



LENNOX AND ADDINGTON COUNTY GENERAL HOSPITAL

BOARD OF DIRECTORS
MEETING MINUTES

June 6, 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 June 6, 2023.

PRESENT:

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

REGRETS:

- Tony Brazda
Kelly Roantree

- 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

The meeting was called to order at 6:30 p.m., by Deb Lowry. Deb acknowledged the hard work of fire crews and first responders during the current wild fires in Ontario.

Deb stated that the Volunteer Services dinner held last week went great and has received many positive comments on the event. Special thanks to, Sarah Fiddler, Chef Mike Scanlan, Tracy Ringrose, Dietary staff and everyone else who helped with the event.

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

Motion #1



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Rationale: Normal Practice

Motion: That the Board of Directors hereby approves the agenda dated June 6, 2023.

Moved by: Bob Clancey
Seconded by: Norm Clark

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 May 2, 2023.

Moved by: Al MacGregor
Seconded by: Robert Paul

The motion was carried.

2. Business Arising

2.1 Regional Updates

Deb Lowry reported that she and Wayne have been invited by the OHA to attend, via Zoom, a member call with the Ministry of Health to provide an update on 2023/24 funding letters.

Wayne Coveyduck reported on the following:

- He and Sanjeev have been invited to a regional Deloitte social event focused on Lumeo.
- The first round of interviews for the Lumeo Executive Lead have concluded. The Steering Committee will conduct their own interviews with the 4 candidates chosen by the regional CEOs. The Steering Committee will then choose 2 of the 4 candidates to be selected for a second interview by the Regional CEOs. Wayne noted that it will be a number of weeks before a Lumeo Executive Lead is chosen.

Dr. Kim Morrison reported on the following OHT items:

- The FLA OHT partnership council town hall will be held on June 22, 2023 via Zoom. It was noted that the Board members received an invitation.
- The FLA OHT 5-year Strategic Plan has launched and available on the newly designed FLA OHT website.

2.2 Capital Projects Update

Deb Lowry reported on the following items:



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- The Tender closing date for the LTC home is Friday June 9th.

3. Reports

3.1 Quality Committee

Bob Clancey highlighted the following from the May 16, 2023 Quality Committee meeting:

- Jason Hann, EVP Patient Care/CNE KHSC, joined the Committee to provide an update report on the Lakeside Clinic.
- Anna Huisman presented a very informative Pharmacy Report to the Committee.

3.2 Medical Advisory Committee

Dr. Morrison highlighted the following from the May 11, 2023 Medical Advisory Committee meeting:

- Anna Huisman joined the MAC and presented an excellent pharmacy report.
- It was highlighted that there are many drug shortages, not just at LACGH but country-wide.
- The group had a robust discussion around the Lumeo Project.

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

- Sophia Badowski – Consulting (Gynaecology)
- Romy Nitsch – Consulting (Gynaecology)
- Marisa Nicole Horniachek – Consulting (Gynaecology)
- Pierre Robichaud – Active (Family Medicine with Emergency)
- Laura Walmsley - Associate (Family Medicine with Emergency)
- Daniel Curran – Active (Family Medicine with Emergency)
- Nathaniel Hart – Active (Family Medicine)
- Aaron McGregor – Active (Family Medicine)
- Derek Moynes - Active (Family Medicine)
- Elizabeth Touzel – Active (Family Medicine)
- Molly 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 #3

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:

- Sophia Badowski – Consulting (Gynaecology)
- Romy Nitsch – Consulting (Gynaecology)
- Marisa Nicole Horniachek – Consulting (Gynaecology)
- Pierre Robichaud – Active (Family Medicine with Emergency)
- Laura Walmsley - Associate (Family Medicine with Emergency)



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- Daniel Curran – Active (Family Medicine with Emergency)
- Nathaniel Hart – Active (Family Medicine)
- Aaron McGregor – Active (Family Medicine)
- Derek Moynes - Active (Family Medicine)
- Elizabeth Touzel – Active (Family Medicine)
- Molly Touzel – Active (Family Medicine)

Moved by: Geoff Griffin
Seconded by: Robert Paul

The motion was carried.

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

- Jonathan Tran – Locum Tenens (Emergency Medicine)
- Carlee Stoyanovich – 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 #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 appointments to the LACGH Medical Staff, as recommended by the Medical Advisory Committee:

- Jonathan Tran – Locum Tenens (Emergency Medicine)
- Carlee Stoyanovich – Locum Tenens (Emergency Medicine)

Moved by: Al MacGregor
Seconded by: Bob Clancey

The motion was carried.

3.3 Ethics Committee

Al MacGregor highlighted the following from the May 10, 2023 Ethics Committee meeting:

- The amended patient letter was reviewed and approved.
- Emily shared a very interesting patient case with the Committee.
- Dr. David Campbell presented on Ethical Issues in Goals of Care and End of Life Discussions.
- Two policies were reviewed and approved by the Committee: Advance Directives and End of Life Care.

Dr. Morrison highlighted that she consulted with Christine and Erin regarding the above mentioned policies and it was recommended that MAC review prior to Board approval. No concerns were noted by the Board and the Advance Directive Policy B-26 and End of Life Care Policy B-29 will be reviewed by the MAC and brought back to the Board in October.

3.4 Governance Committee



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Al MacGregor highlighted the following from the May 17, 2023 Governance Committee meeting:

- BLG joined the Governance Committee to present the final draft of the ONCA Compliance Package.
- Geoff met with Board of Directors applicant Laurie French prior to the Governance Committee meeting. Geoff indicated that Laurie would be a great fit for the LACGH Board and provided a recommendation from the Nominating Committee that she be considered for appointment to the Board of Directors.
- Justin Turner, Director of Risk joined the Governance Committee to review the risk mitigation report for 2022-23 and presented the draft risk mitigation schedule for 2023-24.
- A request that the Executive Committee conduct business on behalf of the Board during the adjournment period over the summer months was brought forward with no concerns noted from the Executive Committee.
- The Naming Rights Policy B-04 was reviewed and approved. It was noted that an appendix will be developed listing the available areas for naming right with associated dollar values.

Motion #7

Rationale: Normal Practice.

Motion: The Board of Directors hereby approves the ONCA Compliance package, as recommended by the Governance Committee.

Moved by: Geoff Griffin

Seconded by: Robert Paul

The motion was carried.

Motion #8

Rationale: The Governance Committee oversees the Board recruitment and nomination process which includes recommending candidates to the Board for election at the annual meeting.

Motion: The Board of Directors hereby approves that Ms. Laurie French's name be put forward for nomination to the Board of Directors at the June 20, 2023 Annual Meeting, as recommended by the Governance Committee.

Moved by: Norm Clark

Seconded by: Al MacGregor

The motion was carried.

Motion #9

Rationale: As part of their annual work plan, the Governance Committee shall review the Risk Mitigation Schedule summary on an annual basis.

Motion: The Board of Directors hereby accepts the 2022-23 Risk Mitigation Report and the Risk Mitigation Schedule for 2023-24, as recommended by the Governance Committee.



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Moved by: Jamie Uson
Seconded by: Geoff Griffin

The motion was carried.

Motion #10

Rationale: As the Board of Directors does not meet in July and August, the Board is asked to endorse the Executive Committee to act on behalf of the Board during the summer months.

Motion: The Board of Directors hereby approves that the Executive Committee, composed of the Chair, Vice Chair, Treasurer, Secretary/CEO and an additional resource (if required), be enabled to act on behalf of the Board until they reconvene in October, as recommended by the Governance Committee.

Moved by: Geoff Griffin
Seconded by: Rosaleen Cutler

The motion was carried.

Motion #11

Rationale: Normal Practice

Motion: The Board of Directors hereby approves the Naming Rights Policy B-04, as recommended by the Governance Committee.

Moved by: Bob Clancey
Seconded by: Geoff Griffin

The motion was carried.

3.5 Capital Projects Committee

The May 2, 2023 Capital Projects Committee report was included in the meeting package; there was nothing further to report.

3.6 Audit Committee

Jamie Uson highlighted the following from the May 29, 2023 Audit Committee meeting:

- Katie Mahon from KPMG joined the Audit Committee and stated there were no significant changes to the Audit Plan.
- Approximately 1M has been accrued, as an estimate, in regards to the Bill 124 union re-openers.
- An estimate has been accrued for the settlement of the 10 employees terminated due to the COVID-19 unvaccinated employee policy.
- It was noted that the Client Preparedness Indicator is 'yellow' due to significant turnover in staff in the payroll/finance departments. KPMG noted that they are confident this will be rectified for the next Audit.

Jamie highlighted the excellent work done by Sanjeev Kumar and the Finance department during the audit.



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Motion #12

Rationale: Normal Practice

Motion: The Board of Directors hereby approves the Audit Planning Report for the year ending March 31, 2023 and the Audited Financial Statements, as recommended by the Audit Committee.

Moved by: Robert Paul
Seconded by: Geoff Griffin

The motion was carried.

3.7 Finance Committee

Jamie Uson reviewed the following from the May 29, 2023 Finance Committee meeting:

3.7.1 Investment Policy Review

The Finance Committee welcomed Investment Manager, Peter Rawson to the meeting. Peter reviewed the investment statements with the Committee and no changes were made to the investment policy. The policy will be re-visited once it is clear what the cash flow forecast will be for the LTC build.

3.7.2 Board, CEO and Senior Manager Expenses

The Finance Committee reviewed the Board, CEO, and Senior Management Expenses for April 2023 which totaled \$1,945.04. The Finance Committee recommends to the Board, that the following expenses be approved:

Motion #13

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 \$1,945.04, as recommended by the Finance Committee.

April 2023

Table with 8 columns: Name, Meals, Hospitality, Accommodation, Vehicle Rental/Own Used Mileage, Incidentals (Parking, tolls, etc.), Fares, Total. Rows include Erin Brown, Christine Wilkinson, and a TOTAL row.

Moved by: Geoff Griffin
Seconded by: Norm Clark

The motion was carried.

3.7.3 April Cheque List

The Finance Committee reviewed the April 2023 Cheque List which totaled \$3,478,953.61. No concerns were noted by the Finance Committee or the Board.

Motion #14



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Rationale: Normal Practice.

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

- April 2023 Cheque List totaling \$3,478,953.61;

Moved by: Robert Paul

Seconded by: Al MacGregor

The motion was carried.

3.7.4 Compliance Documents

BPSAA Hospital Attestation

The Finance Committee reviewed the BPSAA Hospital Attestation and Hospital Use of Consultants for 2022-23. Wayne advised the Board that we were compliant regarding the three Accountability Agreements. No concerns were noted by the Finance Committee or the Board.

Motion #15

Rationale: Under the Broader Public Sector Accountability Act (BPSAA), the hospital is required to review and prepare attestations with respect to compliance with the requirements confirming:

- completion and accuracy of reports on the use of consultants;
- compliance with the prohibition on engaging lobbyist services using public funds;
- compliance with the expense claim directives issued by the government;
- compliance with any applicable perquisite directive issued by the government;
- compliance with procurement directives issued by the government;
- compliance with preparation and publication of business plans and other business or financial report documents.

Motion: The Board of Directors hereby approves the Attestation Compliance Report, as recommended by the Finance Committee.

Moved by: Geoff Griffin

Seconded by: Rosaleen Cutler

The motion was carried.

Deb stated that the HSAA, MSAA and L-SAA declaration of compliance documents were received from Ontario Health after the latest Finance Committee meeting, therefore, they were brought forward for review by the Board. No concerns were noted by the Board and the HSAA, MSAA and L-SAA Compliance documents were approved.

Wayne noted that he and Deb would be attending an OHA member call tomorrow for Hospital CEOs and Board chairs to provide an update on 2023/24 funding letters. Wayne noted that the Ministry provides LACGH with one-time allocation of 2% on our base as a small hospital, this amount for 2023-24 is approximately \$520k. It was highlighted that our over-run costs exceed this amount.

Of note, another letter was received earlier in the day regarding the re-opening of the ONA negotiations in response to compensation limits imposed by Bill 124. It is expected that other unions will follow in ONA's footsteps. Concerns were highlighted that this will come as extra costs to the Hospital as well.



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Robert Paul expressed his thanks to Sanjeev and Wayne on their tremendous efforts to keep the Hospital in surplus for many, many years. Wayne has led LACGH through success over his 15 years of service through the generation of funding for many different operations for the Community.

Motion #16

Rationale: Under the Hospital Service Accountability Agreement (HSAA), the hospital is required to declare compliance, to the best of the Board's knowledge and belief, the Hospital has fulfilled its obligations under the HSAA in effect during the Applicable Period and has delivered the required reports referred to in Section 8.6 of the HSAA.

Motion: The Board of Directors hereby approves the declaration of compliance, issued pursuant to the HSAA, during the Applicable Period April 1, 2022 – March 31, 2023.

Moved by: Rosaleen Cutler

Seconded by: Robert Paul

The motion was carried.

Motion #17

Rationale: Under the Multi-Sector Service Accountability Agreement (MSAA), the hospital is required to declare compliance, to the best of the Board's knowledge and belief, the HSP has fulfilled its obligations under the MSAA in effect during the Applicable Period.

Without limiting the generality of the foregoing, the HSP has complied with:

- (i) Article 4.8 of the MSAA concerning applicable procurement practices;*
- (ii) The Public Sector Compensation Restraint to Protect Public Services Act, 2010, and*
- (iii) The Connecting Care Act; 2019*

Motion: The Board of Directors hereby approves the declaration of compliance, issued pursuant to the MSAA, during the Applicable Period April 1, 2022 – March 31, 2023.

Moved by: Al MacGregor

Seconded by: Geoff Griffin

The motion was carried.

Motion #18

Rationale: Under the Long-Term Care Service Accountability Agreement (L-SAA), the hospital is required to declare compliance, to the best of the Board's knowledge and belief, the HSP has fulfilled its obligations under the L-SAA in effect during the Applicable Period.

Without limiting the generality of the foregoing, the HSP confirms that:

- (i) it has complied with the provisions of the Connecting Care Act, 2019 and with any compensation restraint legislation which applies to the HSP; and*
- (ii) every Report submitted by the HSP is accurate in all respects and in full compliance with the terms of the Agreement;*



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Motion: The Board of Directors hereby approves the declaration of compliance, issued pursuant to the L-SAA, during the Applicable Period January 1, 2022 – December 31, 2022.

Moved by: Bob Clancey
Seconded by: Norm Clark

The motion was carried.

3.8 Patient Family Advisory Council

There was nothing further to the written report.

3.9 Volunteer Services Report

Susan Jack thanked everyone who helped in making the 2023 Volunteer Services Appreciation Dinner a success. The turnout was great and Susan noted she received lots of positive feedback after the dinner.

Deb highlighted that this would be Susan’s last Board meeting as President of the Volunteer Services. Susan was thanked for her service.

3.10 Foundation Report

There was nothing further to the written report.

3.11 Chief Executive Officer’s Report

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

Wayne stated that a request was received to end invoicing of food related items invoiced to the Volunteer Services (VS) coffee shop from the Hospital. It was noted that for at least 15 years the coffee shop has received food related items from the Hospital cafeteria and invoiced approximately \$60/month for these items. The Board members agreed that going forward these items will continue to be supplied to the Coffee Shop by the Hospital, however, at no cost to the VS.

Motion #19

Rationale: On review, it has been determined that charging the Volunteer Services for food items to be used in the Gift Shop is an avoidable, administrative step due to the small amount of money involved and the fact that all revenue earned in the Gift Shop is donated to the Hospital anyway. The offset can be recorded for accuracy and available for review. However, the administrative activities can be avoided.

Motion: The Board of Directors hereby approves the supplying of food related items to the LACGH Volunteer Services Coffee/Gift Shop at no charge to the Volunteer Services

Moved by: Bob Clancey
Seconded by: Norm Clark

The motion was carried.

Wayne noted that he received an email from Lex Klombies, BLG, to clarify that the legal name change of the Hospital (Lennox and Addington County General Hospital **Association**) will not be effective until after the members, Minister or Health, and Service Ontario all approve the name change. On a related note, it is at our



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discretion whether to further change the name of the Hospital to encompass the new LTC building, which would be done by BLG, once we are ready.

Motion #20

Rationale: Normal Practice

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

Moved by: Jamie Uson

Seconded by: Geoff Griffin

The motion was carried.

4. **Other**

4.1 Correspondence Received up to June 1, 2023.

There was nothing further to report for correspondence.

5. **Closed Session**

At 7:17 p.m., the Board moved into closed session.

Motion #21

Rationale: Normal Practice

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

Moved by: Robert Paul

Seconded by: Bob Clancey

The motion was carried.

At 8:45 p.m., the Board rose from closed session.

Motion #22

Rationale: Normal Practice

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

Moved by: Allan MacGregor

Seconded by: Robert Paul

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 October 3, 2023.

6.2 Adjournment

The meeting was adjourned at 8:45 p.m.



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Motion #23

Rationale: Normal Practice

Motion: That the Board of Directors hereby adjourns their meeting at HH:MM p.m. on June 6, 2023.

Moved by:

Seconded by:

The motion was carried.