Interpretation.
- As the CEO Critical Outcomes Interpretation is updated, the CEO Strategic Operating Plan also needs to be updated. The Strategic Operating Plan is one of the major tools to assist the CEO with staff performance development and evaluation.

ACCOUNTABILITY /EVIDENCE /MONITORING EVALUATION

METRICS/MEASURES SYSTEM FOR ACCOUNTABILITY AND COURSE CORRECTION/LEARNING

- Based on CEO Interpretation – actual evidence of results for each observable outcome target/analysis of process

CEO DESIGNED, BOARD EVALUATED, BOARD CONCLUSIONS

- As part of the CEO Critical Outcomes Interpretation a series of targets and metrics are designed to demonstrate achievement of the Critical Outcomes.
- First and foremost, the CEO requires these metrics and measures to be able to assess whether or not the organization is making reasonable progress towards achieving the annual operating outcomes- depending on the results the CEO can make course corrections as needed.
- These metrics are also useful in demonstrating to the Board the actual results achieved for each of the observable conditions and related to targets.
- Designing the metrics is a CEO responsibility with the expectation that the CEO will provide metrics which demonstrate achievement of the observable conditions listed in the CEO Interpretation.
- The Board has the responsibility of assessing the metrics/measures which demonstrate the actual results being achieved for each of the observable outcomes. The evidence to the Board is intended to demonstrate achievement of the Critical Outcomes as measured by the achievement of the CEO Critical Outcomes Interpretation.
- The Board makes an evaluation as to whether the results achieved meet the expected targets and whether progress as a result is reasonable. In this context, reasonable achievement of the Critical Outcomes Interpretation is understood to be excellent CEO performance.

MINUTES OF SPECIAL BOARD OF TRUSTEES MEETING OPEN

THURSDAY, JULY 23, 2026 1730 - 1830

MICROSOFT TEAMS

Board: Kathy Wilkie (Chair), Lise Betteridge (Vice Chair), Ted Sehl (Secretary/Treasurer) David Kennedy, Justine Garner, Lisa Woolley, Joanne Hohenadel, Thomas Hunter

Staff: Michelle Karker (Chief Executive Officer), Martin Ruaux (Chief of Resident Care Services and Administrator), Al Van Leeuwen (Chief of Finance)
Michael Smith (Director of Environmental Services) – Guest (for a portion of the meeting)

Regrets: Naeem Mir, Kimberly Wilson, Katherine Hauser

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1. WELCOME AND CALL TO ORDER

K. Wilkie called the meeting to order at 17:32 pm. Quorum was confirmed.

The Special Board Meeting was convened to consider management's request for approval of an unbudgeted 2026 capital expenditure and an unbudgeted 2026 operating expenditure. The request had originally been presented for approval by email; however, the Board determined further discussion was needed to ensure informed decision-making. The Board also acknowledged and appreciated the updated briefing notes provided by management in advance of the meeting.

1.1 Disclosure of Pecuniary Interests

There were no disclosures of pecuniary interest.

1.2 Approval of the Agenda

The Chair advised there would be a short in-camera meeting following the Special Board meeting.

Moved by Lise Betteridge, seconded by Justine Garner that the July 23, 2026 agenda be accepted as amended. CARRIED.

David Kennedy joined the meeting at 17:50 pm.

2. NEW BUSINESS – OPEN MEETING

2.1 Introduction Michael Smith, Director of Environmental Services

2.2 Fire Panel Replacement – Michael Smith/ Al Van Leeuwen

2.3 Hiring of New Information Technology Position – Al Van Leeuwen

3. ADJOURNMENT – OPEN MEETING AND AUTHORITY TO MOVE INTO CLOSED MEETING

Having no other business raised, it was moved by Joanne Hohenadel, seconded by Lisa Woolley that the Board of Trustees open meeting adjourn at 17:40 pm and move into a closed meeting. CARRIED.

4. MOTIONS FROM CLOSED MEETING

Be it resolved that the Board moves to approve an unbudgeted 2026 capital expenditure of an estimated $426,056 for the replacement of the fire alarm panel at the Elliott Building, to be completed in 2026. Moved by Lise Betteridge. Seconded by Ted Sehl. CARRIED.

Be it resolved that the Board moves to approve an unbudgeted 2026 operational expenditure for the hire of a full-time IT Team Lead, starting August 2026 with an annual starting salary of $82,000, plus benefits. Moved by Justine Garner. Seconded by Thomas Hunter. CARRIED.

5. CHAIR'S ANNOUNCEMENTS & ADJOURNMENT

Having no other business raised, it was moved by Justine Garner and seconded by Lisa Woolley that the Board of Trustees open meeting adjourn at 18:24 pm and a meeting be held that is closed to the public, pursuant to the Municipal Act, Section 239. CARRIED.

Respectfully Submitted,	Approved by Motion of the Board of Trustees,
______________________________	______________________________
Martin Ruaux	Kathy Wilkie
Chief of Resident Care Services (Secretary)	Chair, Board of Trustees
July 23, 2026	September 10, 2026

Board Report Committee Highlights

TO: **Board of Trustees, Consent Agenda**

DATE: **September 10, 2026**

SUBJECT: **Corporate Affairs Committee, June 10, 2026, Highlights**

RECOMMENDATION

That the report presented by the Chair of the Corporate Affairs Committee for the meeting held on June 10, 2026, be received for information.

BACKGROUND

Highlights are presented by the Chairs of the following Committees of the Elliott Board of Trustees: Corporate Affairs and Governance and Nominating. Topics are discussed separately, if required, in the closed meeting as per the Municipal Act, Section 239.

REPORT

The Corporate Affairs Committee held a remote meeting on June 10, 2026. The Committee approved the Consent Agenda, which included the minutes of the meeting held April 22, 2026, and regulatory reports on file since the last meeting of the Committee.

Gloria Mulwa, Senior Development Officer (employee) and Cam Shapansky, (Co-Founder of Blue North Strategies) gave a presentation on the future of fund development at The Elliott Community. There is much work to be done in creating materials that convey our story and the importance to the community. Discussion included the potential role of the Board and how that would fit into our governance structure review.

In the closed meeting, Al Van Leeuwen, CFO, and Michelle Karker, CEO, presented The Elliott Community Business Model, and a robust discussion was held regarding underperforming business segments, the capital infrastructure plans and potential changes that could be made in the future to alleviate the financial strain. Also received and discussed were the Year-to-Date April financial reports, the budgeting assumptions for 2027 and the Q1 2026 Risk Management report

Motions from the Closed Meeting:

- That the items noted on the June 10, 2026 closed Consent Agenda (Minutes of Meeting Held April 22, 2026 and Cyber Security Checklist Q1 2026) be accepted.
- That the Financial Reports for April 2026 be approved.

Board Report Committee Highlights

- That the 2027 Budget Planning Assumptions and Goals as presented on June 10, 2026 be approved.
- That the Q1 2026 Risk Management Report be approved.

The next meeting of the Committee is scheduled for September 23, 2026.

FINANCIAL IMPLICATIONS

As per the Financial Reports presented to the Board on September 10, 2026.

REPORT AUTHOR:

Julie Spindler – EA / Board Liaison

THIS REPORT WAS APPROVED AND RECOMMENDED BY:

Ted Sehl - Committee Chair

Briefing Note

Prepared For: The Elliott Board of Trustees

Prepared By: Kathy Wilkie, Board Chair

Subject: **2025-2026 Board and Individual Effectiveness Self-Evaluation Survey Results and Findings**

Date: September 3, 2026

Purpose: **For Information**

BACKGROUND

Annually, the Elliott Board of Trustees conducts a self-evaluation of Board and Individual Trustee Effectiveness in accordance with its Board Evaluation governance policy. On May 6, 2026, an electronic survey was sent to Board members consisting of 90 questions with a June 19, 2026 response deadline. The same survey questions were used this year as in the previous year.

Seven (7) Trustees responded by the deadline date. The survey was re-sent to Board members with a request to those Trustees who had not yet completed the survey to respond by July 29, 2026. Two (2) more Trustees responded. In total, nine (9) Board members completed the survey (82% of the Board).

EXECUTIVE SUMMARY

Overall, the results are positive but clearly indicate that the Board is at an important governance transition point. The strongest message is not that the Board is ineffective; rather, it is that the Board has a solid foundation and is now moving from a more advisory/operational model toward a policy-driven, outcomes-focused governance model.

Overall assessment

- Board effectiveness is generally strong, with most questions receiving predominantly "Agree" or "Strongly Agree" responses.
- There is strong confidence in the Board's composition, fiduciary conduct, individual Trustee commitment, meeting attendance/preparation, and respect for Board decisions.
- The survey identifies several areas requiring deliberate improvement:
    1. Clarifying the Board-CEO/management roles and boundaries;
    2. Completing the governance framework development and moving to policy-driven governance approach;

3. Strengthening financial and risk oversight;

4. Improving the quality and decision-usefulness of Board information;
5. Strengthening Board strategic focus and future orientation;
6. Improving orientation and ongoing governance education; and
7. Ensuring all perspectives are heard while maintaining Board cohesion

The comments reinforce that these are viewed largely as development opportunities rather than fundamental dysfunctions.

The following is an analysis and interpretation of the survey questionnaire results that are appended to this Briefing Note.

1. Governance Role --- Good Foundation, But Not Yet Fully Mature

The Board generally believes it understands its governance responsibilities. For example:

- Strategic planning: **89% agree/strongly agree**
- Financial oversight: **89% agree/strongly agree**
- Quality: **100% agree/strongly agree**
- Risk identification/management: **89% agree/strongly agree**
- CEO monitoring/support: **78% agree/strongly agree**

However, the distribution of responses shows more uncertainty around how the governance role should be exercised, particularly in relation to management.

The most revealing question is whether the Board operates within its role without becoming overly involved in operations. The response was much more mixed, with only **55.6% selecting Agree/Strongly Agree** and 33.3% selecting **Somewhat Agree**.

This is highly significant in the current governance context.

Interpretation:

The survey provides evidence that the Board itself recognizes that the Board-CEO boundary is not yet consistently understood or applied.

2. Governance Transformation Is Strongly Supported

This is probably the clearest strategic message in the survey.

The written responses specifically call for:

- finishing the governance work already started;
- strengthening the governance policy framework;
- adopting a policy-driven approach;
- approving the Critical Outcomes Policy;
- holding the CEO accountable for interpreting and achieving results;
- establishing a stronger governance and evaluation framework;
- becoming more strategic; and
- focusing on strategic choices rather than operating imperatives.

One respondent characterized the Board as being "in transition to becoming an outcomes focused Board", noting that Critical Outcomes and related Executive Boundary, Board-CEO Relationship and Governance Process policies had not yet been developed/refreshed and approved.

Governance implications

The survey strongly supports continuing the current governance work rather than slowing or abandoning it.

Importantly, the survey suggests that the governance work itself is part of the solution to several of the concerns identified in the survey.

A completed policy framework should help clarify:

Board → defines outcomes and boundaries → CEO → interprets and achieves results → Board monitors results

rather than:

Board → discusses operational matters → management responds → boundaries become unclear.

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3. Financial Oversight Is a Particular Area for Attention

Although the numerical ratings for financial oversight are not poor, the comments introduce an important concern.

One Trustee specifically stated: "given financial situation of The Elliott, it could be argued that we did not sufficiently pay attention to financials."

This is particularly important because the survey was completed against the organization's current financial pressures.

The Board also identified:

- improving quality of information and decision-making;
- improving governance of risk;
- more attention to research/evidence;
- ensuring management has considered alternatives before bringing recommendations forward.

Key point

The issue appears to be less about whether the Board receives financial information and more about whether the Board has the right information, at the right level, to exercise effective oversight and challenge management appropriately. This is an important distinction.

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4. Risk Oversight Needs Strengthening

Risk is another area where the survey signals a gap. Although the formal ratings are generally positive, one Trustee stated:

"I don't believe I have a clear enough idea of emerging risks..."

The Board's own recommendations include:

- improve governance of risk;
- provide ongoing training on risk management and emerging issues;
- improve quality of information and decision-making.

Implication

The Board may benefit from moving from a primarily risk-reporting model to a more deliberate enterprise risk oversight framework, including:

- principal risks;
- emerging risks;

- risk appetite/tolerance;
- mitigation;
- ownership; and
- Board-level monitoring.

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5. Strategic Focus Is Good, But the Board Wants to Become More Strategic

There is relatively strong confidence in strategic planning and monitoring. However, the survey comments identify a desire to move further toward:

- strategic choices;
- future issues;
- critical outcomes;
- evidence-based decision-making;
- less focus on operating imperatives.

The recommendation to "focus on strategic choices vs operating imperatives" is particularly important.

This aligns closely with the Board's current governance work.

Key observation

The Board appears to recognize that being busy with organizational matters is not necessarily the same as providing effective governance.

The next maturity step is to spend more Board time asking:

What outcomes must be achieved?

What risks must be controlled?

What strategic choices does the Board need to make?

What evidence demonstrates progress?

rather than:

How should management execute this?

6. Board-CEO Relationship Is a Critical Governance Issue

The CEO-related responses are generally positive, but there is meaningful variation.

The Board:

- generally believes it communicates its goals and expectations;
- generally believes it has sufficient involvement in monitoring CEO performance;
- is less confident about the overall CEO development/succession framework.

The comments also identify the unresolved governance relationship as a concern.

Governance implications

The survey supports formalizing the Board-CEO Relationship rather than relying on individual interpretations of roles.

This would be particularly valuable in establishing:

- what the Board expects;
- what authority is delegated to the CEO;
- what information the Board requires;
- how the Board monitors performance;
- how the Chair and CEO communicate; and
- how Board members raise concerns without bypassing the CEO.

7. Board Composition Is a Significant Strength

This is one of the strongest areas.

All Trustees agreed that the Board is the right size:

- **33% Agree**
- **67% Strongly Agree**.

There is also strong support for:

- Board independence;
- skills and competencies;
- fiduciary obligations;
- diversity of experience; and
- Trustee engagement.

The fiduciary question is particularly strong: Trustees unanimously identified positive fiduciary behaviours such as acting in TEC's best interests, avoiding conflicts, speaking with one voice and following governance policies.

One comment described the Board as representing "a range of skills and competencies and works well together."

There is some concern about future Board capacity, which suggests the Board should continue developing a skills matrix and succession/recruitment strategy rather than relying on the skills of particular individuals.

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8. Board Culture Is a Strength

The survey provides very positive evidence regarding Board culture. Trustees reported strong performance in:

- preparation;
- engagement;
- constructive questioning;
- listening;
- expressing minority views;
- respecting Board decisions;
- confidentiality; and
- conflict declaration.

For example:

- **100%** agreed/strongly agreed that Trustees respect Board decisions.
- **100%** agreed/strongly agreed that Trustees maintain confidentiality.
- **100%** agreed/strongly agreed that Trustees constructively ask questions and respectfully express their views.

The written feedback described the culture as: "very positive - friendly but professional, respectful and efficient."

Important nuance

The Board's culture appears healthy, but consensus should not become the objective.

The survey's recommendation to "consider diverse views" and the emphasis on continuing to ask good questions suggest the Board should preserve constructive challenge and healthy dissent while maintaining one voice once decisions are made.

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9. Board Materials and Decision Quality Are an Opportunity

This is one of the more actionable findings. The survey indicates that Board materials are generally timely and useful, but there is a desire for them to become more decision oriented.

A specific comment recommends cover memos for submissions that clearly identify:

- whether the item is for information or decision;
- the context/background; and
- what decision is required.

The same respondent noted that materials are generally provided in good time and are useful for preparing for decisions.

The recommendations also call for:

- ensuring management considers alternatives and provides recommendations;
- more research/evidence; and
- improving quality of information and decision-making.

Recommended improvement

A standardized Board report template could require:

Purpose → Decision Required → Strategic/Critical Outcome Alignment → Background → Options Considered → Risks → Financial Implications → Recommendation

That would materially support policy-driven governance.

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10. Orientation and Board Education Need Strengthening

This is another relatively clear development area.

The survey indicates:

- new Trustee orientation is generally positive but not uniformly strong;
- ongoing Board education is adequate but could be strengthened;
- Trustees want more training on governance, industry trends, regulatory changes, risk and emerging issues.

One respondent specifically suggested a more structured orientation process with enhanced policies and supporting documentation.

The final recommendations reinforce the need for: "ongoing Board (and senior staff) policy-driven governance education and training."

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11. Committee Structure Is Generally Working

The committee results are quite positive.

Trustees generally believe:

- the Board has the right committees;
- there is an appropriate number of committees;
- committee work plans align with Board work;
- reports are timely and useful; and
- committees have meaningful discussions.

The main concern is committee timing and workflow.

One respondent specifically suggested committee meetings occur between Board meetings rather than after them and suggested considering fewer but longer meetings.

Another useful point is that committee performance evaluation appears less mature than the rest of the committee framework.

Implication

The issue isn't necessarily more committees. It is making the existing committee structure work more effectively within the Board's annual governance cycle.

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12. Chair Performance Is Generally Positive

The Chair's results are positive overall, although there is some variation.

Trustees generally recognize:

- effective meeting leadership;
- relationship-building;
- moving Board business forward;
- ensuring discussion; and
- representing the Board externally.

One written comment specifically described the Chair as skillfully balancing discussion with moving through the agenda and recognized her dedication and experience. The more mixed response on ensuring all sides of an issue is heard suggests an opportunity to continue emphasizing balanced participation and constructive challenge.

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13. Individual Trustee Performance Is a Clear Strength

The individual self-evaluation results are very strong.

Trustees report that they:

- prepare and attend meetings;
- listen to others;
- contribute to deliberations;
- express views even when in the minority;
- respect Board decisions;
- support TEC activities; and
- contribute to committees.

For example:

- **100%** agreed/strongly agreed that they prepare for and attend meetings.
- **100%** agreed/strongly agreed that they listen to and consider others' views.
- **100%** agreed/strongly agreed that they respect Board decisions.
- **100%** agreed/strongly agreed that they contribute to committees.

This provides a strong foundation for the next stage of governance development.

Key Themes

Strong Foundations

- **Board composition** - Strong skills, appropriate size and independence
- **Fiduciary responsibility** - Strong governance foundation
- **Trustee engagement** - Trustees are committed and well prepared
- **Board culture** - Respectful, professional and constructive
- **Strategic planning** - Strong foundation, with opportunity to become more strategic
- **Committees -** Generally effective; some opportunity to improve timing and alignment
- **Chair performance** - Positive overall; continue emphasis on balanced participation
- **Individual Trustee performance** - Strong

Priority Areas

- **Board-CEO roles and boundaries** - Clarify respective roles, delegation and accountability
- **Policy-driven governance** - Complete and implement the governance framework
- **Critical Outcomes** - Complete the transition to outcomes-focused governance

Areas for Improvement

- **Financial oversight** - Strengthen depth of oversight, challenge and monitoring
- **Risk oversight** - Improve visibility of principal and emerging risks
- **Board materials** - Provide more decision-focused, evidence-based information
- **Board education** - Strengthen orientation and ongoing governance education

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The Most Important Takeaway

The survey's overall message could be characterized as: **"The Board is functioning well, but it is ready - and believes it needs - to mature its governance model."**

The survey does **not** suggest a Board that lacks commitment, competence or cohesion. Quite the opposite.

The principal challenge is **governance maturity and clarity**.

In summary, the Board appears to be saying:

1. We have a strong Board.
2. We work well together.
3. We are engaged and committed.
4. We recognize that the existing governance model needs to evolve.
5. We need to finish the governance work already underway.
6. We need clearer Board-CEO boundaries.
7. We need stronger outcome, risk and financial oversight.
8. We need better decision information.
9. We need to become more strategic and less operational.
10. We need to institutionalize these practices through policy rather than relying on individual interpretation.

That is a very constructive message for the Board.

Suggested Board-Level Priorities Emerging from the Survey

In further distilling the survey results, it appears there are six priorities for the Board to consider:

1. Complete the governance framework

- Critical Outcomes Policy
- Governance Process Policies
- Board-CEO Relationship Policies
- Executive Boundaries Policies
- CEO monitoring framework

2. Clarify the Board-CEO boundary

- What belongs to the Board?
- What is delegated to the CEO?
- How does the Board monitor without directing operations?

3. Strengthen Board information

- decision-oriented cover memos;
- options/alternatives;
- evidence;
- risk;
- financial implications;
- clear recommendations.

4. Strengthen oversight

- financial health;
- enterprise risk;
- emerging risks;
- CEO performance;
- outcomes/KPIs.

5. Strengthen Board development

- Trustee orientation;
- policy-driven governance education;
- risk and regulatory education;
- emerging sector issues.

6. Align Board and committee work with the new governance model

- annual Board work plan;
- committee work plans;
- meeting sequencing;
- Critical Outcomes monitoring;
- annual Board and CEO evaluation.

Briefing Note

In Conclusion

The survey provides strong internal evidence for the direction of the governance work currently underway. Trustees are not asking for more operational involvement; they are asking for clearer governance, stronger accountability, better information, stronger risk oversight, and a more strategic/outcomes-focused Board.

The most important caution is that the Board should not interpret the generally positive ratings as evidence that the governance transition is complete. The comments make clear that several Trustees rated the current state positively while simultaneously recognizing that the organization is in transition and that the policy framework and monitoring system are not yet fully established.

NEXT STEPS

At its August 19, 2026 meeting, the Governance and Nominating Committee considered the results of the Annual Board and Individual Effectiveness Self-Evaluation Survey and the suggested Board-Level priorities emerging from the survey, and recommended they be forwarded to the Board for information and consideration for future governance development planning.

Proposed Motion:

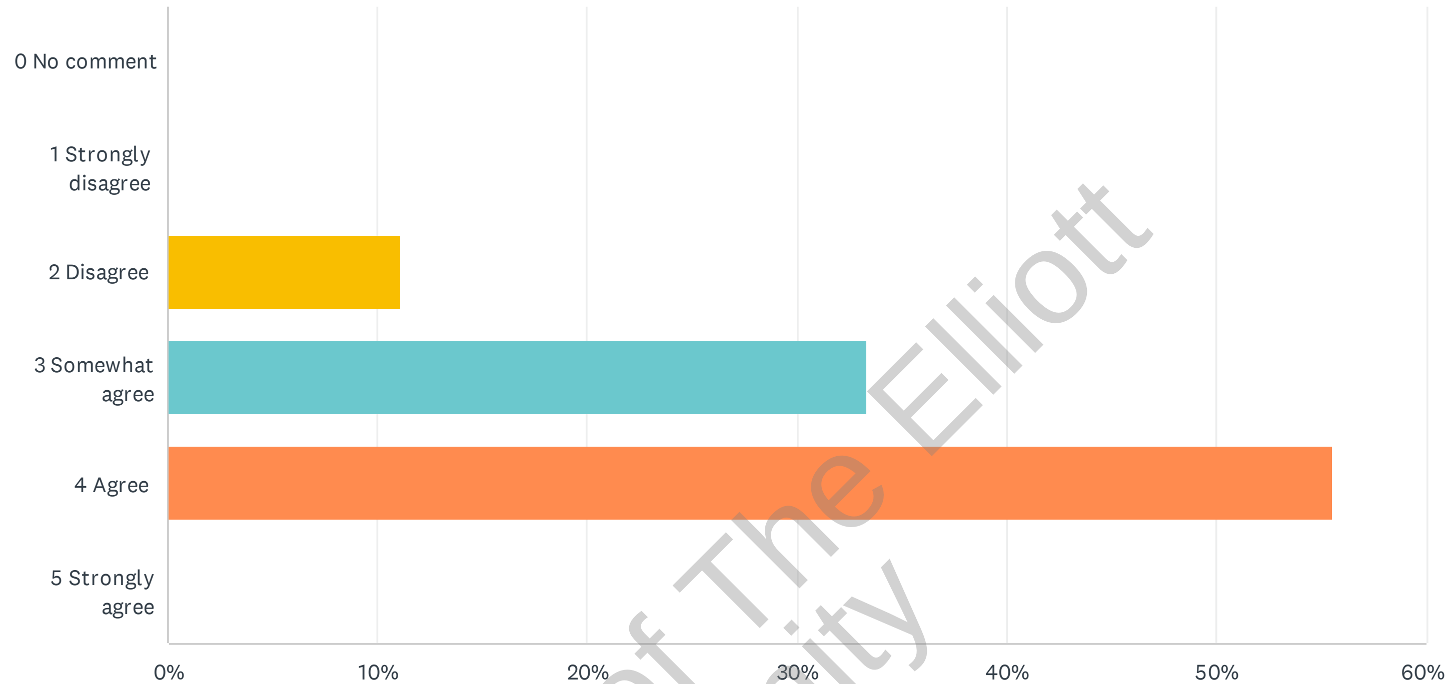
Be it resolved that: the Board accepts the results and analysis of the Annual Board and Individual Effectiveness Self-Evaluation Survey for 2025-2026, including the suggested Board-Level Priorities emerging from the survey for information and future governance development planning.

ATTACHMENT

1. **Annual Board Effectiveness Self-Evaluation Survey Results**

Q1 The Board understands and performs its governance role in the following area: strategic planning.

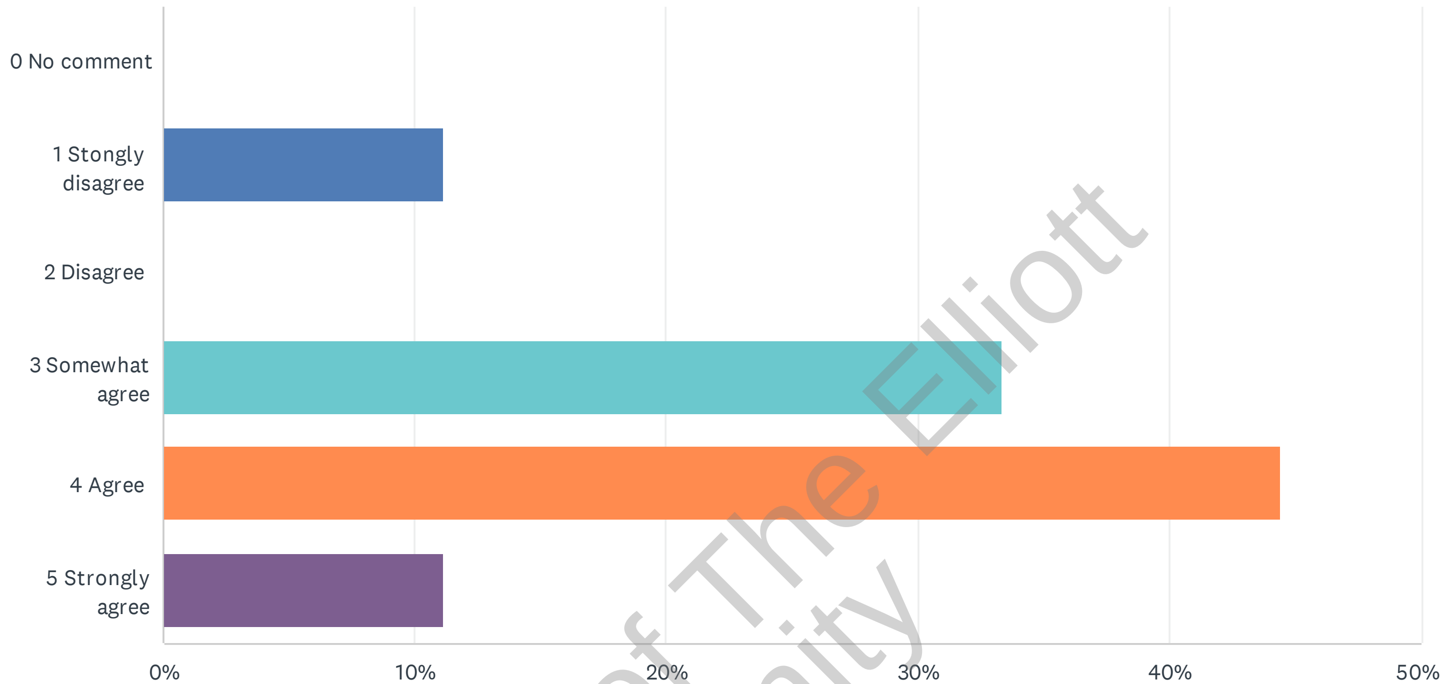
Answered: 9 Skipped: 0



ANSWER CHOICES	RESPONSES	
0 No comment	0.00%	0
1 Strongly disagree	0.00%	0
2 Disagree	11.11%	1
3 Somewhat agree	33.33%	3
4 Agree	55.56%	5
5 Strongly agree	0.00%	0
TOTAL		9

Q2 The Board understands and performs its governance role in the following area: financial oversight.

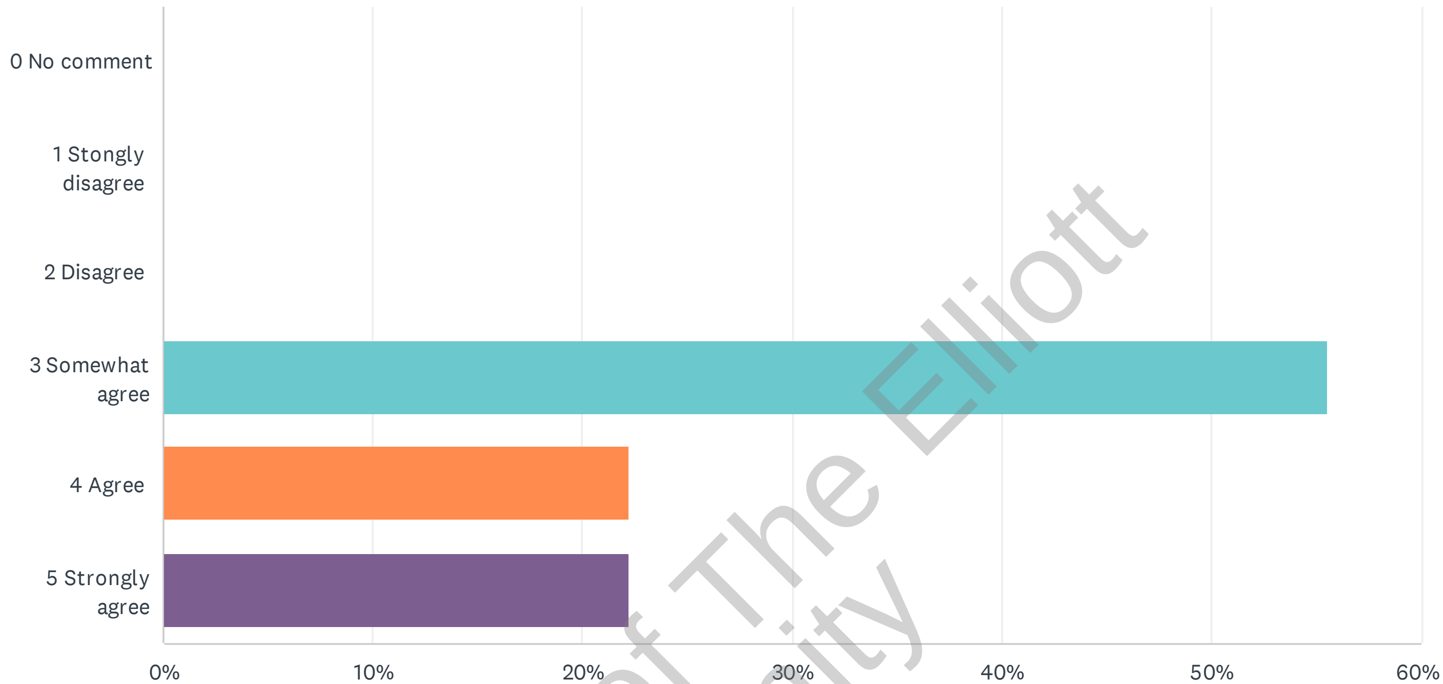
Answered: 9 Skipped: 0



ANSWER CHOICES	RESPONSES	
0 No comment	0.00%	0
1 Stongly disagree	11.11%	1
2 Disagree	0.00%	0
3 Somewhat agree	33.33%	3
4 Agree	44.44%	4
5 Strongly agree	11.11%	1
TOTAL		9

Q3 The Board understands and performs its governance role in the following area: quality.

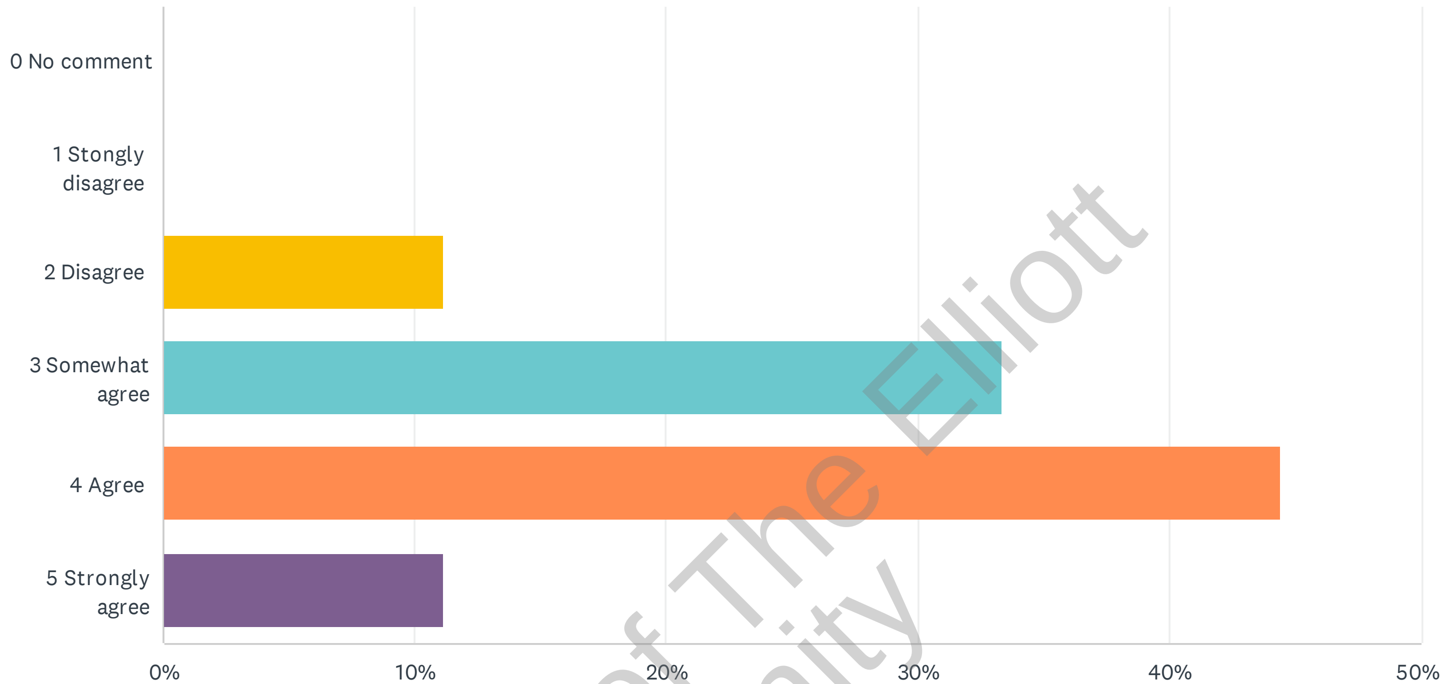
Answered: 9 Skipped: 0



ANSWER CHOICES	RESPONSES	
0 No comment	0.00%	0
1 Stongly disagree	0.00%	0
2 Disagree	0.00%	0
3 Somewhat agree	55.56%	5
4 Agree	22.22%	2
5 Strongly agree	22.22%	2
TOTAL		9

Q4 The Board understands and performs its governance role in the following area: risk identification and management.

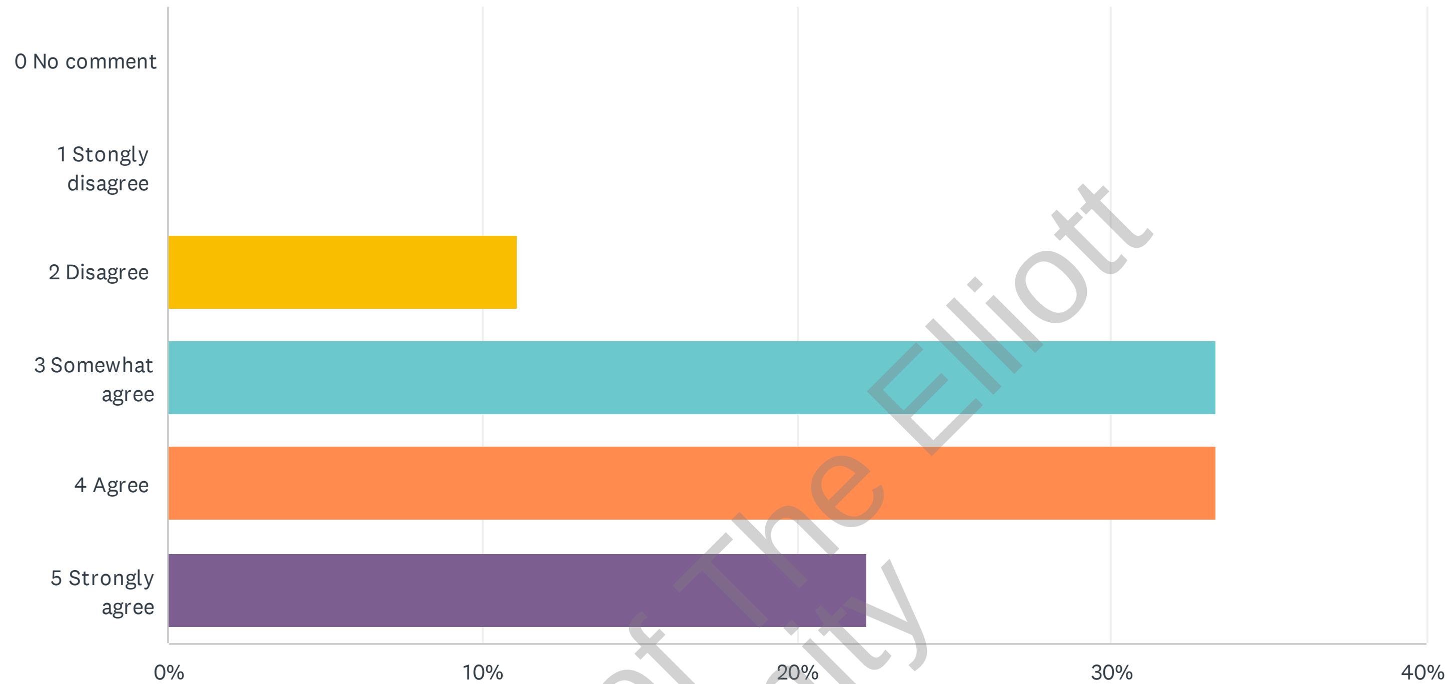
Answered: 9 Skipped: 0



ANSWER CHOICES	RESPONSES	
0 No comment	0.00%	0
1 Stongly disagree	0.00%	0
2 Disagree	11.11%	1
3 Somewhat agree	33.33%	3
4 Agree	44.44%	4
5 Strongly agree	11.11%	1
TOTAL		9

Q5 The Board understands and performs its governance role in the following area: monitoring CEO performance and support of the CEO.

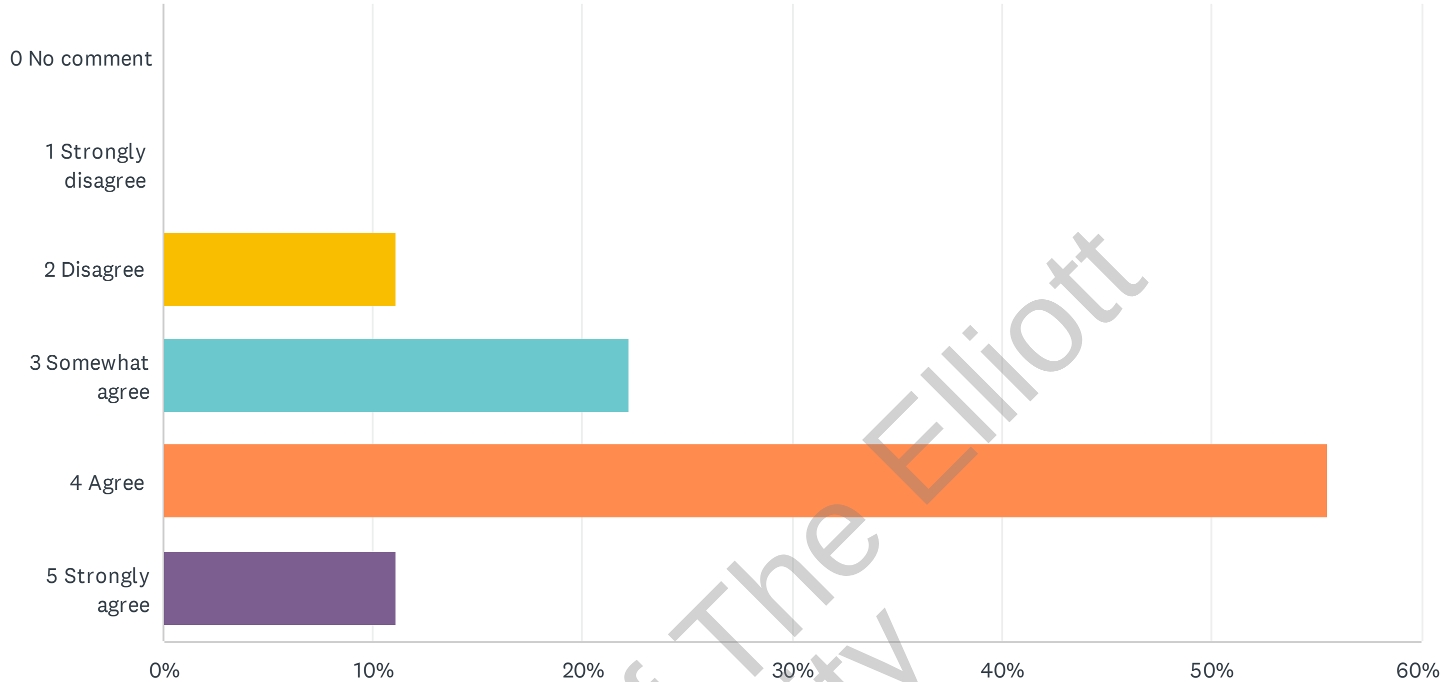
Answered: 9 Skipped: 0



ANSWER CHOICES	RESPONSES	
0 No comment	0.00%	0
1 Stongly disagree	0.00%	0
2 Disagree	11.11%	1
3 Somewhat agree	33.33%	3
4 Agree	33.33%	3
5 Strongly agree	22.22%	2
TOTAL		9

Q6 The Board performs effectively in the following area: strategic planning.

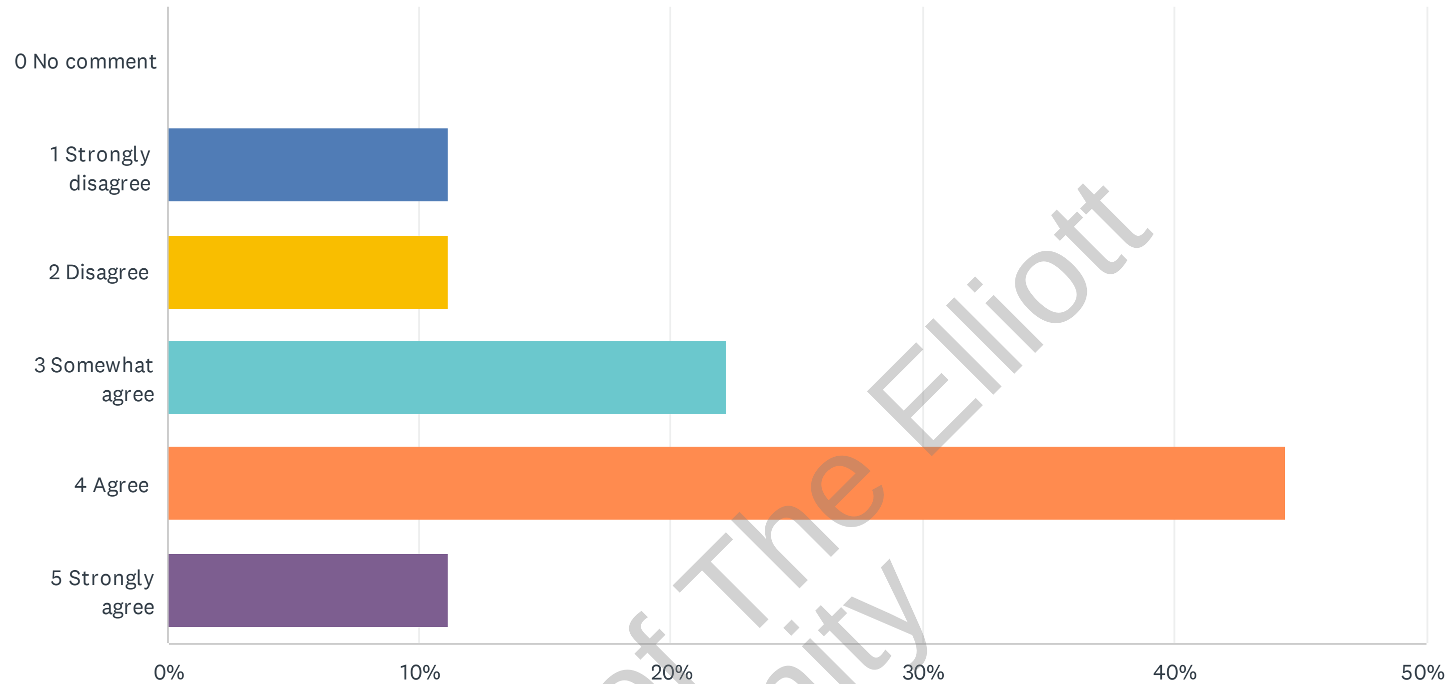
Answered: 9   Skipped: 0



ANSWER CHOICES	RESPONSES	
0 No comment	0.00%	0
1 Strongly disagree	0.00%	0
2 Disagree	11.11%	1
3 Somewhat agree	22.22%	2
4 Agree	55.56%	5
5 Strongly agree	11.11%	1
TOTAL		9

Q7 The Board performs effectively in the following area: financial oversight.

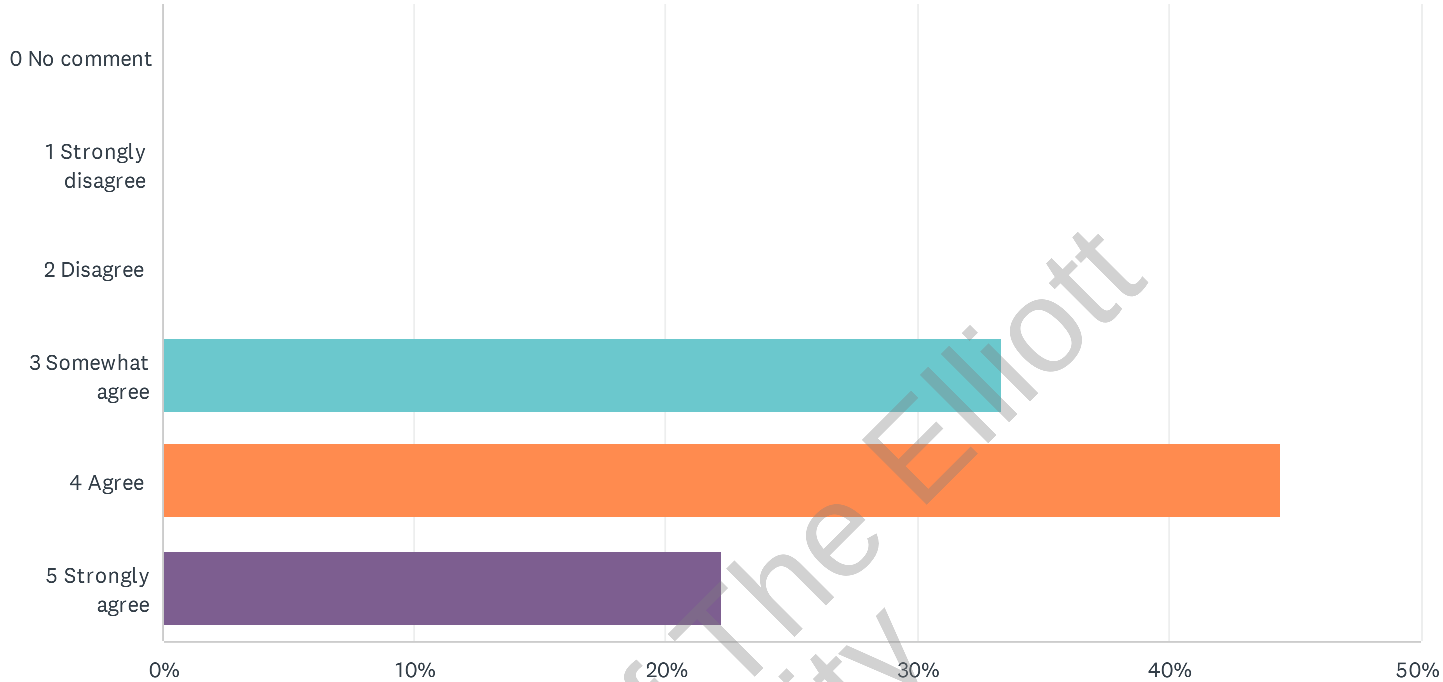
Answered: 9   Skipped: 0



ANSWER CHOICES	RESPONSES	
0 No comment	0.00%	0
1 Strongly disagree	11.11%	1
2 Disagree	11.11%	1
3 Somewhat agree	22.22%	2
4 Agree	44.44%	4
5 Strongly agree	11.11%	1
TOTAL		9

Q8 The Board performs effectively in the following area: quality.

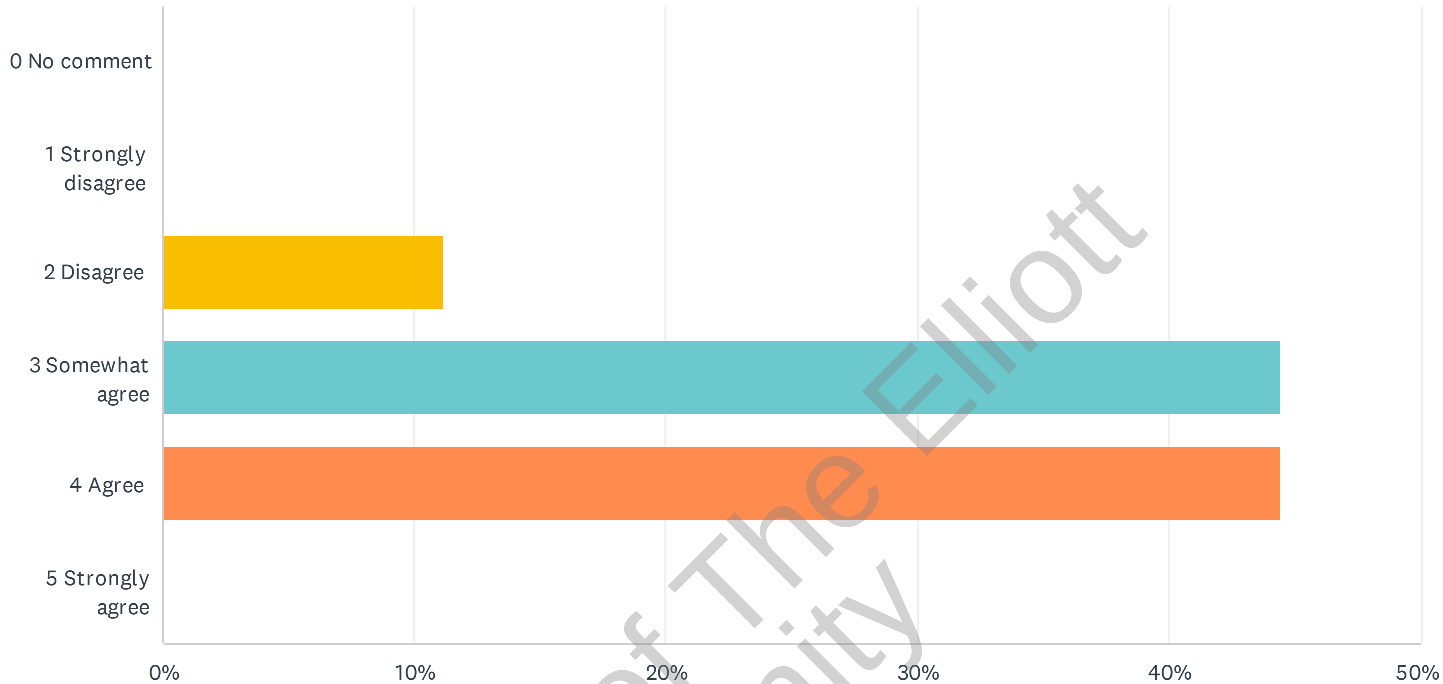
Answered: 9 Skipped: 0



ANSWER CHOICES	RESPONSES	
0 No comment	0.00%	0
1 Strongly disagree	0.00%	0
2 Disagree	0.00%	0
3 Somewhat agree	33.33%	3
4 Agree	44.44%	4
5 Strongly agree	22.22%	2
TOTAL		9

Q9 The Board performs effectively in the following area: risk identification and management.

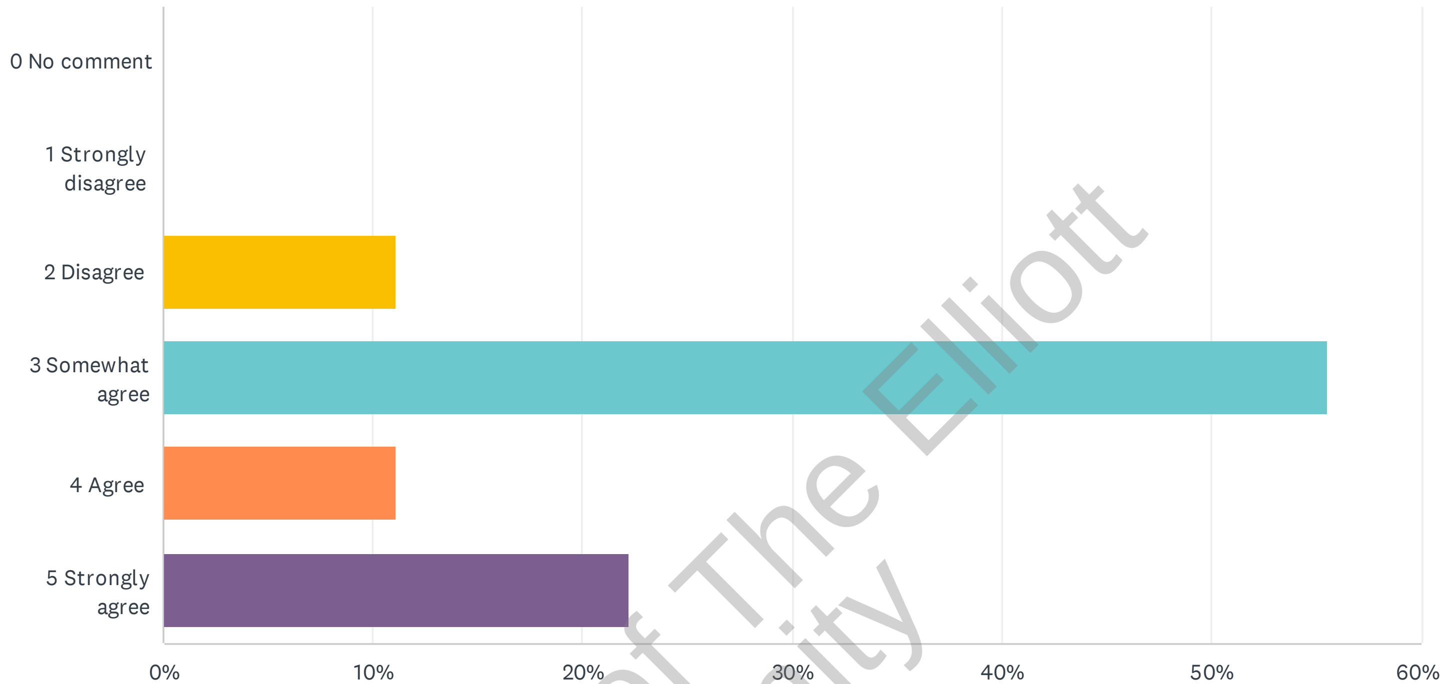
Answered: 9 Skipped: 0



ANSWER CHOICES	RESPONSES	
0 No comment	0.00%	0
1 Strongly disagree	0.00%	0
2 Disagree	11.11%	1
3 Somewhat agree	44.44%	4
4 Agree	44.44%	4
5 Strongly agree	0.00%	0
TOTAL		9

Q10 The Board performs effectively in the following area: monitoring CEO performance.

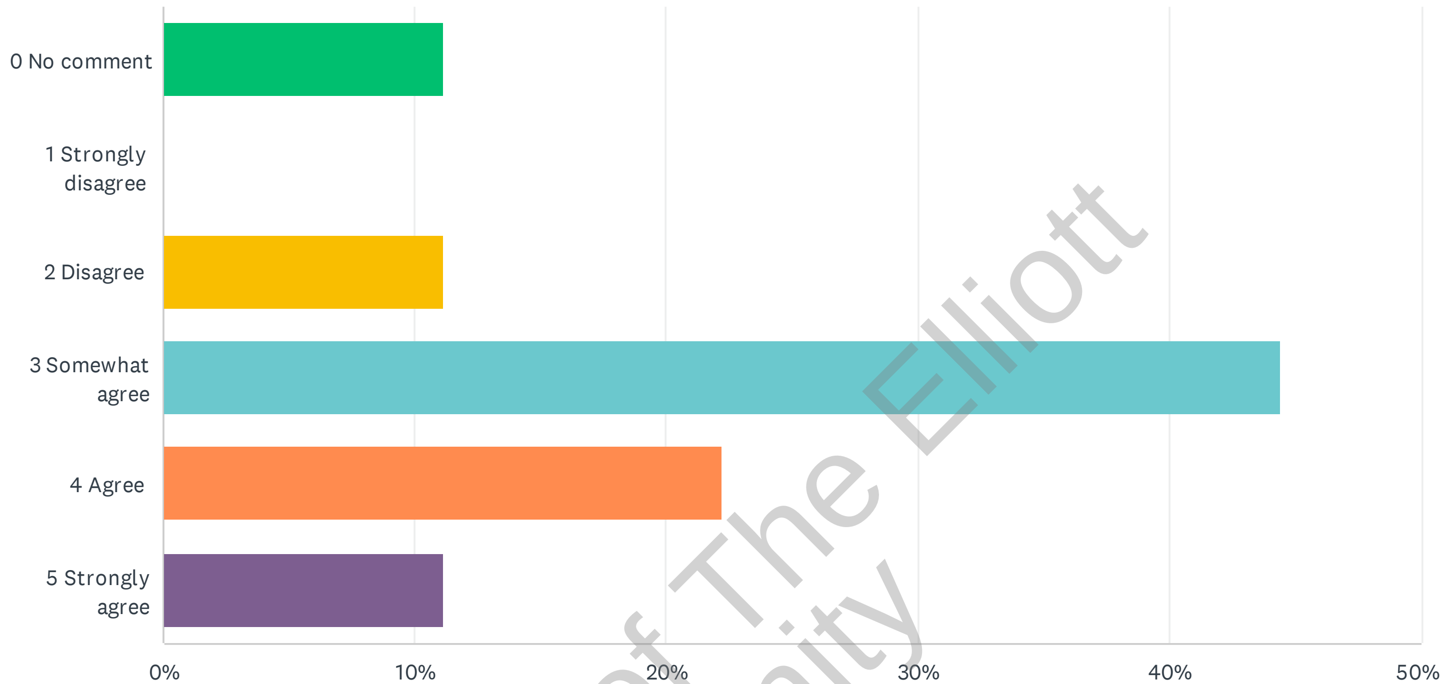
Answered: 9 Skipped: 0



ANSWER CHOICES	RESPONSES	
0 No comment	0.00%	0
1 Strongly disagree	0.00%	0
2 Disagree	11.11%	1
3 Somewhat agree	55.56%	5
4 Agree	11.11%	1
5 Strongly agree	22.22%	2
TOTAL		9

Q11 The Board operates within its role and does not become overly involved in operations/management issues.

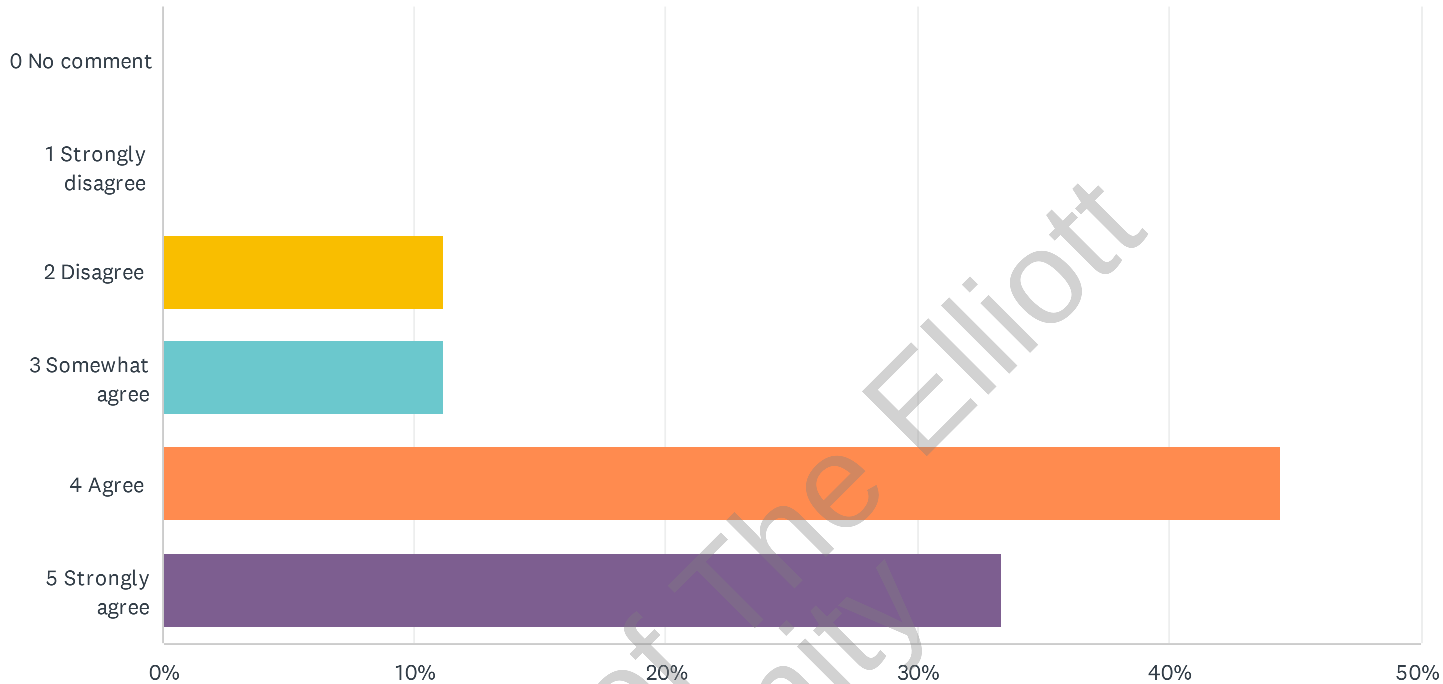
Answered: 9 Skipped: 0



ANSWER CHOICES	RESPONSES	
0 No comment	11.11%	1
1 Strongly disagree	0.00%	0
2 Disagree	11.11%	1
3 Somewhat agree	44.44%	4
4 Agree	22.22%	2
5 Strongly agree	11.11%	1
TOTAL		9

Q12 The Board is adequately involved in the development of the Strategic Imperatives.

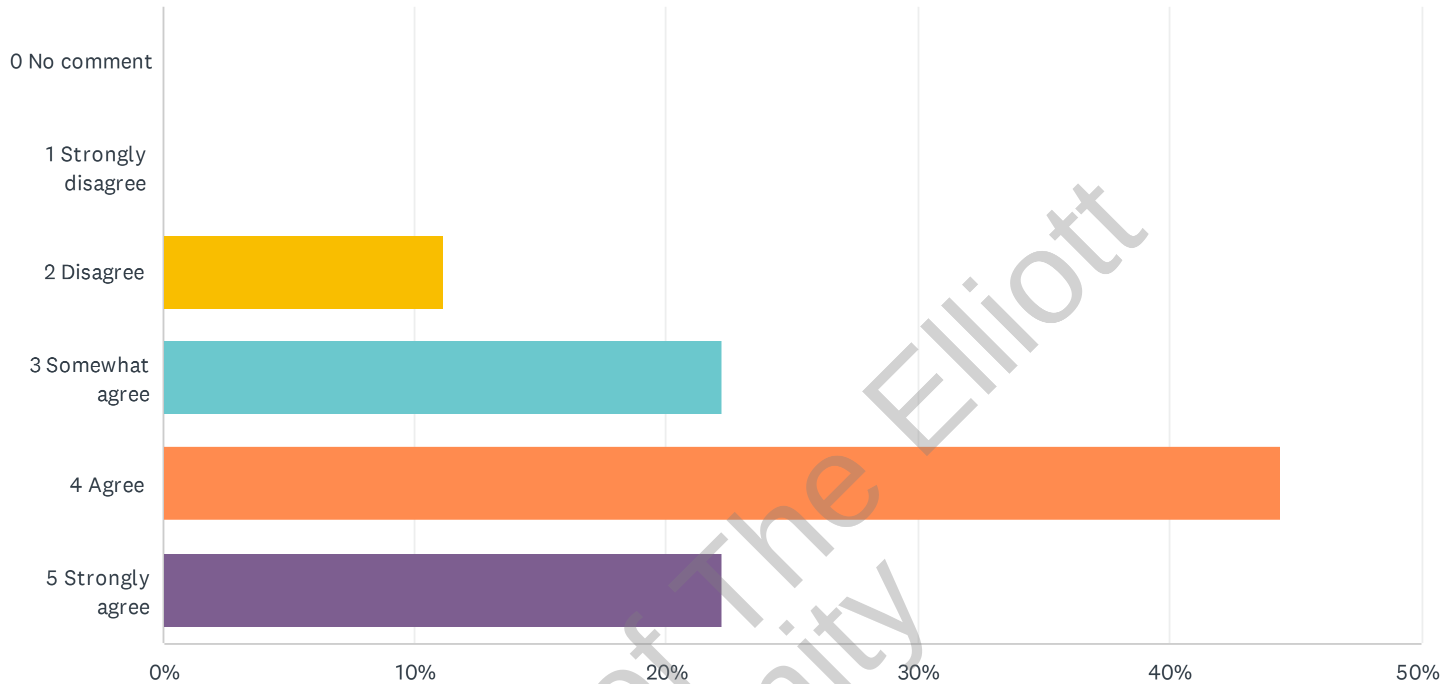
Answered: 9   Skipped: 0



ANSWER CHOICES	RESPONSES	
0 No comment	0.00%	0
1 Strongly disagree	0.00%	0
2 Disagree	11.11%	1
3 Somewhat agree	11.11%	1
4 Agree	44.44%	4
5 Strongly agree	33.33%	3
TOTAL		9

Q13 The CEO's interpretation of the Strategic Imperatives establishes relevant and realistic goals and strategic directions for the organization.

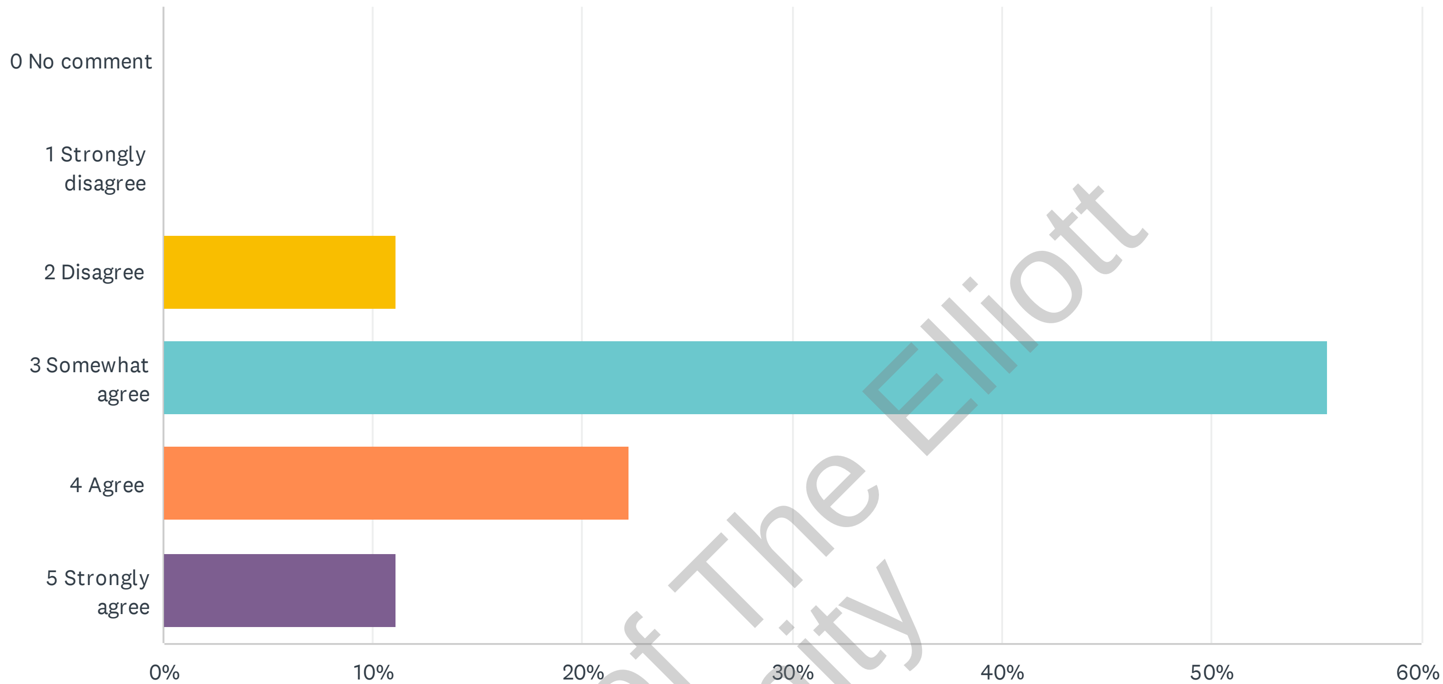
Answered: 9 Skipped: 0



ANSWER CHOICES	RESPONSES	
0 No comment	0.00%	0
1 Strongly disagree	0.00%	0
2 Disagree	11.11%	1
3 Somewhat agree	22.22%	2
4 Agree	44.44%	4
5 Strongly agree	22.22%	2
TOTAL		9

Q14 The Board regularly monitors and evaluates progress toward strategic goals and directions.

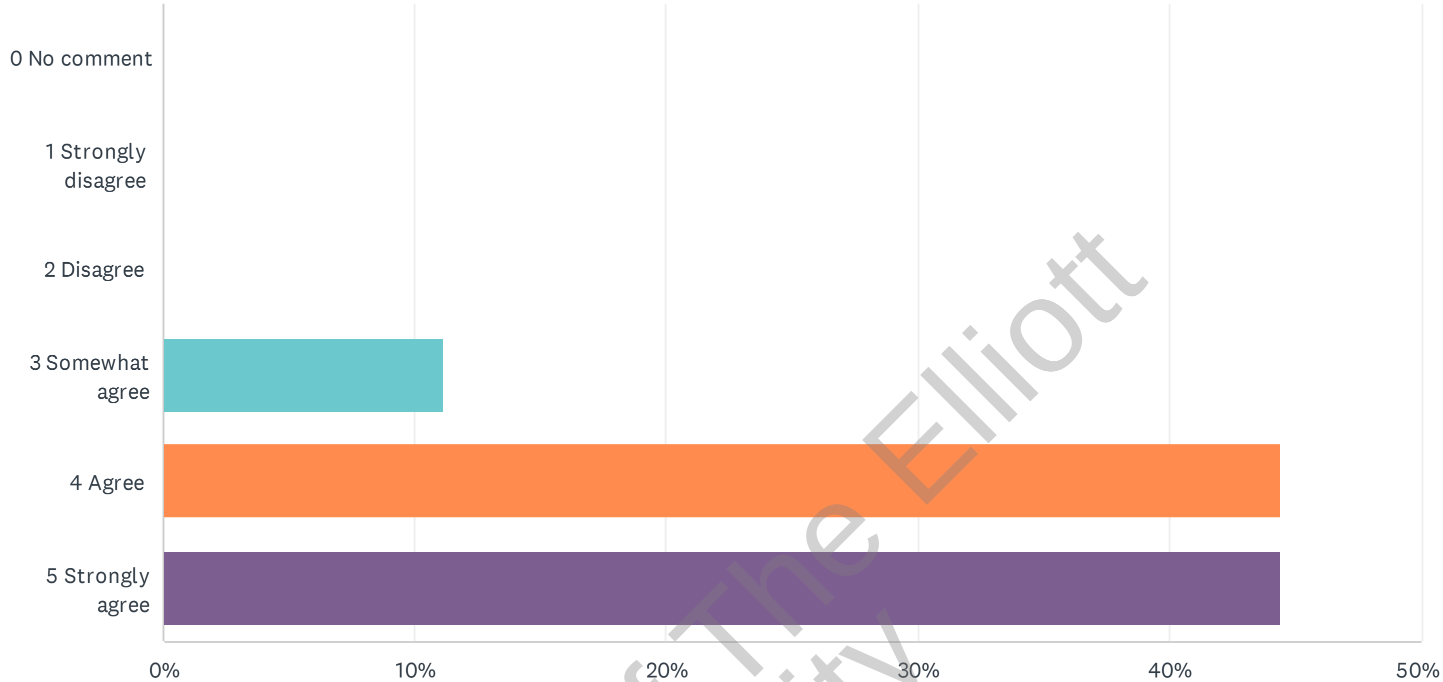
Answered: 9 Skipped: 0



ANSWER CHOICES	RESPONSES	
0 No comment	0.00%	0
1 Strongly disagree	0.00%	0
2 Disagree	11.11%	1
3 Somewhat agree	55.56%	5
4 Agree	22.22%	2
5 Strongly agree	11.11%	1
TOTAL		9

Q15 The Board has developed and follows its annual work plan.

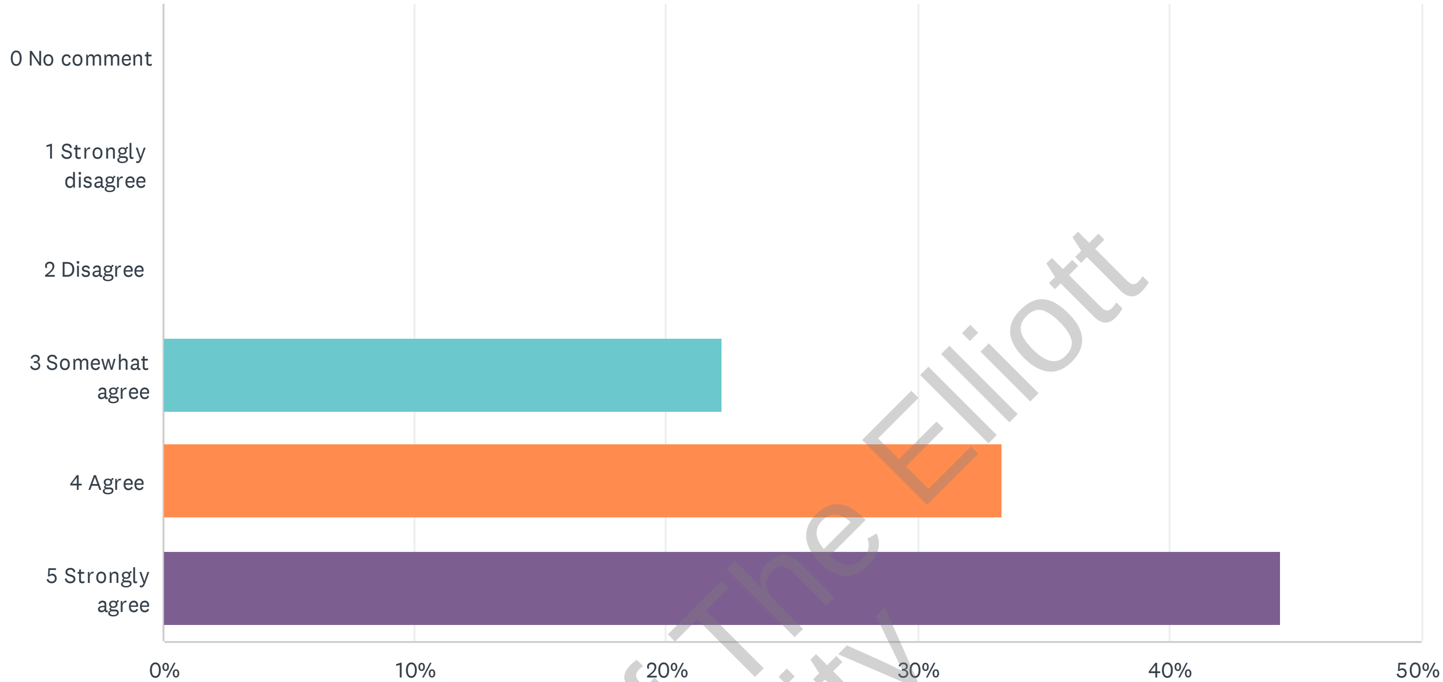
Answered: 9 Skipped: 0



ANSWER CHOICES	RESPONSES	
0 No comment	0.00%	0
1 Strongly disagree	0.00%	0
2 Disagree	0.00%	0
3 Somewhat agree	11.11%	1
4 Agree	44.44%	4
5 Strongly agree	44.44%	4
TOTAL		9

Q16 The Board understands and considers TEC's accountabilities.

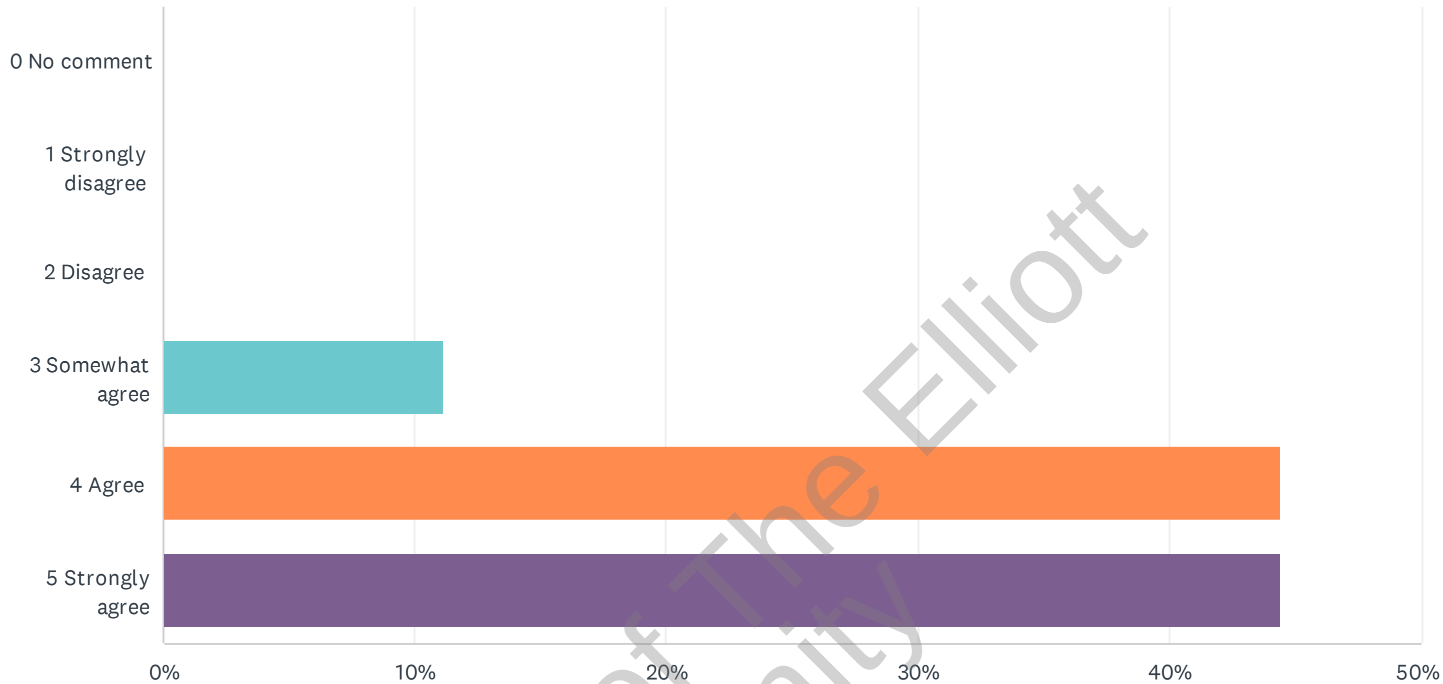
Answered: 9 Skipped: 0



ANSWER CHOICES	RESPONSES	
0 No comment	0.00%	0
1 Strongly disagree	0.00%	0
2 Disagree	0.00%	0
3 Somewhat agree	22.22%	2
4 Agree	33.33%	3
5 Strongly agree	44.44%	4
TOTAL		9

Q17 The Board makes decisions that are consistent with TEC's mission, vision, and values and that adhere to legislative requirements.

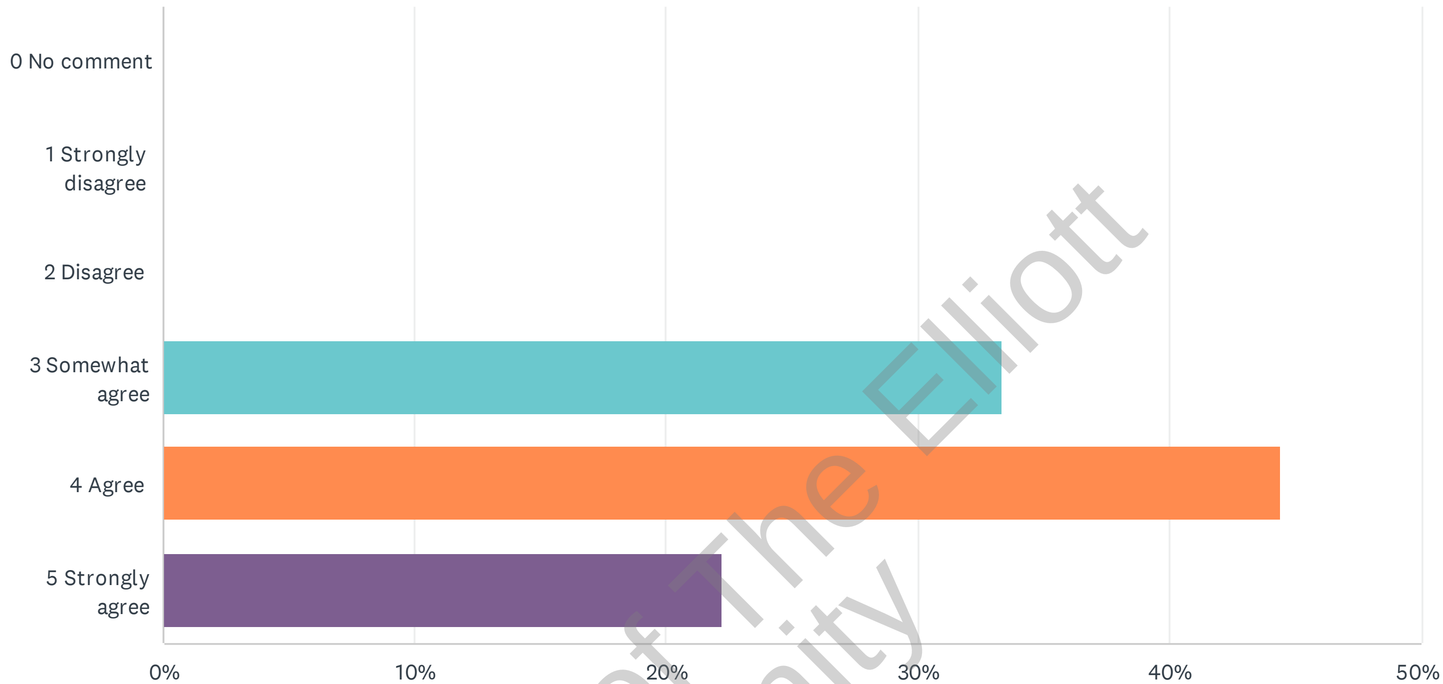
Answered: 9 Skipped: 0



ANSWER CHOICES	RESPONSES	
0 No comment	0.00%	0
1 Strongly disagree	0.00%	0
2 Disagree	0.00%	0
3 Somewhat agree	11.11%	1
4 Agree	44.44%	4
5 Strongly agree	44.44%	4
TOTAL		9

Q18 The Board makes decisions that are consistent with TEC's Strategic Imperatives.

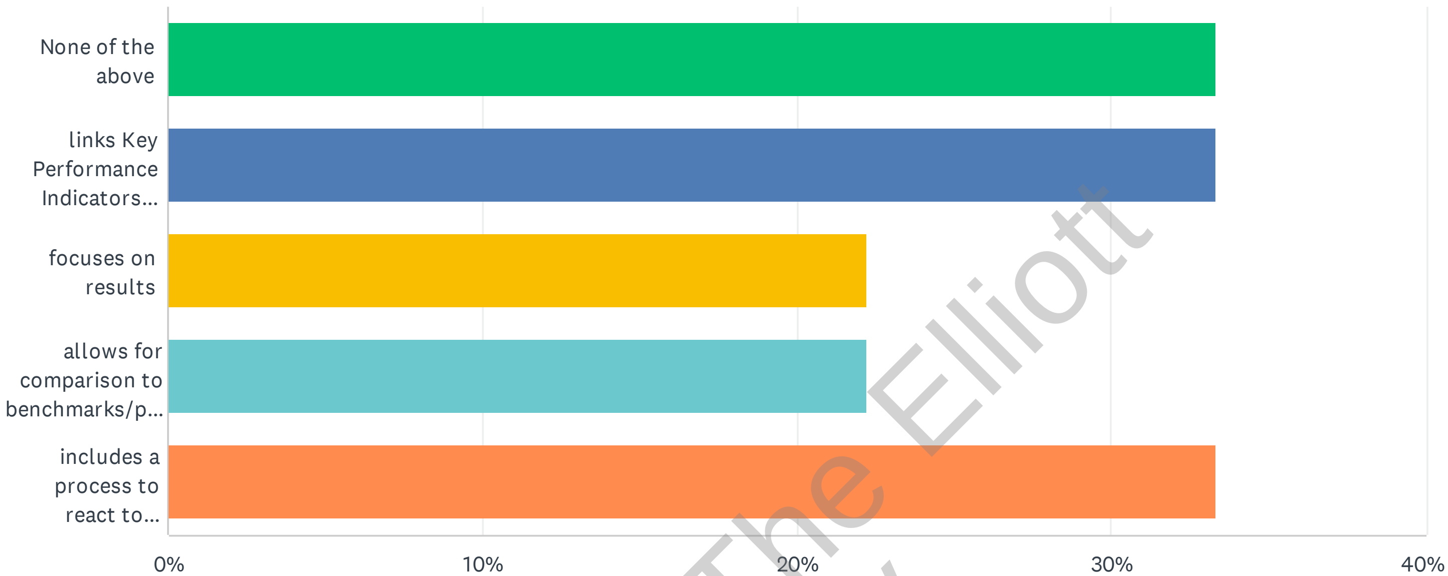
Answered: 9 Skipped: 0



ANSWER CHOICES	RESPONSES	
0 No comment	0.00%	0
1 Strongly disagree	0.00%	0
2 Disagree	0.00%	0
3 Somewhat agree	33.33%	3
4 Agree	44.44%	4
5 Strongly agree	22.22%	2
TOTAL		9

Q19 The Board uses a performance measurement system which (please check all that apply):

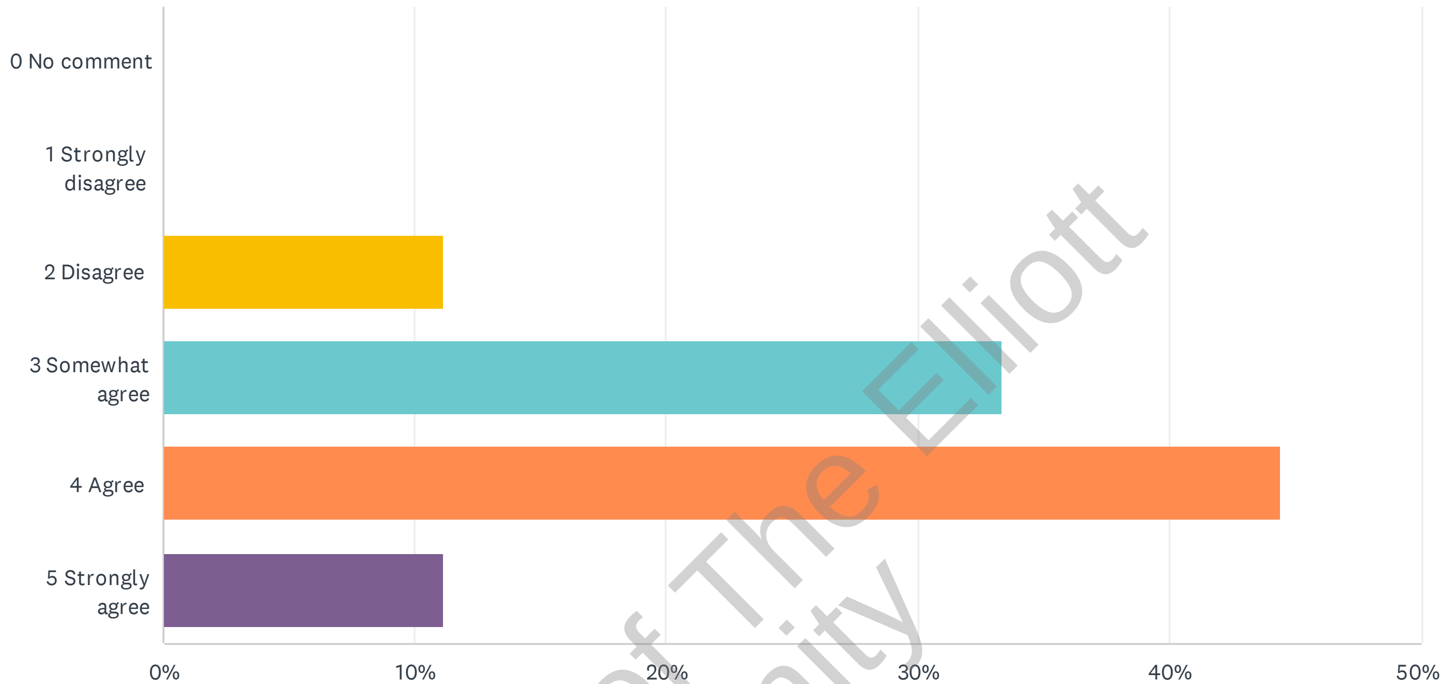
Answered: 9 Skipped: 0



ANSWER CHOICES	RESPONSES	
None of the above	33.33%	3
links Key Performance Indicators (KPIs) to the annual strategic plan	33.33%	3
focuses on results	22.22%	2
allows for comparison to benchmarks/planned results	22.22%	2
includes a process to react to variances	33.33%	3
Total Respondents: 9		

Q20 The Board is kept well informed about current, potential and emerging risks.

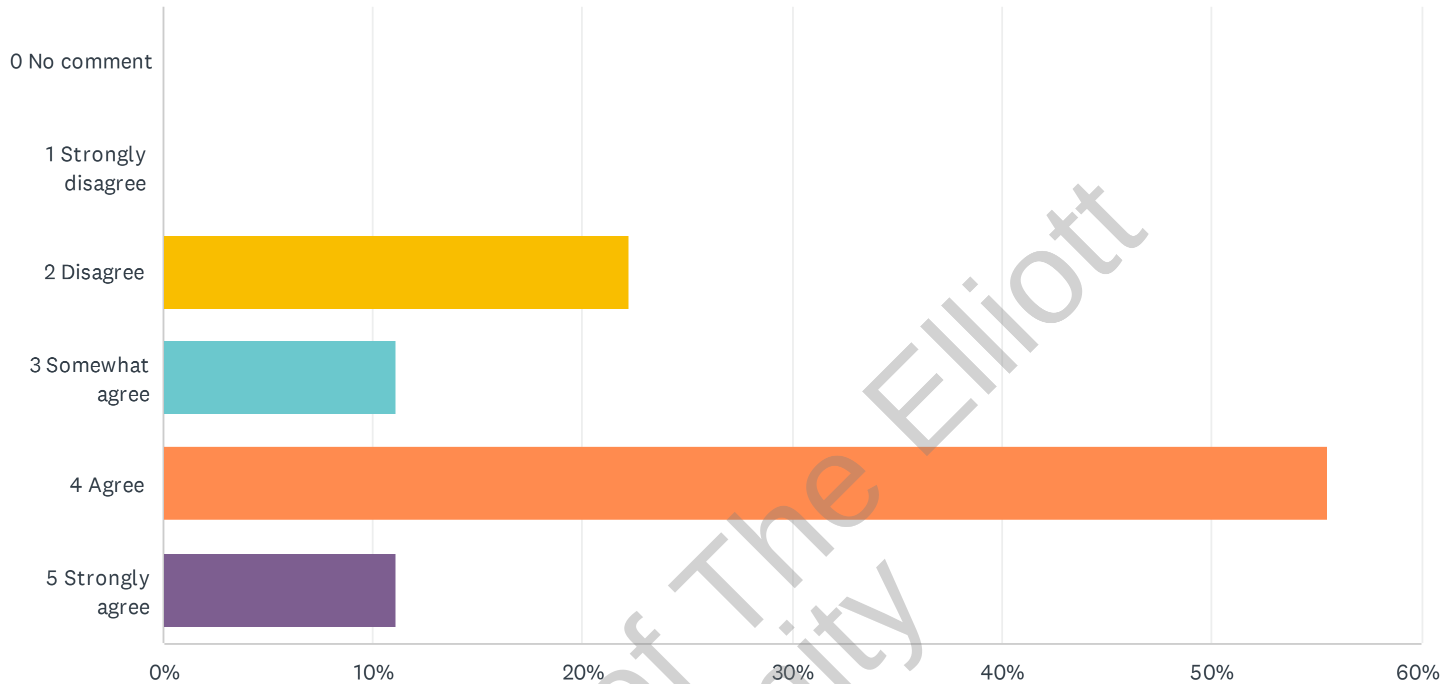
Answered: 9 Skipped: 0



ANSWER CHOICES	RESPONSES	
0 No comment	0.00%	0
1 Strongly disagree	0.00%	0
2 Disagree	11.11%	1
3 Somewhat agree	33.33%	3
4 Agree	44.44%	4
5 Strongly agree	11.11%	1
TOTAL		9

Q21 The Board has the opportunity to consider and discuss the reasonableness of the CEO's annual strategic plan.

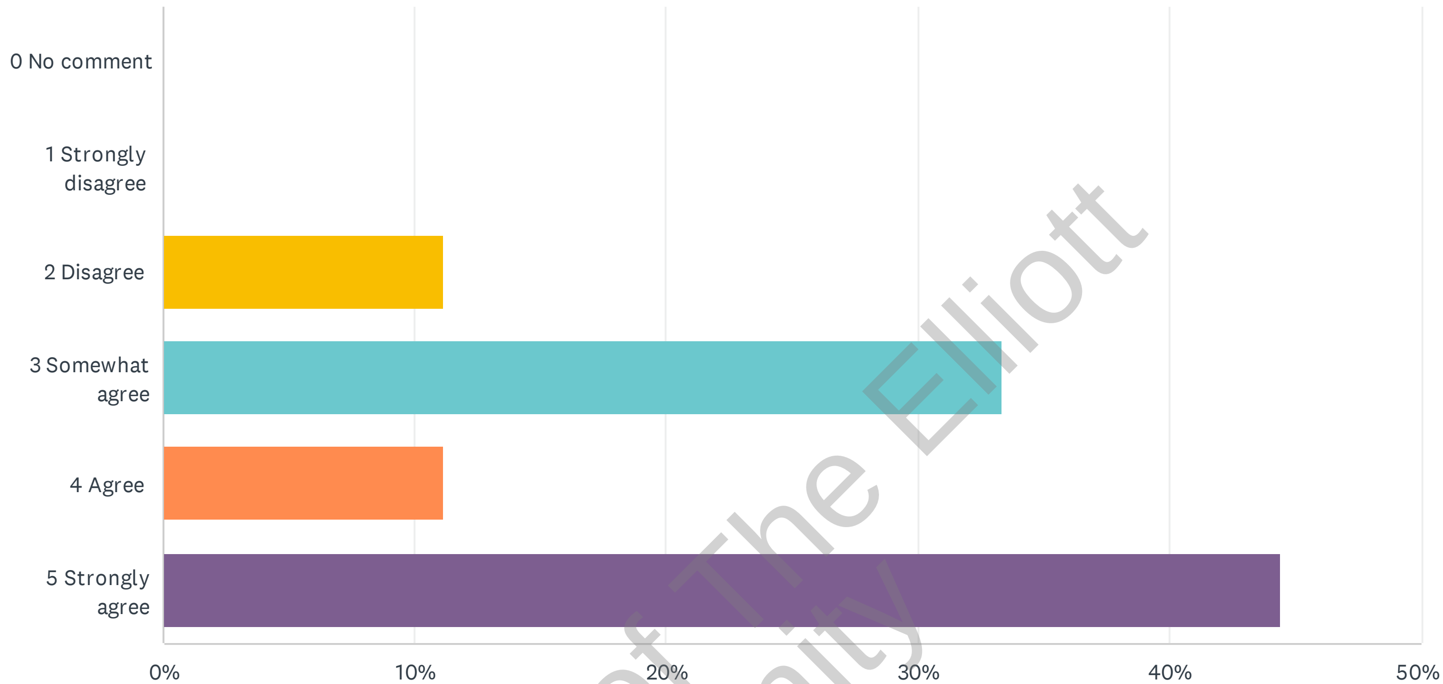
Answered: 9 Skipped: 0



ANSWER CHOICES	RESPONSES	
0 No comment	0.00%	0
1 Strongly disagree	0.00%	0
2 Disagree	22.22%	2
3 Somewhat agree	11.11%	1
4 Agree	55.56%	5
5 Strongly agree	11.11%	1
TOTAL		9

Q22 The Board's goals, expectations and concerns are openly communicated to the CEO.

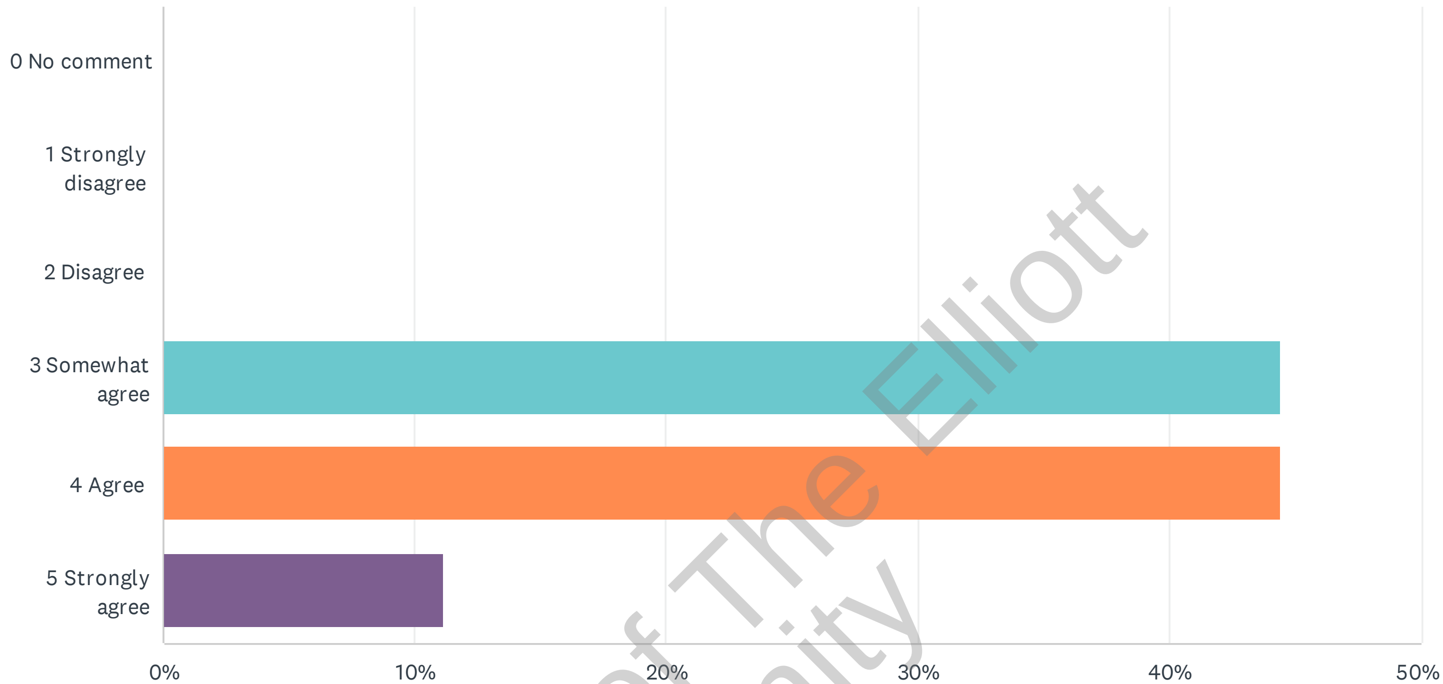
Answered: 9 Skipped: 0



ANSWER CHOICES	RESPONSES	
0 No comment	0.00%	0
1 Strongly disagree	0.00%	0
2 Disagree	11.11%	1
3 Somewhat agree	33.33%	3
4 Agree	11.11%	1
5 Strongly agree	44.44%	4
TOTAL		9

Q23 The Board is sufficiently involved in monitoring the CEO's performance.

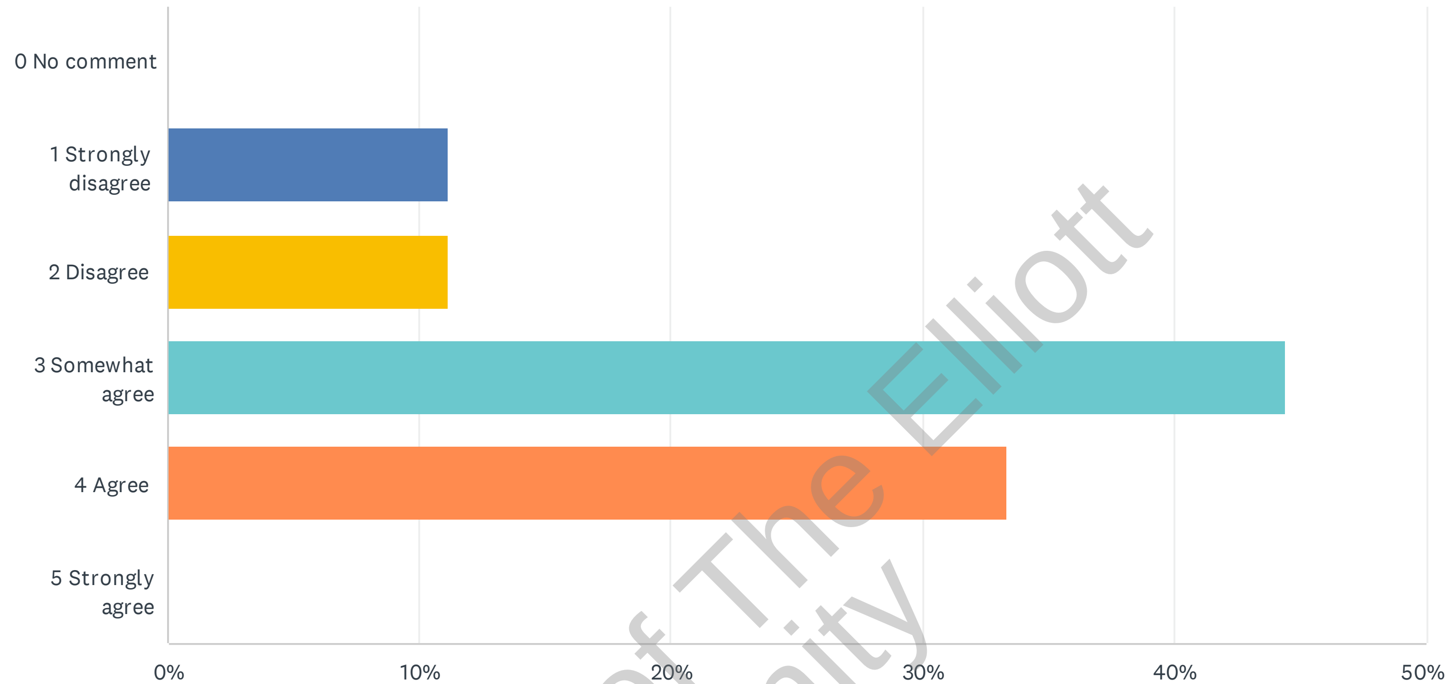
Answered: 9 Skipped: 0



ANSWER CHOICES	RESPONSES	
0 No comment	0.00%	0
1 Strongly disagree	0.00%	0
2 Disagree	0.00%	0
3 Somewhat agree	44.44%	4
4 Agree	44.44%	4
5 Strongly agree	11.11%	1
TOTAL		9

Q24 The Board has a sound plan for the CEO's development and succession.

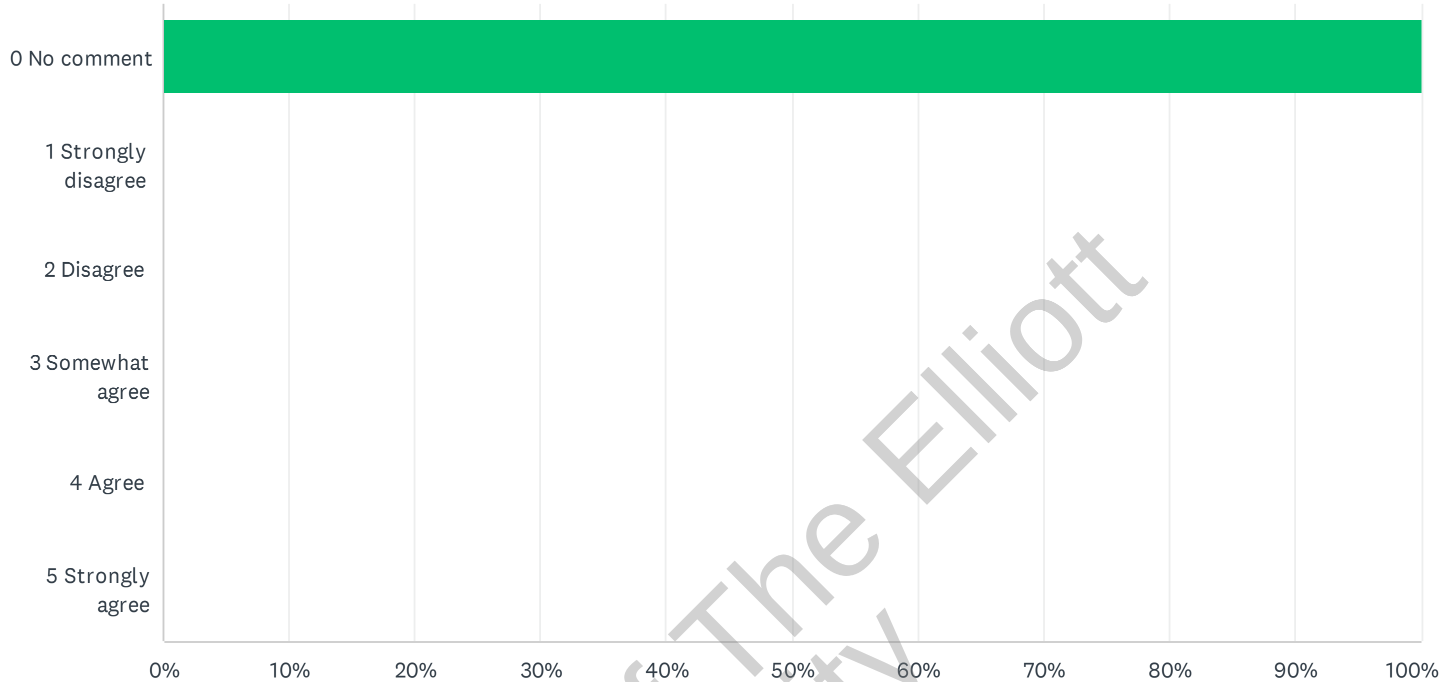
Answered: 9 Skipped: 0



ANSWER CHOICES	RESPONSES	
0 No comment	0.00%	0
1 Strongly disagree	11.11%	1
2 Disagree	11.11%	1
3 Somewhat agree	44.44%	4
4 Agree	33.33%	3
5 Strongly agree	0.00%	0
TOTAL		9

Q25 Comments on Board role and responsibilities.

Answered: 9 Skipped: 0



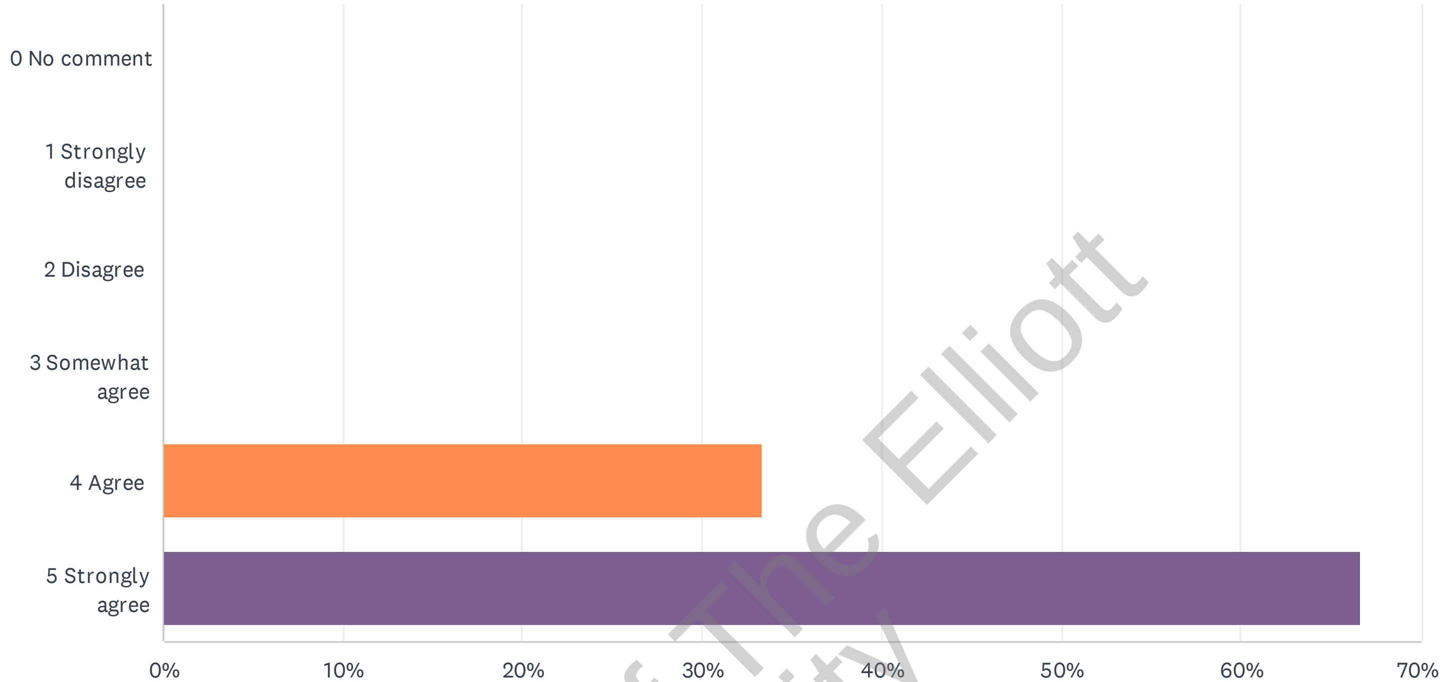
ANSWER CHOICES	RESPONSES	
0 No comment	100.00%	9
1 Strongly disagree	0.00%	0
2 Disagree	0.00%	0
3 Somewhat agree	0.00%	0
4 Agree	0.00%	0
5 Strongly agree	0.00%	0
TOTAL		9

#	COMMENTS	DATE
1	I have not been actively involved in CEO performance evaluation and communication in my first year on the board, so it is hard to have an informed opinion	7/3/2026 10:07 AM
2	Re: financial oversight: given financial situation of The Elliott, it could be argued that we did not sufficiently pay attention to financials. Re: supporting the CEO: it seems the CEO feels there is still too much interference in operations, so until everyone is in agreement about what governance looks like, I put "disagree." Re: emerging risks: I don't believe I have a clear enough idea of emerging risks...	6/17/2026 4:50 PM
3	The Board is in transition to becoming an outcomes focused Board by developing Critical Outcomes (vs Strategic Imperatives). At this point, the Critical Outcomes have yet to be approved, relevant Exec Limitation, Board-CEO Relationship and Governance Process	6/16/2026 4:37 PM

	Policies have yet to be developed and an evidence-based monitoring system is not yet in place.	
4	It's difficult to rate this section appropriately, given that we are embarking on a some exciting governance work and just in the midst of making changes. I think the Board understands its role and the basics of governance, but I look forward to us continuing to grow by setting and monitoring critical outcomes, reviewing the CEO's interpretation of those outcomes, and improving our governance policy framework.	5/7/2026 12:29 PM

Q26 The Board is the right size for effective governance.

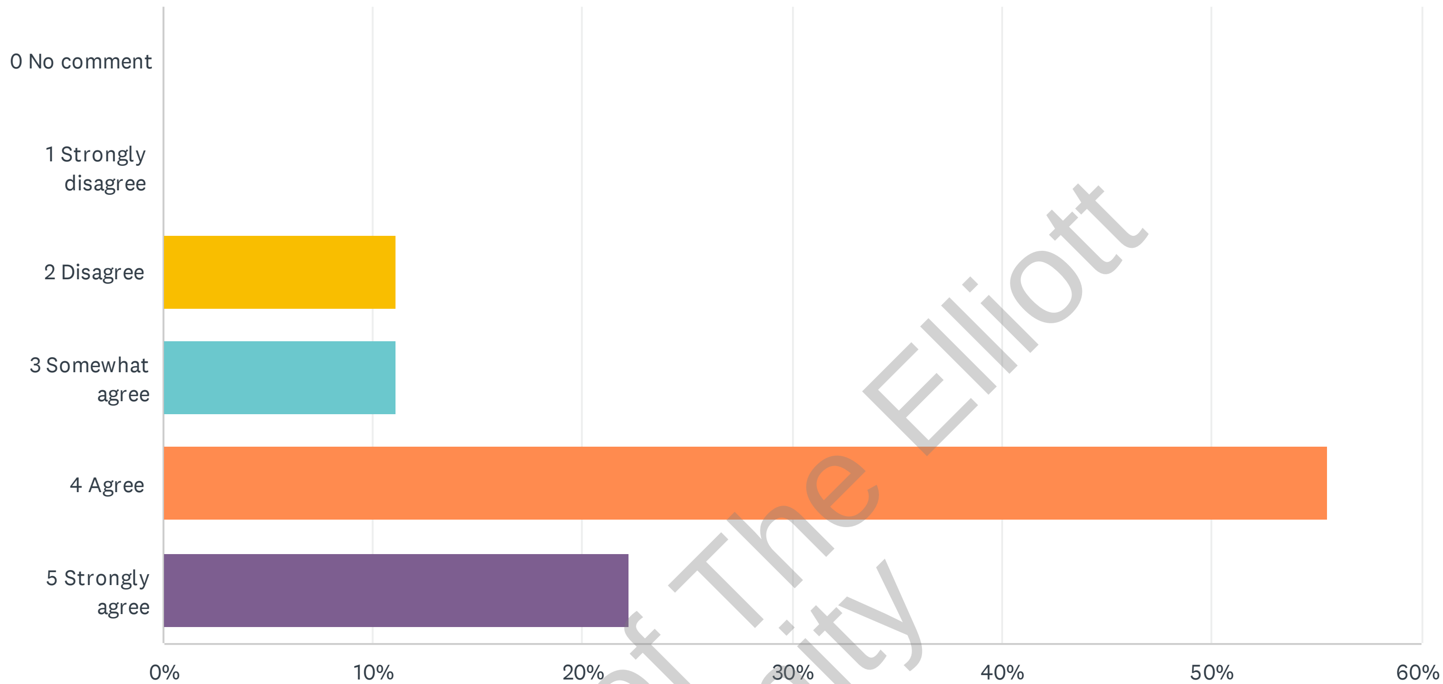
Answered: 9 Skipped: 0



ANSWER CHOICES	RESPONSES	
0 No comment	0.00%	0
1 Strongly disagree	0.00%	0
2 Disagree	0.00%	0
3 Somewhat agree	0.00%	0
4 Agree	33.33%	3
5 Strongly agree	66.67%	6
TOTAL		9

Q27 The Board has identified the skills and qualities that are required to perform its governance role.

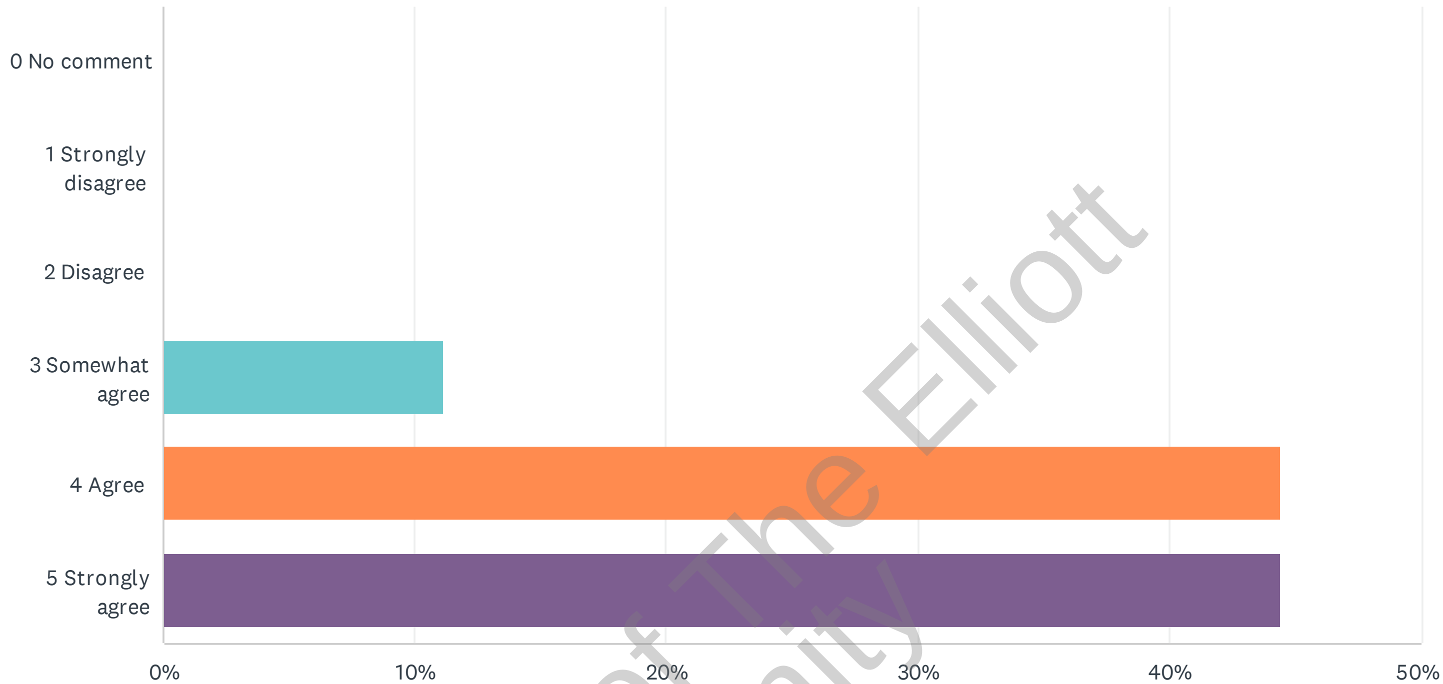
Answered: 9   Skipped: 0



ANSWER CHOICES	RESPONSES	
0 No comment	0.00%	0
1 Strongly disagree	0.00%	0
2 Disagree	11.11%	1
3 Somewhat agree	11.11%	1
4 Agree	55.56%	5
5 Strongly agree	22.22%	2
TOTAL		9

Q28 The board membership is sufficiently independent to ensure good governance of TEC.

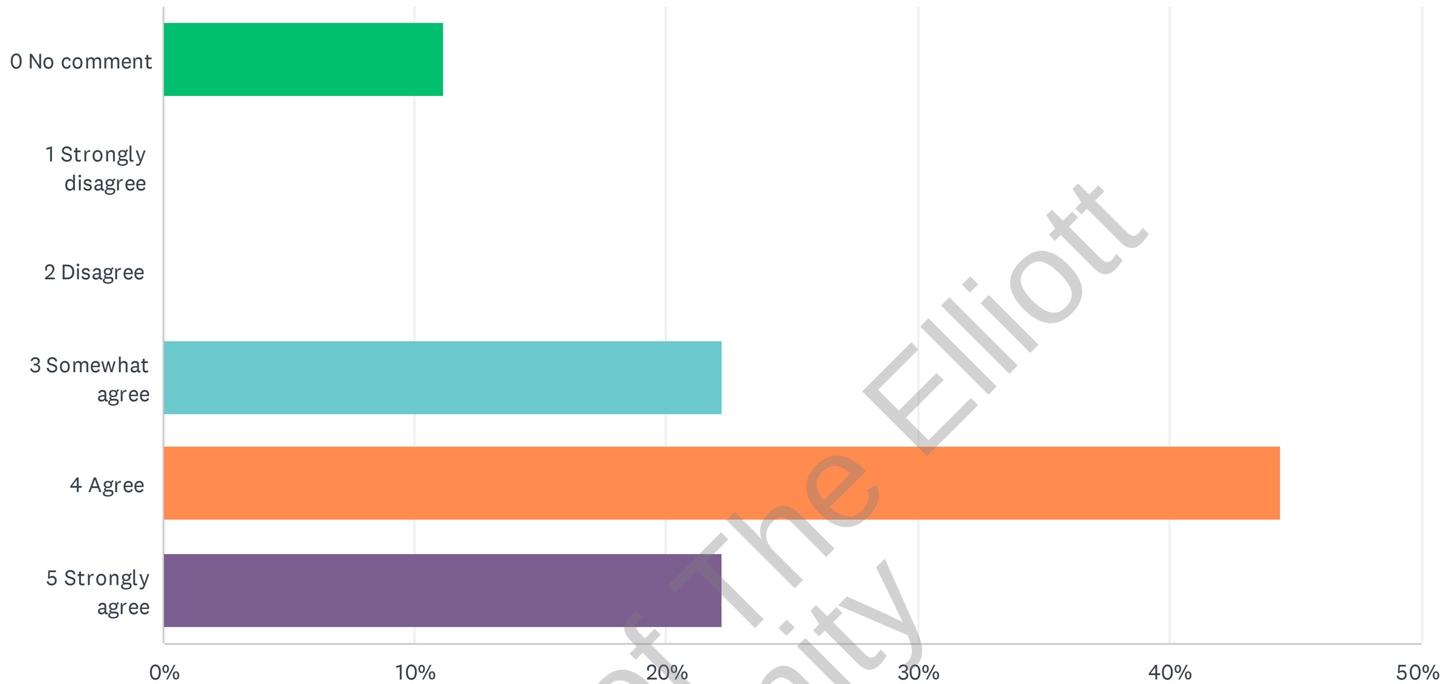
Answered: 9 Skipped: 0



ANSWER CHOICES	RESPONSES	
0 No comment	0.00%	0
1 Strongly disagree	0.00%	0
2 Disagree	0.00%	0
3 Somewhat agree	11.11%	1
4 Agree	44.44%	4
5 Strongly agree	44.44%	4
TOTAL		9

Q29 The Board has a clear and transparent process to recruit new Trustees.

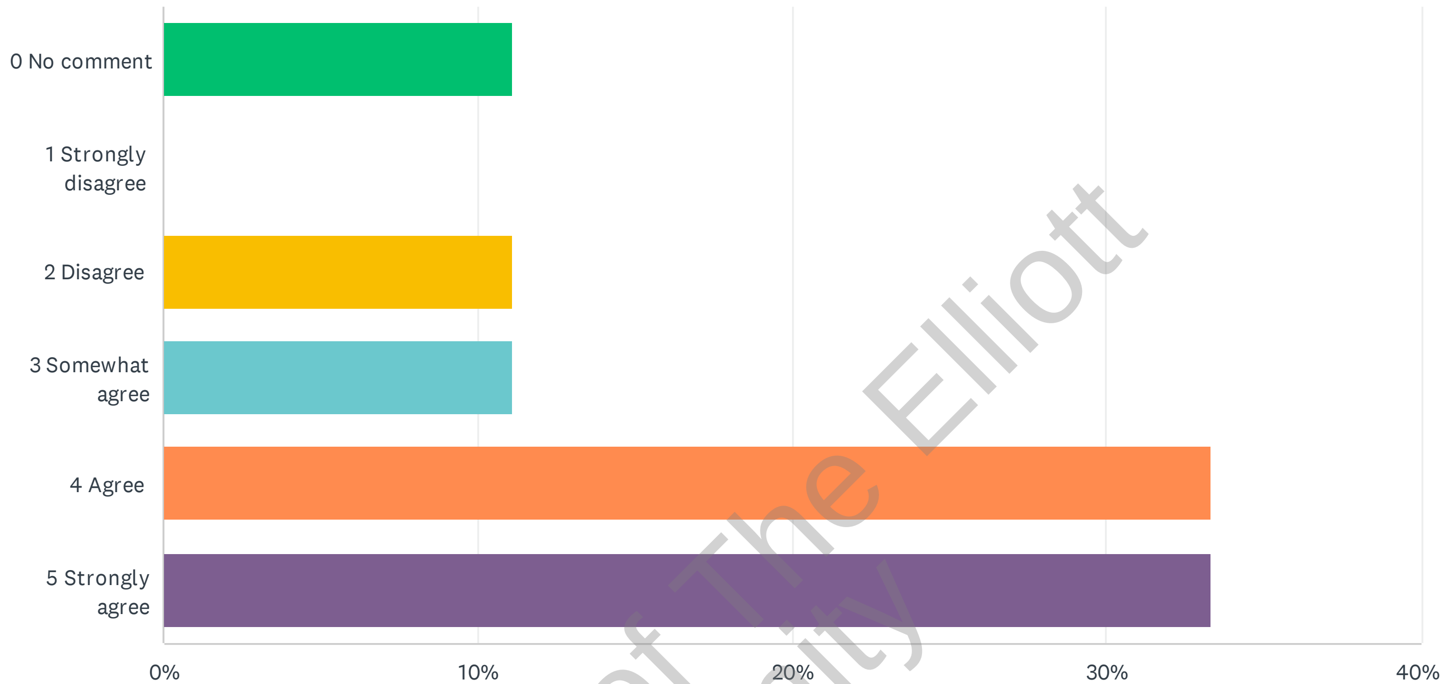
Answered: 9 Skipped: 0



ANSWER CHOICES	RESPONSES	
0 No comment	11.11%	1
1 Strongly disagree	0.00%	0
2 Disagree	0.00%	0
3 Somewhat agree	22.22%	2
4 Agree	44.44%	4
5 Strongly agree	22.22%	2
TOTAL		9

Q30 The Board's diversity of skills, experience and background supports good governance.

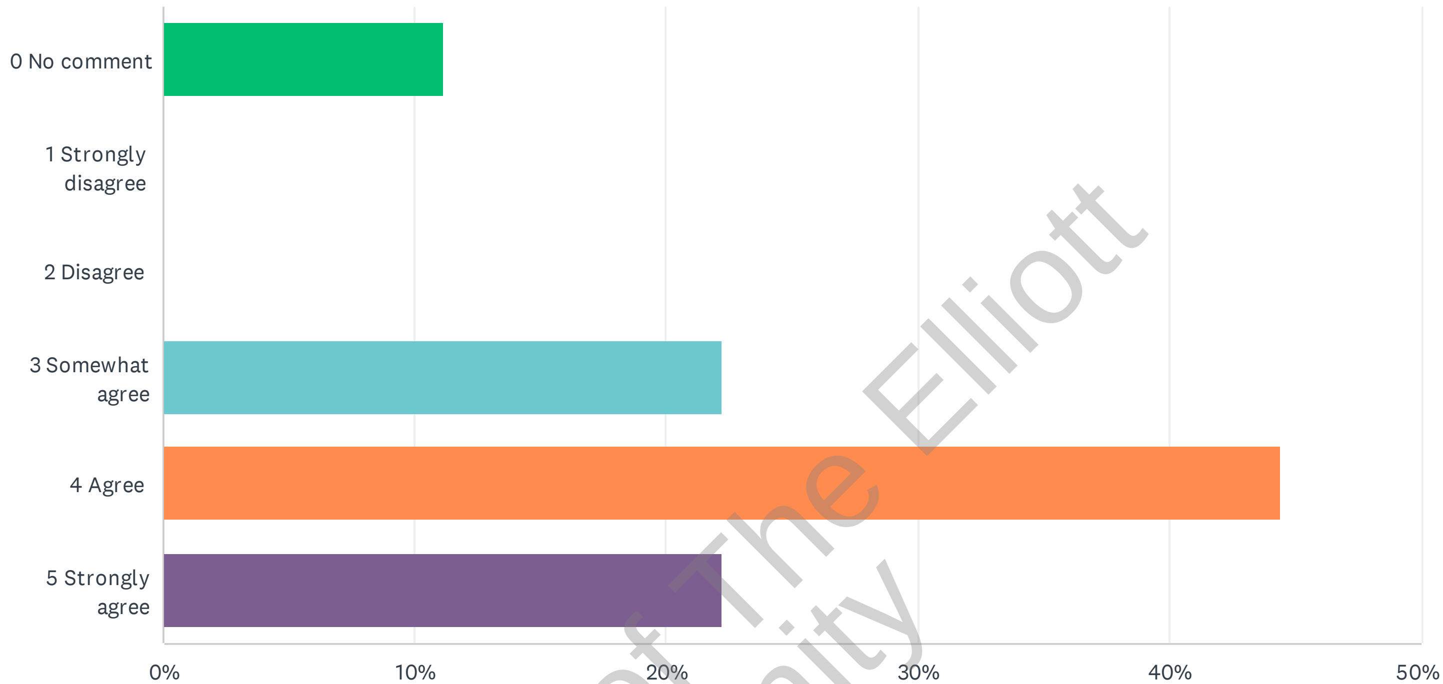
Answered: 9 Skipped: 0



ANSWER CHOICES	RESPONSES	
0 No comment	11.11%	1
1 Strongly disagree	0.00%	0
2 Disagree	11.11%	1
3 Somewhat agree	11.11%	1
4 Agree	33.33%	3
5 Strongly agree	33.33%	3
TOTAL		9

Q31 The Board understands and considers the diversity of its residents and the community when making decisions.

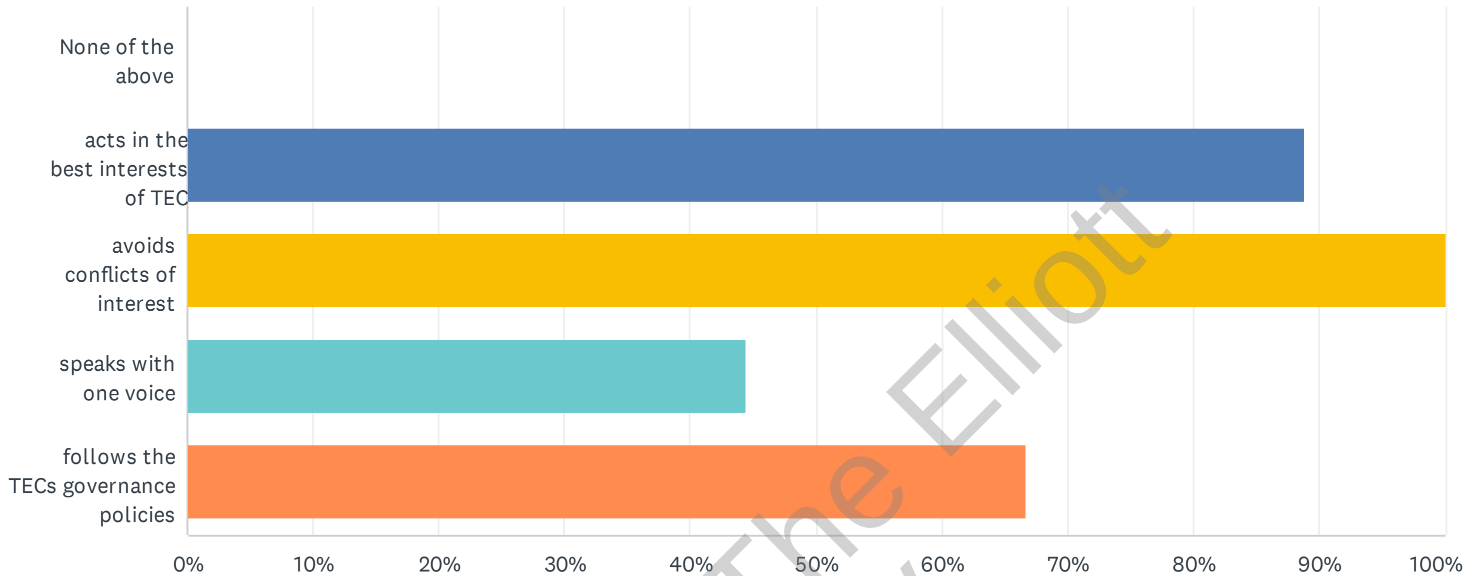
Answered: 9 Skipped: 0



ANSWER CHOICES	RESPONSES	
0 No comment	11.11%	1
1 Strongly disagree	0.00%	0
2 Disagree	0.00%	0
3 Somewhat agree	22.22%	2
4 Agree	44.44%	4
5 Strongly agree	22.22%	2
TOTAL		9

Q32 Trustees understand their fiduciary obligations and the Board (please check all that apply):

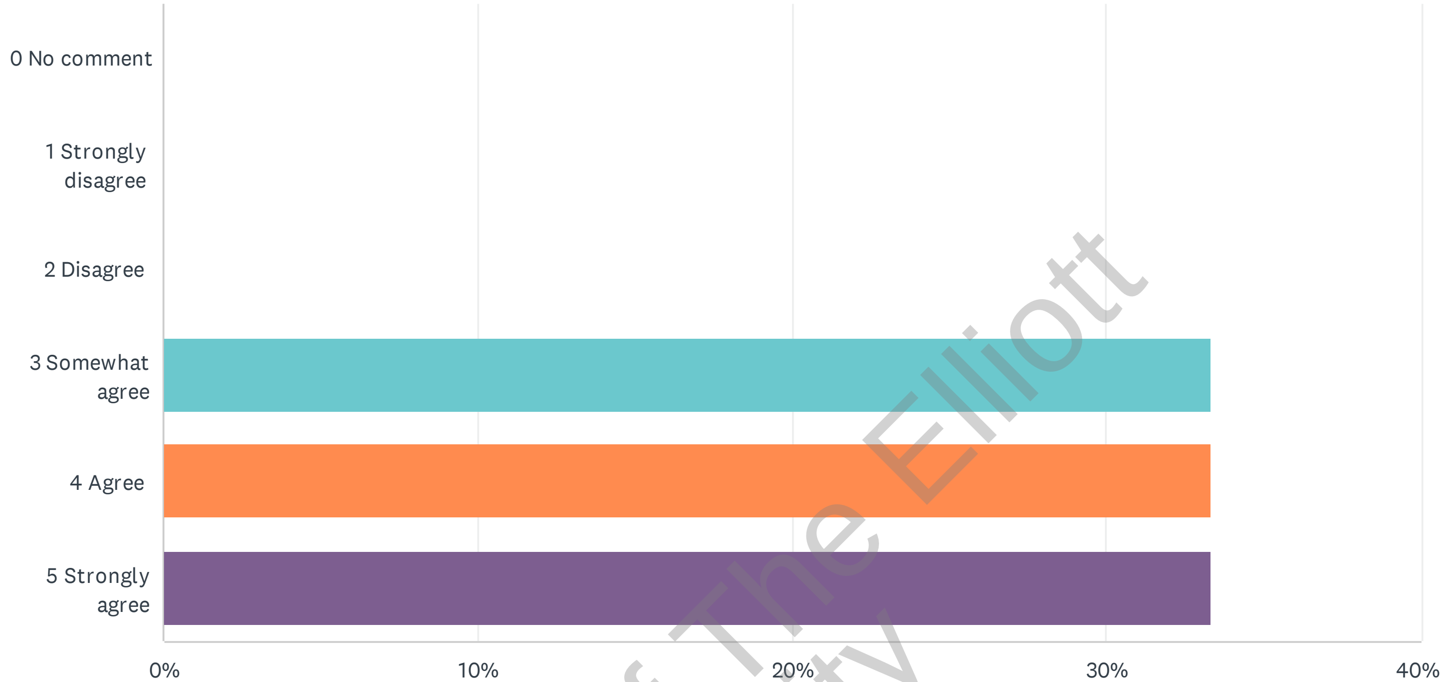
Answered: 9 Skipped: 0



ANSWER CHOICES	RESPONSES	
None of the above	0.00%	0
acts in the best interests of TEC	88.89%	8
avoids conflicts of interest	100.00%	9
speaks with one voice	44.44%	4
follows the TECs governance policies	66.67%	6
Total Respondents: 9		

Q33 Board members work well together.

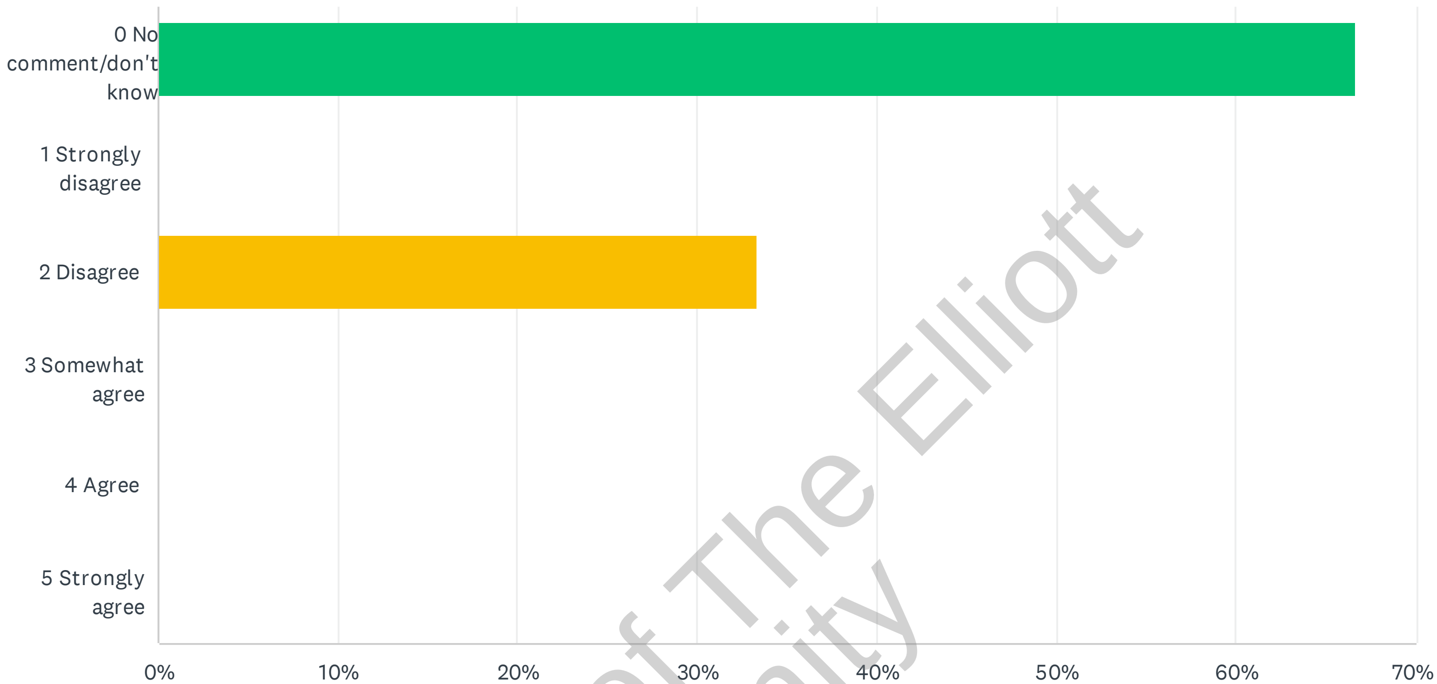
Answered: 9 Skipped: 0



ANSWER CHOICES	RESPONSES	
0 No comment	0.00%	0
1 Strongly disagree	0.00%	0
2 Disagree	0.00%	0
3 Somewhat agree	33.33%	3
4 Agree	33.33%	3
5 Strongly agree	33.33%	3
TOTAL		9

Q34 Departing Board members participate in an exit interview to support continuous improvement of the TEC and its governance.

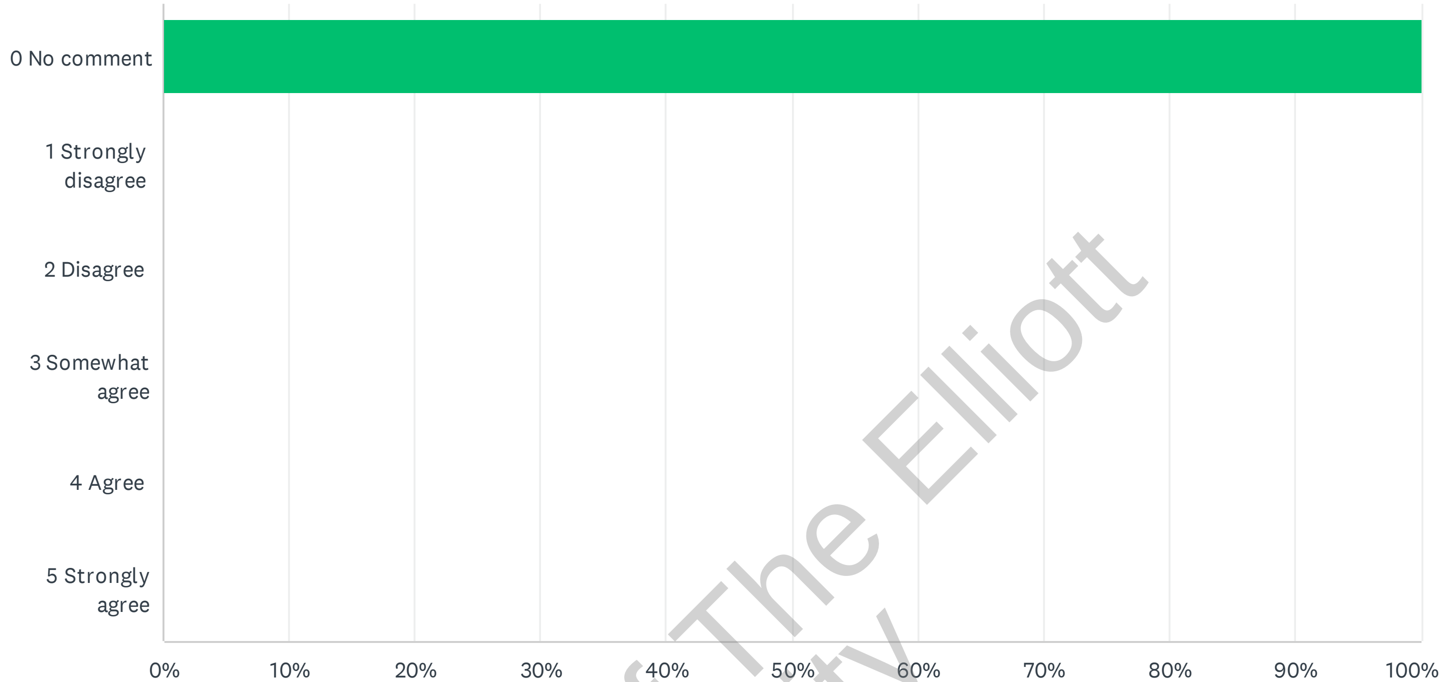
Answered: 9 Skipped: 0



ANSWER CHOICES	RESPONSES	
0 No comment/don't know	66.67%	6
1 Strongly disagree	0.00%	0
2 Disagree	33.33%	3
3 Somewhat agree	0.00%	0
4 Agree	0.00%	0
5 Strongly agree	0.00%	0
TOTAL		9

Q35 Comments on Board composition and quality.

Answered: 9 Skipped: 0

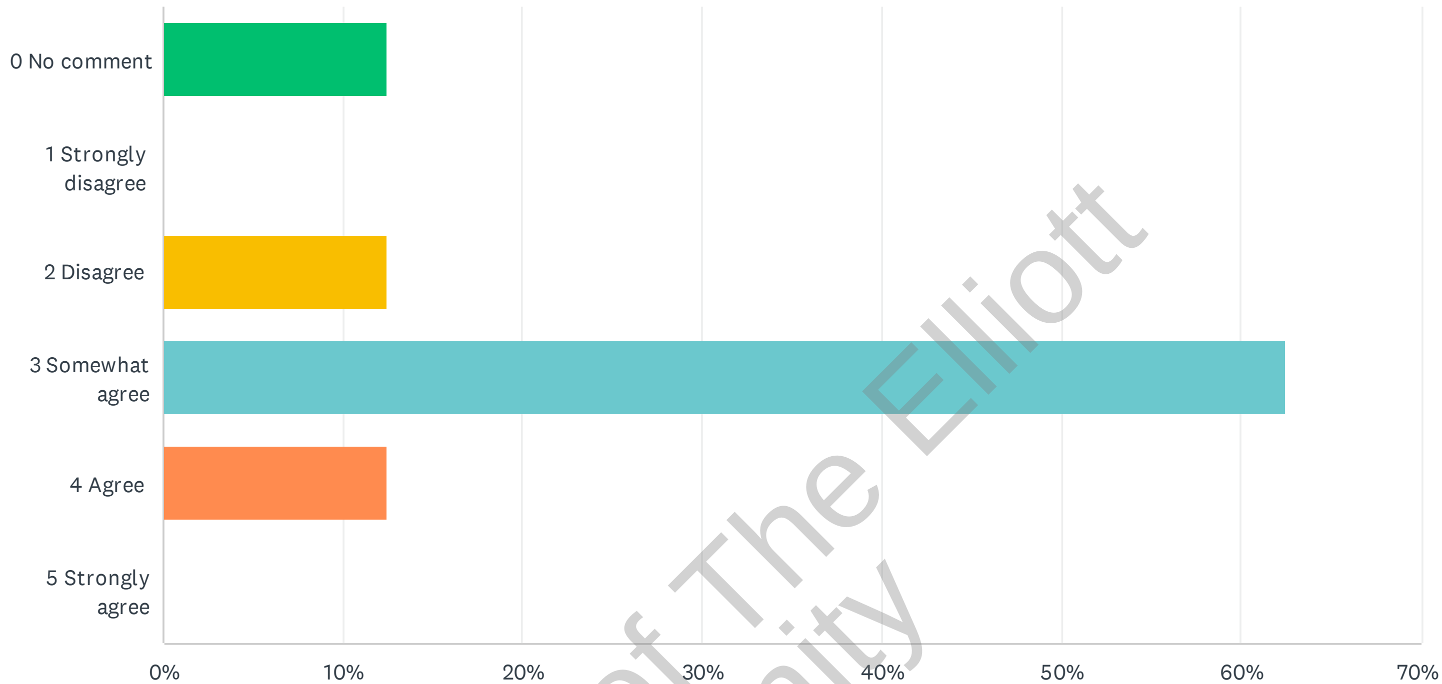


ANSWER CHOICES	RESPONSES	
0 No comment	100.00%	9
1 Strongly disagree	0.00%	0
2 Disagree	0.00%	0
3 Somewhat agree	0.00%	0
4 Agree	0.00%	0
5 Strongly agree	0.00%	0
TOTAL		9

#	COMMENTS	DATE
1	I worry what will happen when we lose David!	6/17/2026 4:52 PM
2	I think the Board represents a range of skills and competencies and works well together.	5/7/2026 12:30 PM

Q36 New Trustees receive adequate orientation to prepare to contribute effectively to the Board.

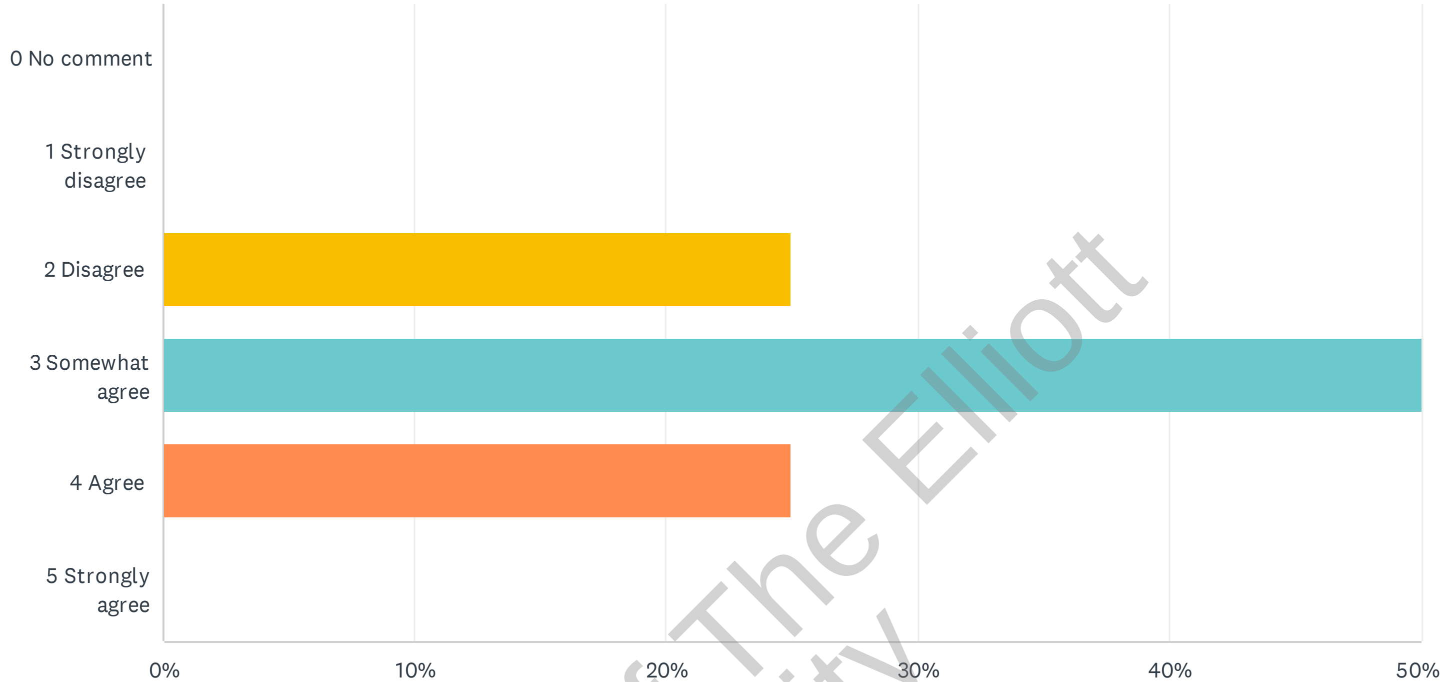
Answered: 8 Skipped: 1



ANSWER CHOICES	RESPONSES	
0 No comment	12.50%	1
1 Strongly disagree	0.00%	0
2 Disagree	12.50%	1
3 Somewhat agree	62.50%	5
4 Agree	12.50%	1
5 Strongly agree	0.00%	0
TOTAL		8

Q37 The Board participates in ongoing education on relevant topics.

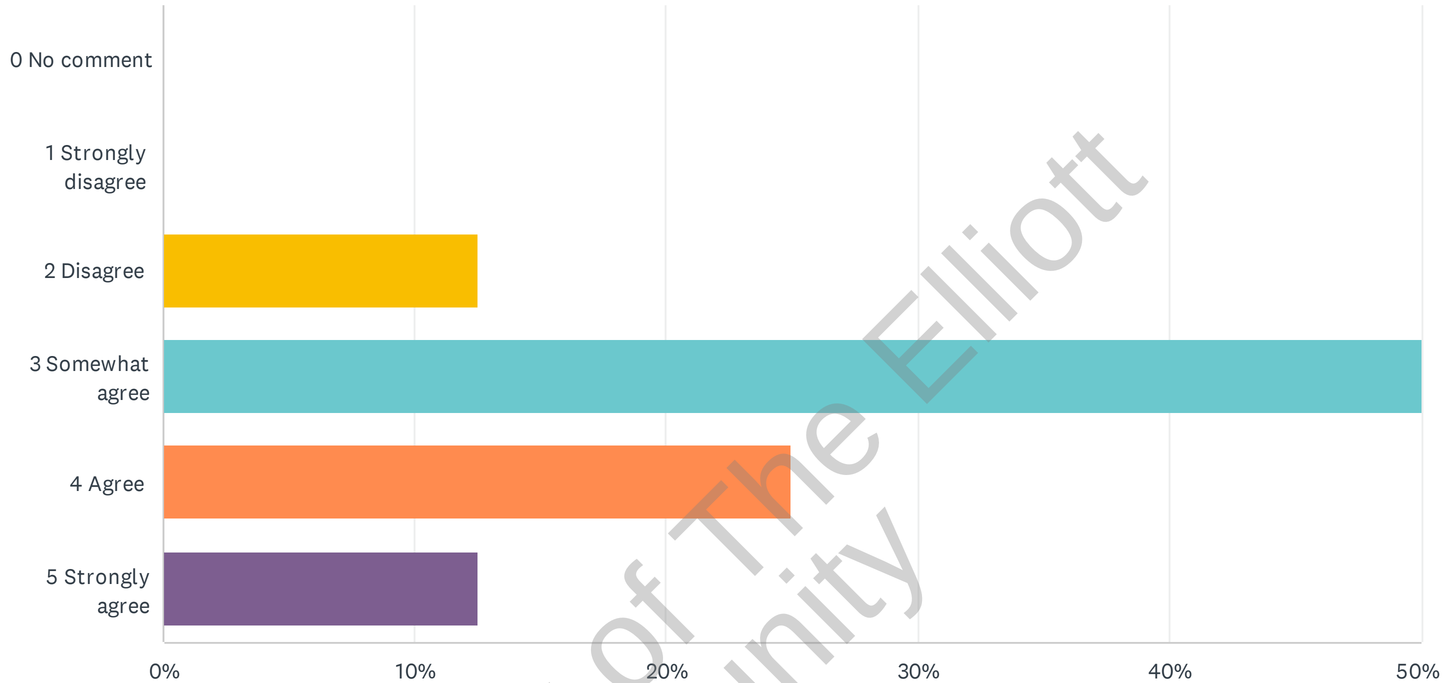
Answered: 8 Skipped: 1



ANSWER CHOICES	RESPONSES	
0 No comment	0.00%	0
1 Strongly disagree	0.00%	0
2 Disagree	25.00%	2
3 Somewhat agree	50.00%	4
4 Agree	25.00%	2
5 Strongly agree	0.00%	0
TOTAL		8

Q38 The Board has sufficient opportunities to consider critical issues in more depth from time to time (retreats, generative discussions at regular meetings).

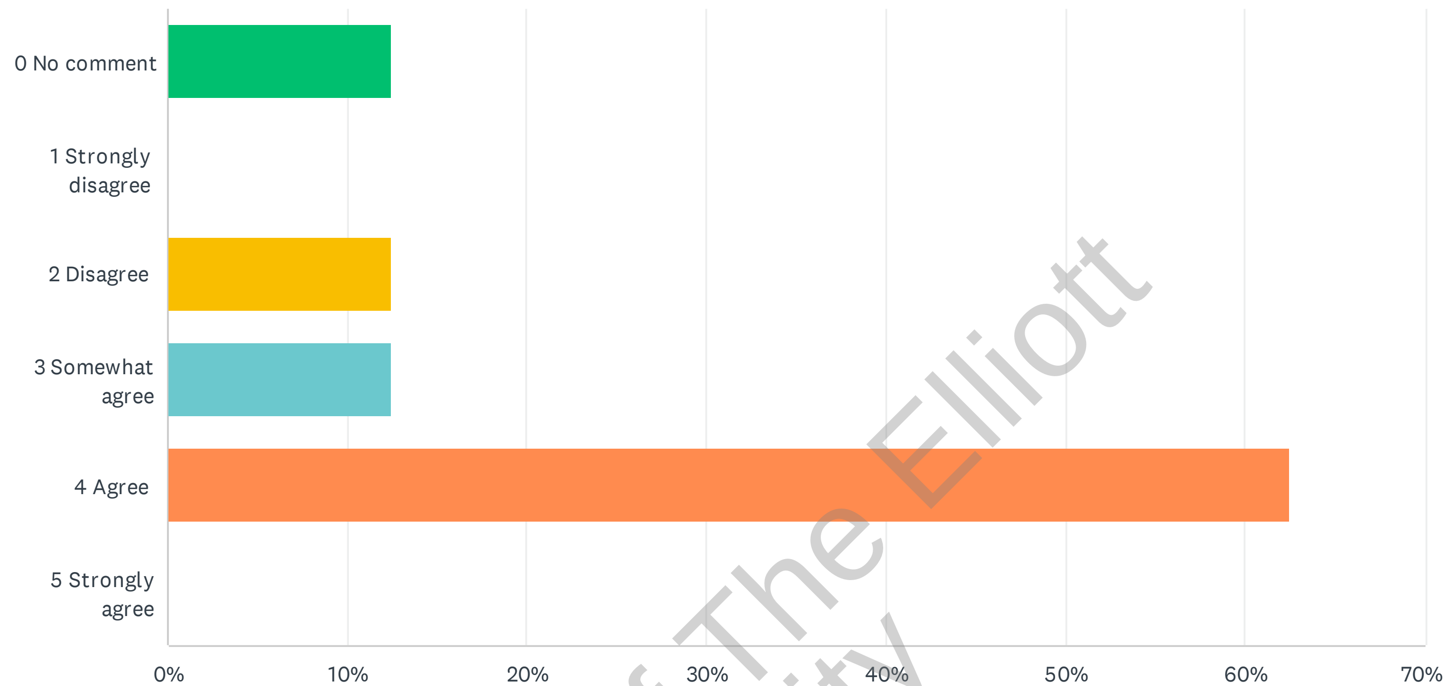
Answered: 8 Skipped: 1



ANSWER CHOICES	RESPONSES	
0 No comment	0.00%	0
1 Strongly disagree	0.00%	0
2 Disagree	12.50%	1
3 Somewhat agree	50.00%	4
4 Agree	25.00%	2
5 Strongly agree	12.50%	1
TOTAL		8

Q39 Committee terms of reference are periodically reviewed.

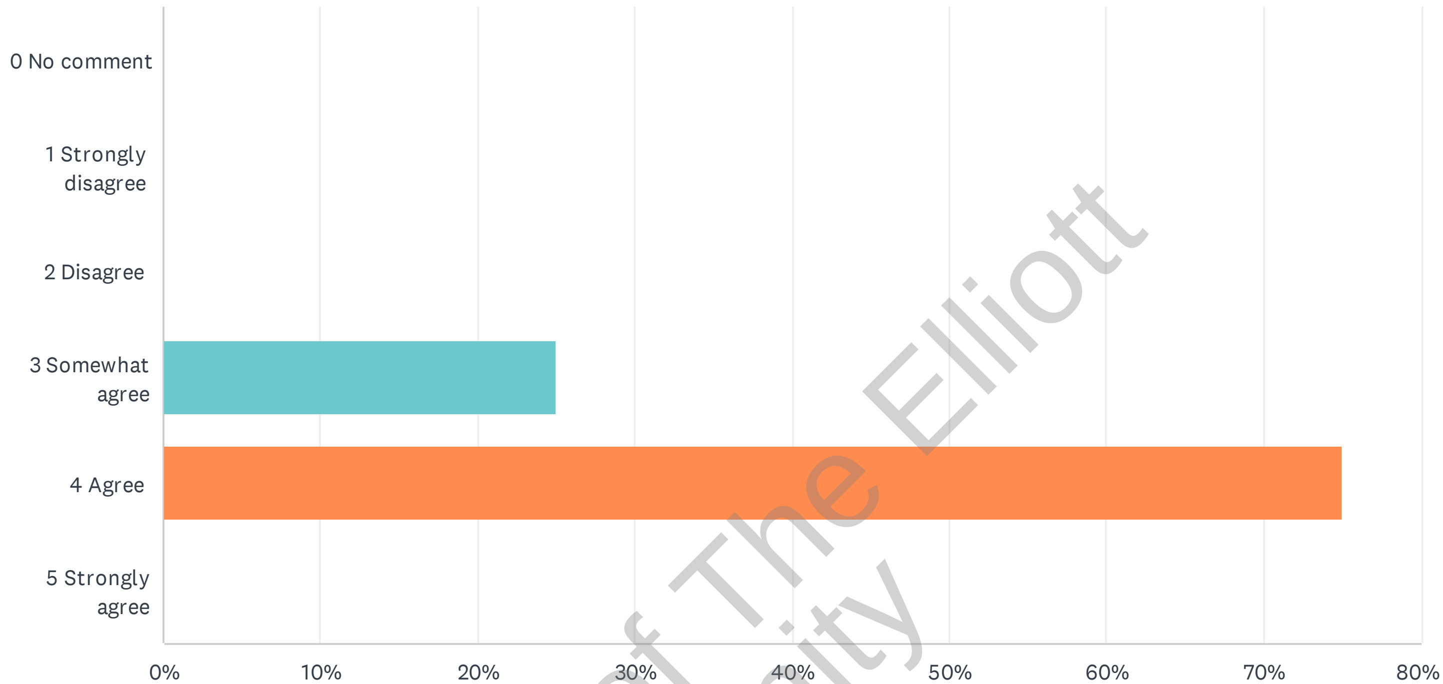
Answered: 8 Skipped: 1



ANSWER CHOICES	RESPONSES	
0 No comment	12.50%	1
1 Strongly disagree	0.00%	0
2 Disagree	12.50%	1
3 Somewhat agree	12.50%	1
4 Agree	62.50%	5
5 Strongly agree	0.00%	0
TOTAL		8

Q40 The Board has the right committees (Corporate Affairs Committee, Governance and Nominating).

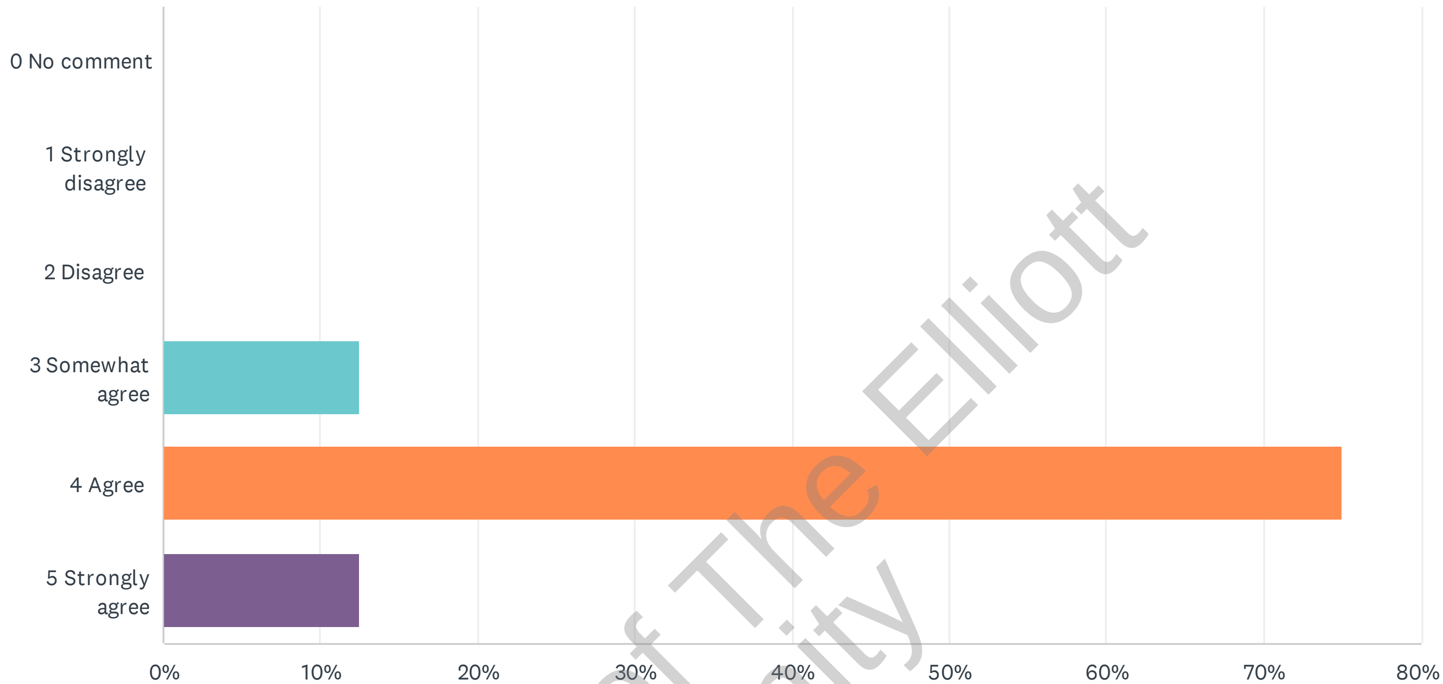
Answered: 8 Skipped: 1



ANSWER CHOICES	RESPONSES	
0 No comment	0.00%	0
1 Strongly disagree	0.00%	0
2 Disagree	0.00%	0
3 Somewhat agree	25.00%	2
4 Agree	75.00%	6
5 Strongly agree	0.00%	0
TOTAL		8

Q41 The Board has the appropriate number of committees to support its work.

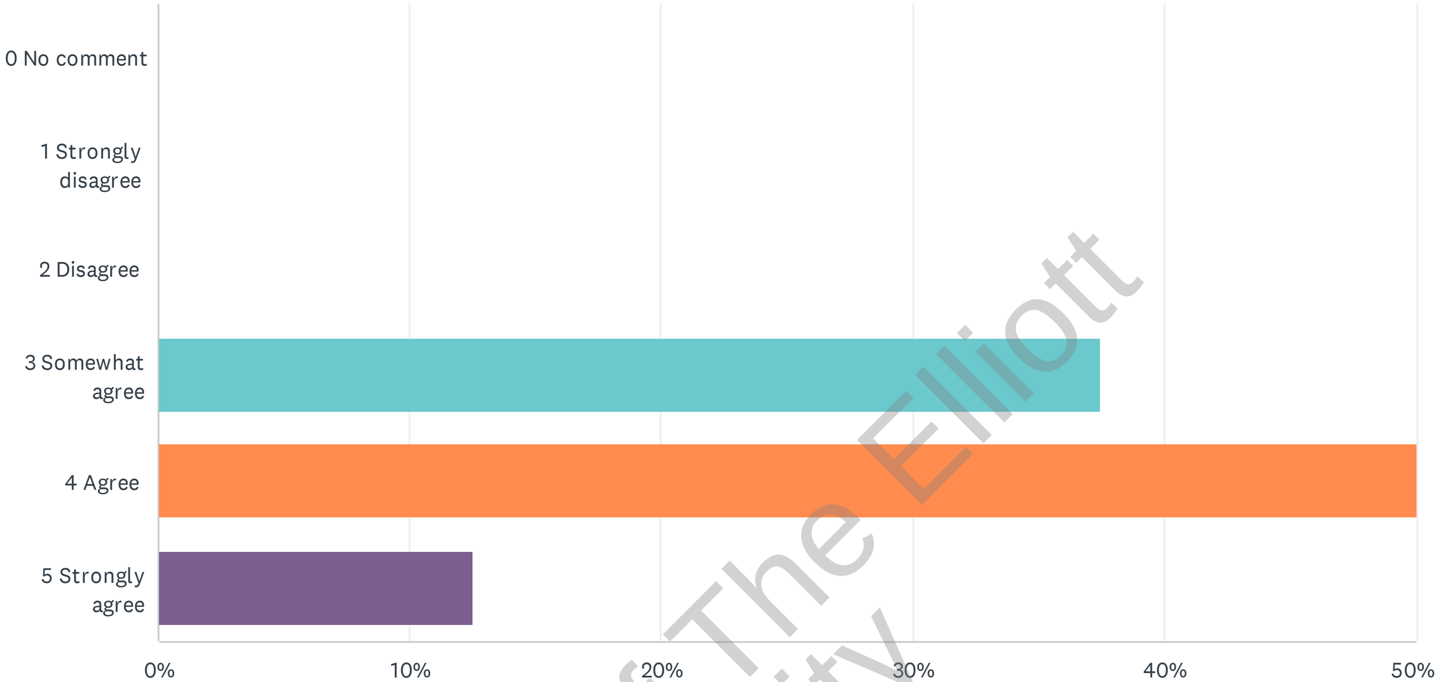
Answered: 8 Skipped: 1



ANSWER CHOICES	RESPONSES	
0 No comment	0.00%	0
1 Strongly disagree	0.00%	0
2 Disagree	0.00%	0
3 Somewhat agree	12.50%	1
4 Agree	75.00%	6
5 Strongly agree	12.50%	1
TOTAL		8

Q42 Committee members are selected based on skill and experience.

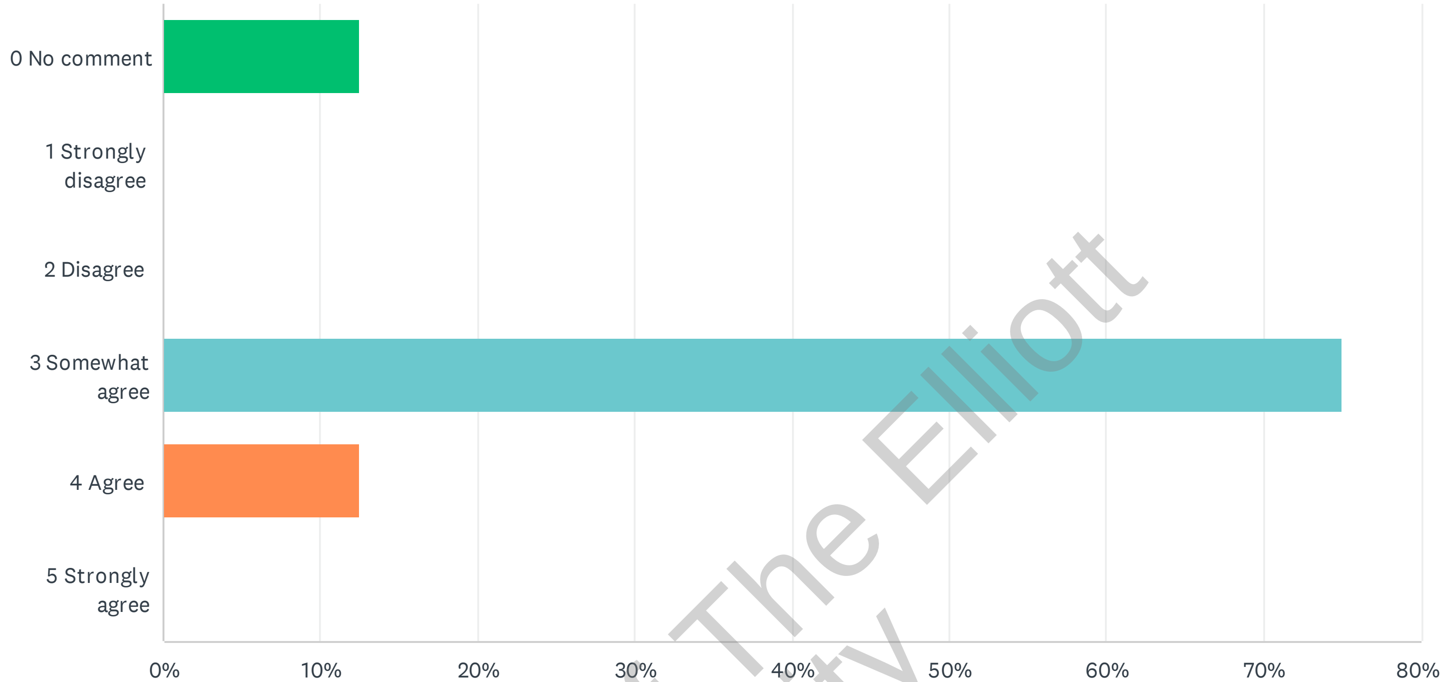
Answered: 8 Skipped: 1



ANSWER CHOICES	RESPONSES	
0 No comment	0.00%	0
1 Strongly disagree	0.00%	0
2 Disagree	0.00%	0
3 Somewhat agree	37.50%	3
4 Agree	50.00%	4
5 Strongly agree	12.50%	1
TOTAL		8

Q43 New committee members receive appropriate orientation.

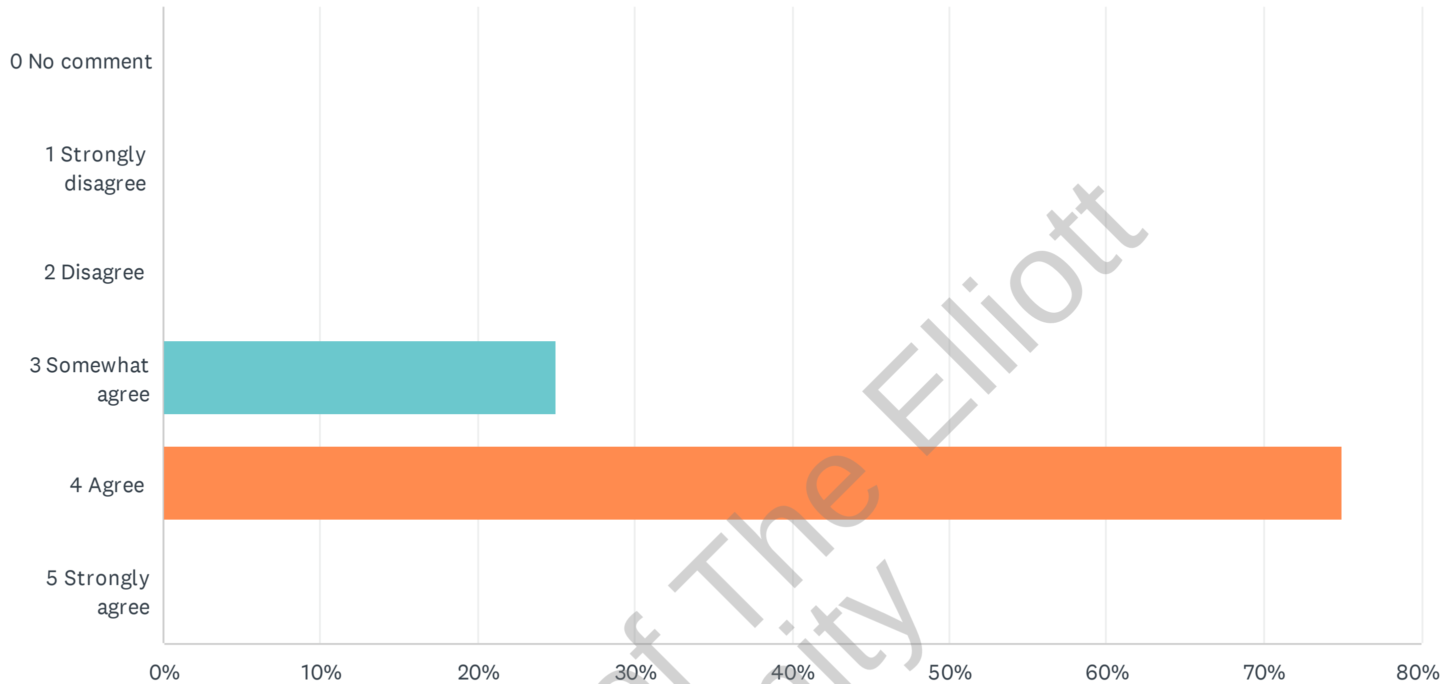
Answered: 8 Skipped: 1



ANSWER CHOICES	RESPONSES	
0 No comment	12.50%	1
1 Strongly disagree	0.00%	0
2 Disagree	0.00%	0
3 Somewhat agree	75.00%	6
4 Agree	12.50%	1
5 Strongly agree	0.00%	0
TOTAL		8

Q44 Committee work plans are established annually and align with the work of the Board.

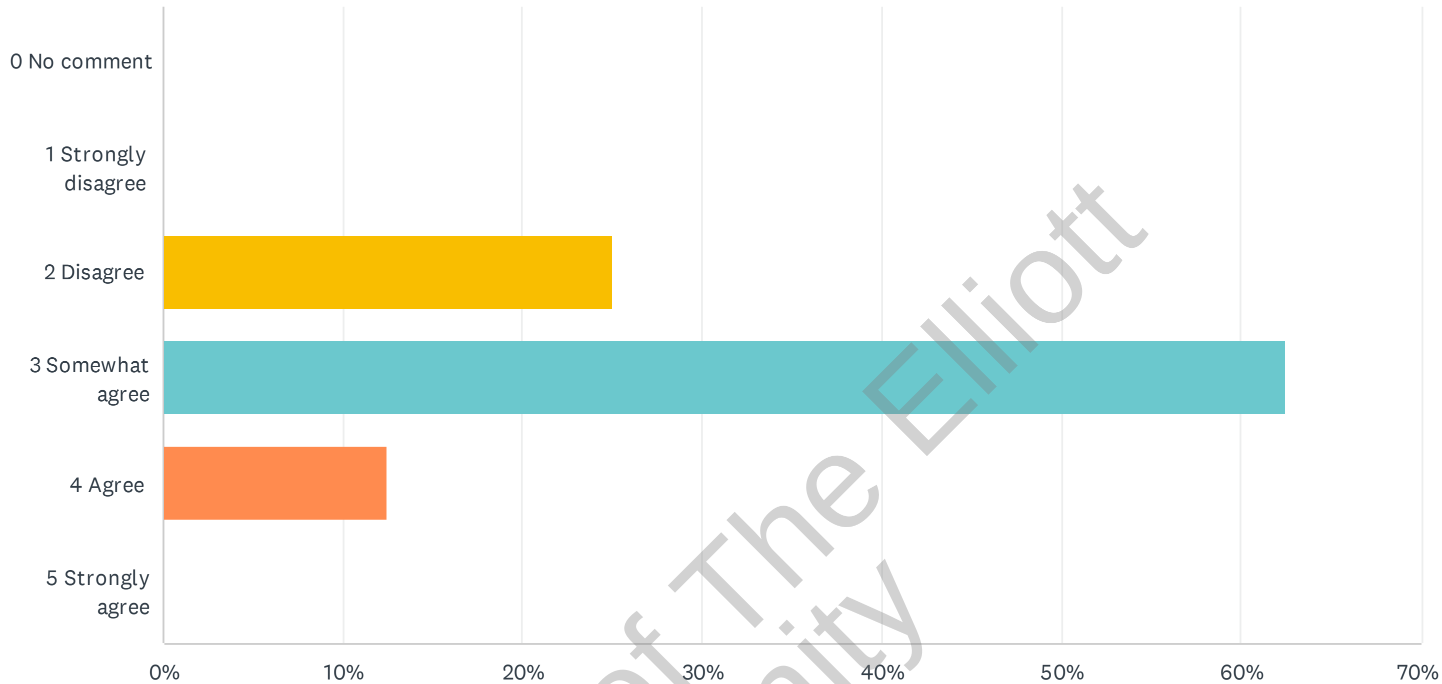
Answered: 8 Skipped: 1



ANSWER CHOICES	RESPONSES	
0 No comment	0.00%	0
1 Strongly disagree	0.00%	0
2 Disagree	0.00%	0
3 Somewhat agree	25.00%	2
4 Agree	75.00%	6
5 Strongly agree	0.00%	0
TOTAL		8

Q45 Committees have regular, generative discussions on matters relating to their responsibilities.

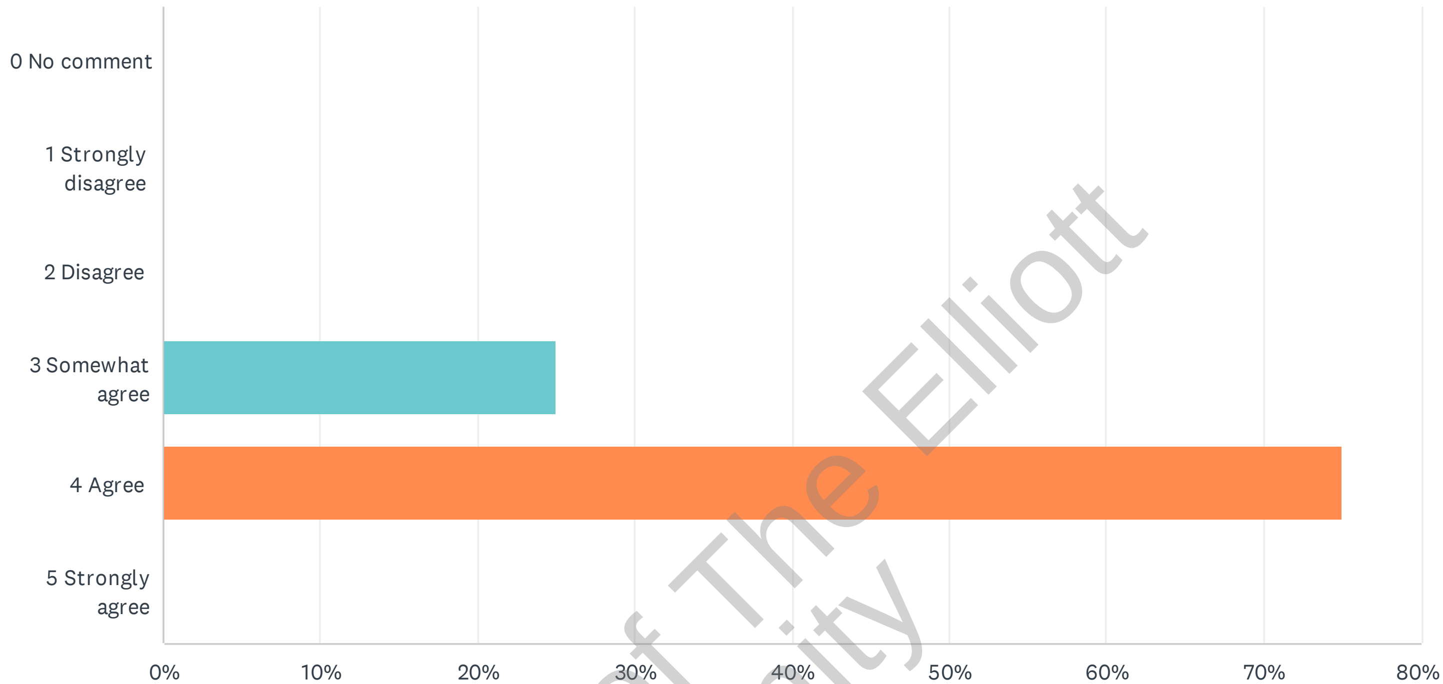
Answered: 8 Skipped: 1



ANSWER CHOICES	RESPONSES	
0 No comment	0.00%	0
1 Strongly disagree	0.00%	0
2 Disagree	25.00%	2
3 Somewhat agree	62.50%	5
4 Agree	12.50%	1
5 Strongly agree	0.00%	0
TOTAL		8

Q46 Committee reports are timely and effective and provide necessary information to the Board.

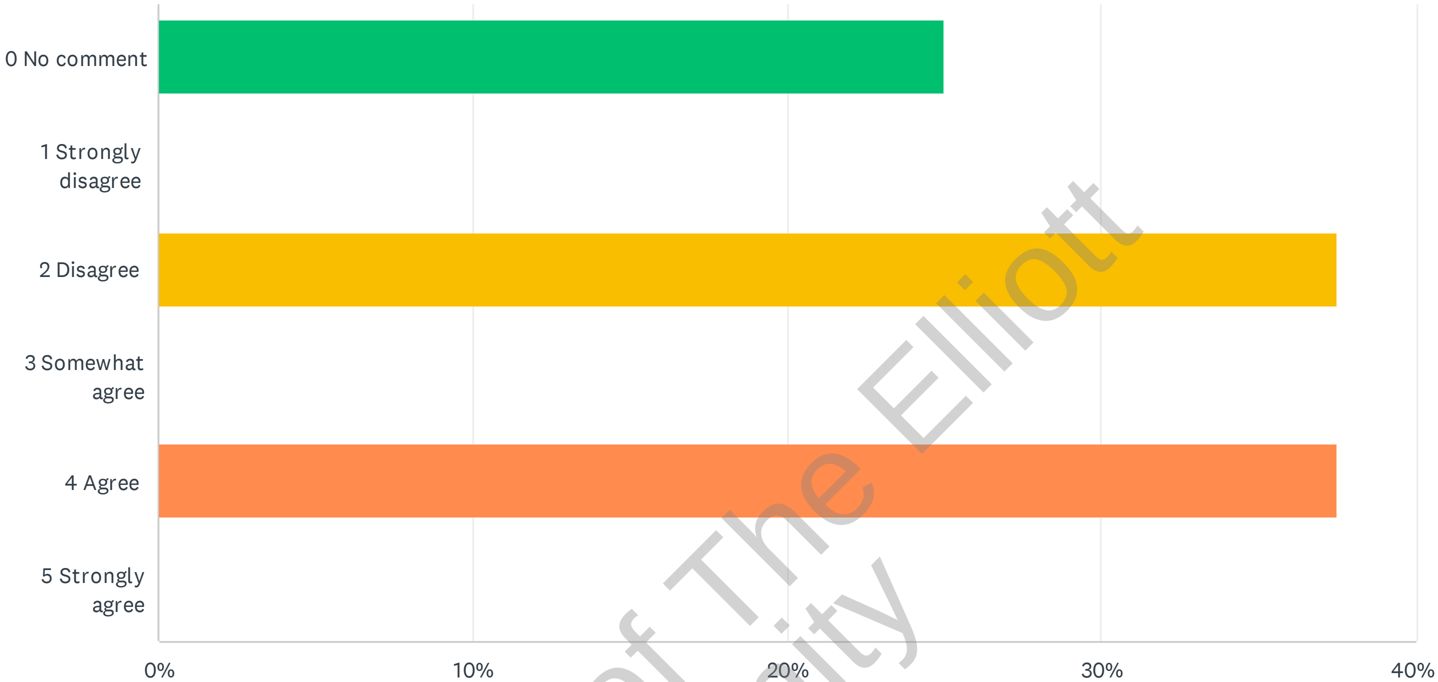
Answered: 8 Skipped: 1



ANSWER CHOICES	RESPONSES	
0 No comment	0.00%	0
1 Strongly disagree	0.00%	0
2 Disagree	0.00%	0
3 Somewhat agree	25.00%	2
4 Agree	75.00%	6
5 Strongly agree	0.00%	0
TOTAL		8

Q47 Committees evaluate their own performance (including that of the Chair) on an annual basis, and results are acted upon as required.

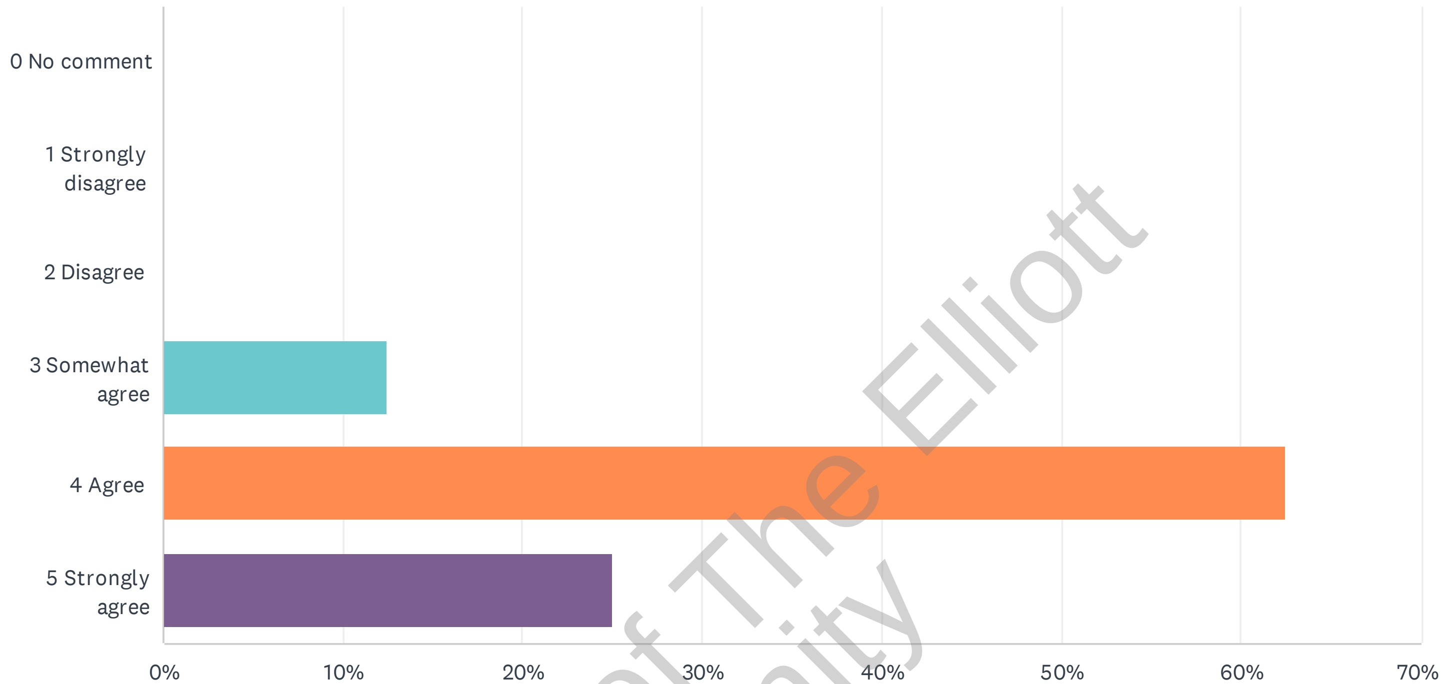
Answered: 8 Skipped: 1



ANSWER CHOICES	RESPONSES	
0 No comment	25.00%	2
1 Strongly disagree	0.00%	0
2 Disagree	37.50%	3
3 Somewhat agree	0.00%	0
4 Agree	37.50%	3
5 Strongly agree	0.00%	0
TOTAL		8

Q48 The Board respects the work of its committees and does not redo committee work.

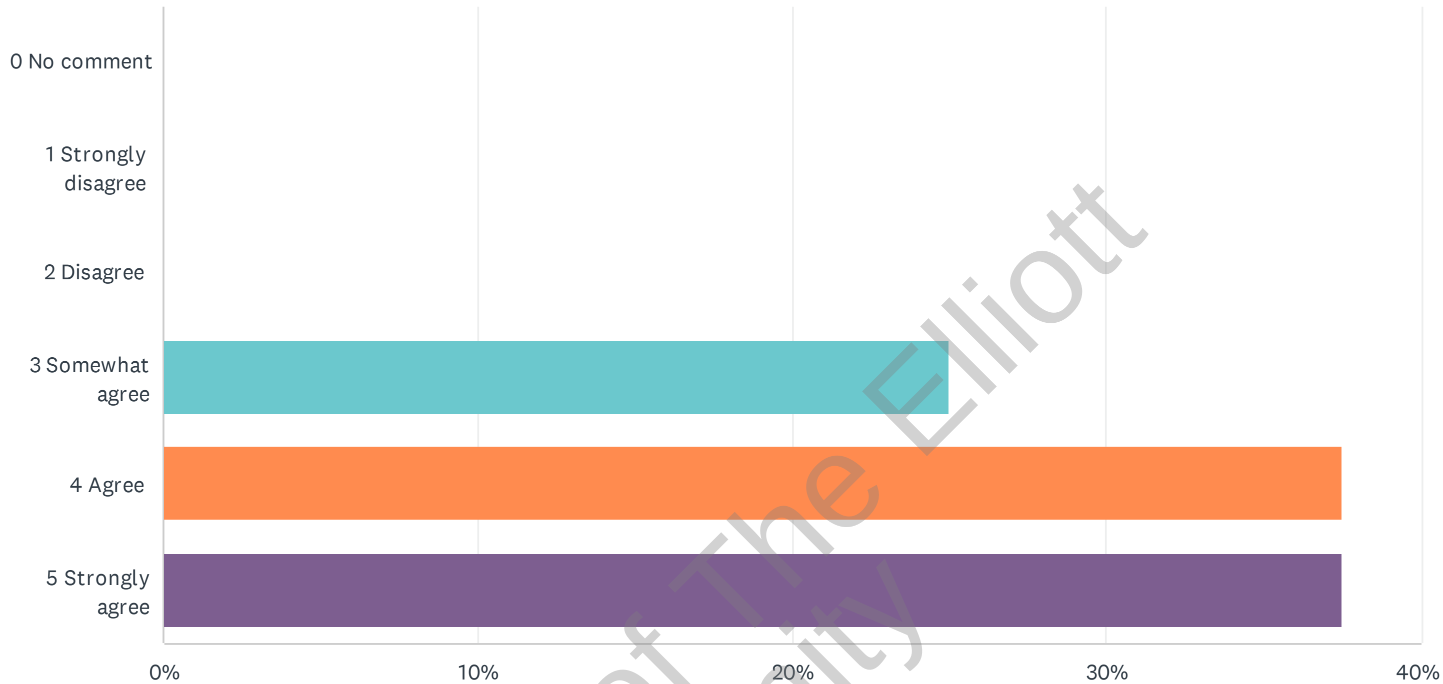
Answered: 8 Skipped: 1



ANSWER CHOICES	RESPONSES	
0 No comment	0.00%	0
1 Strongly disagree	0.00%	0
2 Disagree	0.00%	0
3 Somewhat agree	12.50%	1
4 Agree	62.50%	5
5 Strongly agree	25.00%	2
TOTAL		8

Q49 Board materials arrive sufficiently in advance so that Trustees can prepare properly for meetings.

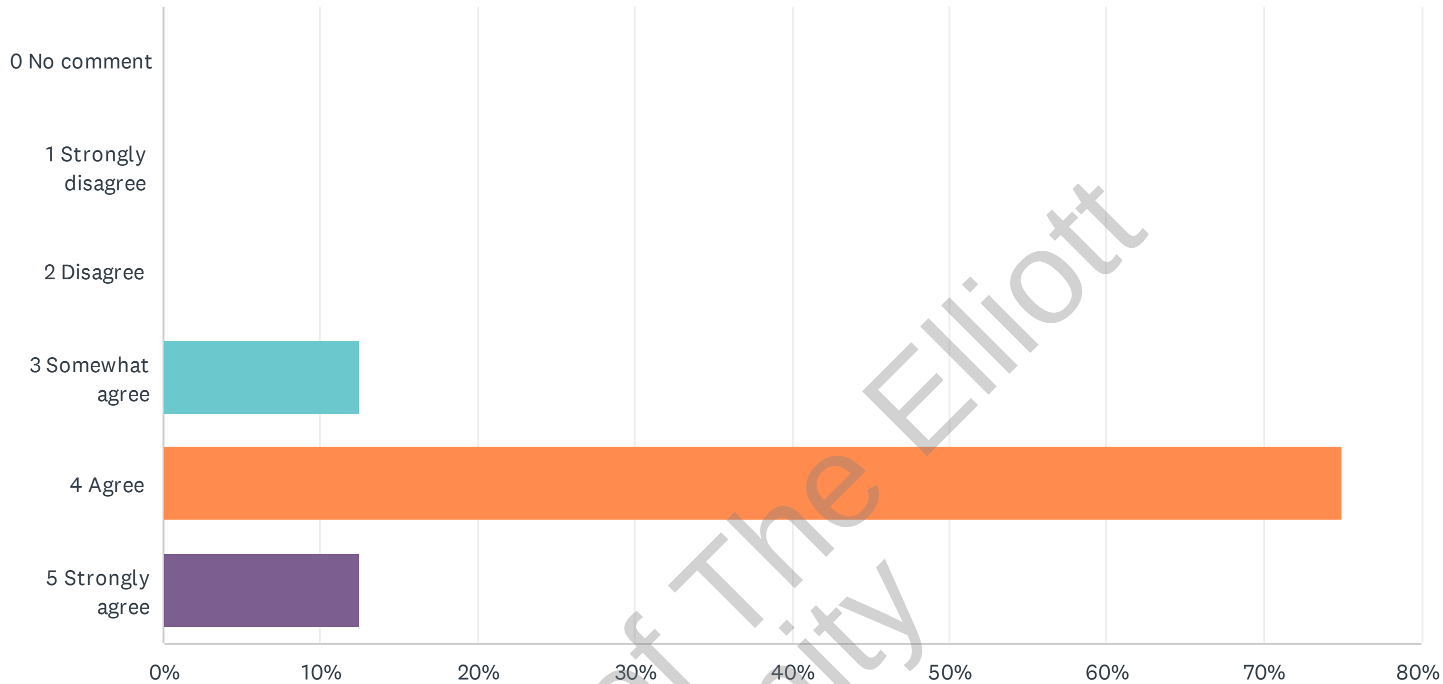
Answered: 8 Skipped: 1



ANSWER CHOICES	RESPONSES	
0 No comment	0.00%	0
1 Strongly disagree	0.00%	0
2 Disagree	0.00%	0
3 Somewhat agree	25.00%	2
4 Agree	37.50%	3
5 Strongly agree	37.50%	3
TOTAL		8

Q50 Board agendas focus on items that are within the Board's role and work plan.

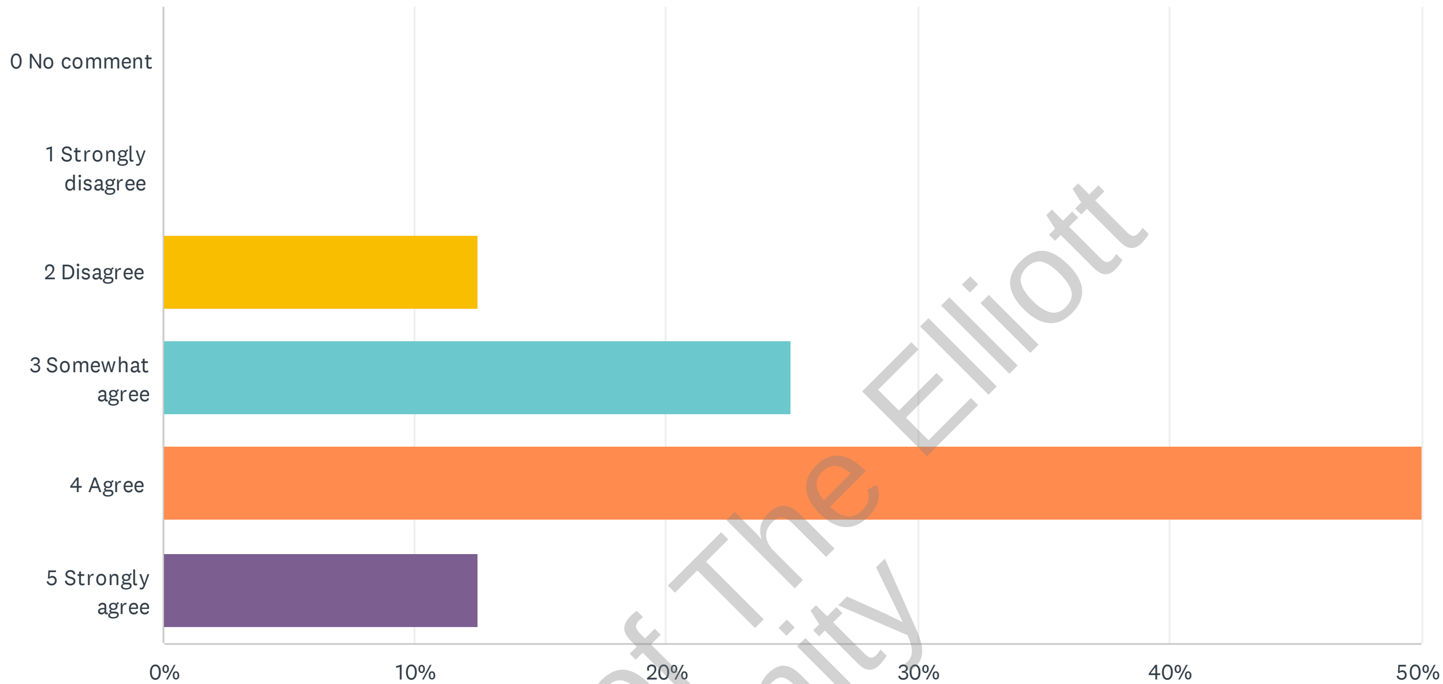
Answered: 8   Skipped: 1



ANSWER CHOICES	RESPONSES	
0 No comment	0.00%	0
1 Strongly disagree	0.00%	0
2 Disagree	0.00%	0
3 Somewhat agree	12.50%	1
4 Agree	75.00%	6
5 Strongly agree	12.50%	1
TOTAL		8

Q51 Board materials adequately prepare Trustees to make governance decisions.

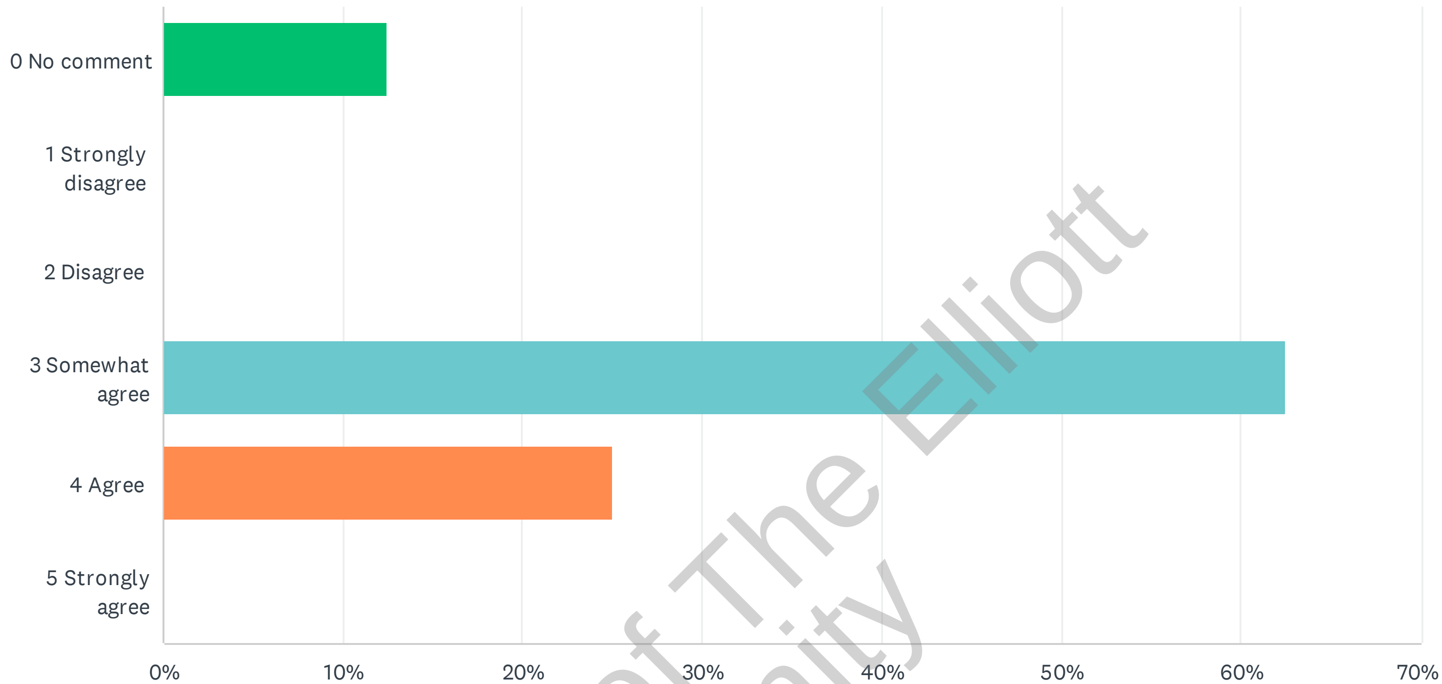
Answered: 8 Skipped: 1



ANSWER CHOICES	RESPONSES	
0 No comment	0.00%	0
1 Strongly disagree	0.00%	0
2 Disagree	12.50%	1
3 Somewhat agree	25.00%	2
4 Agree	50.00%	4
5 Strongly agree	12.50%	1
TOTAL		8

Q52 The Board balances its governance discussions between current matters and future issues.

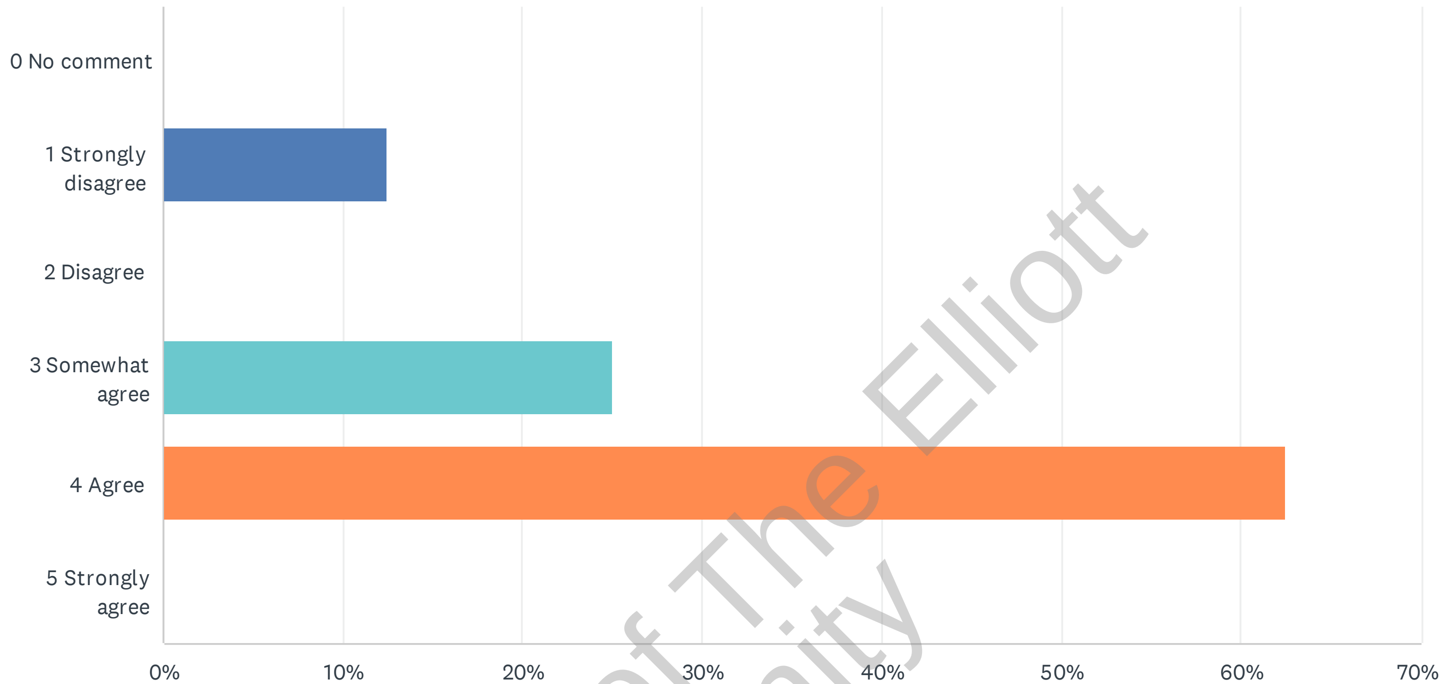
Answered: 8 Skipped: 1



ANSWER CHOICES	RESPONSES	
0 No comment	12.50%	1
1 Strongly disagree	0.00%	0
2 Disagree	0.00%	0
3 Somewhat agree	62.50%	5
4 Agree	25.00%	2
5 Strongly agree	0.00%	0
TOTAL		8

Q53 Meetings are structured so that there is sufficient time for discussion on decision items.

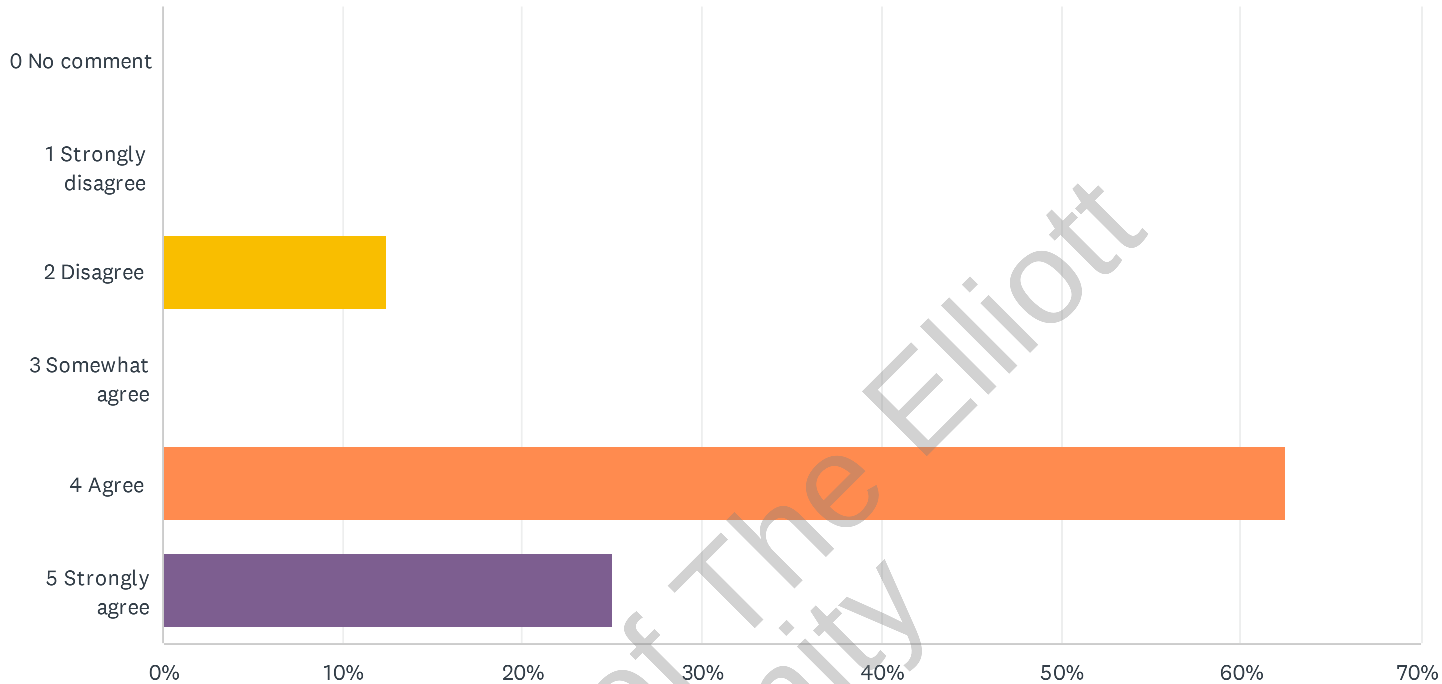
Answered: 8 Skipped: 1



ANSWER CHOICES	RESPONSES	
0 No comment	0.00%	0
1 Strongly disagree	12.50%	1
2 Disagree	0.00%	0
3 Somewhat agree	25.00%	2
4 Agree	62.50%	5
5 Strongly agree	0.00%	0
TOTAL		8

Q54 Closed meeting protocols are followed, and materials and topics are appropriate.

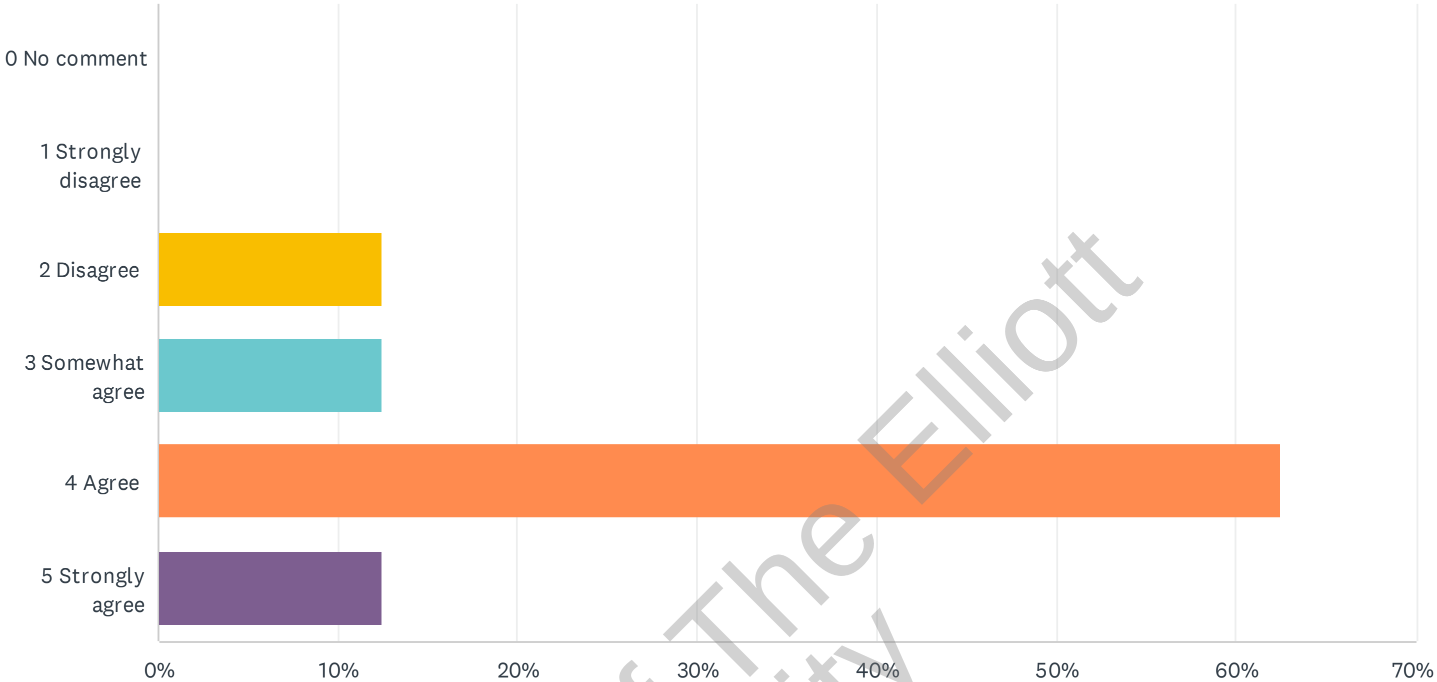
Answered: 8 Skipped: 1



ANSWER CHOICES	RESPONSES	
0 No comment	0.00%	0
1 Strongly disagree	0.00%	0
2 Disagree	12.50%	1
3 Somewhat agree	0.00%	0
4 Agree	62.50%	5
5 Strongly agree	25.00%	2
TOTAL		8

Q55 Minutes accurately reflect board discussions and decisions.

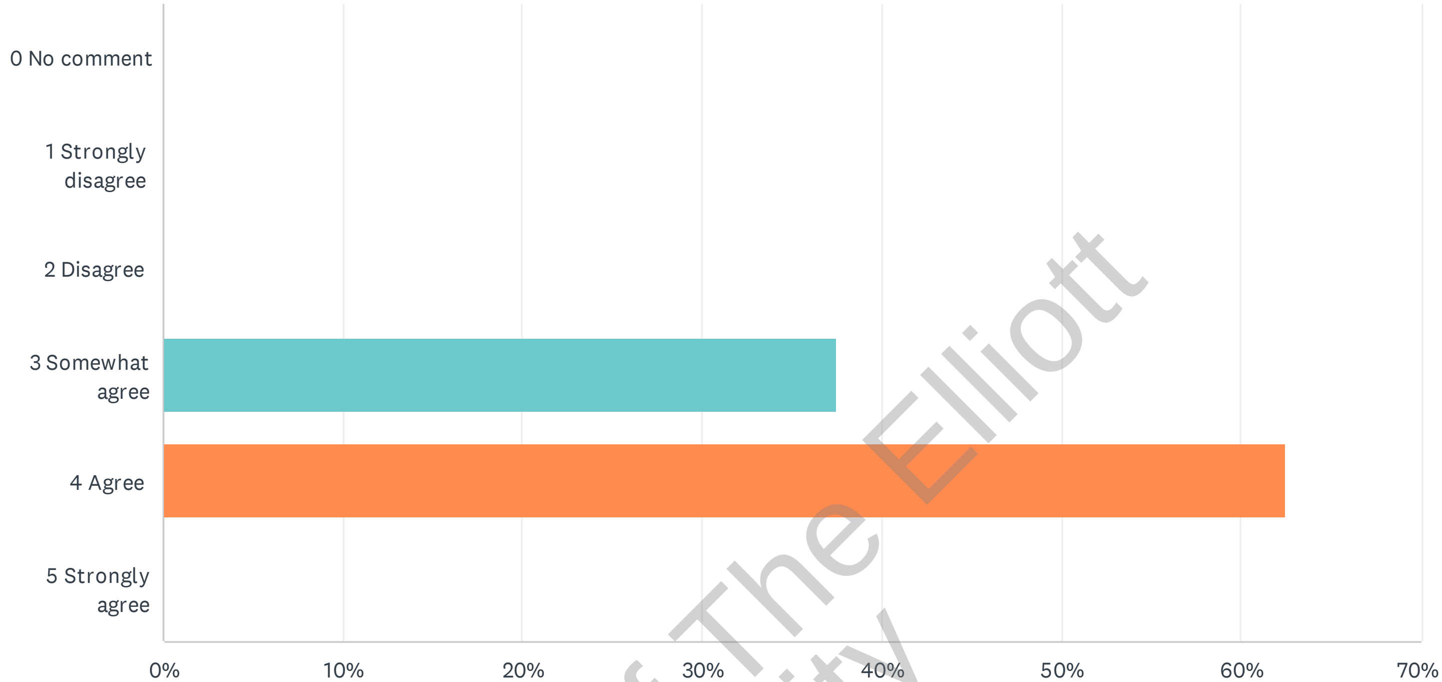
Answered: 8 Skipped: 1



ANSWER CHOICES	RESPONSES	
0 No comment	0.00%	0
1 Strongly disagree	0.00%	0
2 Disagree	12.50%	1
3 Somewhat agree	12.50%	1
4 Agree	62.50%	5
5 Strongly agree	12.50%	1
TOTAL		8

Q56 The Board meets the right number of times annually.

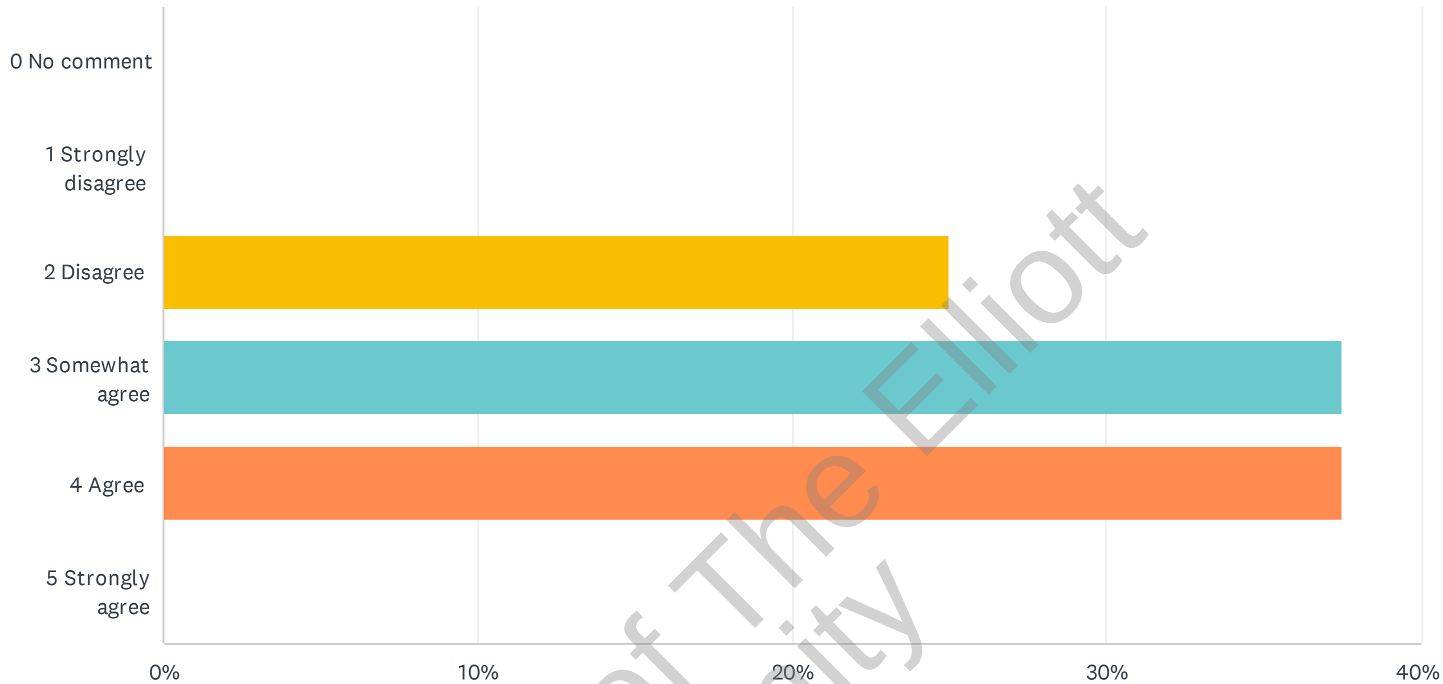
Answered: 8 Skipped: 1



ANSWER CHOICES	RESPONSES	
0 No comment	0.00%	0
1 Strongly disagree	0.00%	0
2 Disagree	0.00%	0
3 Somewhat agree	37.50%	3
4 Agree	62.50%	5
5 Strongly agree	0.00%	0
TOTAL		8

Q57 The Board's meetings without the CEO and the senior leadership focus on appropriate issues.

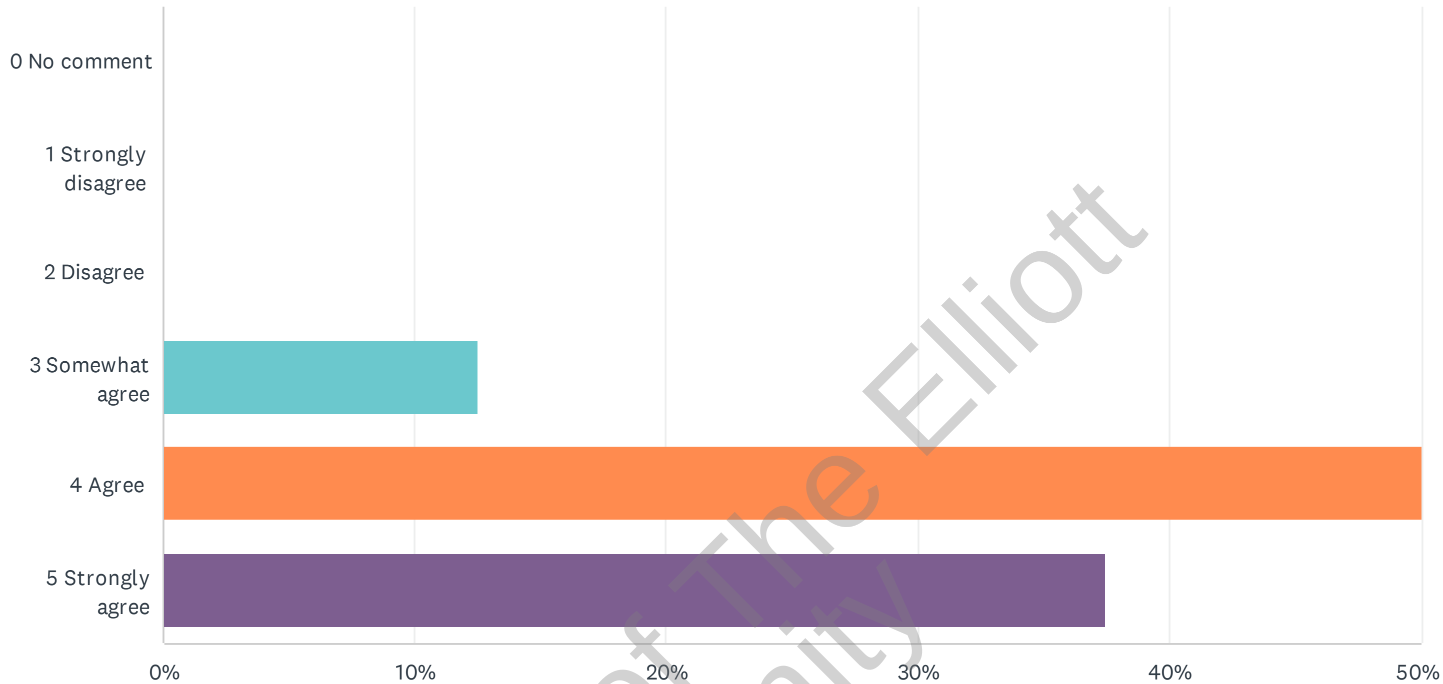
Answered: 8 Skipped: 1



ANSWER CHOICES	RESPONSES	
0 No comment	0.00%	0
1 Strongly disagree	0.00%	0
2 Disagree	25.00%	2
3 Somewhat agree	37.50%	3
4 Agree	37.50%	3
5 Strongly agree	0.00%	0
TOTAL		8

Q58 The Board Chair conducts the meeting in a way that moves the business of the Board forward.

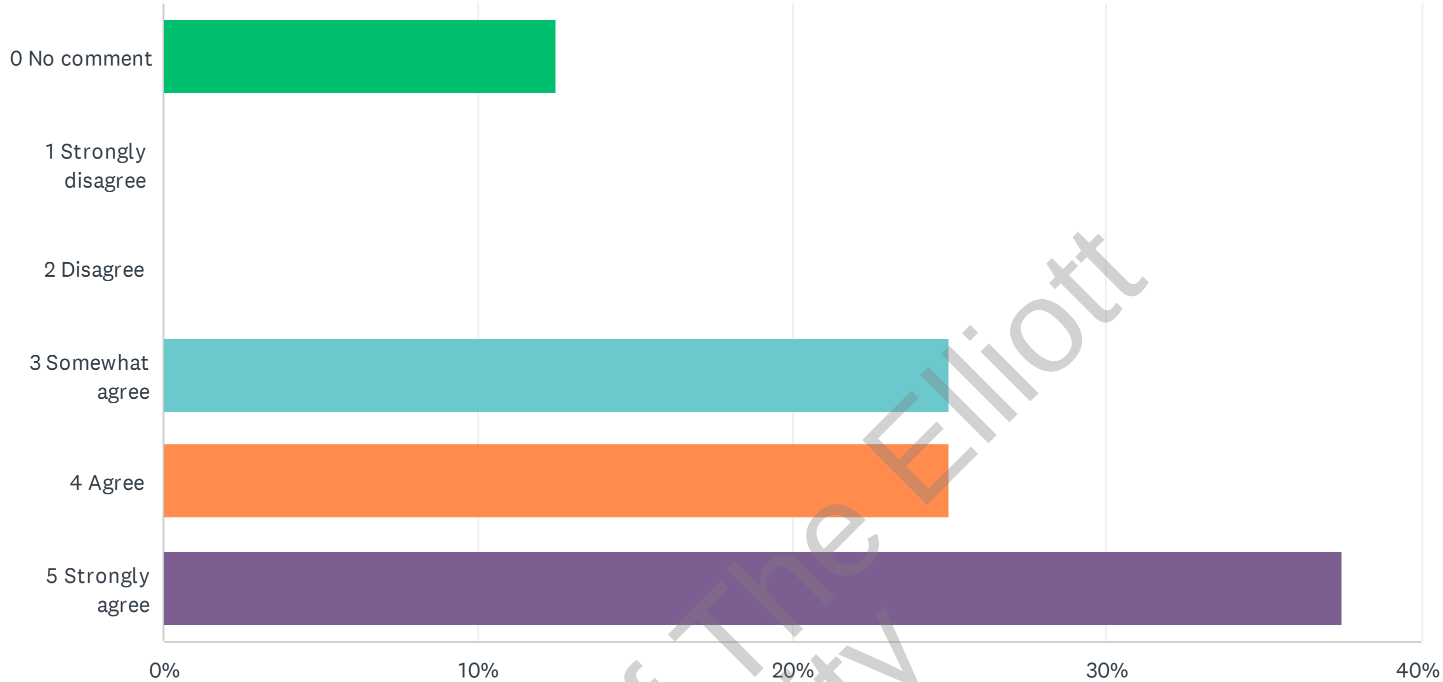
Answered: 8 Skipped: 1



ANSWER CHOICES	RESPONSES	
0 No comment	0.00%	0
1 Strongly disagree	0.00%	0
2 Disagree	0.00%	0
3 Somewhat agree	12.50%	1
4 Agree	50.00%	4
5 Strongly agree	37.50%	3
TOTAL		8

Q59 The Chair allows adequate time for discussion and debate.

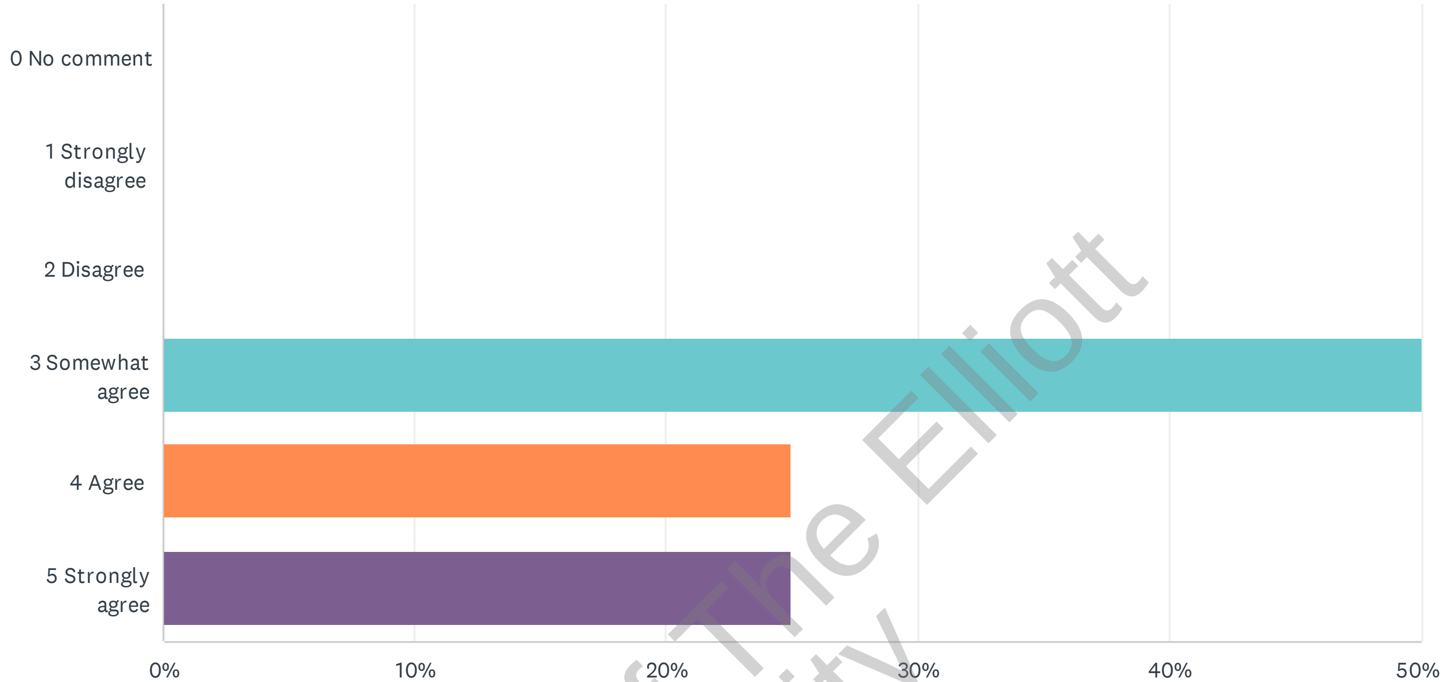
Answered: 8   Skipped: 1



ANSWER CHOICES	RESPONSES	
0 No comment	12.50%	1
1 Strongly disagree	0.00%	0
2 Disagree	0.00%	0
3 Somewhat agree	25.00%	2
4 Agree	25.00%	2
5 Strongly agree	37.50%	3
TOTAL		8

Q60 The Chair ensures that all sides of an issue are heard.

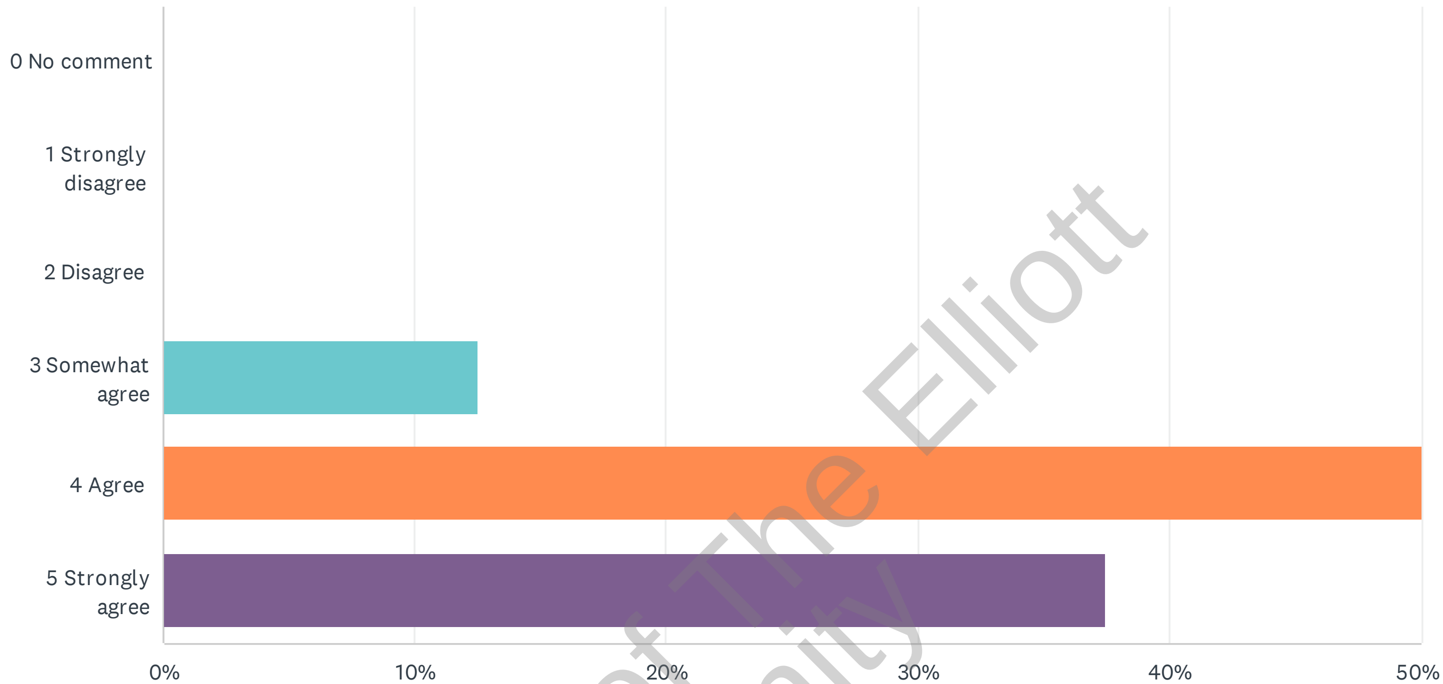
Answered: 8 Skipped: 1



ANSWER CHOICES	RESPONSES	
0 No comment	0.00%	0
1 Strongly disagree	0.00%	0
2 Disagree	0.00%	0
3 Somewhat agree	50.00%	4
4 Agree	25.00%	2
5 Strongly agree	25.00%	2
TOTAL		8

Q61 The Chair invests time in building relationships with the CEO, Trustees and Committee Chairs.

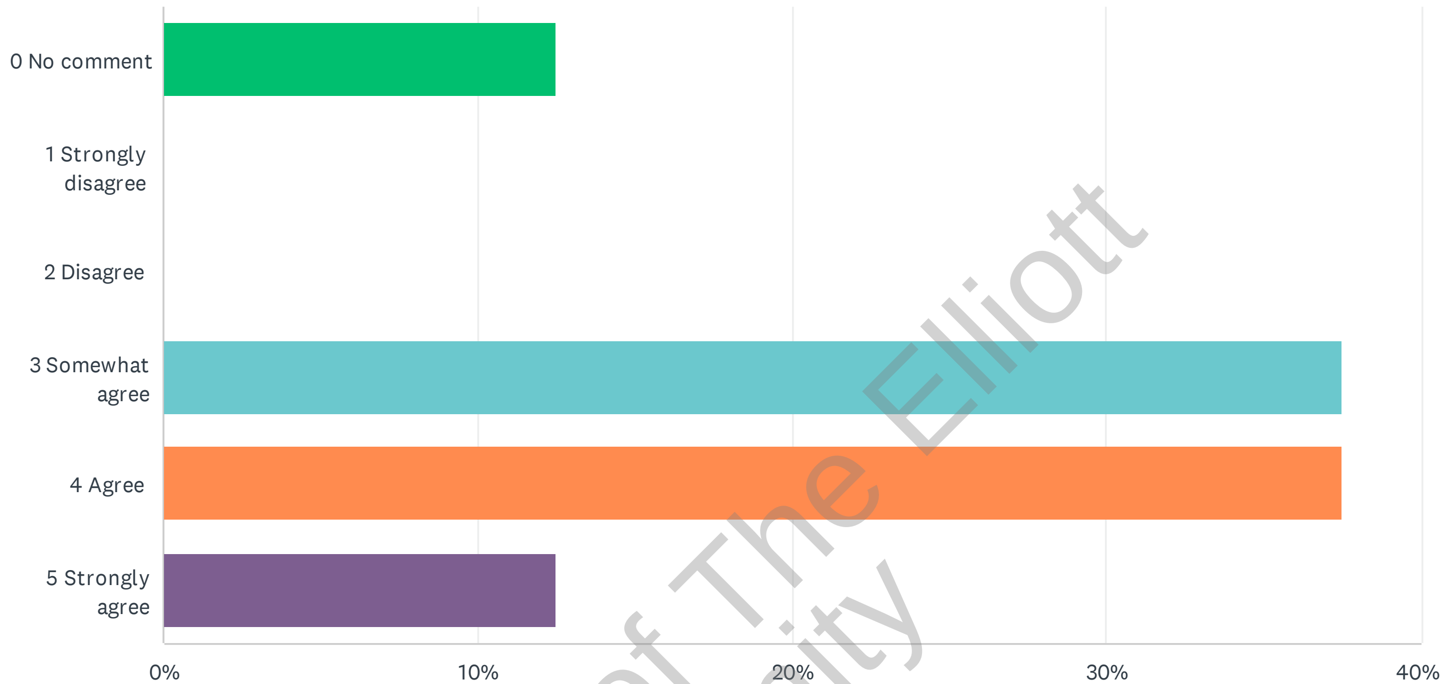
Answered: 8 Skipped: 1



ANSWER CHOICES	RESPONSES	
0 No comment	0.00%	0
1 Strongly disagree	0.00%	0
2 Disagree	0.00%	0
3 Somewhat agree	12.50%	1
4 Agree	50.00%	4
5 Strongly agree	37.50%	3
TOTAL		8

Q62 The Board Chair represents the Board and TEC to system partners and helps to build strong relationships with key partners.

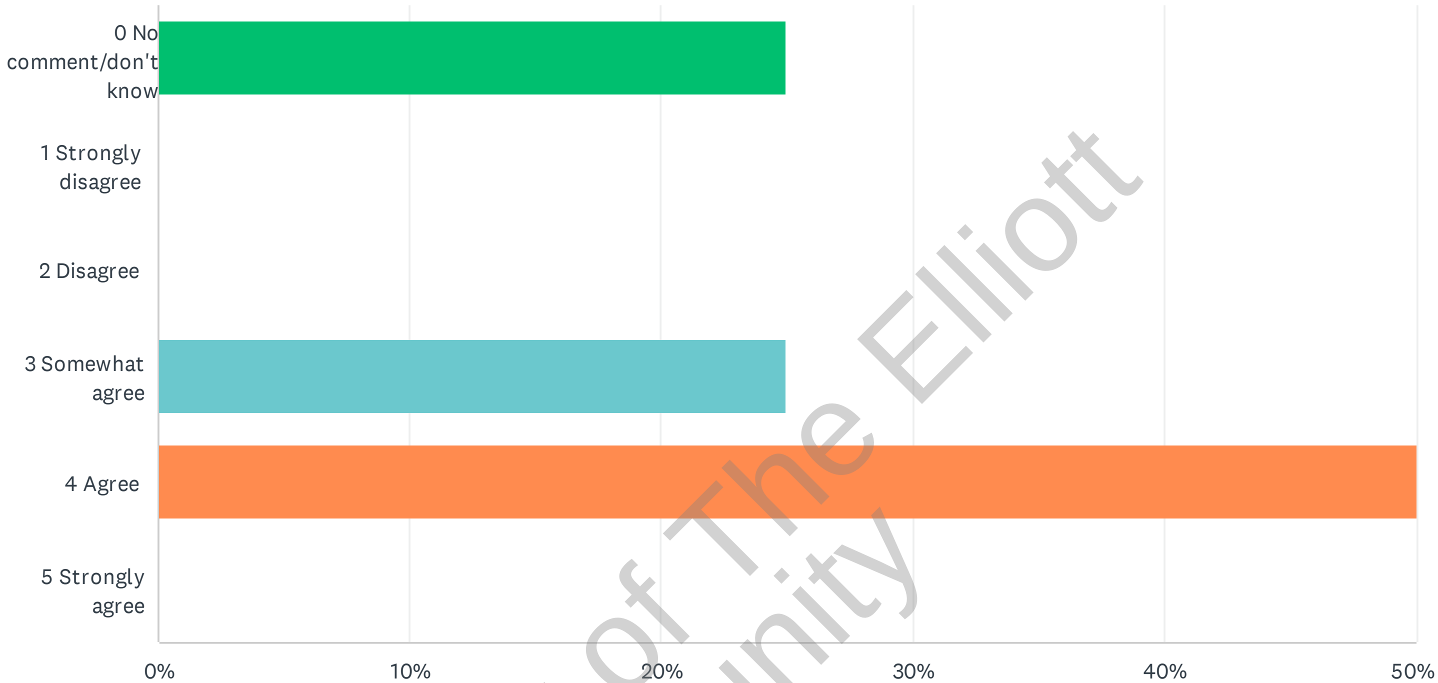
Answered: 8 Skipped: 1



ANSWER CHOICES	RESPONSES	
0 No comment	12.50%	1
1 Strongly disagree	0.00%	0
2 Disagree	0.00%	0
3 Somewhat agree	37.50%	3
4 Agree	37.50%	3
5 Strongly agree	12.50%	1
TOTAL		8

Q63 The Board ensures that the organization communicates its performance and plans to its key system partners in an effective and transparent fashion.

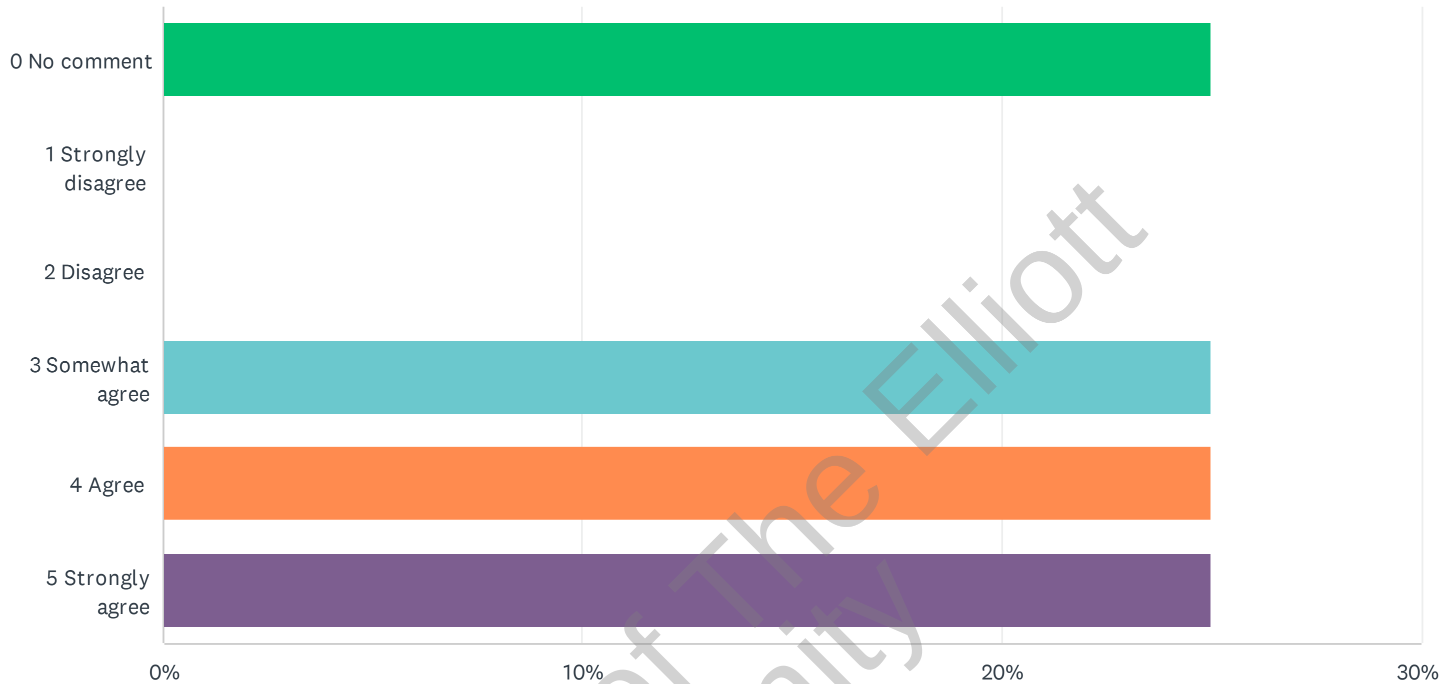
Answered: 8 Skipped: 1



ANSWER CHOICES	RESPONSES	
0 No comment/don't know	25.00%	2
1 Strongly disagree	0.00%	0
2 Disagree	0.00%	0
3 Somewhat agree	25.00%	2
4 Agree	50.00%	4
5 Strongly agree	0.00%	0
TOTAL		8

Q64 The Board speaks with 'one voice' in all communications with system partners and interested parties.

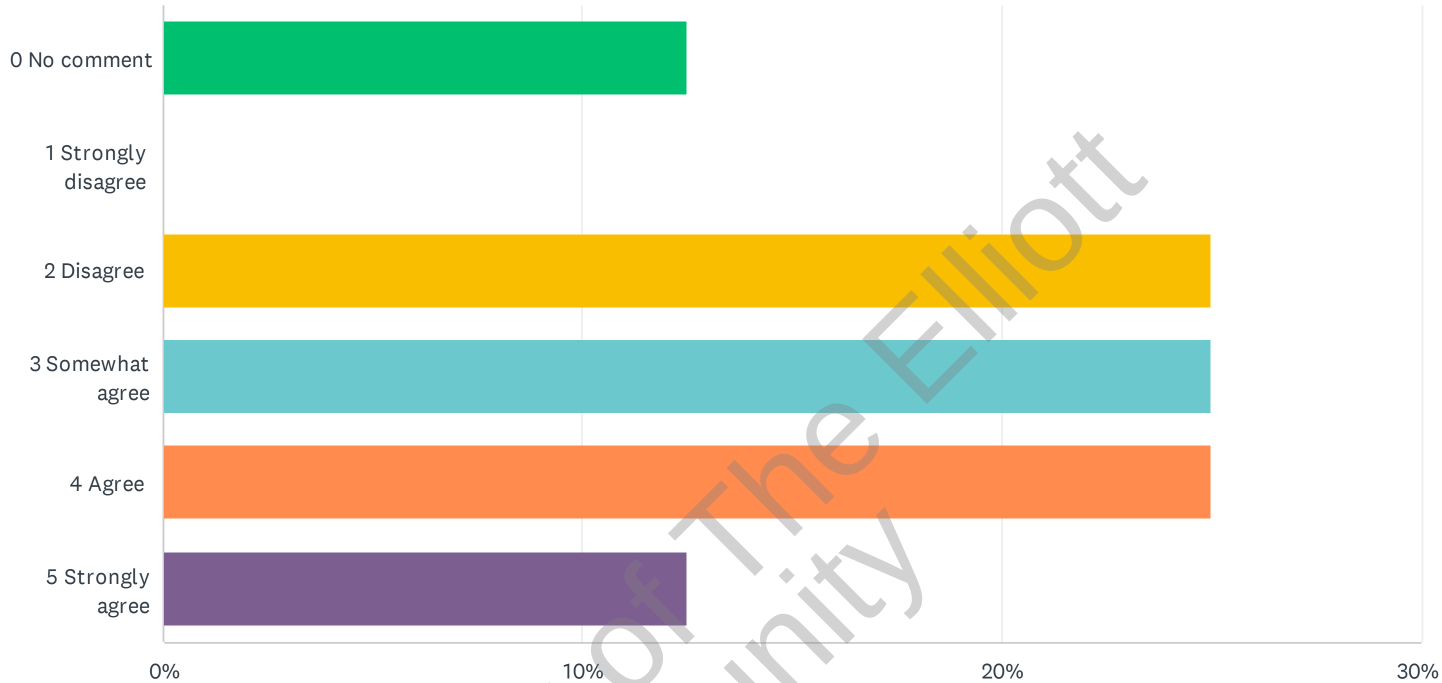
Answered: 8 Skipped: 1



ANSWER CHOICES	RESPONSES	
0 No comment	25.00%	2
1 Strongly disagree	0.00%	0
2 Disagree	0.00%	0
3 Somewhat agree	25.00%	2
4 Agree	25.00%	2
5 Strongly agree	25.00%	2
TOTAL		8

Q65 The Board ensures that the organization engages relevant system partners and interested parties when considering strategic planning and service integration opportunities.

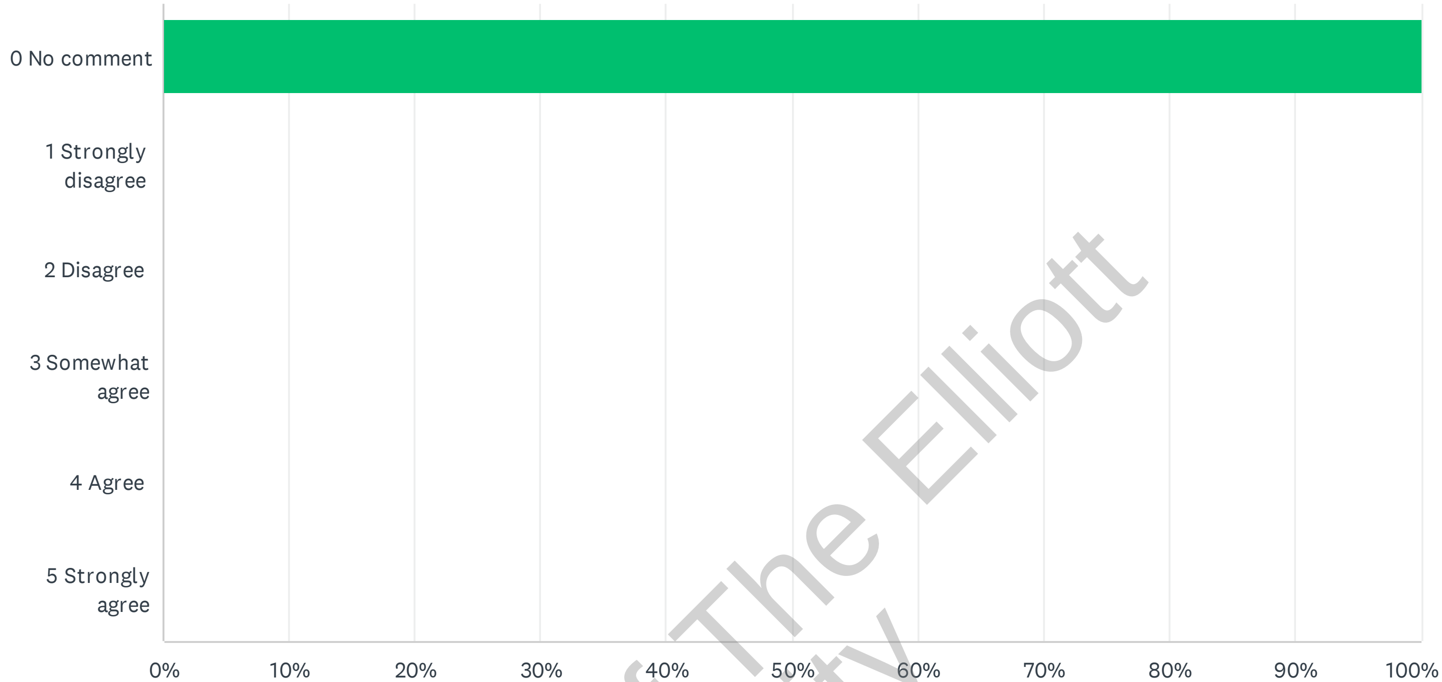
Answered: 8   Skipped: 1



ANSWER CHOICES	RESPONSES	
0 No comment	12.50%	1
1 Strongly disagree	0.00%	0
2 Disagree	25.00%	2
3 Somewhat agree	25.00%	2
4 Agree	25.00%	2
5 Strongly agree	12.50%	1
TOTAL		8

Q66 Comments on Board structure and processes.

Answered: 8 Skipped: 1

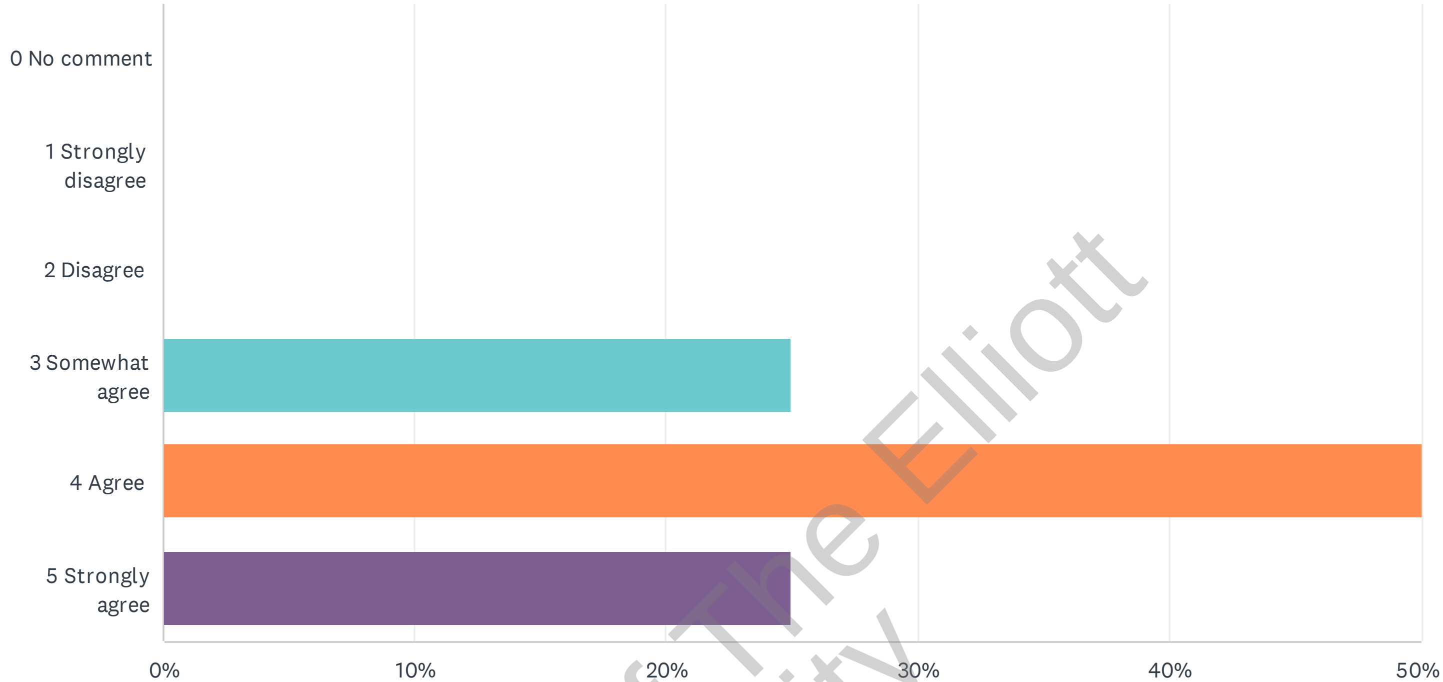


ANSWER CHOICES	RESPONSES	
0 No comment	100.00%	8
1 Strongly disagree	0.00%	0
2 Disagree	0.00%	0
3 Somewhat agree	0.00%	0
4 Agree	0.00%	0
5 Strongly agree	0.00%	0
TOTAL		8

#	COMMENTS	DATE
1	Committee meetings need to be scheduled between Board meetings, not after. Less frequent but longer meetings may need to be considered going forward.	6/16/2026 4:46 PM
2	I have been a mentor to two new board members and have enjoyed taking on this role. I think it would be helpful to have more structure to the orientation process as well as enhanced policies and supporting documentation to support the orientation process. Meeting materials are consistently sent in good time prior to meetings. While they are useful and informative in preparing for decisions to be made, I think it would be helpful to add cover memos to items to clearly identify the decision to be made and providing context and background for the discussion. The Chair skillfully balances opportunities for discussion with moving through the agenda. She has demonstrated her dedication to her role and her experience in leading us throughout the past year.	5/7/2026 12:46 PM

Q67 Trustees come prepared for Board and committee meetings.

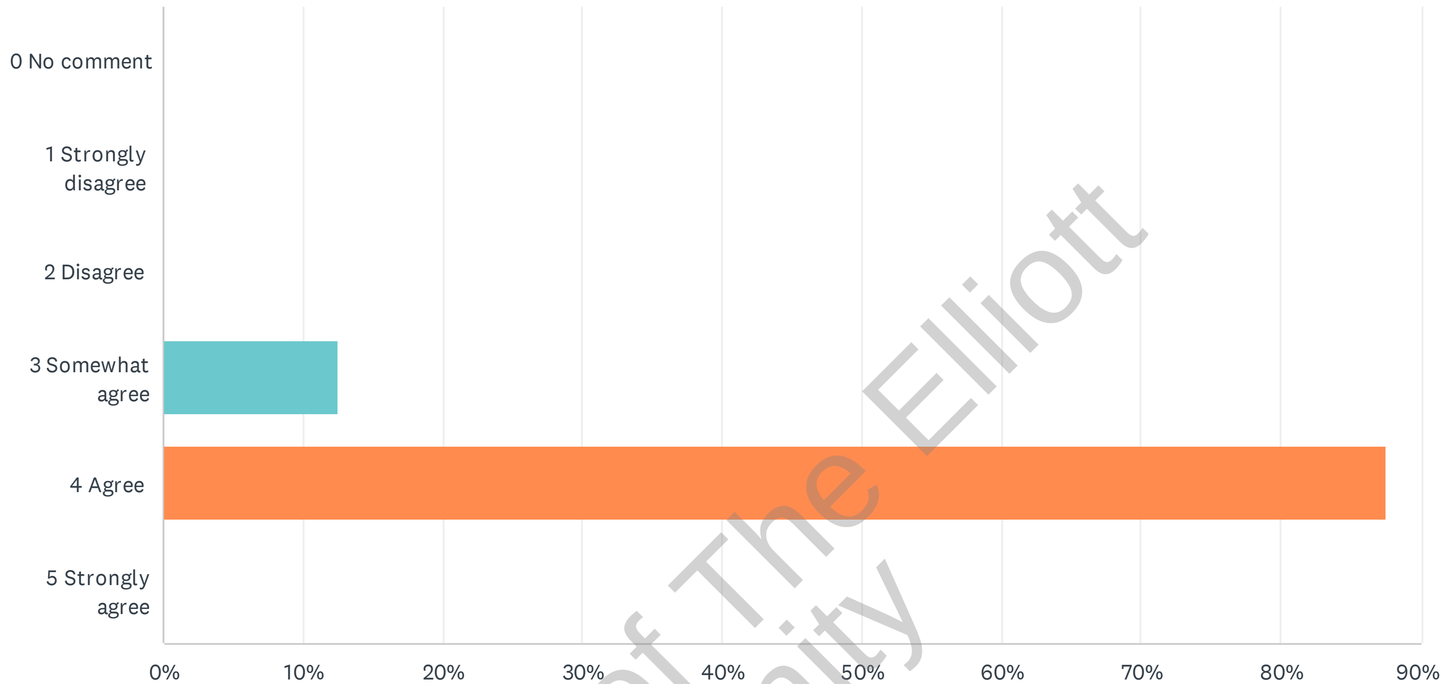
Answered: 8   Skipped: 1



ANSWER CHOICES	RESPONSES	
0 No comment	0.00%	0
1 Strongly disagree	0.00%	0
2 Disagree	0.00%	0
3 Somewhat agree	25.00%	2
4 Agree	50.00%	4
5 Strongly agree	25.00%	2
TOTAL		8

Q68 Trustees are actively engaged and contribute their skills and experience as appropriate.

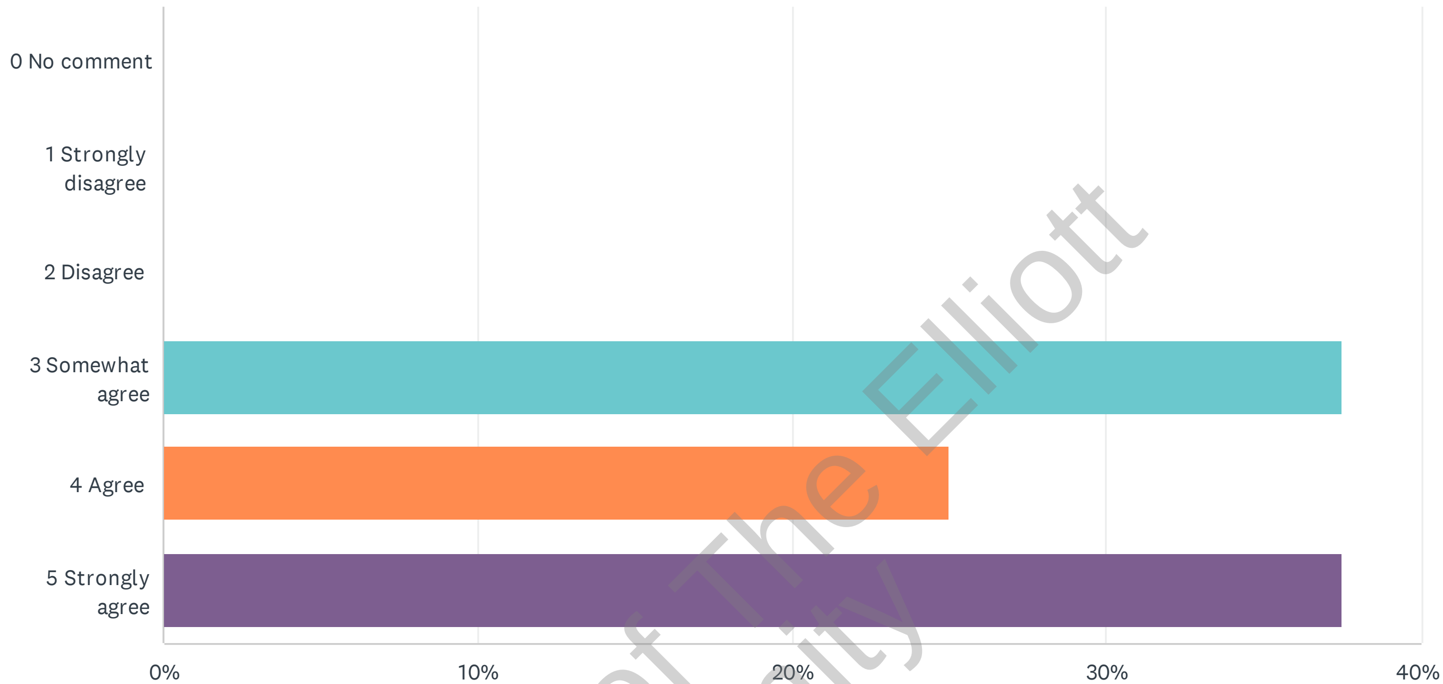
Answered: 8   Skipped: 1



ANSWER CHOICES	RESPONSES	
0 No comment	0.00%	0
1 Strongly disagree	0.00%	0
2 Disagree	0.00%	0
3 Somewhat agree	12.50%	1
4 Agree	87.50%	7
5 Strongly agree	0.00%	0
TOTAL		8

Q69 Trustees work well together, valuing the views of all Board members, treating each other with respect and courtesy and seeking consensus.

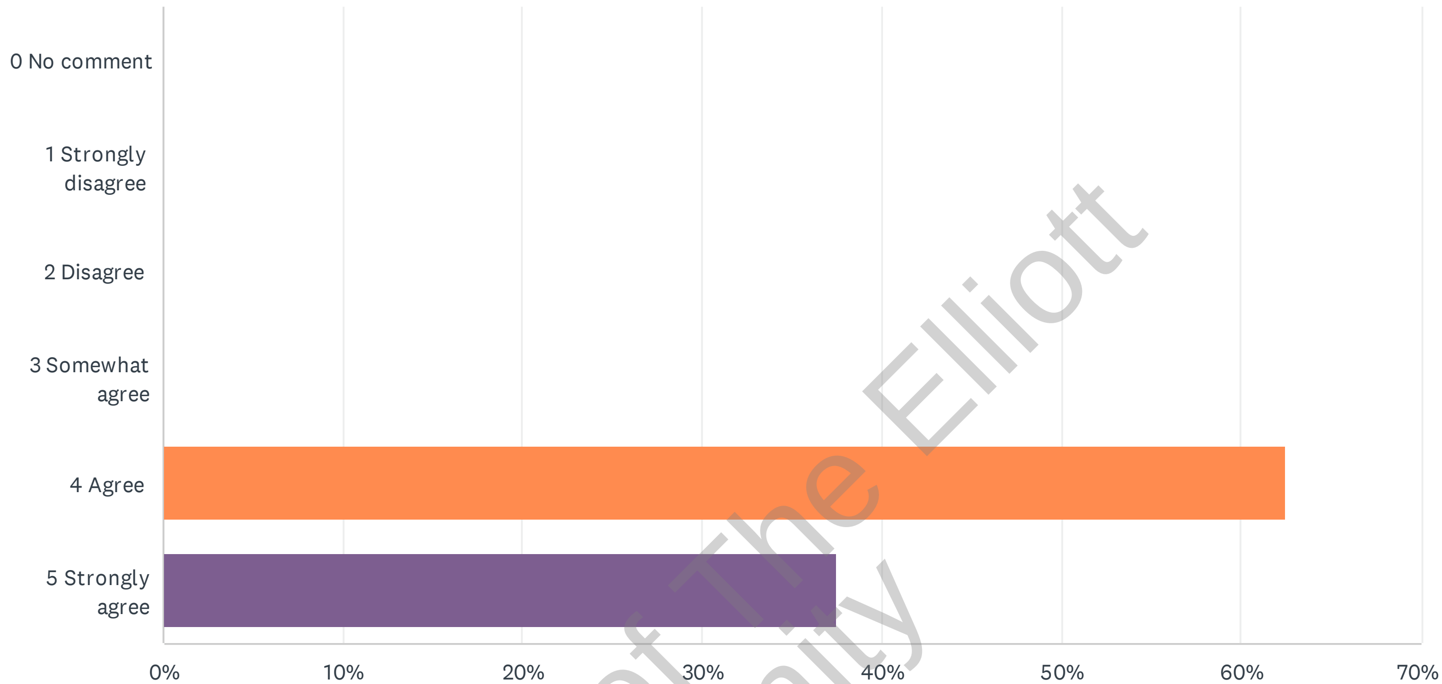
Answered: 8 Skipped: 1



ANSWER CHOICES	RESPONSES	
0 No comment	0.00%	0
1 Strongly disagree	0.00%	0
2 Disagree	0.00%	0
3 Somewhat agree	37.50%	3
4 Agree	25.00%	2
5 Strongly agree	37.50%	3
TOTAL		8

Q70 Trustees constructively ask questions and respectfully express their views.

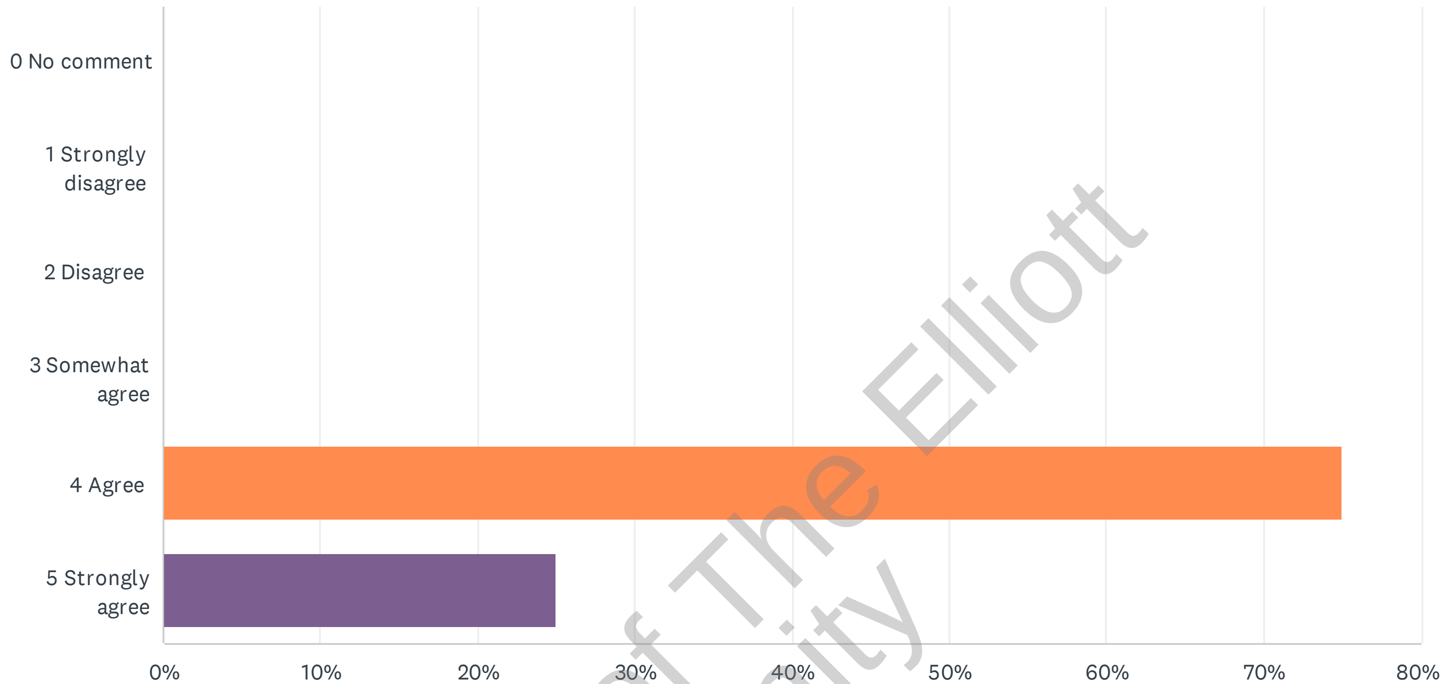
Answered: 8   Skipped: 1



ANSWER CHOICES	RESPONSES	
0 No comment	0.00%	0
1 Strongly disagree	0.00%	0
2 Disagree	0.00%	0
3 Somewhat agree	0.00%	0
4 Agree	62.50%	5
5 Strongly agree	37.50%	3
TOTAL		8

Q71 Once decisions are taken by the Board, all Trustees support the position.

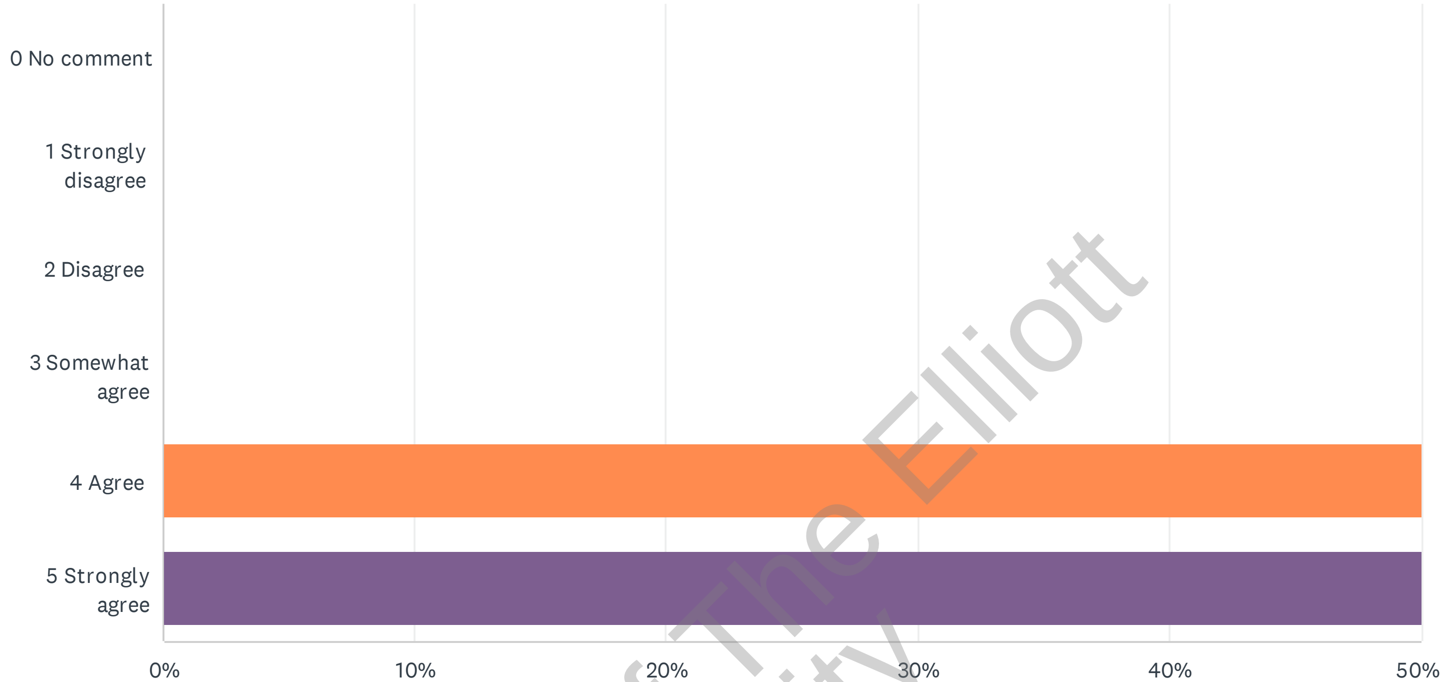
Answered: 8 Skipped: 1



ANSWER CHOICES	RESPONSES	
0 No comment	0.00%	0
1 Strongly disagree	0.00%	0
2 Disagree	0.00%	0
3 Somewhat agree	0.00%	0
4 Agree	75.00%	6
5 Strongly agree	25.00%	2
TOTAL		8

Q72 Trustees maintain confidentiality.

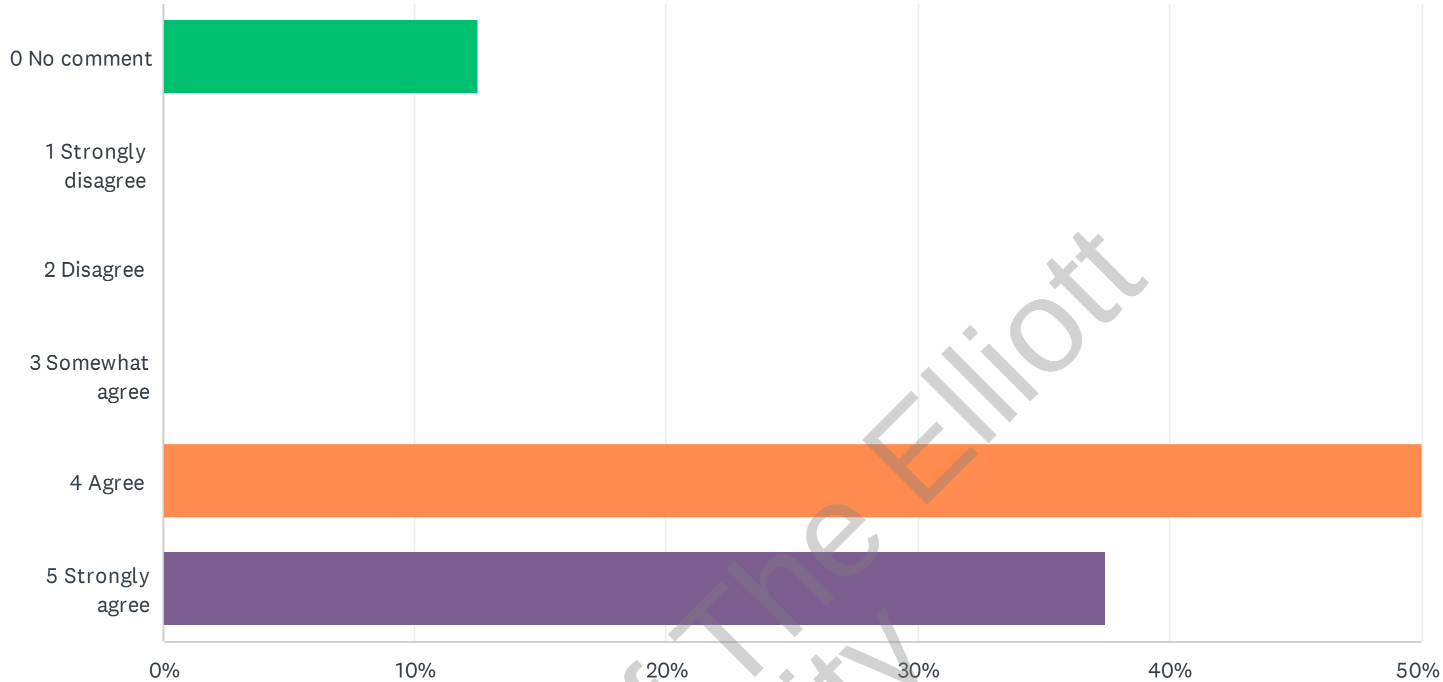
Answered: 8 Skipped: 1



ANSWER CHOICES	RESPONSES	
0 No comment	0.00%	0
1 Strongly disagree	0.00%	0
2 Disagree	0.00%	0
3 Somewhat agree	0.00%	0
4 Agree	50.00%	4
5 Strongly agree	50.00%	4
TOTAL		8

Q73 Trustees declare conflicts of interest.

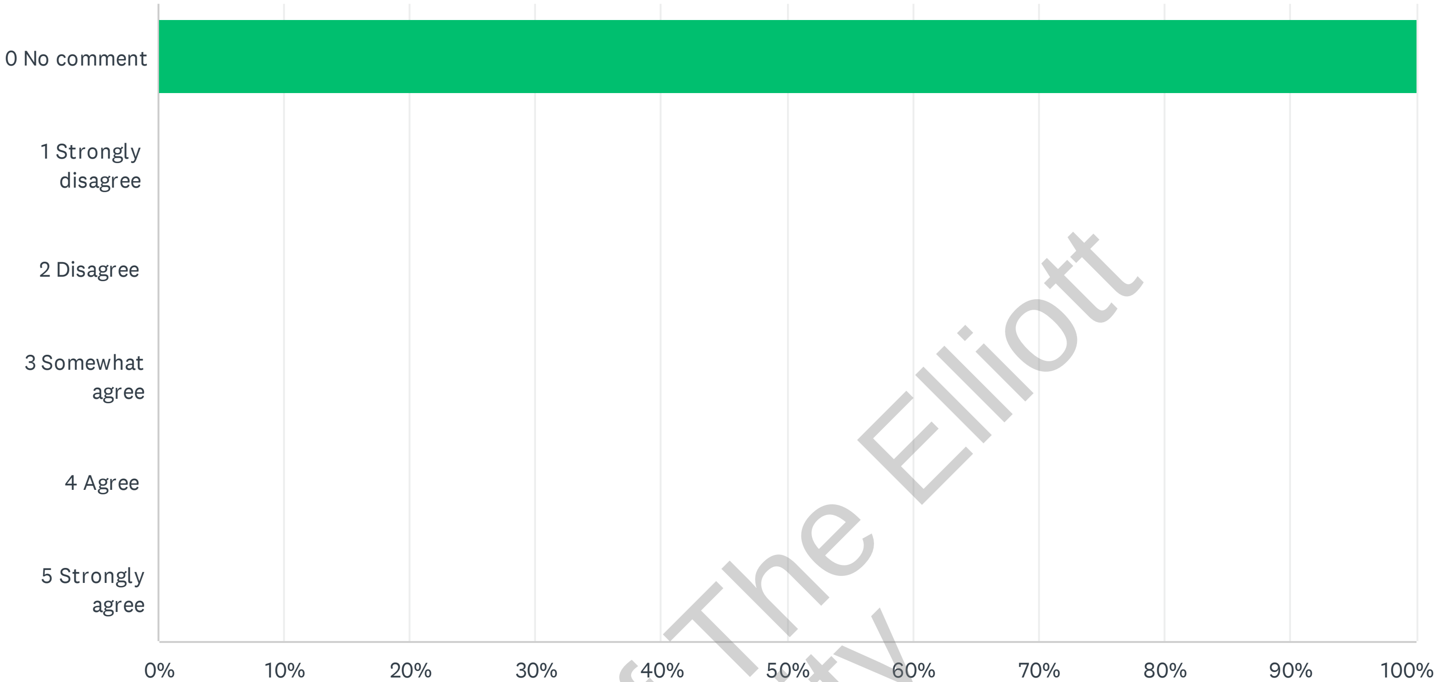
Answered: 8 Skipped: 1



ANSWER CHOICES	RESPONSES	
0 No comment	12.50%	1
1 Strongly disagree	0.00%	0
2 Disagree	0.00%	0
3 Somewhat agree	0.00%	0
4 Agree	50.00%	4
5 Strongly agree	37.50%	3
TOTAL		8

Q74 Comments on board culture, efficiency and performance.

Answered: 8   Skipped: 1

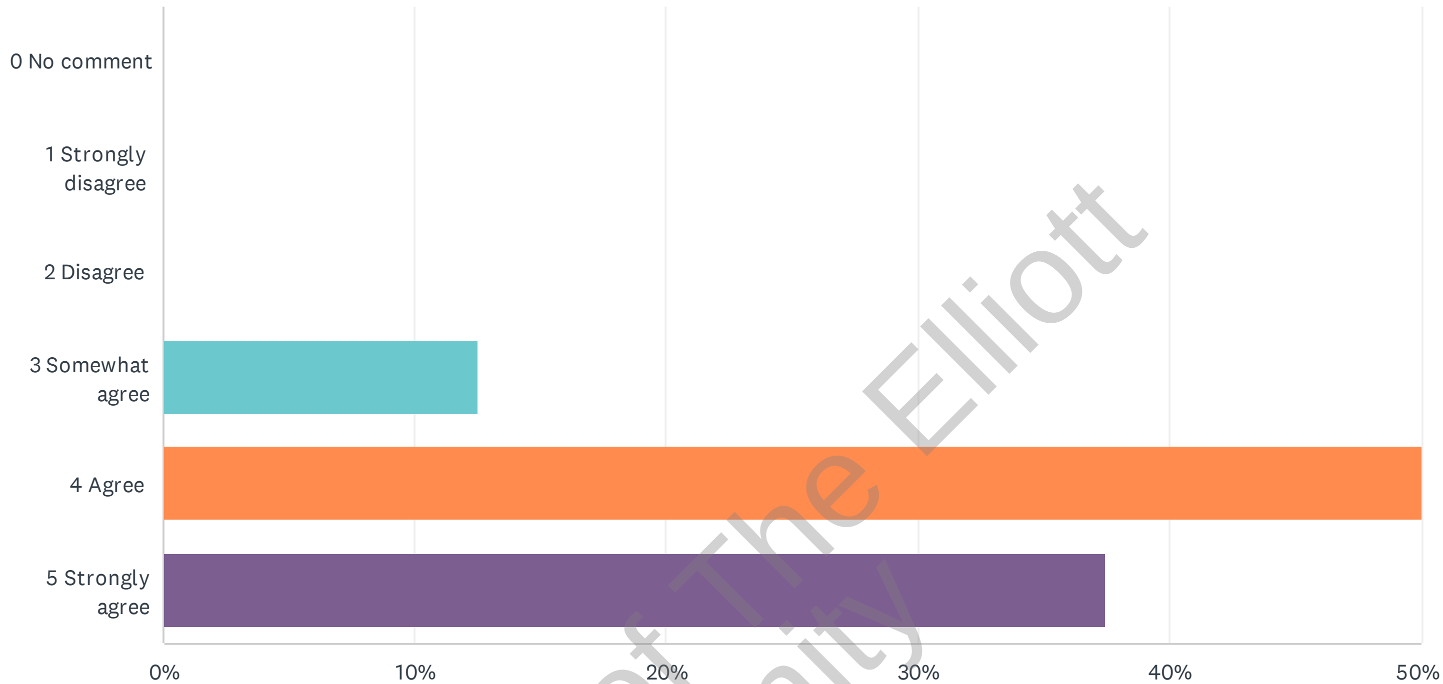


ANSWER CHOICES	RESPONSES	
0 No comment	100.00%	8
1 Strongly disagree	0.00%	0
2 Disagree	0.00%	0
3 Somewhat agree	0.00%	0
4 Agree	0.00%	0
5 Strongly agree	0.00%	0
TOTAL		8

#	COMMENTS	DATE
1	The culture of the Board is very positive - friendly but professional, respectful and efficient.	5/7/2026 12:47 PM

Q75 I have read the Elliott Act, 2002, Municipal Act, 2001, and Fixing Long-Term Care Act, 2021.

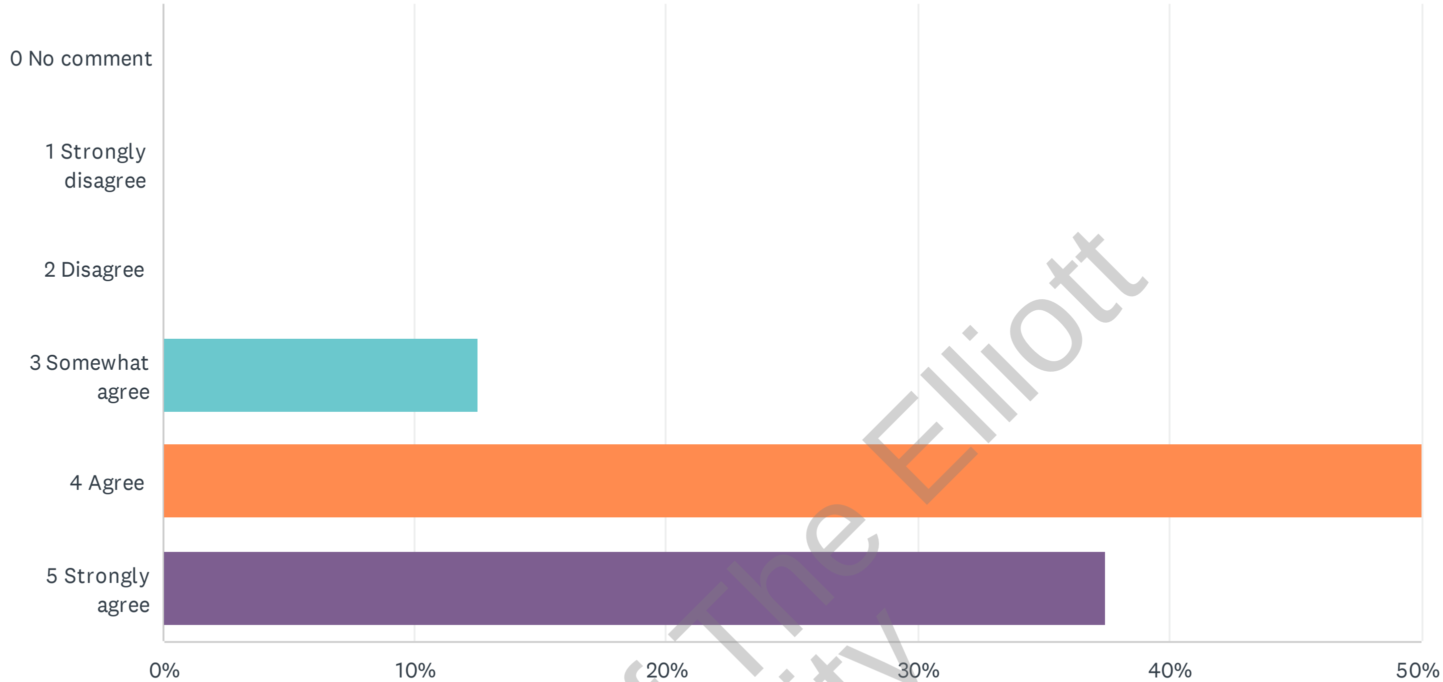
Answered: 8 Skipped: 1



ANSWER CHOICES	RESPONSES	
0 No comment	0.00%	0
1 Strongly disagree	0.00%	0
2 Disagree	0.00%	0
3 Somewhat agree	12.50%	1
4 Agree	50.00%	4
5 Strongly agree	37.50%	3
TOTAL		8

Q76 I understand TEC's Mission, Vision and Values.

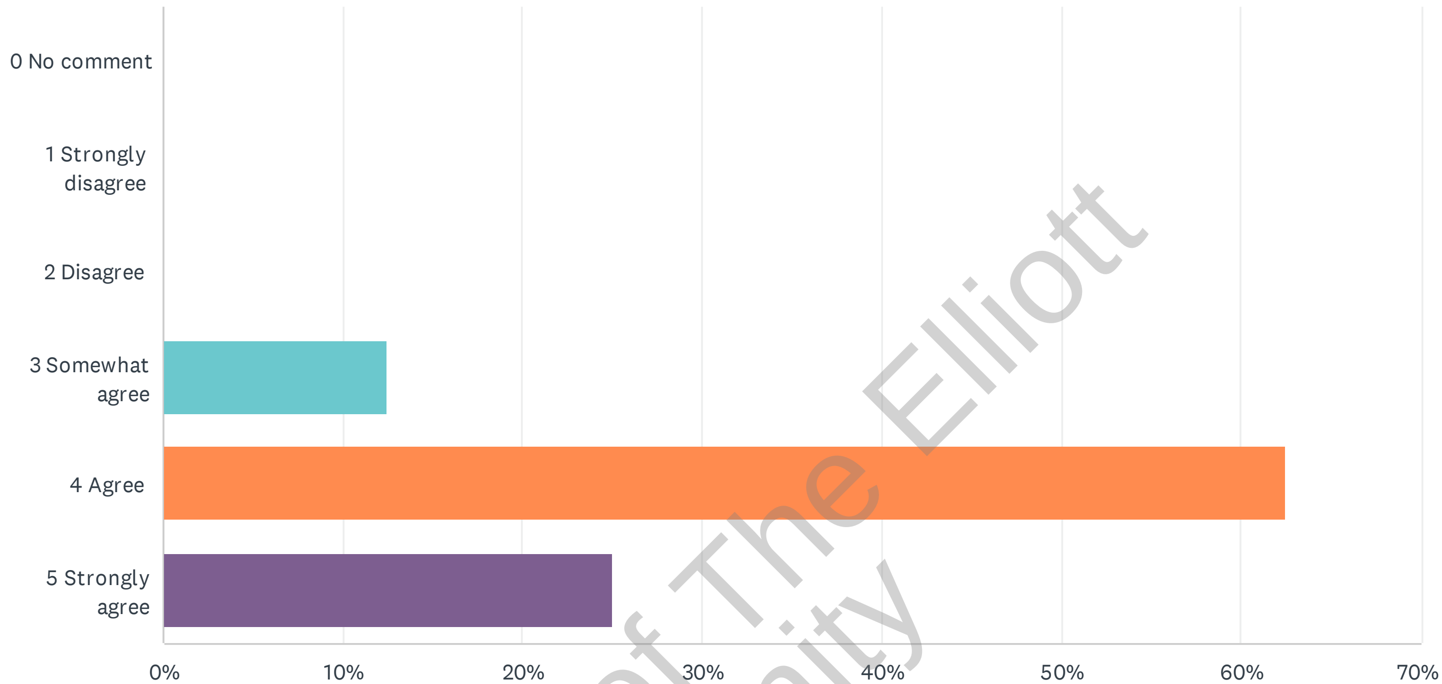
Answered: 8 Skipped: 1



ANSWER CHOICES	RESPONSES	
0 No comment	0.00%	0
1 Strongly disagree	0.00%	0
2 Disagree	0.00%	0
3 Somewhat agree	12.50%	1
4 Agree	50.00%	4
5 Strongly agree	37.50%	3
TOTAL		8

Q77 I am familiar with the current Strategic Imperatives and the Board's Annual Work Plan and take them into account in Board decisions.

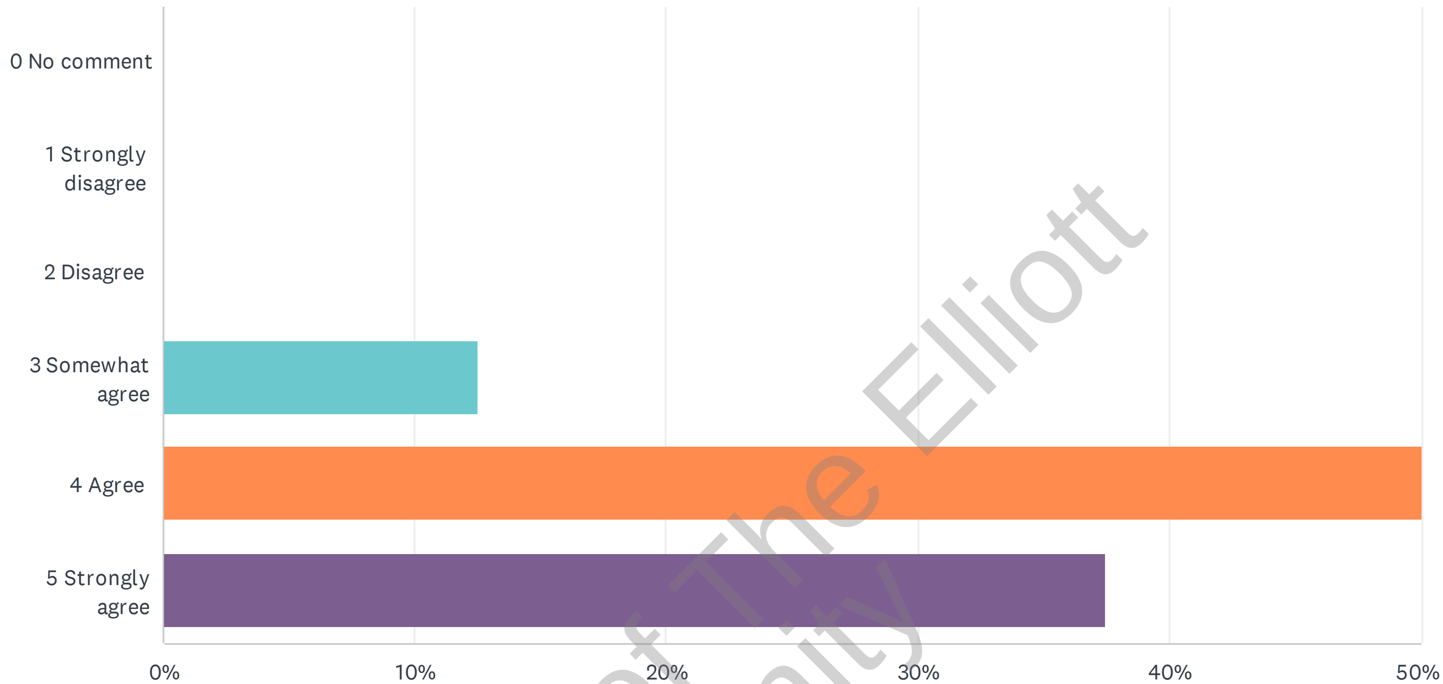
Answered: 8 Skipped: 1



ANSWER CHOICES	RESPONSES	
0 No comment	0.00%	0
1 Strongly disagree	0.00%	0
2 Disagree	0.00%	0
3 Somewhat agree	12.50%	1
4 Agree	62.50%	5
5 Strongly agree	25.00%	2
TOTAL		8

Q78 My understanding of TEC's operations and activities is sufficient to support my role as a Trustee.

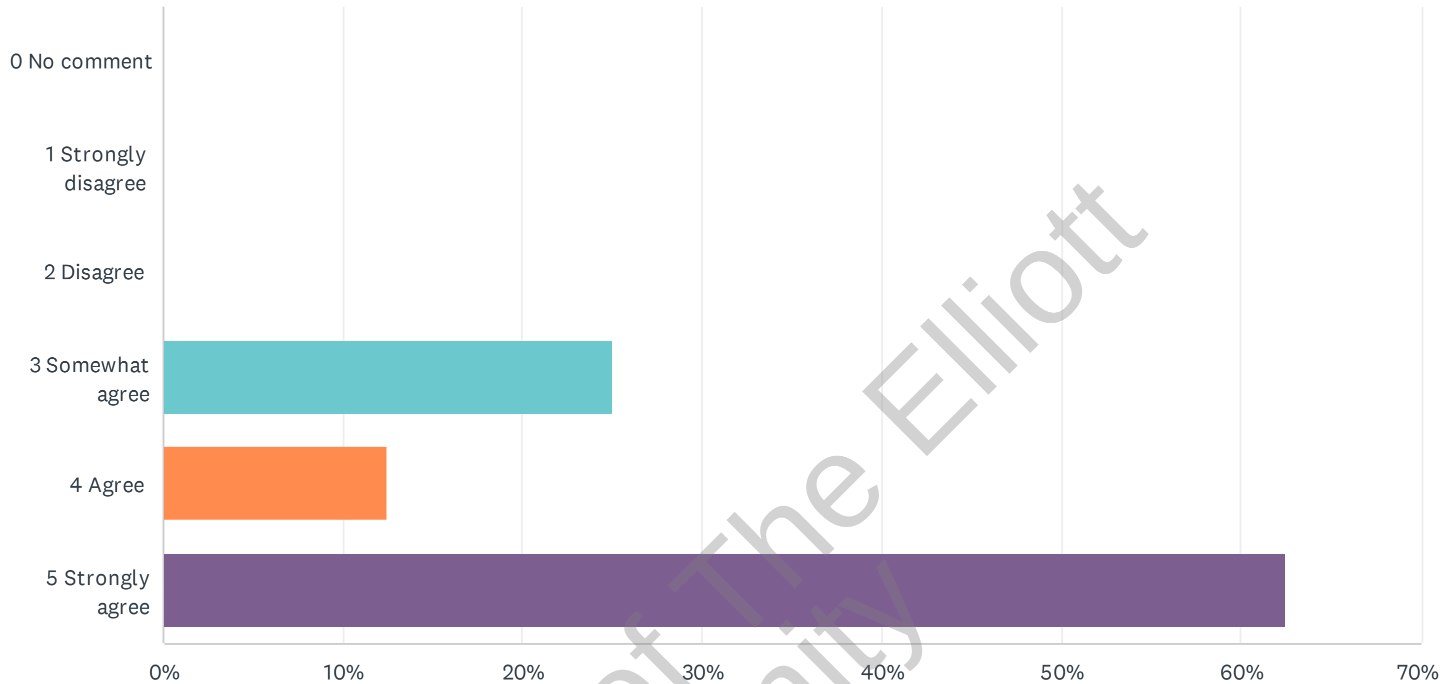
Answered: 8 Skipped: 1



ANSWER CHOICES	RESPONSES	
0 No comment	0.00%	0
1 Strongly disagree	0.00%	0
2 Disagree	0.00%	0
3 Somewhat agree	12.50%	1
4 Agree	50.00%	4
5 Strongly agree	37.50%	3
TOTAL		8

Q79 I have a good understanding of the differences between the Board's governance role and the role of the CEO (and management).

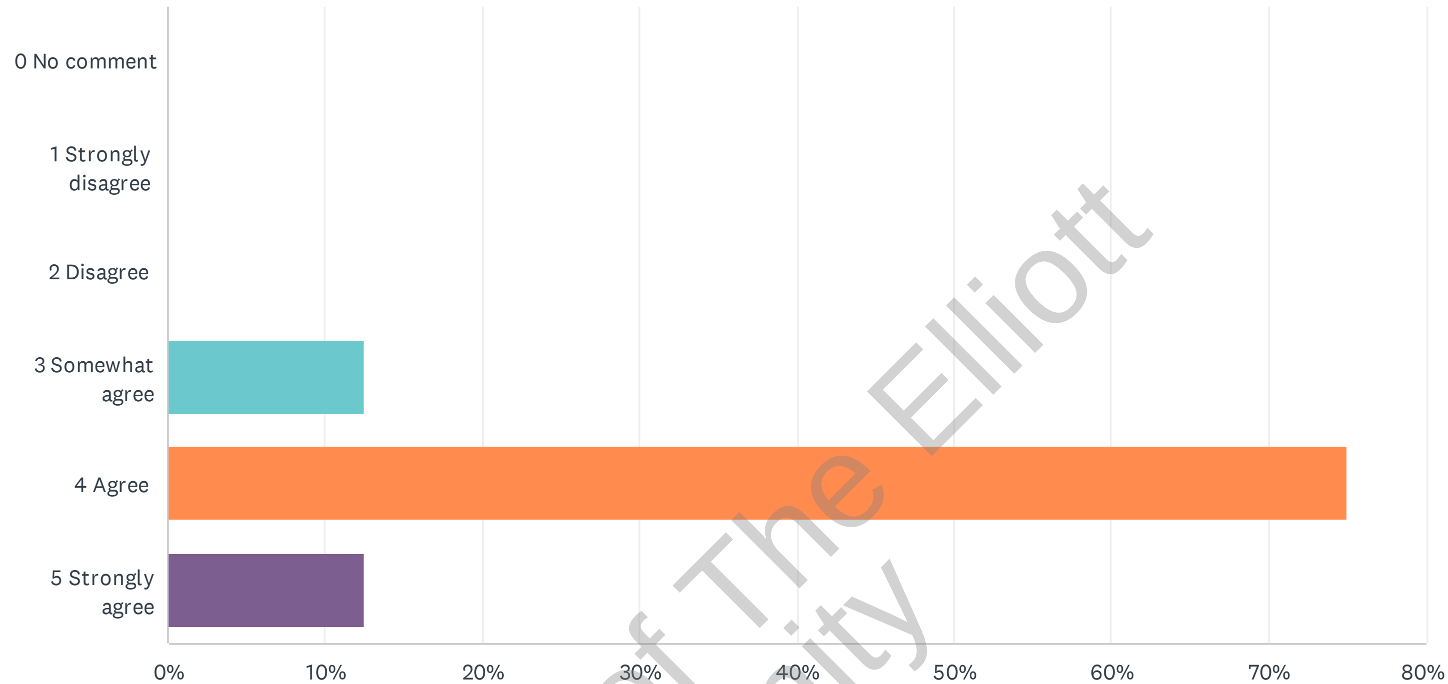
Answered: 8 Skipped: 1



ANSWER CHOICES	RESPONSES	
0 No comment	0.00%	0
1 Strongly disagree	0.00%	0
2 Disagree	0.00%	0
3 Somewhat agree	25.00%	2
4 Agree	12.50%	1
5 Strongly agree	62.50%	5
TOTAL		8

Q80 I have a good understanding of the challenges and opportunities in the external environment affecting the organization.

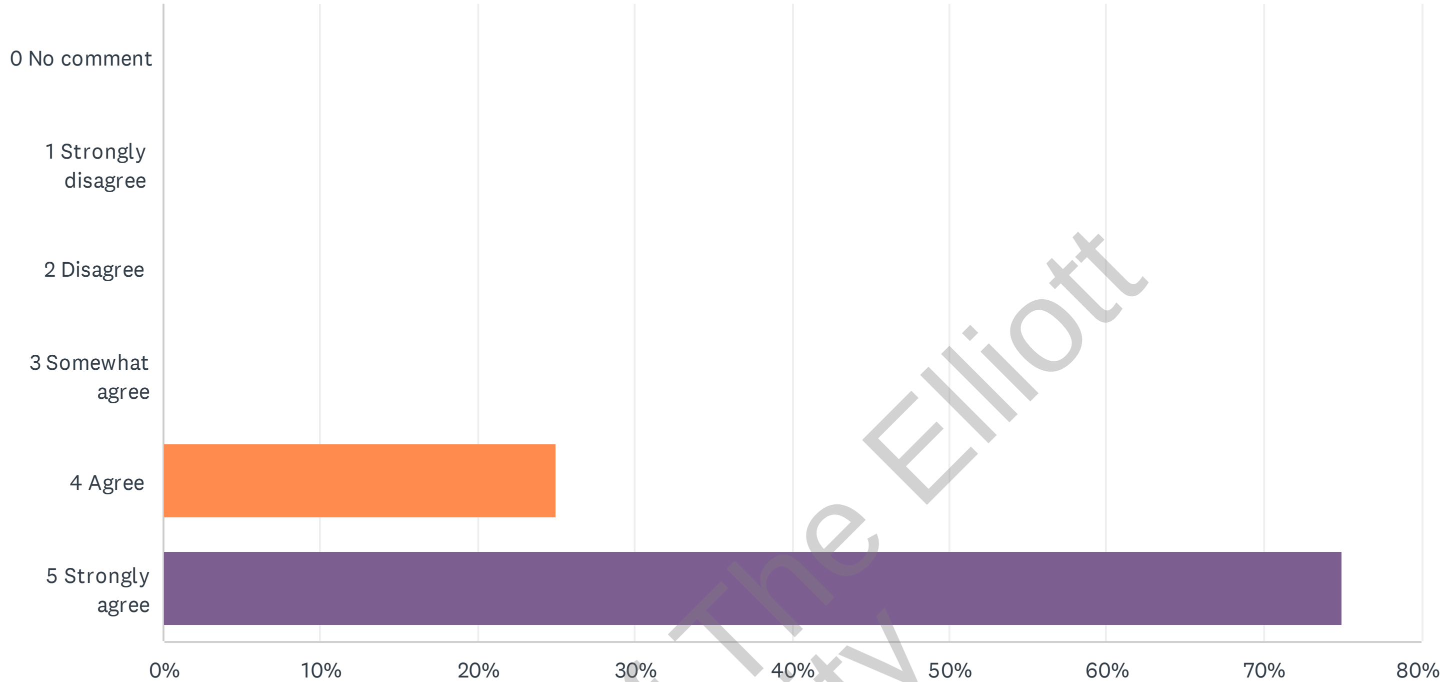
Answered: 8 Skipped: 1



ANSWER CHOICES	RESPONSES	
0 No comment	0.00%	0
1 Strongly disagree	0.00%	0
2 Disagree	0.00%	0
3 Somewhat agree	12.50%	1
4 Agree	75.00%	6
5 Strongly agree	12.50%	1
TOTAL		8

Q81 I apply my skills and experience.

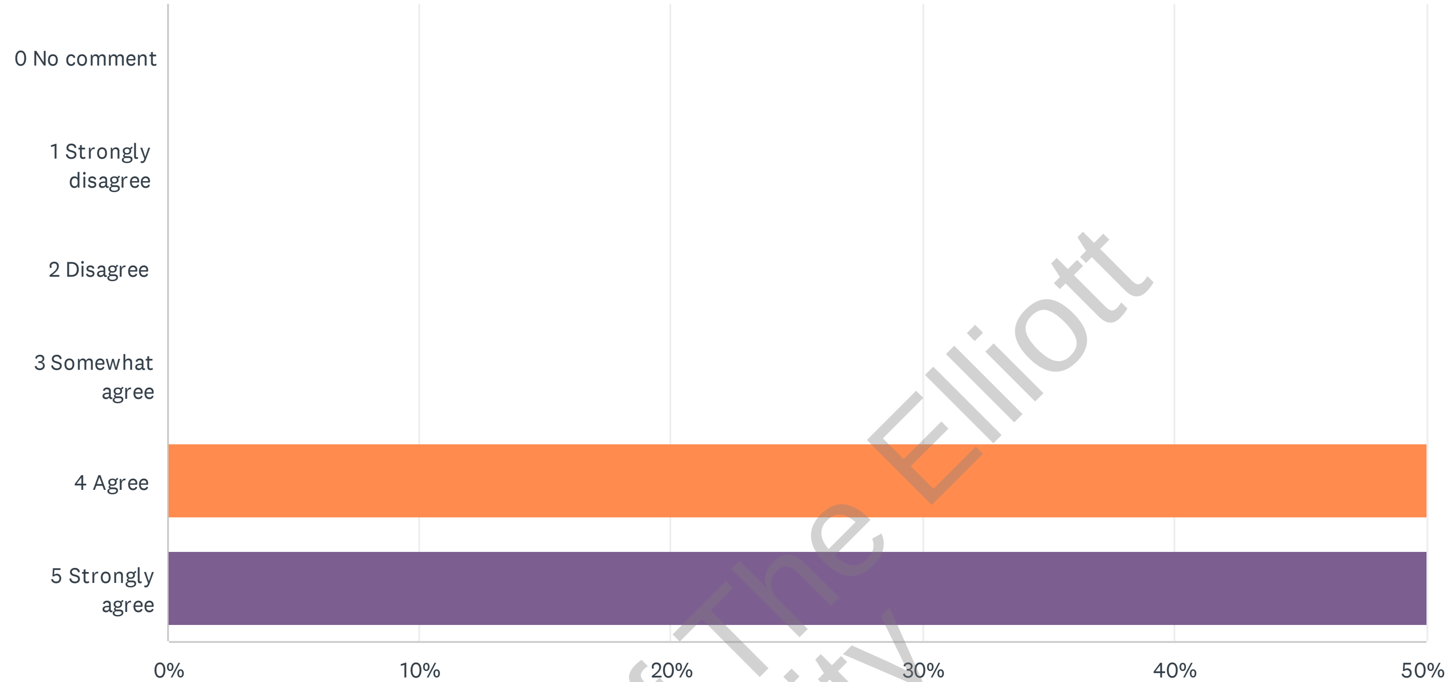
Answered: 8 Skipped: 1



ANSWER CHOICES	RESPONSES	
0 No comment	0.00%	0
1 Strongly disagree	0.00%	0
2 Disagree	0.00%	0
3 Somewhat agree	0.00%	0
4 Agree	25.00%	2
5 Strongly agree	75.00%	6
TOTAL		8

Q82 I prepare for and attend meetings.

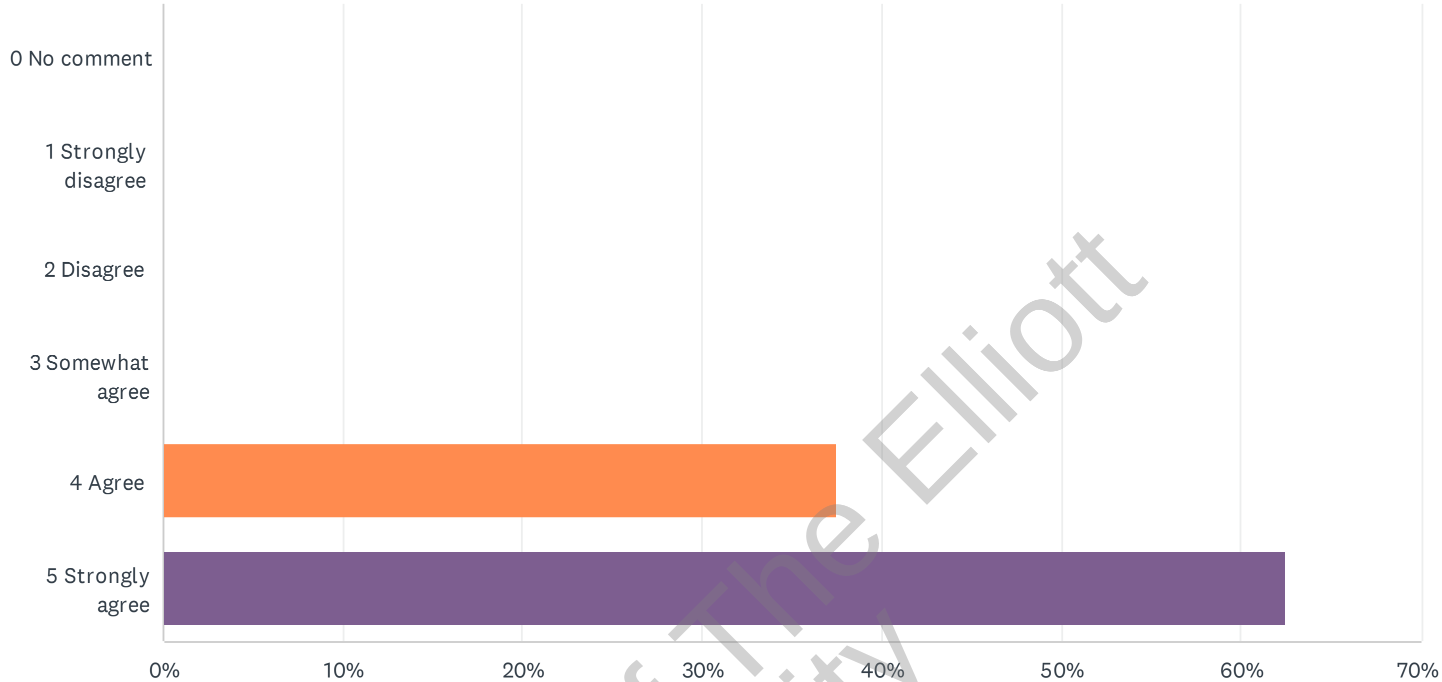
Answered: 8 Skipped: 1



ANSWER CHOICES	RESPONSES	
0 No comment	0.00%	0
1 Strongly disagree	0.00%	0
2 Disagree	0.00%	0
3 Somewhat agree	0.00%	0
4 Agree	50.00%	4
5 Strongly agree	50.00%	4
TOTAL		8

Q83 I listen to and consider the views of others.

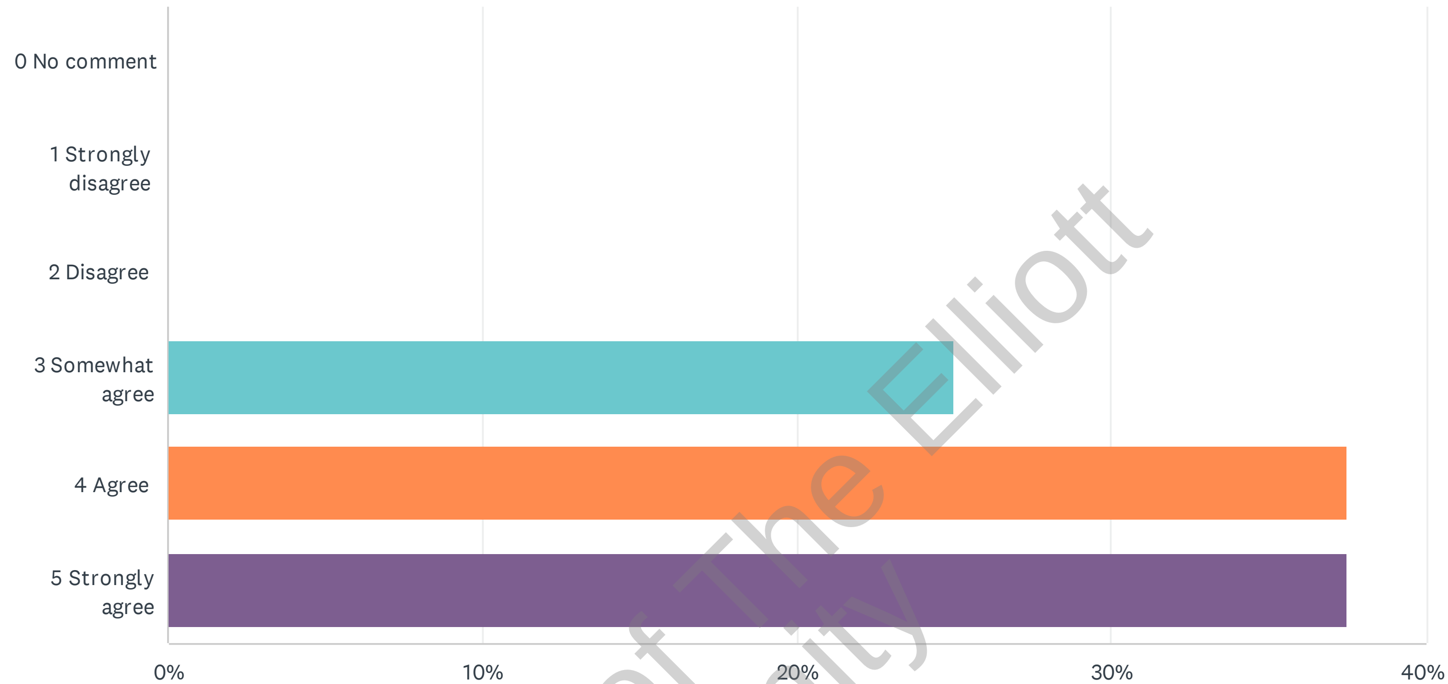
Answered: 8 Skipped: 1



ANSWER CHOICES	RESPONSES	
0 No comment	0.00%	0
1 Strongly disagree	0.00%	0
2 Disagree	0.00%	0
3 Somewhat agree	0.00%	0
4 Agree	37.50%	3
5 Strongly agree	62.50%	5
TOTAL		8

Q84 I contribute to Board deliberations and ask questions that will help me make a decision.

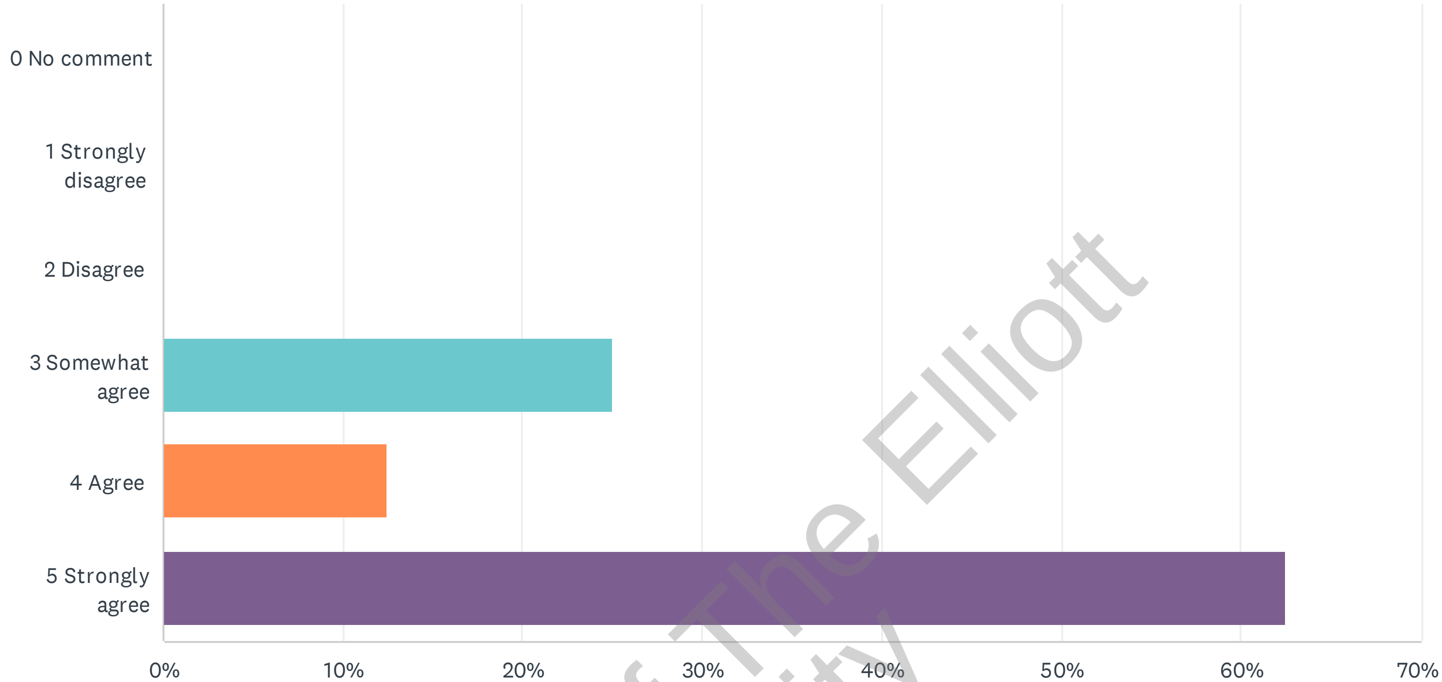
Answered: 8 Skipped: 1



ANSWER CHOICES	RESPONSES	
0 No comment	0.00%	0
1 Strongly disagree	0.00%	0
2 Disagree	0.00%	0
3 Somewhat agree	25.00%	2
4 Agree	37.50%	3
5 Strongly agree	37.50%	3
TOTAL		8

Q85 I express my views even when I may be in the minority.

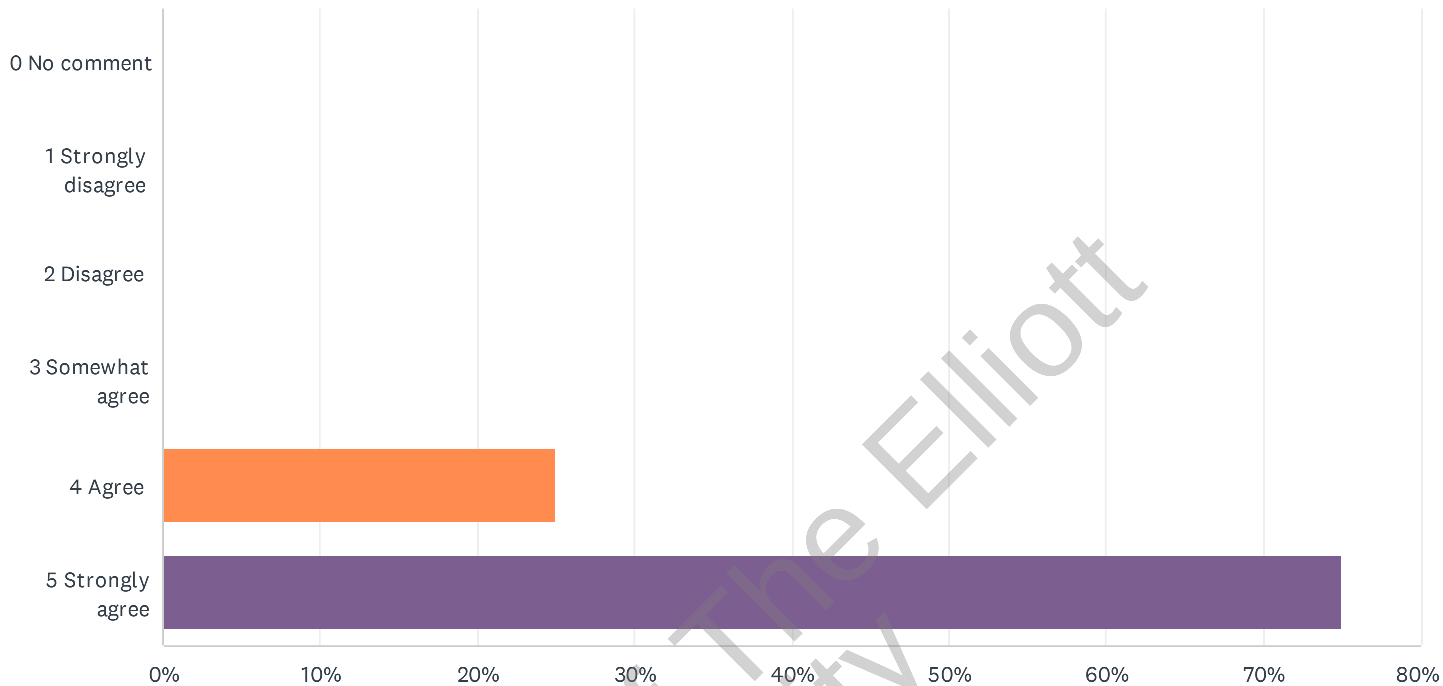
Answered: 8 Skipped: 1



ANSWER CHOICES	RESPONSES	
0 No comment	0.00%	0
1 Strongly disagree	0.00%	0
2 Disagree	0.00%	0
3 Somewhat agree	25.00%	2
4 Agree	12.50%	1
5 Strongly agree	62.50%	5
TOTAL		8

Q86 I respect the decisions of the Board.

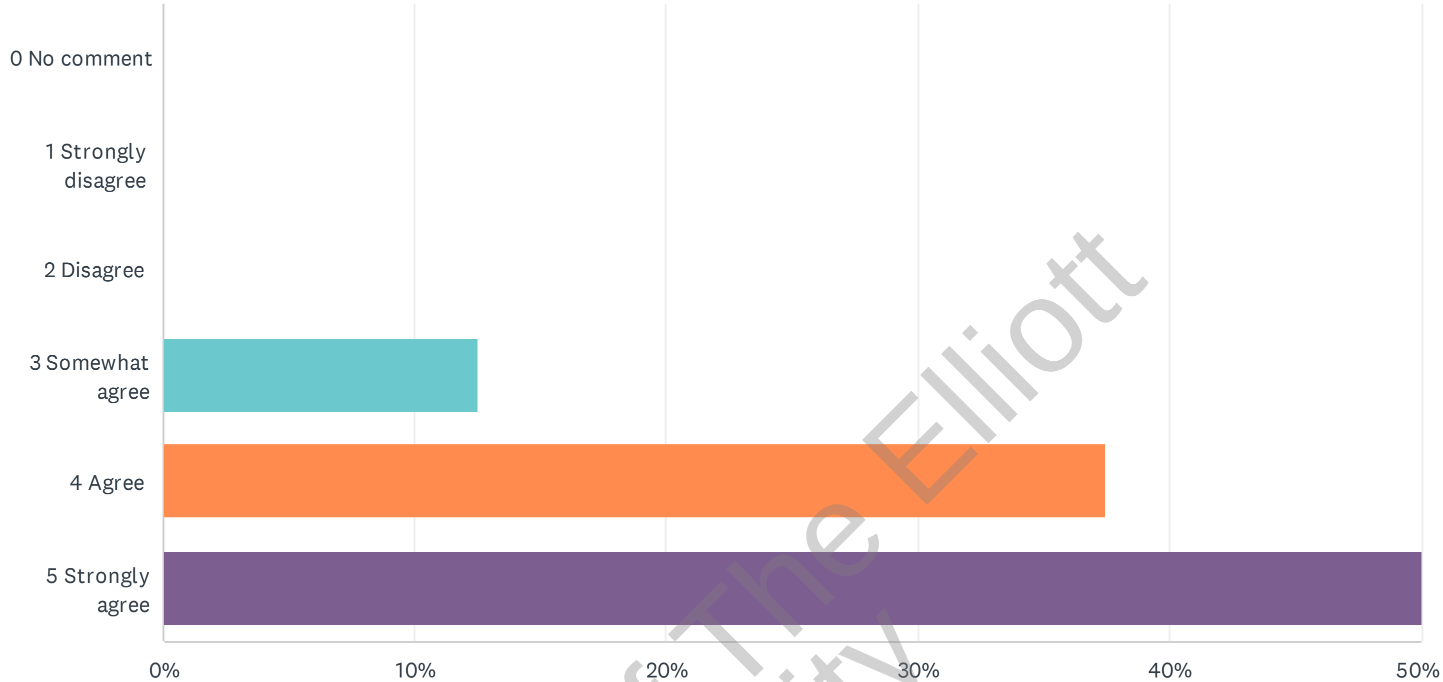
Answered: 8 Skipped: 1



ANSWER CHOICES	RESPONSES	
0 No comment	0.00%	0
1 Strongly disagree	0.00%	0
2 Disagree	0.00%	0
3 Somewhat agree	0.00%	0
4 Agree	25.00%	2
5 Strongly agree	75.00%	6
TOTAL		8

Q87 I support TEC events and activities wherever possible.

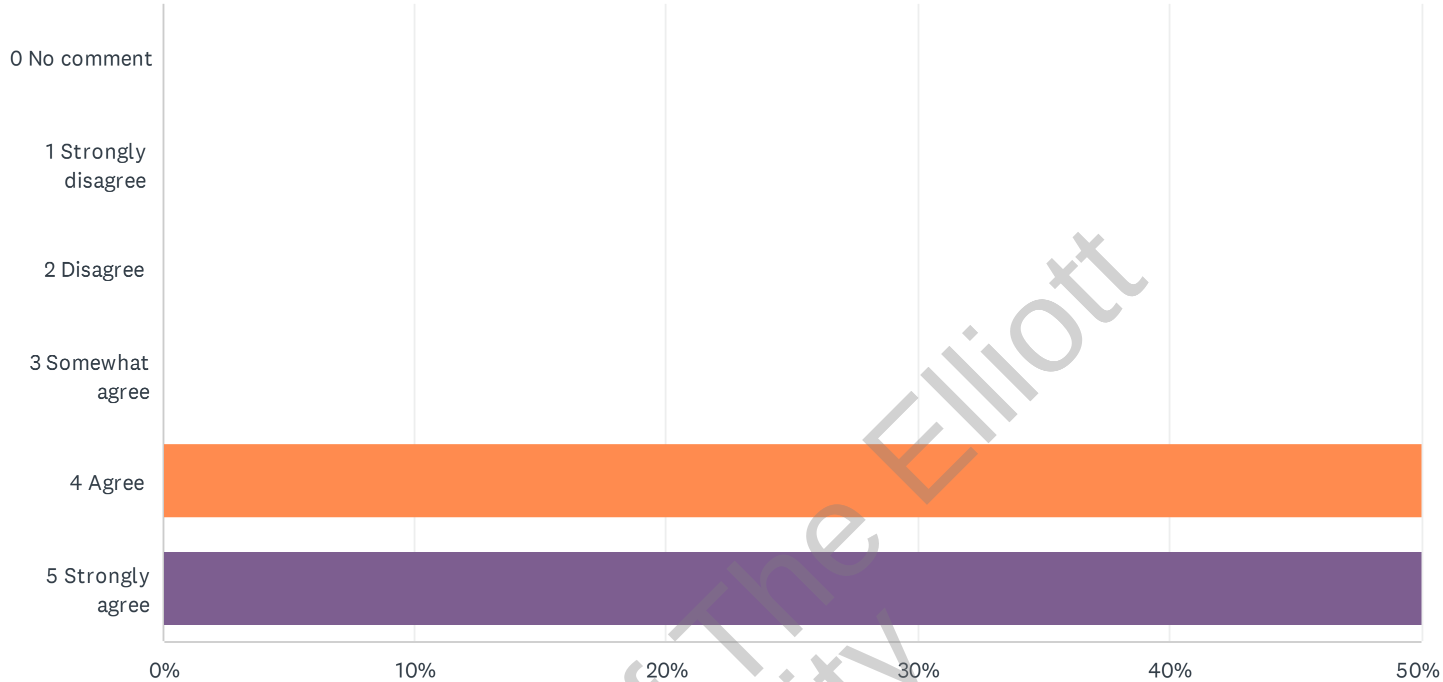
Answered: 8 Skipped: 1



ANSWER CHOICES	RESPONSES	
0 No comment	0.00%	0
1 Strongly disagree	0.00%	0
2 Disagree	0.00%	0
3 Somewhat agree	12.50%	1
4 Agree	37.50%	3
5 Strongly agree	50.00%	4
TOTAL		8

Q88 I contribute to the committees on which I serve.

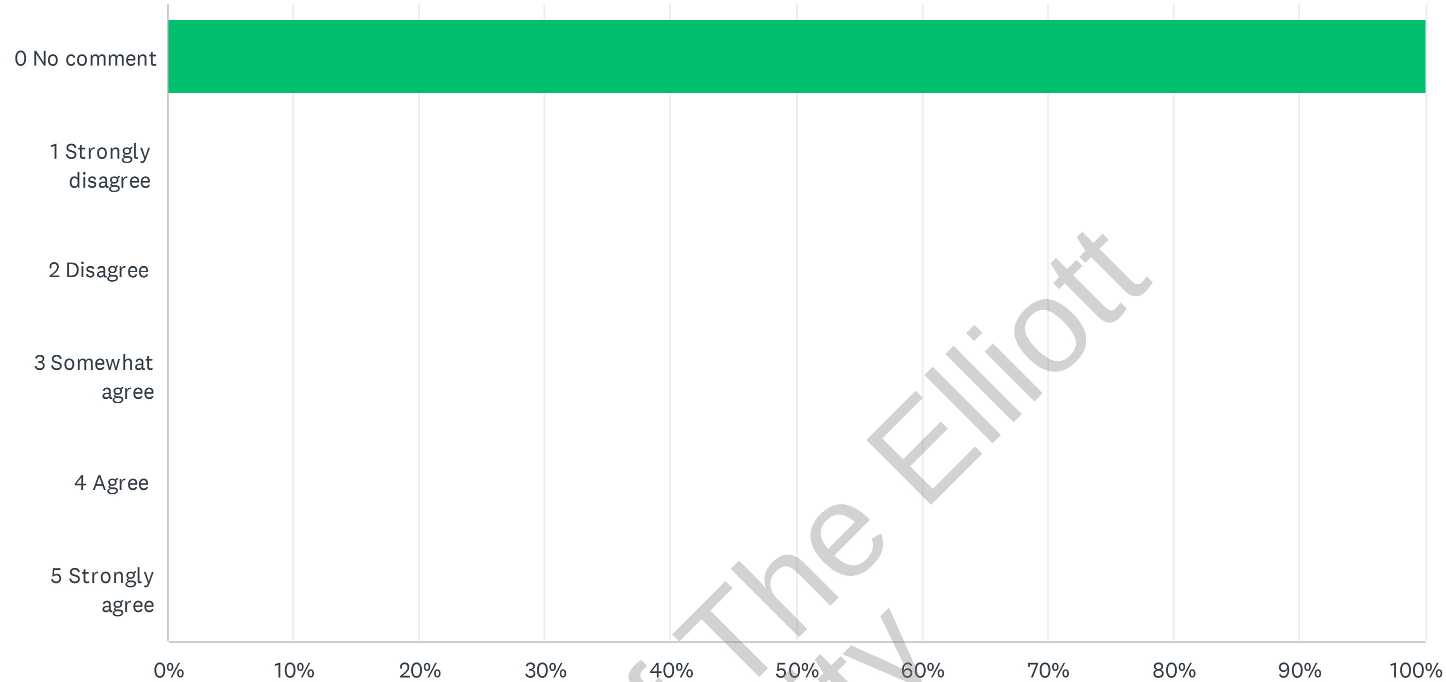
Answered: 8   Skipped: 1



ANSWER CHOICES	RESPONSES	
0 No comment	0.00%	0
1 Strongly disagree	0.00%	0
2 Disagree	0.00%	0
3 Somewhat agree	0.00%	0
4 Agree	50.00%	4
5 Strongly agree	50.00%	4
TOTAL		8

Q89 Comments on Trustee self-evaluation.

Answered: 8 Skipped: 1



ANSWER CHOICES	RESPONSES	
0 No comment	100.00%	8
1 Strongly disagree	0.00%	0
2 Disagree	0.00%	0
3 Somewhat agree	0.00%	0
4 Agree	0.00%	0
5 Strongly agree	0.00%	0
TOTAL		8

#	COMMENTS	DATE
1	I am honoured to serve on the Board of The Elliott and endeavour to contribute to good governance to the best of my ability. I view the experience as an ongoing opportunity to learn and to contribute.	5/7/2026 12:50 PM

Q90 Overall Comments.

Answered: 3 Skipped: 6

#	RESPONSES	DATE
1	While Board is effectively being managed by the trustees yet there is always room for improvements.	6/29/2026 5:27 PM
2	It is a very exciting time for the Board of the Elliott and I'm inspired by what we have begun.	5/7/2026 12:52 PM
3	Board trustees are working effectively but there is room for improvements	5/6/2026 4:56 PM

Q91 Please list up to three things that the Board could do to enhance and improve it governance and its own performance.

Answered: 7 Skipped: 2

ANSWER CHOICES	RESPONSES	
#1	100.00%	7
#2	100.00%	7
#3	100.00%	7

#	#1	DATE
1	finish the work it started on governance processes	7/3/2026 10:17 AM
2	Strengthen accountability	6/29/2026 5:27 PM
3	Adopt a policy-driven approach to governance	6/16/2026 4:52 PM
4	Strengthen its governance policy framework.	5/7/2026 12:52 PM
5	Consider diverse views	5/7/2026 8:45 AM
6	Timed agenda and assume content is pre-read to allow more time for discussion	5/6/2026 9:14 PM
7	Establish a Strong Governance & Evaluation Framework	5/6/2026 4:56 PM
#	**#2**	**DATE**
1	ensure that management has considered alternatives other than presented	7/3/2026 10:17 AM
2	Identify strengths, weaknesses, and areas for improvement.	6/29/2026 5:27 PM
3	Approve Critical Outcomes Policy and hold CEO accountable for interpreting and and achieving results	6/16/2026 4:52 PM
4	Improve its governance of risk.	5/7/2026 12:52 PM
5	More attention to research/evidence	5/7/2026 8:45 AM
6	Cover memos for all submissions that clearly state if its for information or for decision	5/6/2026 9:14 PM
7	Improve Quality of Information & Decision-Making	5/6/2026 4:56 PM
#	**#3**	**DATE**
1	continue to ask good questions	7/3/2026 10:17 AM
2	Provide ongoing training on governance, industry trends, regulatory changes, risk management, and emerging issues.	6/29/2026 5:27 PM
3	Ongoing Board (and senior staff) policy-driven governance education and training	6/16/2026 4:52 PM
4	Become more strategic in its approach.	5/7/2026 12:52 PM
5	Engage all board members by acknowledging the unique skillset each bring to the table	5/7/2026 8:45 AM
6	Focus on strategic choices vs operating imperatives	5/6/2026 9:14 PM
7	Strengthen Board Culture, Education & Engagement	5/6/2026 4:56 PM

Staff Report

THE Elliott COMMUNITY

TO: Board of Trustees

DATE: September 3, 2026

SUBJECT: THE ELLIOTT LONG-TERM CARE RESIDENCE Q2 2026 REPORT

RECOMMENDATION

To receive for information The Elliott Long-Term Care Residence (ELTCR) Q2 2026 Report prepared by the Administrator LTC and presented to the Board of Trustees on September 10, 2026.

BACKGROUND

In accordance with the Long-Term Care Services Agreement, the Administrator of the Long-Term Care Residence provides a quarterly report to the Elliott Board of Trustees.

REPORT

- **Achievement and Maintenance of Direct Care Hours**

The Elliott Long-Term Care Residence (ELTCR) continues to exceed the provincial requirement of 4.0 hours of direct care per resident per day, as mandated by legislation. For this quarter, the Residence achieved an average of 4.32 hours of direct care per resident day, demonstrating sustained performance above the standard.

- **Implementation of the Butterfly Approach**

Implementation of the Butterfly Approach continues to progress. Environmental enhancements and furnishings have been completed. Staff training was completed March 31, 2026. The mid-point audit and all planned milestones to date have been achieved and the organization remains on track for full Butterfly Accreditation in Fall 2026. We have confirmed our ongoing partnership with Meaningful Care Matters for 2027/ 28 with a plan for ongoing Butterfly Accreditation every 2 years.

- **CARF Accreditation (Commission on Accreditation of Rehabilitation Facilities)**

In preparation for CARF Accreditation in June 2027, workplans are being refined to ensure full organizational readiness.

<u>Complaints / Concerns</u>

There were zero (0) complaints/concerns received during Q1, 2026 by the ELTCR.

Staff Report

Critical Incident Reports

Two (2) critical incidents were reported to the MLTC during Q2, 2026 by the ELTCR. There was one inspection:

No.	Details of Critical Incident	Response from Management	Resolved within The Elliott	MLTC Completed Inspection
Inspection 2026-1628-0003	MLTC on site in follow-up to outbreak of previous quarter. Proactive review of doors in home. Written Notification of non-compliance with O.Reg 246/22. S 12(2). Two doors unlocked to enclosed balconies.	ELTCR process is to allow open access during appropriate weather. To become compliant, the policy was reviewed and updated to reflect actual practice. MLTC agreed that this resolves this concern.	No	Yes
M633-000007-26	May 2, 2026. Staff member using very harsh communication approach with resident. Resident received support. SDM notified.	Staff member no longer works at The Elliott as of May 19, 2026. Annual training of all staff re abuse. Mandatory notification to the Police (no action).	Yes	No
M633-000008-26	June 9, 2026. Chiller system maintenance required from 0800-1600. Cooling capacity reduced.	Internal cooling plan initiated. MLTC was notified; however they advised this was not required.	Yes	No

FINANCIAL IMPLICATIONS

N/A

STRATEGIC IMPERATIVE ALIGNMENT

Enhance The Elliott Community resident experience

Report Author: Martin Ruaux, Chief of Resident Care Services and Administrator

This report was approved and recommended by: Michelle Karker, Chief Executive Officer

Staff Report

TO:	**Board of Trustees**
DATE:	**September 3, 2026**
SUBJECT:	**CEO's Report – September 2026**

RECOMMENDATION

That the report titled "CEO's Report – September 2026" be received for information.

BACKGROUND

The CEO reports to the Board of Trustees in open session on Long-Term Care strategic updates and significant developments and items of importance for the Board of Trustees reflective of actions or events that have arisen since the Board's last meeting.

STRATEGIC REPORT

Enhance The Elliott Community resident experience

Care Environment Enhancements: The following enhancements to the care environment have been completed: the Anne Flowers Lounge, three new coffee bars, and the Ellridge Hobby/Games Room (formerly The Workshop). These improvements build on the addition of the gym in 2025, continuing a broader trend of amenity enhancements designed to enrich the resident experience while supporting ongoing sales efforts.

Butterfly Transformation: Training for the second cohort of staff has been successfully completed as part of the *Improving Dementia Care Program*. Final funding from Ontario Health, covering all approved expenses within the established funding framework, has also been received.

The annual Resident Demographic Report for 2026 has been completed and published. The annual Resident Experience Survey will be launched in September and will be open for 8 weeks.

Planning is underway for the inaugural "Many Cultures, One Community" multicultural celebration on September 21, inviting staff, volunteers, and residents to showcase their heritage, enhancing our programming and culture innovations.

Staff Report

We have expanded public engagement strategies and resident initiatives, in nominating Ellington resident Marc P. for the RHRA Resident Champion Award for his positive impact across the community, with results to be announced on September 16. Meanwhile, the newly upgraded Ellridge amenity space, the 'Workshop', was successfully completed and relocated, with a grand opening scheduled for September 16.

The New Horizons for Seniors Program grant application has advanced to the next review stage. If successful, the funding will deliver an accessible, community wide Stronger U Seniors Fitness program focused on strength, balance, and fall prevention, along with a $25,000 accessibility upgrade to the Ellington entrance, improving health and wellness Funding.

Bring out the best in everyone

Our volunteer program is growing! Volunteer interest continues to surge, marked by higher than usual application volumes over the past two quarters. We are actively working to streamline onboarding and retention strategies to effectively engage new volunteers this fall.

We are proud to recognize our Community Champions, including long time volunteer Denise Frasson, who was nominated for the United Way 7 Over 70 Award, formally recognizing her outstanding volunteer contributions both within The Elliott Community and across the broader Guelph area.

We leveraged the Canada Summer Jobs program to add a Social Media Coordinator, Recreation Therapists and a Junior Financial Analyst to our team, enhancing capacity and career development. Additionally, we secured a $5,000 HR Coop grant, strengthening our HR engagement while providing valuable hands on experience to emerging professionals.

Create community partnerships with purpose

The Elliott is hosting a Long Term Care Community Engagement Day on September 18 to showcase its Butterfly Approach to emotion based care for local leaders, including MPP Mike Schreiner. Through great events such as this, we continue to build community spirit and sector engagement. Additionally, leadership toured the University of Waterloo Research Institute for Aging to explore potential research partnerships, grant opportunities, and the Living Classroom program.

Community events and civic collaboration continue to be a positive highlight; in partnership with Hall Communications, Jordan Brown, and Hear Right Canada, The Elliott will host the inaugural Aging Well Showcase on September 26, featuring 35 vendors and 8 speakers. Operational collaborations also thrived, including a corporate volunteer Gardening Day with Sutherland Insurance and a workshop buildout partnership with local non profit DIYode.

Staff Report

We continue to invest in local sports and media alliances and are happy to share that The Elliott renewed its partnership with the Guelph Storm. For a fourth season through the Adopt-a-Charity program, we will expand branding in the Sleeman Centre's accessible seating areas and explore 50/50 draw charity proceeds, while partnering with Partner Plus Magazine to develop the community's annual publication.

Focus on financial sustainability

Year-to-date April results for 2026 were presented to the Corporate Affairs Committee on June 10th. LTC has a $969,246 surplus (more than 31% over budget). The main driver of this variance relates to the realization of Dementia Care grant revenue, higher than budgeted accommodation fees, and the lower than budgeted operating cost. Given it is early into the new fiscal year, it is expected that this surplus will diminish throughout the remainder of the year.

Several higher-priority unbudgeted capital infrastructure requirements have emerged in 2026 that require immediate attention. This has required staff to reprioritize its planned capital investment for 2026 giving way to the higher priority items. These items include the following in the Elliott building: main fire panel, the modernization of the two main elevators, and a required electrical feed for HVAC equipment. These items combined have an estimated cost of $1,070,431 and require the use of City capital funds already received to fund these. A recommendation to approve these items will be included in separate briefing notes and will be for approval recomendation in the Committee of Management report for September.

The development of the 2027 operating budget is well underway. Given the pressures of rising cost, and the need to upgrade the payroll system, it is anticipated that the LTC budget for 2027 will generate a very small surplus. Work continues on refining the budget and identifying the high priority capital needs for LTC for the 2027 budget.

Grant and revenue diversification continues to be successful. Fund Development continues to support multi departmental grant pipelines, actively pursuing opportunities through FedDev Ontario, the 2026 - 2027 Local Priorities Fund, the Ontario Trillium Foundation, the Toyota Driving Change Program, and the LifeLabs Community Investment Grant.

Report Authors: Tanya Watton, Chief of HR & Community Services

Martin Ruaux, Chief of Resident Care Services & Administrator

Al Van Leeuwen, Chief Financial Officer, Corporate Services

This report approved and recommended by: Michelle Karker, Chief Executive Officer

Date: May 14, 2026
To: GW OHT Integrated Care Council
From: Emmi Perkins, Director of Transformation
Subject: **GW OHT Integrated Care Council Key Messages – May 13, 2026**

Key Messages

The following are the Key Messages from the Guelph Wellington OHT (GW OHT) Integrated Care Council (ICC) meeting on **May 13, 2026**. Please share broadly with your staff, clinicians, boards, and partners.

1. **New Integrated Care Council Member –** Members of the ICC are excited to welcome Lindsay Beuermann to the Integrated Care Council as the new Executive Director of the Minto-Mapleton Family Health Team.
2. **Celebrations of Radical Collaboration –** At each ICC meeting, members are invited to share examples of radical collaboration amongst partners.
   a) Seniors on Stevenson – Partners from CMHA WW joined to share this update on how CMHA WW collaborated with Stepping Stone to identify the need in the senior population for transitional housing. The program launched in April 2026 and provides housing for 4 seniors along with support services.
   b) GW OHT Joint Quality Improvement Training – On April 4, GW OHT partners and members of the Data & QI Working Group met for a training session with in-house subject matter expertise from the RISE Platform, Guelph General Hospital and Guelph Family Health Team. Attendees left with tangible tools and strategies for quality improvement planning and cycles. The group plans to reconvene for more training in the fall.
   c) Joint AGM between Guelph CHC, Stonehenge, Wyndham House, Kindle, Family & Children's Services GW – As evidence of their on-going radical collaboration, these organizations are holding a joint Annual General Meeting (AGM) in June.
3. **GW OHT Patient, Family, Caregiver (PFAC) Engagement Opportunity –** The GW OHT invites partners who may not have a PFAC to bring any projects and work they would like feedback on the GW OHT PFAC. Their next meeting is on June 10th.
4. **Updated Integrated Care Council Terms of Reference –** The ICC reviews the Terms of Reference for the Council annually. The primary changes were to clarify the tri-chair model which consists of an executive, governor, and patient advisor. Additionally, the term length for these positions was increased to 1-2 years. The adjustment to term length was made in acknowledgement of the significant learning curve for new chairs entering the role. The Integrated Care Council endorsed all changes made to the Terms of Reference.
5. **Primary Care Expansion Funding –** The GW OHT is thrilled to announce that we were successful in our proposal for primary care expansion funding that we submitted back in November. Primary care partners

will receive a total of $4.6 million to attach approximately 12,000 patients to primary care. Our Family Health Teams and Community Health Centre are working to complete a collaborative implementation plan. Residents in need of a primary care provider can join the Health Care Connect waitlist. GW OHT partners are invited to promote the primary care attachment opportunity – resources can be found on the GW OHT website.

6. **One Team Approach Assessment 2026 –** The One Team Approach definition and domains were developed by the GW OHT in 2023 to be a guiding term for the desired culture of integrated work with a people centered approach. This approach promotes greater efficiency, innovation, and a positive work environment. The assessment survey was distributed to GW OHT partners earlier this year. All domains of the One Team Approach showed improvement when compared to the 2024 results. ICC members discussed the results and discussed priority areas of focus for the coming year.

7. **Aligning Strategic Priorities and Planning Processes –** The GW OHT ICC continues to advance collaborative governance as an enabler to achieve the GW OHT shared purpose (i.e. improved health of the population of Guelph Wellington). Previous discussion led to recognition that there is already great alignment between GW OHT strategic priorities and the strategic priorities of partners organizations. Next steps include:

    - Continue to support organization who are undertaking strategic planning in 2026 to explore opportunities for process alignment
    - Create a shared resource list for OHT partners (including names of consultants with different strengths in planning vs. execution)
    - Invite group of interested ICC members to meet to consider progress to date (including summary of today's discussion) to guide process / recommendations back to ICC in June.

If you have any questions or comments, or would like to be involved in the Guelph Wellington Ontario Health Team, please contact Emmi Perkins (emmi.perkins@guelphwellingtonoht.com)

The Elliott Long-Term Care Residence Report

TO: Committee of Management

DATE: May 21, 2026

SUBJECT: The Elliott Long-Term Care Residence Quarterly Report 2026 – Q1

RECOMMENDATION

That the 2026-Q1 quarterly report on the operations of The Elliott Long-Term Care Residence (the ELTCR), be received.

BACKGROUND

The *Fixing Long-Term Care Act, 2021* (*FLTCA*) requires every municipality within Ontario to support a municipal long-term care home. The City of Guelph (The City) is meeting this responsibility through a Delegation of Authority Bylaw, assigning the responsibility to operate The City's approved 114-bed long-term care home to The Elliott Community's (The Elliott) Board of Trustees. In addition to the Delegation of Authority Bylaw, The City and The Elliott have also entered into a Long-Term Care Services Agreement (Services Agreement) that identifies the specific nature of the relationship and sets out the responsibilities of both parties to the Agreement. There is a requirement within the Services Agreement for The Elliott to report quarterly on the operations of the ELTCR.

The Elliott operates a campus of care offering retirement and life-lease care and services beyond the ELTCR. As the relationship set out in the Services Agreement pertains strictly to the ELTCR operations, this report only reflects long-term care operations and does not reflect the retirement and life-lease suites.

REPORT

In accordance with the provisions within the Services Agreement:

<u>Attestation of the Responsibilities of The Elliott</u>

The Elliott confirms that to the best of its knowledge, it is,

(a) Complying with all provisions of the *Municipal Act* relating to local boards;
(b) Complying with all provisions of the *Elliott Act*;
(c) Complying with all provisions of the *Fixing Long-Term Care Act), 2021*, including fulfilling the obligations under section 69;
(d) Complying with all laws, regulations, policies, and orders made by any level of government that relate to the operation of the ELTCR;
(e) Complying with all provisions in the Elliott Delegation of Authority Bylaw; and,
(f) Managing a Business Plan and Strategic Plan for the ELTCR.

Overview of the Operations

The Elliott – Long-Term Care Update

- **Butterfly Accreditation Achievement**
  Implementation of the Butterfly Approach continues to progress. Environmental enhancements and furnishings are being updated on the second-floor home areas (Eramosa and Paisley). Staff training was completed as scheduled by March 31, 2026. All planned milestones to date have been achieved, and the organization remains on track for full Butterfly Accreditation in Fall 2026.

- **Direct Hours of Care Compliance**
  ELTCR continues to exceed the provincial requirement of 4.0 direct hours of care per resident per day, as mandated by the *FLTCA, 2021*, to be achieved by March 31, 2025. In Q4 (last reported), The Elliott reported an average of 4.11 direct hours of care per resident per day, demonstrating our ongoing commitment to quality care.

- **Infection Prevention and Control Compliance**
  The Elliott remains fully compliant with all Ontario Government and Public Health directives related to Infection Prevention and Control (IPAC). We are committed to upholding the highest standards to protect the health and safety of our residents, staff, and visitors.

There have been no conflicts of interest of any Board of Trustee members or employees of The Elliott providing services.

There have been no requests for information under the *Freedom of Information and Protection of Privacy Act,* R.S.O. 1990, c.58.

There are no identified litigations, potential litigations, or claims (insured or uninsured) of any kind at the time of preparing this report.

In the opinion of the Chair of the Board of Trustees, no other issues or matters require a direction from or a decision of the Committee of Management or which the Committee of Management has requested that the Board of Trustees provide a report.

The following represent specific sections of the responsibilities of the Services Agreement:

Complaints / Concerns

There were zero (0) complaints/concerns received during Q1, 2026 by the ELTCR.

Critical Incident Reports

Four (5) critical incidents were reported to the MLTC during Q1, 2026 by the ELTCR:

No.	Details of Critical Incident	Response from Management	Resolved within The Elliott	MLTC Completed Inspection
M633-000003-26	Disease Outbreak – Enteric – Norovirus. Home-wide outbreak declared on Feb 27, 2026 with a number of resident cases, as well as staff cases	In collaboration with Public Health, outbreak declared. All appropriate IPAC outbreak management standards in place. Routine Outbreak Management Committee meetings. Collaborative reporting through WSIB (employees). Cases resolved by March 9 and outbreak declared over.	Yes with support of Public Health	No
M633-000002-26	Abuse of Resident by staff member. Feb 15, 2026 Director of Care made aware of concerns via an anonymous email advising of witnessing a current PSW's approach to care.	Investigation initiated. Team member suspended. Difficult to substantiate via resident interviews, however staff members were able to validate the issues. Police notified. Staff member terminated.	Yes with support of Guelph Police	Phone inquiry
M633-000004-26	Disease Outbreak – Enteric – Fountain Home Area involving 3 residents/ no staff. Declared March 11, 2026	In collaboration with Public Health, outbreak declared. All appropriate IPAC outbreak management standards in place. Routine Outbreak Management Committee meetings. Declared over March 16, 2026.	Yes with support of Public Health	No
M633-000005-26	Fall with Injury. Occurred on March 14, 2026. Resident assisting in dining room fell. Transferred to hospital and diagnosed with dislocated right shoulder and left patella fracture. Returned to The Elliott on March 17, 2026	Assessed as Low risk for Falls. Following incident – head to toe assessment completed. EMS called for transfer to hospital.	Yes	No
M633-000006-26	Disease Outbreak – Enteric – Wellington Home Area involving 5 residents/ no staff. Declared March 31, 2026	In collaboration with Public Health, outbreak declared. All appropriate IPAC outbreak management standards in place. Routine Outbreak Management Committee meetings. Declared over April 6, 2026	Yes with support of Public Health	No

Financial Overview

City Council confirmed The Elliott's 2026 Long-Term Care budget, on February 4th, 2026. The total funding request was $3,005,863 and consisted of:

- Base operational funding of $2,113,789; and,
- Annual capital expenditure of $892,074.

Financial Results

At the end of Q1 2026, The Elliott – LTC operations has a year-to-date surplus of $913,162 which is $281,670 higher than budget; revenue was higher than budget for the period and expenses were under resulting in a 45% variance at the end of the quarter.

Statement of Operations and Variance Analysis

THE ELLIOTT COMMUNITY
LTC - STATEMENT OF OPERATIONS
For the Three Months Ending March 31, 2026

	OA Envelope Actual $	Other envelopes Actual $	Total all envelopes Actual $	Year To Date Budget $	Variance $	Variance %	Notes
REVENUE							
LTC accommodation (basic and preferred)	852,182	0	**852,182**	826,909	25,273	3.1%	
Provincial funding - MLTC	126,879	2,671,334	**2,798,213**	2,626,675	171,538	6.5%	
City of Guelph funding	528,447	0	**528,447**	528,447	0	0.0%	
Recognition of deferred contributions	114,639	0	**114,639**	136,479	(21,840)	-16.0%	**1**
Other revenue	88,090	8,159	**96,249**	58,655	37,594	64.1%	**2**
Total Revenue	**1,710,237**	**2,679,493**	**4,389,730**	**4,177,165**	**212,565**	**5.1%**	
EXPENSES							
Wages, salaries and benefits	550,860	1,861,166	**2,412,026**	2,475,854	63,828	2.6%	
Supplies, facilities, equipment, services	316,793	384,620	**701,413**	683,586	(17,827)	-2.6%	
Administrative, financing, other	113,334	26,616	**139,950**	138,559	(1,391)	-1.0%	
Amortization of capital assets and financing fees	223,179	0	**223,179**	247,673	24,494	9.9%	
Total Expenses	**1,204,166**	**2,272,402**	**3,476,568**	**3,545,672**	**69,104**	1.9%	
SURPLUS / (DEFICIT)	**506,071**	**407,091**	**913,162**	**631,493**	**281,670**	**44.6%**	

Actual results with variances of 10% and $15,000 compared to budget are explained as follows:

1. Capital asset purchases were less than budget. In December of 2024, the capital plan was revised after receipt of a Building Condition Assessment for the Elliott (LTC) building. Management planned for less spending in 2025 with an increase spend in 2026. Several requirements have emerged in 2026 so management is in the midst of forecasting these costs and prioritizing the investment for 2026.

2. In Q1, TEC received $30,000 from University of Waterloo Research Institute for Aging, as budgeted. TEC also received $16,500 from HIROC for Butterfly and Emergency Preparedness, $10,000 from Healthcare Excellence Canada and funds and a salary recovery for time spent administering the PSW student program.

PREPARED BY:

Martin Ruaux
Chief of Resident Care Services and Administrator

Al Van Leeuwen
CFO

APPROVED BY:

Kathy Wilkie
Chair, Board of Trustees

RECOMMENDED BY: Michelle Karker, CEO

The Elliott Long-Term Care Residence Report

TO: Committee of Management

DATE: September 3, 2026

SUBJECT: The Elliott Long-Term Care Residence Quarterly Report 2026 – Q2

RECOMMENDATIONS

That the 2026-Q2 quarterly report on the operations of The Elliott Long-Term Care Residence (the ELTCR), be received; and

That the temporary inter-fund borrowing from City long-term care capital funds to advance capital requirements of the retirement home, within the funding envelope previously approved by City Council and with a plan for the repayment period to be reflected in 2027 budget, as described in The Elliott Long-term Care Residence Quarterly report 2026 – Q2 dated September 15, 2026, be approved.

BACKGROUND

The *Fixing Long-Term Care Act, 2021* (*FLTCA*) requires every municipality within Ontario to support a municipal long-term care home. The City of Guelph (The City) is meeting this responsibility through a Delegation of Authority Bylaw, assigning the responsibility to operate The City's approved 114-bed long-term care home to The Elliott Community's (The Elliott) Board of Trustees. In addition to the Delegation of Authority Bylaw, The City and The Elliott have also entered into a Long-Term Care Services Agreement (Services Agreement) that identifies the specific nature of the relationship and sets out the responsibilities of both parties to the Agreement. There is a requirement within the Services Agreement for The Elliott to report quarterly on the operations of the ELTCR.

The Elliott operates a campus of care offering retirement and life-lease care and services beyond the ELTCR. As the relationship set out in the Services Agreement pertains strictly to the ELTCR operations, this report only reflects long-term care operations and does not reflect the retirement and life-lease suites.

REPORT

In accordance with the provisions within the Services Agreement:

<u>Attestation of the Responsibilities of The Elliott</u>

The Elliott confirms that to the best of its knowledge, it is,

(a) Complying with all provisions of the *Municipal Act* relating to local boards;
(b) Complying with all provisions of the *Elliott Act*;
(c) Complying with all provisions of the *Fixing Long-Term Care Act), 2021*, including fulfilling the obligations under section 69;
(d) Complying with all laws, regulations, policies, and orders made by any level of government that relate to the operation of the ELTCR;
(e) Complying with all provisions in the Elliott Delegation of Authority Bylaw; and,
(f) Managing a Business Plan and Strategic Plan for the ELTCR.

Overview of the Operations

The Elliott – Long-Term Care Update:

- **Butterfly Accreditation Achievement**
  Implementation of the Butterfly Approach continues to progress. Environmental enhancements and furnishings have been completed. All planned milestones to date have been achieved, including a mid-point audit of readiness and the organization remains on track for full Butterfly Accreditation in fall 2026.

- **Direct Hours of Care Compliance**
  ELTCR continues to exceed the provincial requirement of 4.0 direct hours of care per resident per day, as mandated by the *FLTCA, 2021*, to be achieved by March 31, 2025. In Q1, The Elliott reported an average of 4.32 direct hours of care per resident per day, demonstrating our ongoing commitment to quality care.

- **Infection Prevention and Control Compliance**
  The Elliott remains fully compliant with all Ontario Government and Public Health directives related to Infection Prevention and Control (IPAC). We are committed to upholding the highest standards to protect the health and safety of our residents, staff, and visitors.

There have been no conflicts of interest of any Board of Trustee members or employees of The Elliott providing services.

There have been no requests for information under the *Freedom of Information and Protection of Privacy Act,* R.S.O. 1990, c.58.

There are no identified litigations, potential litigations, or claims (insured or uninsured) of any kind at the time of preparing this report.

In the opinion of the Chair of the Board of Trustees, no other issues or matters require a direction from or a decision of the Committee of Management or which the Committee of Management has requested that the Board of Trustees provide a report.

The following represent specific sections of the responsibilities of the Services Agreement:

Complaints / Concerns

There were zero (0) complaints/concerns received during Q2, 2026 by the ELTCR.

Critical Incident Reports

Two (2) critical incidents were reported to the MLTC during Q2, 2026 by the ELTCR. There was also one (1) inspection by the MLTC:

No.	Details of Critical Incident	Response from Management	Resolved within The Elliott	MLTC Completed Inspection
Inspection 2026-1628-0003	MLTC on site in follow –up to an outbreak that occurred in the previous quarter. Completed a proactive review of doors in home. Written Notification of non-compliance with Ontario Reg 246/22. S12 (2). Two doors were found to be unlocked to enclosed balconies.	ELTCR process is to allow full open access to balconies during appropriate weather. In order to become compliant – policy was updated to reflect actual practice. MLTC agreed that this resolves the concern.	No	Yes
M633-000007-26	May 2, 2026. Staff member using very harsh communication approach with resident. Resident received support from another team members. SDM notified.	Investigation completed. Staff member no longer employed at The Elliott as of May 19, 2026. Annual training of all staff regarding abuse and neglect. Mandatory notification to the Police (no action taken).	Yes	No
M633-000008-26	June 9, 2026. Chiller system maintenance required from 0800-1600. Cooling capacity reduced.	Internal cooling plan initiated. Residents and families notified. MLTC notified – however, they advised that this notification and report was not required.	Yes	No

Financial Overview

The Elliott Community has significant ongoing and future capital needs, consistent to any healthcare organization that is capital intensive. Distinctive to The Elliott, is its seniors continuum model providing a range of interconnected services that support individuals aging needs, but with only partial capital funding to support these needs. Multi-year capital plans have been created without identified funding options to cover all these needs. The issue is compounded when critical infrastructure needs replacement in a manner not consistent with established plans.

For 2026, several higher-priority infrastructure requirements have emerged that require immediate attention and given the limited funds The Elliott has available for capital, the need to defer items in the approved 2026 capital budget is required to give way to higher priority items. The following is an updated list of requirements for Board of Trustee approval on September 10, 2026 which requires the use and reallocation of received LTC capital funds from The City. Discussions with City staff have been ongoing and they are aware of this critical need by TEC. We are seeking approval via Committee of Management to authorize the use of these capital funds to complete these critical time sensitive infrastructure requirements.

Project	Estimated Project Cost
Fire panel for The Elliott Building (Approved by the Board of Trustees and underway)	$426,000
HVAC electrical requirement for The Elliott Building	$68,429
Elevator Modernization (2 Main Cars) for The Elliott Building	$576,002
Cooling Tower for The Ellington Building	$614,434
Heat Pumps for The Ellington Building	$80,000

The projects identified above support the capital needs of resident home areas within The Elliott Community, including Long-Term Care and Retirement Living. The prioritization of these projects reflects the critical nature of the infrastructure involved and the need to maintain safe, reliable and sustainable operations across the campus. Given the challenge of having no funding for capital for Retirement and Life Lease, a long-term plan for funding the capital requirements of the complete campus of The Elliott needs to be developed to adequately sustain building and infrastructure for operations. Staff are requesting that discussions commence between the City Staff/Board of Trustees/Staff in order to determine how long-term capital needs for The Elliott will be funded.

Financial Results

At the end of Q2 2026, The Elliott – LTC operations has a year-to-date surplus of $638,689 which is $55,008 higher than budget; revenue was higher than budget for the period and expenses were also higher than budget resulting in a 9% variance at the end of the second quarter.

Statement of Operations and Variance Analysis

THE ELLIOTT COMMUNITY
LTC - STATEMENT OF OPERATIONS
For the Six Months Ending June 30, 2026

	OA Envelope Actual $	Other envelopes Actual $	Total all envelopes Actual $	Year To Date Budget $	Variance $	Variance %	Notes
REVENUE							
LTC accommodation (basic and preferred)	1,708,912	0	1,708,912	1,653,819	55,093	3.3%	
Provincial funding - MLTC	220,743	5,148,184	5,368,927	5,298,738	70,189	1.3%	
City of Guelph funding	1,056,895	(1)	1,056,895	1,056,895	(1)	0.0%	
Recognition of deferred contributions	229,279	0	229,279	272,958	(43,679)	-16.0%	1
Other revenue	114,630	21,039	135,669	114,310	21,359	18.7%	2
Total Revenue	**3,330,459**	**5,169,222**	**8,499,681**	**8,396,720**	**102,961**	**1.2%**	
EXPENSES							
Wages, salaries and benefits	1,345,051	4,415,094	**5,760,145**	5,623,824	(136,321)	-2.4%	
Supplies, facilities, equipment, services	514,915	806,974	**1,321,889**	1,417,845	95,956	6.8%	
Administrative, financing, other	338,325	(5,647)	**332,678**	276,025	(56,653)	-20.5%	
Amortization of capital assets and financing fees	446,281	0	**446,281**	495,346	49,065	9.9%	
Total Expenses	**2,644,572**	**5,216,421**	**7,860,992**	**7,813,040**	**(47,954)**	-0.6%	
SURPLUS / (DEFICIT)	**685,887**	**(47,199)**	**638,689**	**583,681**	**55,008**	**9.4%**	

Actual results with variances of 10% and $15,000 compared to budget are explained as follows:

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PREPARED BY:

Martin Ruaux
Chief of Resident Care Services and Administrator

Al Van Leeuwen
Chief Financial Officer

APPROVED BY:

Kathy Wilkie
Chair, Board of Trustees

RECOMMENDED BY: Michelle Karker, Chief Executive Officer

THE GREAT HARVEST 2026: BUILDING NEW RELATIONSHIPS

The Opportunity at The Great Harvest 2026

The Great Harvest is an important opportunity to raise funds for The Elliott Community while bringing supporters, partners and members of our community together. It also gives us an opportunity to introduce new people to our work and begin relationships that may grow into future support.

Why Personal Connections Can Make a Difference

The relationship-building opportunity depends in part on **who we bring into the room and how they are introduced to us**. The Association of Fundraising Professionals identifies fundraising events as valuable opportunities to meet prospective donors, strengthen relationships and turn new attendees into lasting supporters.[1]

Existing relationships can make those introductions even more effective. CCS Fundraising highlights the value of using personal and professional networks to open doors to prospective supporters, with the connector facilitating the introduction rather than making the fundraising pitch, and staff then taking responsibility for cultivation and follow-up.[2]

The Great Harvest gives us a natural opportunity to apply both principles. A personal invitation from a Trustee can introduce someone to The Elliott Community through a relationship they already trust, while the event gives that guest an opportunity to experience our community, meet people connected to our work and begin developing their own relationship with us.

Our Request in Support of The Great Harvest 2026

For this year's Great Harvest, we are requesting Trustees to:

Identify → Personally Invite → Welcome & Connect

- **Identify** people within their personal or professional networks who may be valuable to introduce to The Elliott Community
- **Personally invite** them to attend The Great Harvest
- **Welcome and connect** them during the event, helping create natural introductions to members of The Elliott Community team and others connected to our work

Trustees are not being asked to make a fundraising solicitation. The value of their involvement is the relationship and personal introduction that helps open the door.

[1] AFP: Five Ways Prospect Research Can Boost Fundraising Events
[2] CSS Fundraising: How to Turn Prospects into Donors Through Relationship Mapping

Who to Consider as a Potential Guests

There is no single profile, and prospective guests do not need to meet every criterion. As Trustees consider their networks, we are looking for people who bring some combination of:

- **Connection:** an existing relationship with a Trustee that makes a personal invitation meaningful
- **Capacity:** the potential to support philanthropically
- **Influence:** leadership, networks or community reach that could help open doors and create further connections
- **Interest:** an existing or potential interest in The Elliott Community or our mission

Prospective guests do not need to already identify as philanthropists or have an existing relationship with The Elliott Community. What matters is that there is a credible basis for a relationship that we can build over time.

What Happens After the Introduction?

Fund Development will support Trustees throughout the process by providing invitation wording and event information and coordinating guest details.

Once a prospective supporter has been introduced, Fund Development will take responsibility for prospect management, any appropriate solicitation, follow-up and stewardship. This allows Trustees to focus on the contribution their existing relationship makes possible: **opening the door and helping create a meaningful connection.**

Support Available from Fund Development

The Senior Development Officer is available to support Trustees with any aspect of this invitation, including thinking through potential guests, tailoring invitation wording or answering questions about The Great Harvest.

Please feel free to reach out at any time to Gloria Mulwa on email gmulwa@elliottcommunity.org or phone 519 822 0491 Ext. 2242. Fund Development is here to make the process as easy and well-supported as possible for Trustees.