



LENNOX AND ADDINGTON COUNTY GENERAL HOSPITAL

BOARD OF DIRECTORS

MEETING MINUTES

March 7, 2023

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 March 7, 2023.

PRESENT:

Board: Deb Lowry (Chair)	Wayne Coveyduck
Allan MacGregor	Christine Wilkinson
Bob Clancey	Dr. Kim Morrison
Norm Clark	Dr. Heather Khey Beldman*
Geoff Griffin*	
Robert Paul*	
Jamie Uson*	
Rosaleen Cutler	

REGRETS:

Kelly Roantree
Susan Jack
Tony Brazda

Staff in attendance: Erin Brown	Sanjeev Kumar
Tracy Ringrose	Andrea Nussberger (Recorder)

* Attended via zoom

1. Meeting Opening

1.1 Call to Order/Opening Remarks

After an education session from Wes Lynah on the Lumeo Project, the meeting was called to order at 6:55 p.m., by Deb Lowry.

1.2 Land Acknowledgement

Deb Lowry started the meeting with the following Land Acknowledgment:

A Land Acknowledgement 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 with the below addition:

2.3 Electronic Signatures



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Motion #1

Rationale: Normal Practice

Motion: That the Board of Directors hereby approves the amended agenda dated March 7, 2023.

Moved by: Jamie Uson

Seconded by: Rosaleen Cutler

The motion was carried.

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 February 7, 2023.

Moved by: Bob Clancey

Seconded by: Norm Clark

The motion was carried.

2. Business Arising

2.1 Regional Updates

Deb Lowry reported on the following items:

- Deb and Wayne will attend the 2023 OHA Health Care Leadership Summit in May 2023. It was noted that this Summit previously was named “Annual OHA Convention” and now is only open to CEOs and Board Chairs.

2.2 LTC Updates

Wayne Coveyduck reported on the following item:

- The LTC facility DA has not yet been received.

2.3 Electronic Signatures

Deb highlighted that pre-pandemic motions were brought to Board meetings and were pre-signed by Board members prior to the meeting opening. It has recently been recognized that we do not follow this process anymore. Deb stated that she wants to re-introduce this process however, it would preclude any members who are attending the Board meetings via Zoom. Deb proposed the idea of continuing with the current practice in which the Board Chair reads out the motion and members move and second them then post meeting Andrea would add e-signatures to the corresponding motions. No concerns were noted.



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Motion #3

Rationale: To include Board members whom attend Board of Director meetings via Zoom, the Board Chair is asking for consent for the Executive Assistant to add electronic signatures to printed motions.

Motion that the Board of Directors hereby approves the Executive Assistant to add Board members electronic signatures to Board motions they have moved or seconded, post meeting.

Moved by: Bob Clancey

Seconded by: Norm Clark

The motion was carried.

3. Reports

3.1 Quality Committee

Bob Clancey highlighted the following from the February 21, 2023 Quality Committee meeting:

- The 2023-24 Draft QIP was presented and approved. Erin noted that the majority of the indicators are mandated by Ontario Health and 2 are custom to LACGH. Three of the indicators are tied to executive compensation.

After reviewing the minutes, concerns were brought forward regarding the 2 patients complaints involving misdiagnosis of RSV in babies. It was highlighted that on February 22, 2023, Dr. Warren lead a physician education session on pediatrics, with a focus on RSV, and these 2 incidents were referenced. Erin noted that she followed up with both mothers and both were satisfied that an education session and discussion were held in response to their complaints/concerns.

Motion #3

Rationale: Our hospital is required to annually submit a Quality Improvement Plan based on requirements under the Excellent Care for All Act, 2010 (ECFAA). Our 2023/2024 QIP sets out key strategies to enhance our quality of care, improve safety, increase satisfaction and achieve better clinical outcomes for patients and residents.

Motion: The Board of Directors hereby approves the 2023-24 Quality Improvement Plan, as recommended by the Quality Committee.

Moved by: Geoff Griffin

Seconded by: Rosaleen Cutler

The motion was carried.



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Motion #4

Rationale: It is mandatory, under the Excellent Care for All Act (ECFAA) to link compensation for the Chief Executive Officer (CEO) and other executives reporting to the CEO to the achievement of performance targets in our organizations Quality Improvement Plan (QIP). Performance-based executive compensation is linked to achieving specific QIP targets, as well as achieving success on selected corporate goals and objectives. The amount of compensation that is performance-based for the executive team has been set at 3% for 2023-24.

Motion: The Board of Directors hereby approves the proposed indicators linked to the 3% executive compensation for the 2023-24 Quality Improvement Plan, as recommended by the Quality Committee and tied to the achievement of the following selected corporate goals and objectives:

- 15% relative reduction in the percentage of surgical case long-waiters
- 10% relative increase in the percentage of IPU survey respondents who responded “completely” to the following question: Did you receive enough information from hospital staff about what to do if you were worried about your condition or treatment after you left the hospital?
- 15% increase in the number of reported workplace violence incidents and near-misses.

Moved by: Al MacGregor

Seconded by: Bob Clancey

The motion was carried.

3.2 Medical Advisory Committee

Dr. Morrison highlighted the following from the February 9, 2023 Medical Advisory Committee meeting:

- Five policies were reviewed and approved.
- The decision was made to defer order set review to the Lumeo Project.

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

- Darren Beiko - Consulting (Urology)
- Chris Doiron - Consulting (Urology)
- D. Robert Siemens - Consulting (Urology)
- Stephen Steele - Consulting (Urology)
- Naji Touma - Consulting (Urology)
- David Good - Consulting (Pathology and Molecular Medicine)
- Sasha Bhan - Consulting (Radiology)
- Nicola Gambarotta - Active (Radiology)
- Jessica Biederman – Active (Radiology)
- Susan James - Active (Radiology)
- Annette Polanski - Active (Radiology)
- Binyamin Rokach - Consulting (Radiology)
- Tara Baetz - Consulting (Oncology)
- James Biagi - Consulting (Oncology)
- Christopher Booth - Consulting (Oncology)



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- Annette Hay - Consulting (Oncology)
- David H Lee - Consulting (Oncology)
- Bethany Monteith - Consulting (Oncology)
- Andrew Robinson - Consulting (Oncology)

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 #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, as recommended by the Medical Advisory Committee:

- Darren Beiko - Consulting (Urology)
- Chris Doiron - Consulting (Urology)
- D. Robert Siemens - Consulting (Urology)
- Stephen Steele - Consulting (Urology)
- Naji Touma - Consulting (Urology)
- David Good - Consulting (Pathology and Molecular Medicine)
- Sasha Bhan - Consulting (Radiology)
- Nicola Gambarotta - Active (Radiology)
- Jessica Biederman – Active (Radiology)
- Susan James - Active (Radiology)
- Annette Polanski - Active (Radiology)
- Binyamin Rokach - Consulting (Radiology)
- Tara Baetz - Consulting (Oncology)
- James Biagi - Consulting (Oncology)
- Christopher Booth - Consulting (Oncology)
- Annette Hay - Consulting (Oncology)
- David H Lee - Consulting (Oncology)
- Bethany Monteith - Consulting (Oncology)
- Andrew Robinson - Consulting (Oncology)

Moved by: Norm Clark

Seconded by: Bob Clancey

The motion was carried.

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

- Andrea Fung– Consulting (Oncology)
- Mariam Jafri – Consulting (Oncology)

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.



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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:

- Andrea Fung– Consulting (Oncology)
- Mariam Jafri – Consulting (Oncology)

Moved by: Geoff Griffin

Seconded by: Jamie Uson

The motion was carried.

3.3 Governance Committee

Al MacGregor highlighted the following from the February 15, 2023 meeting:

- Nick Pasquino, from BLG, attended the meeting to review ONCA compliance documents. Some changes will be made and brought back to the May Governance Committee meeting for review before approval at the June Board meeting and final approval at the June AGM.
- There were discussions around a legal name change for LACGH given that the hospital will be incorporating a LTC facility in the future. Nick conducted a brand search on the name “Lennox and Addington County Health Centre”. Wayne noted that Nick has completed the search and recommended reserving the name “Lennox and Addington County Health Centre” until a final decision has been made.
- The two policies below, both of which were updated by BLG, were reviewed and approved.
 - Board Code of Conduct Policy
 - Board Conflict of Interest
- Andrea will have Annual Director Declaration & Consent forms available after the meeting for any Board directors who have yet to sign.
- The Board Retreat was discussed and it was decided that the retreat will be in Kingston this year. Andrea will get quotes from three hotels for comparison and further discussion will be held at the May meeting.

Motion #7

Rationale: The Governance Committee and Board of Directors are required to review and update Board policies.

Motion: The Board Committee approves the updated, in compliance with ONCA, Board Code of Conduct Policy B-01.

Moved by: Robert Paul

Seconded by: Norm Clark

The motion was carried.



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Motion #8

Rationale: The Governance Committee and Board of Directors are required to review and update Board policies.

Motion: The Board Committee approves the updated, in compliance with ONCA, Board Conflict of Interest Policy B-03. Moved by: Robert Paul

Seconded by: Norm Clark

The motion was carried.

Motion #9

Rationale: The Governance Committee and Board of Directors are required to review and approve the Guidelines for Director Selection.

Motion: The Board of Directors hereby approves the Guidelines for Director Selection as recommended by the Governance Committee.

Moved by: Bob Clancey

Seconded by: Jamie Uson

The motion was carried.

3.4 Pastoral Care Committee

Deb Lowry highlighted that the Committee approved the return of the annual Memorial Service and the date of April 30, 2023 was approved. This memorial service will be for families of patients who passed in the Hospital in 2022.

3.5 Finance Committee

Jamie Uson reviewed the following from the February 27, 2023 Finance Committee meeting:

- The Investment Policy was reviewed and a few concerns were pointed out and the hope is to get clarification from Peter Rawson, Investment Manager at a future Finance Committee meeting.

3.5.1 Board, CEO and Senior Manager Expenses

The Finance Committee reviewed the Board, CEO, and Senior Management Expenses for January 2023 which totaled \$79.44. The Finance Committee recommends to the Board, that the following expenses be approved:



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Motion #10

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 \$79.44, as recommended by the Finance Committee.

January 2023

Name	Meals	Hospitality	Accommodation	Vehicle Rental/Own Used Mileage	Incidentals (Parking, tolls, etc.)	Fares	Total
Sanjeev Kumar	79.44						
TOTAL							\$79.44

Moved by: Rosaleen Cutler
Seconded by: Bob Clancey

The motion was carried.

3.5.2 Revised Operating Budget

Jamie highlighted that the 2023-24 operating budget was revised to reduce cost. The updated 2023-24 Operating Budget was reviewed and approved by the Finance Committee and the Board of Directors.

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: The Board of Directors hereby approves the 2023-24 revised Operating Budget, as recommended by the Finance Committee.

Moved by: Geoff Griffin
Seconded by: Robert Clancey

The motion was carried.

3.5.3 January Financial Statements and Cheque List

The Finance Committee reviewed the January 2023 Financial Statements and Cheque List which totaled \$3,308,441.57. No concerns were noted by the Finance Committee or the Board.

Motion #12

Rationale: Normal Practice.

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

- January 2023 Cheque List totaling \$3,308,441.57;
- January 2022 Financial Statements.

Moved by: Robert Paul
Seconded by: Rosaleen Cutler

The motion was carried.



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3.5.4 Capital Equipment Requests

The Finance Committee reviewed a request for the allocation of \$4,675 + tax, towards the purchase of: Diagnostic Imaging, laptop. No concerns were noted by the Finance Committee or the Board.

<p>Motion #13</p> <p><i>Rationale: The Board of Directors is required to review and approve capital requests.</i></p> <hr/> <p>Motion: The Board of Directors hereby approves the following capital requests totaling \$4,675 + tax, as recommended by the Finance Committee for:</p> <ul style="list-style-type: none"> Diagnostic Imaging. Laptop (\$4,675 + tax). <p>Moved by: Norm Clark Seconded by: Jamie Uson</p> <p style="text-align: right;">The motion was carried.</p>

3.6 Volunteer Services Report

The Volunteer Services Report was included in the meeting package for review.

3.7 Foundation Report

The Foundation Report was included in the meeting package for review.

3.8 Chief Executive Officer’s Report

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

Wayne stated that he recently consulted with Home and Community Care about a memo that was received regarding an announcement of 23 new Hospice beds in Ontario. In follow-up there was a meeting arranged in which Wayne, Christine Wilkinson and Kim Sunstrum from Hospice LACGH attended. It was recognized that these 23 Hospice beds do not come with sufficient funds to effectively operate Hospice beds in the Community. Kim Sunstrum, on behalf of LACGH Hospice, agreed that if we have the opportunity to apply for these beds and approved for funding, that the Hospital could integrate their two overflow beds with Hospice. Essentially, the Hospital would receive the Hospice bed funding from Ontario Health, increasing our occupancy from 52 – 54 beds. It was noted that our two palliative care beds, which are not funded, would continue to be used for palliative care and when not in use would default to Acute Care usage.

<p>Motion #14</p> <p><i>Rationale: Normal Practice</i></p> <hr/> <p>Motion: The Board of Directors hereby approves the consideration of applying for funding for two Hospice Care beds at LACGH in partnership with Hospice LACGH.</p> <p>Moved by: Geoff Griffin Seconded by: Rosaleen Cutler</p> <p style="text-align: right;">The motion was carried.</p>
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Referring to item #1 in the President and CEO’s Report, the question was asked whether we have received our 128-bed LTC Home license. Wayne replied that we have not received our license but rather have received confirmation that once we require it, and have met all the conditions outlined, it will be available for issuance.

Motion #14
<i>Rationale: Normal Practice</i>
Motion: The Board of Directors hereby accepts the reports from the Quality Committee, Medical Advisory Committee, Governance Committee, Pastoral Care Committee, Finance Committee, Volunteer Services, Foundation and the CEO.
Moved by: Norm Clark Seconded by: Bob Clancey
The motion was carried.

4. Other

4.1 Correspondence Received up to March 1, 2023.

There was nothing further to report for correspondence.

5. Closed Session

At 7:34 p.m., the Board moved into closed session.

Motion #15
<i>Rationale: Normal Practice</i>
Motion: That the Board of Directors hereby moves into closed session.
Moved by: Bob Clancey Seconded by: Al MacGregor
The motion was carried.

At 7:38 p.m., the Board rose from closed session.

Motion #16
<i>Rationale: Normal Practice</i>
Motion: That the Board of Directors hereby rises from closed session.
Moved by: Al MacGregor Seconded by: Rosaleen Cutler
The motion was carried.

6. Meeting Closing

6.1 Next Meeting

The next regular meeting of the Board is scheduled for 6:30 p.m., on Tuesday April 4, 2023.

6.2 Adjournment



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The meeting was adjourned at 7:38 p.m.

Motion #17

Rationale: Normal Practice

Motion: That the Board of Directors hereby adjourns their meeting at 7:38 p.m. on March 7, 2023.

Moved by: Bob Clancey

Seconded by: Jamie Uson

The motion was carried.