



# LENNOX AND ADDINGTON COUNTY GENERAL HOSPITAL

## BOARD OF DIRECTORS

### MEETING MINUTES

April 4, 2023

Zoom | ACR

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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 April 4, 2023.

#### PRESENT:

**Board:** Deb Lowry (Chair)                      Wayne Coveyduck  
Allan MacGregor                                      Christine Wilkinson  
Bob Clancey    Dr. Kim Morrison  
Norm Clark    Kelly Roantree  
Robert Paul    Susan Jack  
Jamie Uson  
Tony Brazda  
Rosaleen Cutler

#### REGRETS:

Dr. Heather Khey Beldman  
Geoff Griffin

**Staff in attendance:** Erin Brown                                      Sanjeev Kumar  
Andrea Nussberger (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. Deb remarked that Information Services manager, Chris Garrah, assisted her with getting her LACGH iPad back to functioning as it did before the IS outage in December 2022. Deb asked Board members to contact Andrea to facilitate a time to meet up with IS staff, to do the required update, to their respective devices.

Deb stated that all current Board members have confirmed that they will be continuing their membership with the Board for the 2023-24 term.

Deb announced that LACGH President and CEO Wayne Coveyduck has submitted his notice of retirement. Wayne will be retiring at the end of September 2023. On behalf of everyone at LACGH Deb thanked Wayne for everything he has done for the Hospital. Andrea will circulate a memo informing all staff and physicians of his retirement.

### 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*



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*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 following addition:

##### 5.2 Capital Projects Committee

Motion #1

*Rationale: Normal Practice*

***Motion: That the Board of Directors hereby approves the amended agenda dated April 4, 2023.***

Moved by: Norm Clark

Seconded by: Bob Clancey

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 March 7, 2023.***

Moved by: Jamie Uson

Seconded by: Robert Paul

The motion was carried.

## 2. Business Arising

### 2.1 Regional Updates

Deb Lowry reported on the following items:

- The March 2023 OHA Chair's Report was received and Andrea will circulate the report to Board members post meeting.

Wayne Coveyduck reported on the following items:

- The Hospital submitted a claim for damages done by the former tenant at 308 Bridge St. with estimated damages at \$40k. The Hospital maintenance team have been working on fixing the damage. Due to the wait for a HIROC adjuster, the high deductible and chance that the price of insurance would go up, the claim has since been cancelled. It was noted that a couple of individuals have expressed interest in renting the house once restored. The discussion of how to proceed with this property will be brought to the Capital Projects Committee.



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Dr. Kim Morrison reported on the following items:

- Another local physician has announced that he is closing his Primary Care practice. This notice means the closure of the Richmond Physician group leaving 5k patients unattached.
- Periwinkle is a new model of primary care (PC) that Kingston is hoping to implement once approval from the Ministry of Health. *Deb asked that Board members do some research on the Periwinkle model for education on alternate models of Primary Care.* Dr. Morrison noted that there is a willingness in our community to try a similar alternate model of PC. The worsening shortage of PC physicians in the community will drive up the wait times in our ED and increase the amount of ALC patients on our in-patient units. Recent medical residents have stated that they are not interested in the current PC model as they want to practice medicine and not be business owners. Dr. Morrison highlighted that a new model is being worked on and would provide the practitioners with an administrative backbone and the patients with access to allied health professionals.

### 2.2 LTC Updates

Wayne Coveyduck reported that, we have received our Development Agreement for the 128-bed LTC Home. Wayne noted that the turnaround time for him and Deb to sign and return for the Minister’s signature is 2 weeks. A discussion ensued and it was decided that Wayne and Deb would sign the DA and return for the Minister’s signature and proceed with tendering once the signed DA is received; expectantly in 1-2 weeks’ time. No concerns were noted.

## 3. Reports

### 3.1 Quality Committee

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

- The Quality Committee recommended to the Board of Directors the 3% pay for performance compensation for the achievement of the 2022/23 Quality Improvement Plan for the President and CEO, Chief of Staff and other executives. No concerns were noted by the Board of Directors.

Motion #3

*Rationale: The Excellent Care for All Act (ECFAA) requires that the compensation of the President & CEO, Chief of Staff and other executives be linked to the achievement of performance improvement targets laid out in the Performance Improvement Plan, which forms part of the Quality Improvement Plan.*

**Motion: The Board of Directors hereby approves the 3% pay for performance compensation for the achievement of the 2022/23 Quality Improvement Plan for the following:**

- *President & CEO/Long Term Care Administrator*
- *Chief of Medical Staff*
- *Chief Nursing Officer/VP Patient & Resident Services*
- *Chief Human Resources Officer*
- *Chief Diagnostic and Therapeutic Services Officer*
- *Chief Operating Officer*

Moved by: Al MacGregor

Seconded by: Rosaleen Cutler

The motion was carried.



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#### 3.2 Medical Advisory Committee

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

- Pam Hodgen and Dr. Callum presented the quality lab report to the MAC. It was noted that the Hospital is well on their way to the next level of the Choosing Wisely Designation.
- There was an in-depth discussion involving many concerns with the Lumeo Project.

Deb Lowry noted that, as per the MAC minutes, the MAID policy was discussed and the question was asked whether the MAID policy should be a Board or MAC policy. Board members noted that the MAID policy historically has been a Board policy. It was highlighted that the MAID policy is Hospital driven and endorsed by the clinical teams with revisions made from a legal perspective due to legislation. It was acknowledged that it is important that MAC review the policy from a clinical perspective, before approval by the Board. The MAID policy will remain a Board policy and will go to MAC for review before approval by the Board. If needed, the policy could also be reviewed by the Ethics and Governance Committees. All Board members in attendance were in agreement.

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

- Marie-Andree Harvey - Consulting (Gynaecology with Urology)
- Marie Eve Sophie Gibson – Consulting (Gynaecology)
- Mary Anne Jamieson – Consulting (Gynaecology)
- Shawna Lee Johnston – Consulting (Gynaecology)
- Ashley Waddington - Consulting (Gynaecology)
- Negar Chooback – Consulting (Oncology)
- Jill Dudebout – Consulting (Oncology)
- Josee-Lyne Renee Gisele Ethier – Consulting (Oncology)
- Janarthanan Kankesan – Consulting (Oncology)
- Cindy Lawlor – Consulting (Oncology)
- Crystal Gonu – Active (Family Medicine)
- Kimberley Morrison – Active (Family Medicine)
- Tom Touzel – Active (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:**

- Marie-Andree Harvey - Consulting (Gynaecology with Urology)
- Marie Eve Sophie Gibson – Consulting (Gynaecology)
- Mary Anne Jamieson – Consulting (Gynaecology)



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- Shawna Lee Johnston – Consulting (Gynaecology)
- Ashley Waddington - Consulting (Gynaecology)
- Negar Chooback – Consulting (Oncology)
- Jill Dudebout – Consulting (Oncology)
- Josee-Lyne Renee Gisele Ethier – Consulting (Oncology)
- Janarthanan Kankesan – Consulting (Oncology)
- Cindy Lawlor – Consulting (Oncology)
- Crystal Gonu – Active (Family Medicine)
- Kimberley Morrison – Active (Family Medicine)
- Tom Touzel – Active (Family Medicine)

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:

- Janet Giroux - Extended Class Nursing – Consulting (Oncology)
- Jordan Boudreau – Associate (Family Medicine)
- April Swoboda – Consulting (Oncology)
- Shivani Dadwal – 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.

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 appointments to the LACGH Medical Staff, as recommended by the Medical Advisory Committee:**

- Janet Giroux - Extended Class Nursing – Consulting (Oncology)
- Jordan Boudreau – Associate (Family Medicine)
- April Swoboda – Consulting (Oncology)
- Shivani Dadwal – Consulting (Oncology)

Moved by: Rosaleen Cutler  
Seconded by: Jamie Uson

The motion was carried.

3.3 Ethics Committee

Al MacGregor, interim Ethics Committee Chair, highlighted that the Committee had a thorough discussion regarding an incident that happened on the CVC unit. Dr. Campbell also did a presentation on Honesty in Healthcare.



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#### 3.4 Finance Committee

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

- At the Finance Committee, we discussed the need to replace the rental TV sets in the patient rooms. There were 3 options previewed. It was suggested that this item be discussed at the upcoming Capital Projects Committee.
- The Summary of Capital Purchases 2022/23 were reviewed.

##### 3.4.1 February Financial Statements and Cheque List

The Finance Committee reviewed the February 2023 Financial Statements and Cheque List which totaled \$3,349,689.28. No concerns were noted by the Finance Committee or the Board.

<p>Motion #6</p> <p><i>Rationale: Normal Practice.</i></p> <hr/> <p><b>Motion: The Board of Directors hereby approves the following, as recommended by the Finance Committee:</b></p> <ul style="list-style-type: none"> <li>• February 2023 Cheque List totaling \$3,349,689.28;</li> <li>• February 2023 Financial Statements.</li> </ul> <p>Moved by: Robert Paul Seconded by: Tony Brazda</p> <p style="text-align: right;">The motion was carried.</p>
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##### 3.4.2 Write off Analysis

The Finance Committee reviewed the write off analysis, which totaled \$94,995.82. Sanjeev noted that they are hoping to recover some of the 2022/23 write offs. No concerns were noted by the Finance Committee or the Board.

<p>Motion #7</p> <p><i>Rationale: The Board of Directors is required to review and approve write offs.</i></p> <hr/> <p><b>Motion: The Board of Directors hereby approves the write off analysis for 2022/23 in the amount of \$94,995.82, as recommended by the Finance Committee.</b></p> <p>Moved by: Rosaleen Cutler Seconded by: Robert Paul</p> <p style="text-align: right;">The motion was carried.</p>
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#### 3.5 Volunteer Services Report

Susan Jack noted that Volunteer Services (VS) are in the process of recruiting a Secretary, Vice-President and Communications person. Volunteers' week is April 16-22 and articles will be included in local newspapers to share with the public the many contributions our VS makes to the Hospital. The Annual VS spring yard sale is booked for May 25-27, however, due to lack of volunteers may have to be cancelled. Handicap parking space signage has been revised to add wording that these parking spaces are also to be used for chemo patients. This is a very positive change for the chemo patients.

#### 3.6 Foundation Report



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Kelly Roantree noted that preparation is underway for the 26<sup>th</sup> Annual LACGH Foundation Golf Tournament. The afternoon time slots are almost sold out so if interested in purchasing tickets contact the Foundation Office. Shelin Pools has generously donated a hot tub with accessories; 400 tickets will be sold with the draw being held on May 14<sup>th</sup>. \$3k was received in support of the Chemotherapy Unit from a grateful patient.

### 3.7 Chief Executive Officer's Report

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

The Hospital Service Accountability Agreement (HSAA), Multi-Sector Service Accountability Agreement (MSAA) and the Long-Term Care Home Service Accountability Agreements (LSAA) were included in the meeting package for review. It was noted that there are no significant changes and we have received an extension to April 11 to sign off on the agreements.

No concerns were noted and the HSAA, MSAA and LSAA were approved by the Board of Directors.

#### Motion #8

*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 Service Accountability Agreement (H-SAA).*

**Motion: The Board of Directors hereby approves the Hospital Service Accountability Agreement 2023-24. .**

Moved by: Bob Clancey

Seconded by: Jamie Uson

The motion was carried.

#### Motion #9

*Rationale: Annually, the Lennox and Addington County General Hospital Association is required to review and sign off on our Multi-Sector Service Accountability Agreement (M-SAA).*

**Motion: That the Board of Directors hereby approves the Multi-Sector Service Accountability Agreement 2023-24.**

Moved by: Al MacGregor

Seconded by: Rosaleen Cutler

The motion was carried.

#### Motion #10

*Rationale: Annually, the Lennox and Addington County General Hospital Association is required to review and sign off on our Long Term Care Service Accountability Agreement (L-SAA).*

**Motion: That the Board of Directors hereby approves the Long Term Care Service Accountability Agreement 2023-24.**

Moved by: Norm Clark

Seconded by: Tony Brazda



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The motion was carried.

Further to the written report Wayne also shared an update regarding Hospice beds at LACGH. Given the current extremely high occupancy levels on the inpatient unit and the prediction that these levels will stay high for the unforeseeable future, the timing for Hospice beds on the inpatient unit may need to be pushed out. Christine Wilkinson was consulted and it was decided that the feedback will be given to Hospice that when the healthcare system stabilizes we will revisit the potential in having Hospice beds at LACGH. There are localized issues that need to be ironed out as well, particularly with Home and Community Care. Hospice beds on the inpatient unit will remain on the radar and will be managed as we go forward.

Motion #11

Rationale: Normal Practice

Motion: The Board of Directors hereby accepts the reports from the Quality Committee, Medical Advisory Committee, Ethics Committee, Finance Committee, Volunteer Services, Foundation and the CEO.

Moved by: Robert Paul

Seconded by: Norm Clark

The motion was carried.

4. Other

4.1 Correspondence Received up to March 31, 2023.

Wayne reported that we have received a letter from a community member regarding donating her late husbands cherished model train set for display in the future LTC facility. A few Board members acknowledged that his model train displays are spectacular. Deb noted that she would reply to the letter thanking her and stating that the development of the new LTC Home is in its very early stages and we will keep her donation in mind once the building is near completion.

5. New Business

5.1 Pharmacy Automated Dispensing Cabinets

Christine Wilkinson noted that our vendor of choice for the pharmacy automated dispensing cabinets is Pyxis. Sanjeev did lots of research on vendor choices and the decision was made to remain with Pyxis. Sanjeev noted that these cabinets are already on the capital equipment list.

5.2 Capital Projects Committee

Deb stated that Kelly Roantree, Foundation Board Chair, will join the newly created Capital Projects Committee. Deb highlighted that recurring meetings should be booked starting in the near future. The Board had a brief discussion on possible dates and agreed that the first meeting would be on May 2 at 5:00 p.m., directly preceding the Board of Directors meeting. This will be the first of the monthly dinner meetings in the Airhart Conference Room.

6. Closed Session

At 7:27 p.m., the Board moved into closed session.



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Motion #12

*Rationale: Normal Practice*

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

Moved by: Al MacGregor

Seconded by: Robert Paul

The motion was carried.

At 8:31 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: Bob Clancey

Seconded by: Norm Clark

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 May 2, 2023.

**7.2 Adjournment**

The meeting was adjourned at 8:31 p.m.

Motion #

*Rationale: Normal Practice*

***Motion: That the Board of Directors hereby adjourns their meeting at 8:31 p.m. on April 4, 2023.***

Moved by: Jamie Uson

Seconded by: Al MacGregor

The motion was carried.