



LENNOX AND ADDINGTON COUNTY GENERAL HOSPITAL

BOARD OF DIRECTORS

MEETING MINUTES

December 7, 2021

Zoom | ACR

A meeting of the Board of Directors of the Lennox and Addington County General Hospital (LACGH) was held in the Airhart Conference Room and via Zoom at 6:30 p.m. on December 7, 2021.

PRESENT:

- |               |                   |                        |
|---------------|-------------------|------------------------|
| <b>Board:</b> | Deb Lowry (Chair) | Wayne Coveyduck        |
|               | Allan MacGregor   | Tracy Kent-Hillis *    |
|               | Bob Clancey *     | Dr. Kim Morrison *     |
|               | Norm Clark *      | Adrienne Harris-Hale * |
|               | Lori Francis *    | Susan Jack *           |
|               | Geoff Griffin *   | Alice Carlson          |
|               | Robert Paul       |                        |

REGRETS:

- |                |                 |
|----------------|-----------------|
| Jamie Uson     | Ric Bresee      |
| Michelle Smith | Dr. Sonal Patel |

- |                             |                 |                         |
|-----------------------------|-----------------|-------------------------|
| <b>Staff in attendance:</b> | Erin Brown      | Tracy Ringrose          |
|                             | Darlene Moore * | Sheila Mabee (Recorder) |

\* Attended via zoom

1. Meeting Opening

1.1 Call to Order/Opening Remarks

The meeting was called to order at 6:30 p.m., by Deb Lowry.

1.2 Land Acknowledgment

Deb Lowry started the meeting with the following Land Acknowledgment:

*A Land Acknowledgment recognizes the traditional territories of the Indigenous peoples, before the arrival of settlers, and their unique and continuing relationship with these lands. In particular, we acknowledge that Lennox and Addington County General Hospital is built on the ancestral and traditional territory of the Anishinaabeg and Haudenosaunee Peoples, including the Mohawks of the Bay of Quinte, and on the land of the Huron-Wendat Nation. As the LACGH Board of Directors, we are dedicated to honouring Indigenous history and culture, and are committed to moving forward in the spirit of reconciliation and respect.*

1.3 Approval of the Agenda

The agenda was approved as circulated.

Motion #1
<i>Rationale: Normal Practice</i>
<b>Motion: That the Board of Directors hereby approves the agenda dated December 7, 2021.</b>
Moved by: Alice Carlson
Seconded by: Bob Clancey
The motion was carried.



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#### 1.4 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.

#### 1.5 Approval of Previous Board Meeting Minutes

The minutes of the previous meeting were approved as circulated.

Motion #2

*Rationale: Normal Practice*

***Motion: That the Board of Directors hereby approves the minutes of the previous meeting dated November 2, 2021.***

Moved by: Allan MacGregor

Seconded by: Susan Jack

The motion was carried.

## 2. Business Arising

### 2.1 Regional Updates

Deb Lowry reported on the following items:

- The OHA Board Chair circulated a “Chair’s Report” full of news and insights targeted to Hospital Board Chairs. Deb inquired if the Board would like this circulated to receive a high level overview of current health care news. There were nods of agreement, therefore Deb asked for Sheila Mabee to circulate the email to the Board.

#### Regional HIS Project

Wayne Coveyduck highlighted that the RHIS Project did host a 3-hour large virtual gathering with senior leadership across the SE sub-region to provide a project update.

Tracy Kent-Hillis and Dr. Morrison have the lists of those recruited to be the leads of the RHIS working groups. The sheer volume of people involved was staggering. LACGH is well represented, with 18% of those chosen being from our hospital.

“Lumeo”, which was being considered as the new branding name for the RHIS Project, is being reevaluated following feedback that was received.

#### FLA-OHT

The FLA-OHT Partnership Council meeting was held on November 25, 2021. Deb Lowry inquired if Dr. Morrison could provide a 30-minute education session, ahead of the January Board meeting, to which Dr. Morrison agreed.

### 2.2 LTC Update

Wayne Coveyduck reported that he participated in a LTC work group with representatives from across the three boundaries of the province, who are working on a report to submit to the Ministry of LTC (MLTC) in an attempt to identify barriers to LTC development (i.e. process issues, financing challenges, etc.).

Wayne reported that he flagged a couple of concerns around the 15-stage process, and navigating through to the opening of LTC beds.



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Another big and current challenge, is the financials and skyrocketing costs with the supply and demand challenges brought on by the COVID-19 pandemic. There is an appeal to the MLTC to provide another increase to the construction subsidy, in an effort to fill in the gap of these increased construction costs.

#### 2.3 Board Self-Assessment – Reminder

Deb Lowry reminded Board members to complete and submit their Board Self-Assessment, which was circulated via email by Sheila Mabee. The deadline for completion was December 13, 2021, so that the results can be tabulated and reviewed prior to the next meeting.

In addition, there are still a few who need to submit their annual declaration and consent forms. Board members were reminded to get these in to Sheila Mabee ASAP.

Deb Lowry prompted Board members to put on their thinking caps about future potential Board members and to identify potential candidates who may wish to join the Board for the upcoming term. Names of identified parties could be forwarded to Deb via email.

### 3. Reports

#### 3.1 Quality Committee

Lori Francis highlighted the following from the November 16, 2021 Quality Committee meeting:

- The Accreditation surveyors staff debrief presentation was circulated. The preliminary score was 97.7%, with an appeal being submitted in relation to one ROP which was corrected while surveyors were still onsite. The final results have yet to be received, but were anticipated prior to Christmas.
- The LTC satisfaction survey results were reviewed at Quality. There were some good overall comments and a few areas for the clinical team to work on.
- The mid-year KHSC Women’s Clinic report was reviewed, with no concerns noted. They are changing the name of the Clinic to “Lakeside Clinic” to be more inclusive.
- A great presentation was provided by Nancy Wicks from the Laboratory. The presentation was included with the meeting minutes for information.

#### 3.2 Art Decor Committee

In absence of Michelle Smith, the minutes of November 9, 2021 were briefly reviewed as circulated.

There was a motion to approve the updated Art Décor Policy B-23, with no concerns noted by the Board.

Motion #3

*Rationale: As part of the annual work plan, Board Committees shall update their Board policies annually or as required.*

***Motion: The Board of Directors hereby approves the amendment to the Art Decor Board policy B-23, as recommended by the Art Decor Committee.***

Moved by: Geoff Griffin

Seconded by: Alice Carlson

The motion was carried.

#### 3.3 Medical Advisory Committee

Dr. Morrison highlighted the following from the November 11, 2021 Medical Advisory Committee meeting:



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The Medical Advisory Committee reviewed the radiation protection annual report. Kudos were provided to the DI Team for a successful launch of the Sectra PACS System. The new PACS system provides the ability to smoothly move images with greater ease.

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

- Cameron MacLean – Active (Anesthesia with Family Medicine)

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.

#### 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:***

- Cameron MacLean – Active (Anesthesia with Family Medicine)

Moved by: Robert Paul

Seconded by: Lori Francis

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:

- Mark Waldron – Active (Emergency Medicine) *addition of methadone initiation added*

No concerns were noted by the MAC; therefore, the re-appointment application, with the noted change, were recommended to the Board of Directors for approval. The Board reviewed the credentialing application 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 appointment to the LACGH Medical Staff, with the noted change, as recommended by the Medical Advisory Committee:***

- Mark Waldron – Active (Emergency Medicine) *initiation of methadone added*

Moved by: Geoff Griffin

Seconded by: Allan MacGregor

The motion was carried.

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



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- Cowan “Dale” Mercer – Consulting (General Surgery)
- Philip Lee – Locum Tenens (Emergency Medicine)

No concerns were noted by the MAC; therefore, the appointment applications were recommended to the Board of Directors for approval. The Board reviewed the credentialing applications 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 appointments to the LACGH Medical Staff, as recommended by the Medical Advisory Committee:***

- Cowan “Dale” Mercer – Consulting (General Surgery)
- Philip Lee – Locum Tenens (Emergency Medicine)

Moved by: Lori Francis

Seconded by: Bob Clancey

The motion was carried.

### 3.4 Finance Committee

Lori Francis noted a correction to item 7.3 in the Finance Committee minutes, which refers to the \$1.5 million and \$5 million commitment by the LACGH Foundation. This should have been a \$5 million total commitment by the Foundation. The minutes will be corrected to reflect this change.

Lori reported that Peter Rawson, Investment Manager attended the meeting to go over the investment funds, which are doing well and stable. Lori also reviewed the following items from the November 29, 2021 Finance Committee meeting:

#### 3.4.1 Board, CEO and Senior Manager Expenses

The Finance Committee reviewed the Board, CEO, and Senior Management Expenses for October 2021 which totaled \$304.02. The Finance Committee recommends to the Board, that the following expenses be approved:



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Motion #7

Rationale: The Broader Public Sector Accountability Act requires that the expenses of the Board, CEO and Senior Management be reviewed and/or approved by the Board.

Motion: The Board of Directors hereby approves the following Board, CEO and Senior Management Expenses which totaled \$304.02, as recommended by the Finance Committee.

October 2021

Table with 8 columns: Name, Meals, Hospitality, Accommodation, Vehicle Rental/Own Used Mileage, Incidentals (Parking, tolls, etc.), Fares, Total. Rows include Wayne Coveyduck, Deb Lowry, and a TOTAL row.

Moved by: Robert Paul
Seconded by: Geoff Griffin

The motion was carried.

3.4.2 October Financial Statements and Cheque List

The Finance Committee reviewed the October 2021 Financial Statements and Cheque List which totaled \$3,064,551.48. 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 2021 Cheque List totaling \$3,064,551.48;
October 2021 Financial Statements.

Moved by: Allan MacGregor
Seconded by: Bob Clancey

The motion was carried.

3.4.3 2022-23 Draft Capital Budget

The Finance Committee reviewed the draft 2022-23 capital budget, which was reviewed by the senior management team, prior to the Finance Committee meeting. 2022-23 requests for capital items were reviewed against a prioritization framework and evaluation criteria. The 2022-23 draft capital budget amount of \$1,426,068 (\$605,378 net of applicable funding) was recommended by the Finance Committee for approval by the Board of Directors.

No concerns were noted by the Board of Directors, therefore the 2022-23 draft Capital Budget was approved.



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#### Motion #9

*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: The Board of Directors hereby approves the 2022-23 Draft Capital Budget, as recommended by the Finance Committee***

Moved by: Geoff Griffin

Seconded by: Robert Paul

The motion was carried.

#### 3.4.4 Transfer from Investments

The Finance Committee reviewed for approval, the request from the Executive Committee, who recommended a transfer of \$1.5 million from investments, to assist with cash flow. No concerns were noted by the Finance Committee or the Board.

#### Motion #10

*Rationale: Normal Practice.*

***Motion: The Board of Directors hereby approves \$1.5 million transfer from investments to the cash account, as recommended by the Executive Committee and the Finance Committee.***

Moved by: Robert Paul

Seconded by: Bob Clancey

The motion was carried.

#### 3.4.5 MOH Request: Bed Allocation

The Finance Committee reviewed and considered an ask put forth by the Ministry of Health (MOH), who are looking to hospitals to consider if there is space or additional bed availability for future use. Wayne noted that the second floor of the hospital could be redeveloped back in to beds, should the office spaces be relocated. It was noted that, upon review, the second floor could be redeveloped into 23 additional beds, should the MOH need or require them to be redeveloped in the future.

Work is currently underway to relocate the second floor surgeon suites to the basement. This relocation is scheduled to occur early in the new year. The Board discussed not doing any redevelopment, or spending any money on this, unless approached by the MOH to redevelop the space for additional beds. There was concern of the large scale projects on the horizon, and this would mean a disruption of administration.

The Finance Committee and the Board agreed to put forth a notice to the MOH that there is a potential for 23 beds at LACGH through a redevelopment of the second floor and relocation of offices.



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Motion #11

*Rationale: Normal practice.*

***Motion: The Board of Directors approves putting forth a submission for a potential 23 beds that could be redeveloped on the second floor of the hospital through a renovation and relocation of offices, as recommended by the Finance Committee.***

Moved by: Geoff Griffin

Seconded by: Allan MacGregor

The motion was carried.

### 3.5 Patient Family Advisory Council

Alice Carlson highlighted that Dr. Robichaud is planning to attend an upcoming PFAC meeting to speak to geriatric medicine. The PFAC is looking to recruit additional members, and would like to expand membership diversity.

### 3.6 Volunteer Services Report

Susan Jack noted, in addition to the report circulated in the meeting package that volunteers in the area of BMD will not be opening until January, as the Convenor retired due to illness. With the COVID-19 numbers going up, a number of volunteers are hesitant about coming into the hospital to volunteer.

Susan Jack, Tracy Ringrose and Employee Health Services are working together in an attempt to streamline the recruitment process for Volunteers.

### 3.7 Foundation Report

Adrienne Harris-Hale noted, in addition to the report circulated with the meeting package, that Winter Campaign and Tribute Tree donations have now topped \$60,000 as of December 6, 2021. Volunteer Services were thanked for their assistance with putting decorations on the Tribute Tree.

### 3.8 Chief Executive Officer's Report

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

The CEO report included an article which was recently in the Picton Gazette which highlighted a LTC project currently underway and the seriousness of what can happen with cost overruns.

The enhanced 24/7 security, which was implemented a number of months ago, was discussed, as was the rise in incidents occurring at the COVID Assessment Centre (CAC). It was noted that security patrols at the CAC have been increased to hourly patrols. Improved antenna coverage was installed, so that staff at the CAC can get in contact with security, when and if needed.



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Motion #12

*Rationale: Normal Practice*

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

Moved by: Lori Francis

Seconded by: Susan Jack

The motion was carried.

#### 4. Other

##### 4.1 Correspondence Received up to November 30, 2021

There was nothing further to report for correspondence.

#### 5. New Business

##### 5.1 Deseronto Medical Clinic – Capital Facility Agreement

Wayne Coveyduck highlighted that we have received the Capital Facility Agreement from the Town of Deseronto, in relation to the Deseronto Medical Clinic. This agreement will be put in place so that the property can be exempt from paying property taxes.

Wayne highlighted that the agreement was for a 10-year period, up to December 31, 2031, and wondered if this was a typo and rather should have been 2021. Wayne did not see any concern with signing off on the agreement. There will be another piece which will be added in relation to the operational costs, and who is responsible for what in terms of property maintenance (i.e. snow clearing, grass cutting, etc.).

The Board was agreeable with having a 10-year agreement with the Town, and signing off on the agreement.

Motion #13

*Rationale: The Hospital and the Town of Deseronto are required to enter into a Capital Facility Agreement in order to make the Hospital owned Deseronto Medical Clinic tax exempt.*

***Motion: That the Board of Directors approves the Capital Facility Agreement with the Town of Deseronto for the Deseronto Medical Clinic.***

Moved by: Robert Paul

Seconded by: Allan MacGregor

The motion was carried.

#### 6. Closed Session

At 7:25 p.m., the Board moved into closed session.



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Motion #14

*Rationale: Normal Practice*

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

Moved by: Allan MacGregor

Seconded by: Robert Paul

The motion was carried.

At 7:47 p.m., the Board rose from closed session.

Motion #15

*Rationale: Normal Practice*

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

Moved by: Geoff Griffin

Seconded by: Bob Clancey

The motion was carried.

**7. Meeting Closing**

**7.1 Next Meeting**

The next regular meeting of the Board is scheduled for 6:30 p.m., on Tuesday January 11, 2022.

**7.2 Adjournment**

The meeting was adjourned at 7:48 p.m.

Motion #16

*Rationale: Normal Practice*

***Motion: That the Board of Directors hereby adjourns their meeting at 7:48 p.m. on December 7, 2021.***

Moved by: Allan MacGregor

Seconded by: Robert Paul

The motion was carried.