

LENNOX & ADDINGTON COUNTY GENERAL HOSPITAL



BOARD OF DIRECTORS MEETING MINUTES December 1, 2020 ACR | Zoom

A meeting of the Board of Directors of the Lennox & Addington County General Hospital was held in the Airhart Conference Room and via Zoom Videoconference at 6:30 p.m. on December 1, 2020.

PRESENT:

Board:	Allan MacGregor (Chair)	Geoff Griffin
	Deb Lowry	Jamie Uson
	Michelle Smith	Dr. Kim Morrison
	Wayne Coveyduck	Tracy Kent-Hillis
	Bob Clancey	Adrienne Harris-Hale
	Chris Seeley	Susan Jack
	Robert Paul	Alice Carlson

REGRETS:

Lori Francis	Dr. Crystal Gonu
Norm Clark	John Wise

Staff in Attendance:	Darlene Moore	Erin Brown
	Tracy Ringrose	Sheila Mabee (Recorder)

1. Call to Order/Opening Remarks

The meeting was called to order at 6:32 p.m., by Allan MacGregor.

Allan introduced Alice Carlson to the meeting. Alice is the new Patient & Family Advisor Board representative whose insight and contributions to the LACGH Board will be welcome additions.

2. Approval of the Agenda

The agenda was approved as circulated.

Motion #1

Rationale: Normal Practice

Motion: That the Board of Directors hereby approves the agenda dated December 1, 2020.

Moved by: Deb Lowry

Seconded by: Chris Seeley

The motion was carried.

3. Conflict of Interest

The Chair inquired if any Board member wished to declare a conflict of interest based on items identified on the Agenda. There were no identified conflicts of interest.

4. Minutes of the Previous Meeting

The minutes of the previous meeting were approved as circulated.

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Motion #2

Rationale: Normal Practice

Motion: That the Board of Directors hereby approves the minutes of the previous meeting dated November 3, 2020.

Moved by: Bob Clancey
Seconded by: Geoff Griffin

The motion was carried.

5. Business Arising

5.1 Regional Updates

Allan MacGregor reported on the following items:

- The regional Chairs/Vice Chairs Forum (CVCF) held a meeting on November 23, 2020. Allan, Deb Lowry and Wayne Coveyduck all attended the call. There was a regional HIS Project update. Negotiations with Cerner are going well. There is a 36 month implementation timeline and the possibility of remote cloud hosting with Amazon, which could have considerable cost savings. The project was felt to be promising from a cost and reduced implementation timeline perspective.
- A Zoom invitation was circulated to all Board members and Quality Committee members for a presentation by Dr. Gerald Evans, infectious disease doctor at KHSC. Brockville raved about the presentation, resulting in an encore presentation be extended to all SE Hospital Board/Quality Committee members. The presentation date is December 7 from 5:00 to 6:00 p.m.

Dr. Morrison provided the following update in relation to the FLA-OHT:

- The FLA-OHT application has officially been approved by the Ministry.
- Moving forward, the work done by the initial steering committee will now be in the process of determining what a leadership collaborative looks like for the four main projects.
- The last piece being worked on right now is collaborative decision-making (intentionally not labelled governance). A collaborative decision-making agreement will likely come to our Board for signoff, potentially in January. This is similar to signing off on the application with nothing changing in the first year. Governance will be determined in the years to come and what that will look like with all of the partners.

Wayne Coveyduck reported that we are still awaiting Ministry response to our LTC bed application.

6. Reports

6.1 Quality Committee

Chris Seeley had nothing further to highlight from the November 24, 2020 Quality Committee minutes circulated with the Board meeting package.

6.2 Patient & Family Advisory Council

Alice Carlson reported that she is getting back up to speed with Patient & Family Advisory Council (PFAC) following a year hiatus. In addition to the November 10, 2020 meeting minutes circulated with the Board package, Alice highlighted that PFAC had met to go over the new TVs to be purchased for the patient care rooms.

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6.3 Medical Advisory Committee

Dr. Morrison highlighted the following from the November 12, 2020 Medical Advisory Committee meeting:

The Medical Advisory Committee reviewed the Annual Radiation Protection Report as an essential component of the radiation safety. The team deserves kudos for their multiple gold stars in their report which included the new machines which were replaced due to the flood earlier in the year and added additional testing to this year's report.

The Medical Advisory Committee discussed respirology services and two Respirologists interested in coming to Napanee. Dr. Morrison noted that our Internal Medicine department is doing a great job at expanding services for our community. With the rates of lung disease being much higher than other areas of the province, this would be a welcome addition to have in our community.

The Medical Advisory Committee reviewed and approved amendments to the Professional Staff Appointment Application, which Dr. Morrison spoke about at last month's meeting. The forms were amended to be inclusive of other professional staff, including Nurse Practitioners (NPs). This will enable KHSC NPs working at KHSC in the Chemo unit to write orders for patients seen at the LACGH satellite chemo unit. No concerns were noted by the Board.

Motion #3

Rationale: The Board of Directors is asked to consider an amended appointment application to be inclusive of a variety of types of practitioners caring for patients in our hospital.

As an example, with this revised application KHSC Nurse Practitioners may use it to be credentialed as part of the satellite chemotherapy unit at LACGH.

Motion: The Board of Directors hereby supports the amendment to the Professional Staff Appointment Application, as recommended by the Medical Advisory Committee.

Moved by: Robert Paul

Seconded by: Michelle Smith

The motion was carried.

The Medical Advisory Committee reviewed the re-appointment applications to the LACGH Medical Staff for the following:

- Dale Engen – Courtesy with Admitting (Anesthesia)
- Cameron MacLean – Active (Anesthesia)
- Peter Hollett – Consulting (Cardiology)

No concerns were noted by the MAC; therefore, the re-appointment applications were recommended to the Board of Directors for approval. The Board reviewed the credentialing applications and no concerns were noted.

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Motion #4

Rationale: Applications for appointment to the Medical Staff require the review and approval of the Medical Advisory Committee and the Board of Directors.

Motion: The Board of Directors hereby approves the following re-appointments to the LACGH Medical Staff, as recommended by the Medical Advisory Committee:

- Dale Engen – Courtesy with Admitting (Anesthesia)
- Cameron MacLean – Active (Anesthesia)
- Peter Hollett – Consulting (Cardiology)

Moved by: Geoff Griffin

Seconded by: Jamie Uson

The motion was carried.

The Medical Advisory Committee reviewed the re-appointment applications, with the noted changes, to the LACGH Medical Staff for the following:

- Sasha Bhan - Active (Radiology) *
- Jessica Biederman - Active (Radiology) *
- Nicola Gambarotta - Active (Radiology) *
- Annette Polanski - Active (Radiology) *
- Susan James - Active (Radiology) *

**updated procedures lists to reflect service expansion in the Diagnostic Imaging department*

No concerns were noted by the MAC; therefore, the re-appointment applications, with the noted changes, were recommended to the Board of Directors for approval. The Board reviewed the credentialing applications and no concerns were noted.

Motion #5

Rationale: Applications for appointment to the Medical Staff require the review and approval of the Medical Advisory Committee and the Board of Directors.

Motion: The Board of Directors hereby approves the following re-appointments to the LACGH Medical Staff, all of which have updated procedures lists to reflect service expansion in the Diagnostic Imaging Department, as recommended by the Medical Advisory Committee:

- Sasha Bhan - Active (Radiology)
- Jessica Biederman - Active (Radiology)
- Nicola Gambarotta - Active (Radiology)
- Annette Polanski - Active (Radiology)
- Susan James - Active (Radiology)

Moved by: Bob Clancey

Seconded by: Chris Seeley

The motion was carried.

The Medical Advisory Committee reviewed the appointment application to the LACGH Medical Staff for the following:

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- Marisa Horniachek – Consulting (Gynaecology)

No concerns were noted by the MAC; therefore, the appointment application was recommended to the Board of Directors for approval. The Board reviewed the credentialing application and no concerns were noted.

Motion #6

Rationale: Applications for appointment to the Medical Staff require the review and approval of the Medical Advisory Committee and the Board of Directors.

Motion: The Board of Directors hereby approves the following appointment to the LACGH Medical Staff, as recommended by the Medical Advisory Committee:

- Marisa Horniachek – Consulting (Gynaecology)

Moved by: Robert Paul

Seconded by: Bob Clancey

The motion was carried.

6.4 Governance Committee

Deb Lowry reviewed the following from the November 19, 2020 Governance Committee meeting:

The Governance Committee had a good discussion at the meeting in relation to the OHA Board Self-Assessment. Responses are due back to the OHA by December 8, 2020 by Board members. The link for submitting the survey will be shared by Sheila Mabee in an email following the meeting. A sampling of questions was included with the Board package to provide a sense of the questions to be asked. Most Board members have seen the survey before and we have had good scoring in the past. For those new to the Board, Deb highlighted one question which will be asked and can give a bit of trouble in answering. A number of years ago, our Board made a conscious decision to always include management in the Board meetings. To have management at the table with the Board was felt to be important for inclusivity and collaboration. Question 5.8 speaks to *meetings without management*. This question is difficult to answer because our Board always makes sure management are included. Deb suggested an answer of - agree or totally agree – to this question. For any clarity or if there were any questions related to the OHA Board Self-Assessment, Deb noted to please reach out to herself or to Sheila Mabee.

The Governance Committee also had a good discussion about financial support for the FLA-OHT. A motion will be discussed with the Finance Committee report later in the meeting.

The Governance Committee had a good discussion about the draft 2020-23 Communication Plan, which was tweaked a bit. The Governance Committee approved the updated Plan with a recommendation for Board approval.

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Motion #7

Rationale: As part of the oversight roles and responsibilities of the Board, the Board ensures that the organization appropriately communicates with its stakeholders. Accreditation Canada identifies that the governing body should work with the CEO to establish, implement, and evaluate a communication plan for the organization.

Motion: The Board of Directors hereby approves the 2020-23 Corporate Communication Plan, as recommended by the Governance Committee.

Moved by: Chris Seeley
Seconded by: Robert Paul

The motion was carried.

6.5 Finance Committee

Deb Lowry reviewed the following from the November 23, 2020 Finance Committee meeting:

The Finance Committee met virtually with Investment Manager, Peter Rawson for a fall update. Investments are doing surprisingly well, despite the volatility in the markets with the COVID-19 pandemic.

The Finance Committee reviewed and approved the 2021-22 draft budget proposal, which Darlene Moore will speak to later in the meeting.

6.5.1 October Financial Statements and Cheque List

The Finance Committee reviewed the October 2020 Financial Statements and Cheque List which totaled \$3,925,123.50. No concerns were noted by the Finance Committee or the Board.

Motion #8

Rationale: Normal Practice.

Motion: The Board of Directors hereby approves the following, as recommended by the Finance Committee:

- *October 2020 Cheque List totaling \$3,925,123.50;*
- *October 2020 Financial Statements.*

Moved by: Geoff Griffin
Seconded by: Jamie Uson

The motion was carried.

6.5.2 Capital Equipment Requests

The Finance Committee reviewed a request for the allocation of \$36,889 towards the purchase of:

- *OR. Storage Cabinet. (\$8,021). Added Cost; OR. Video Monitor. (\$6,250). Replacement; and ER. AutoPulse Resuscitation System. (\$22,628). New.*

No concerns were noted by the Finance Committee or the Board.

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Motion #9

Rationale: The Board of Directors is required to review and approve capital requests.

Motion: The Board of Directors hereby approves the following capital requests totaling \$36,889, as recommended by the Finance Committee:

- OR. Storage Cabinet. (\$8,021). Added Cost.
- OR. Video Monitor. (\$6,250). Replacement.
- ER. AutoPulse Resuscitation System. (\$22,628). New.

Moved by: Robert Paul
Seconded by: Bob Clancey

The motion was carried.

6.6 Volunteer Services

In addition to the written report circulated with the Board meeting package, Susan Jack highlighted the following:

- Volunteer Executive are hoping to meet soon (next week).
- There have been a number of people enquiring about the possibility of having another Gift Shop sale for staff.
- The gift bags made up for the LTC residents have been brought into the Hospital. They are in incubation for a 48 hour period prior to being distributed.

6.7 Foundation Report

Adrienne Harris-Hale noted that the Winter Campaign and Tribute Tree donations have grown since her report was circulated to the Board in the meeting package. The Catch-the-Ace campaign has resumed.

Adrienne provided a special thank you to the Volunteer Services who are assisting with the Catch-the-Ace campaign and decorating the Tribute Tree. The Volunteer Services were also acknowledged for making a substantial contribution to the IV Pump Campaign.

6.8 Chief Executive Officer's Report

Further to the written report provided in the Board package, Wayne Coveyduck shared the following information:

- Last month the Board discussed the opportunity to renovate and create a second floor space about the Westdale Auditorium. It was felt that this project should be paused at the drawing finalization stage. There is a lot of changes within the health care sector (provincial procurement, OHT development, etc.) with many unknowns and having surplus space which could potentially be left vacant would be money not well spent right now. If we have drawings ready, this would mean we are ready for permit application without investing in the buildout until such a time as deemed necessary.
- As we await Ministry response to our LTC application, Wayne wondered about pulling our Transitional Care Bed proposal and submitting a refreshed version of what we originally proposed a few years back. Having both submissions with the Ministries (MOH, MLTC) could have them wondering if we have the capital, land, finances to commit to two large projects in

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tandem. As there have been a large number of local LTC bed announcements of late, the board liked the notion of engaging with the MOH on our transitional care bed proposal.

- Deb Lowry commented on the positive remarks in the Auditor General report on KFLA Public Health. This reflect nicely on our partnership with them. She also provided kudos to Nancy Wicks and the Laboratory team who did a phenomenal job with Lab Accreditation, scoring 97% this year.

Motion #10

Rationale: Normal Practice

Motion: The Board of Directors hereby accepts the reports from the Quality Committee, Patient & Family Advisory Council, Medical Advisory Committee, Governance Committee, Finance Committee, Volunteer Services, Foundation and the CEO.

Moved by: Deb Lowry

Seconded by: Susan Jack

The motion was carried.

7. Correspondence Received up to November 25, 2020

There was nothing further to report for correspondence.

8. New Business

8.1 2021-22 Budget Plan and Capital Budget

Darlene Moore hoped that everyone had the opportunity to thoroughly read through the commentary and supporting documentation of the budget and capital plan for 2021-22. She provided the following summarizing highlights:

- Under the Benefit section, following the Finance Committee meeting, the assumption was updated for CPP rates changed the income statement and notes on that for additional \$23,000 on the benefit lines
- The team put together a budget where you are seeing some of the changes proposed for next year, with the Chemo expansion and the Supportive Living launch being the main cruxes. There were no assumptions made for Covid and such, as they are reimbursable expenses by the Ministry.
- We are still projecting a 1% surplus and we have a capital list at just over \$904,000 with a broad capture from both the building equipment and software areas.
- Some of the funding sources were populated for areas we are fairly certain of (base line funding, etc.) and we will be looking at other opportunities from other sources as well.

There were comments that this was a well presented budget with no questions or concerns were noted.

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Motion #11

Rationale: Annually, the hospital is required to submit a Hospital Annual Planning Submission (HAPS), which includes a budget for the Hospital and formulates part of our Hospital Sector Accountability Agreement.

Motion: That the Board of Directors hereby approves the 2021-22 Draft Budget Plan and Capital Budget, as recommended by the Finance Committee.

Moved by: Jamie Uson
Seconded by: Robert Paul

The motion was carried.

8.2 Cyber Insurance

Darlene Moore highlighted that the Cyber Insurance renewal invoice has arrived and is significantly higher than last year (+27%), despite us having no claims. Colin Catt thought the increase was a bit high, given our lower risk factors.

Following lengthy discussion, Darlene was asked to go back to our Broker to inquire about reducing the rate. Alternatively, we can increase the deductible. It was determined that this insurance was indeed needed and we can potentially look at alternative options for future years.

9. Closed Session

At 7:36 p.m., the Board moved into closed session. Staff were excused from the remainder of the meeting.

Motion #12

Rationale: Normal Practice

Motion: That the Board of Directors hereby moves into closed session.

Moved by: Bob Clancey
Seconded by: Jamie Uson

The motion was carried.

At 8:35 p.m., the Board rose from closed session.

Motion #13

Rationale: Normal Practice

Motion: That the Board of Directors hereby rises from closed session.

Moved by: Robert Paul
Seconded by: Bob Clancey

The motion was carried.

10. Next Meeting

The next regular meeting of the Board is scheduled for 6:30 p.m., on Tuesday January 12, 2021.

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11. Adjournment

The meeting was adjourned at 8:35 p.m.

Motion #14

Rationale: Normal Practice

Motion: That the Board of Directors hereby adjourns their meeting at 8:35 p.m. on December 1, 2020.

Moved by: Deb Lowry

Seconded by: Robert Paul

The motion was carried.