



LENNOX AND ADDINGTON COUNTY GENERAL HOSPITAL

BOARD OF DIRECTORS

MEETING MINUTES

October 3, 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 October 3, 2023.

PRESENT:

Board: Deb Lowry (Chair)	Wayne Coveyduck
Bob Clancey	Christine Wilkinson
Norm Clark	Dr. Kim Morrison
Geoff Griffin	Kelly Roantree
Jamie Uson*	Marg Isbester*
Tony Brazda	Dr. Sonal Patel
Rosaleen Cutler	
Laurie French	

REGRETS:

Allan MacGregor

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 6:29 p.m., by Deb Lowry. Deb welcomed new Board Director Laurie French to her first Board meeting and Marg Isbester to her first Board meeting as President of the Volunteer Services. Dr. Sonal Patel was welcomed back after her recent return from maternity leave.

Deb stated that Robert Paul has resigned as Director of the LACGH Board. Deb thanked Robert for all of his contributions over the many years he served on the Board and wished him well.

Deb highlighted that last Thursday was the Physicians 25 years of Service recognition event, which was long overdue due to COVID. Drs. Morrison, Waldron and White were celebrated for their 25 + years of service to LACGH at the Waterfront Restaurant in Napanee. It was a great event and thanks were expressed to Rosaleen who attended on behalf of the Board and Andrea who organized 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.



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1.3 Approval of the Agenda

The agenda was approved as circulated

Motion #1
<i>Rationale: Normal Practice</i>
Motion: That the Board of Directors hereby approves the agenda dated October 3, 2023.
Moved by: Geoff Griffin 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
<i>Rationale: Normal Practice</i>
Motion: That the Board of Directors hereby approves the minutes of the previous meeting dated June 6, 2023.
Moved by: Bob Clancey Seconded by: Rosaleen Cutler
The motion was carried.

2. Business Arising

2.1 Regional Updates

Wayne Coveyduck reported on the following items:

- The new Lumeo CIO, Leon Goonaratne, is expected to start on October 10th. Lindsay Wyers, CIO Brockville General Hospital, will continue to assist Lumeo for another 3 months.
- The Lumeo go live date has been pushed, tentatively, to November 2024 and will be completed in one 'big bang'.

Dr. Morrison reported on the following items:

OHT

- There were two important announcements in September from The Minister of Health, Sylvia Jones, Ontario Health and Home and Community Care Support Services
- On Sept 11 she announced that the government is taking the next steps to better connect and coordinate people's care through OHTs. This includes a 3-point plan to modernize home and community care. With the passing of new legislation, the 14 Home and Community Care Services organizations will consolidate into a single shared service organization – Ontario Health at Home. This organization will provide the care coordination services for OHTs to make it easier for people to access the services they need. Service delivery contracts will be modernized and at



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maturity accountability for delivery of home care will transition to OHTs in order to improve coordination and integration of care.

- On Sept 27, the Minister of Health and members from Ontario Health provided an update on the next steps to accelerate OHTs in the “Path Forward” released in Nov 2022. As a start each of the 57 OHTs will have stable funding for the next 3 years. Previous agreements had been for only 12-18 months, and often extended at the last minute, which was challenging to work within.
- In addition, as part of this announcement, 12 OHTs were identified as being leaders in the path to maturity of integrated care. FLA OHT was one of this group which is very exciting for our community. We will be supported to accelerate the work of OHTs in several priority areas including improved patient care and outcomes in priority areas, integrated clinical pathways for chronic illness, prevention and early detection of chronic illnesses, supports for unattached patients and improved system navigation. Primary Care Networks will be cornerstones of this work, which we already have well in place. Work will continue on governance, a performance framework and operational supports for OHTs. As previously announced OHTs will become not for profit corporations and work with existing organizations and partners through their own governance structures (current organizations will maintain their Boards). Together, these drivers are intended to support readiness for potential designation and will be supported by guidance issued by MOH and OH. It is expected the pace of this will be significantly accelerated from current state and lay the foundation for OHTs across the province to advance integrated care.

Primary Care Health Home

- The “Greater Napanee Health Home” is moving forward to be a primary care clinic for all residents of Greater Napanee. The Mighty Docs FHO is working with the NACHC to create a model of primary care which will benefit the community and be a place of work for family doctors, nurse practitioners, nurses and support staff want to come and be a part of. It is expected that this model will help with recruitment and retention of primary care providers which is a challenge across the country. It will continue to be a teaching site for Queen’s University. A budget and operational model has been established which includes pooling funding together to allow the Primary Care providers to do focus on providing care, not running small businesses. The Health Home will provide care, including afterhours care, to patients in the greater Napanee area alleviating approximately 5000 unattached patients. This is expected to have beneficial effects on our volume of people attending ER as their only option to access care, better access to our specialists who by default are doing primary care, and better transitions for people leaving hospital to have an appropriate place to follow up in.
- Each patient of the Primary Care Health Home will have a MRP physician, however, if that physician is unavailable another physician in the team will see the patient. Any existing patients of the physicians in this team currently will remain rostered, regardless of their address.
- The CHC will provide the back bone support for the team. 11/12 of the physicians in the team are currently located in the Lenadco building and the hope is to continuing using this space and utilize existing clinical space at the CHC.
- The Health Home is the foundation of the strategic plan of the FLA OHT. Greater Napanee is a pilot of a geographic model – much like when you move to a town, you are guaranteed a school for your child, you should ideally have access to primary care. The FLA geography would require



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approximately 10 Health Homes across the region, many of which already exist in the form of Family Health Teams.

- More information is available on the FLA OHT website <https://flaoht.ca/>

2.2 Capital Projects Update

Wayne Coveyduck reported on the following items:

- The MRI Project is progressing well. Siemens was the successful tender and delivery of the machine is anticipated before the end of the year. The fully operational MRI is expected in early 2024.
- The LTC Project is several weeks ahead of schedule. The concrete work is nearing completion and the service line installation will begin next week. It is anticipated that the structural steel will start to go up in 4-6 weeks. It was noted that project meetings are held monthly to ensure the project is going to plan.

2.3 T.V. Replacement Discussion

Deb Lowry reported that the inpatient televisions, which are in the acute care and CVC rooms, are at their end of life and not repairable. Sanjeev presented three options for replacement at the March 2023 Finance meeting, and the bring your own device 'BYOD' option was recommended and brought forward to the Capital Projects Committee for review. The Capital Projects Committee had no concerns with the BYOD option, however, recommended that PFAC review from a patient perspective. It was highlighted that the BYOD option did not go to the Board for approval.

Deb stated that on a weekend in August she received a phone call from an individual whose mother was admitted on the CVC unit and concerned about the televisions being removed from her room. After Deb received the concerned phone call from the community member she consulted the Senior Admin team and any TV replacement decisions were put on hold.

The members had a robust conversation regarding the options for television replacement. It was noted that if the BYOD option was chosen that there would be larger televisions introduced in the common areas on CVC, ER, Chemo and other areas as well as tablets that could be loaned to admitted patients who don't have their own devices. Concerns were brought forward, given the average age of our admitted patients is 80 years old, that cognitive impairment would limit most patients from being able to hold or function a tablet. These issues would then put further strain on our nursing staff. It was noted that the televisions themselves bring calmness to the in-patient unit as they hold the patients attention.

Deb stated that a resolution on television replacement will not be decided today. The recommendation was that PFAC will be consulted and their recommendation be brought back to Finance for discussion.

3. Reports

3.1 Quality Committee

Rosalien Cutler highlighted the following from the September 19, 2023 Quality Committee meeting:

- Justine Feeney was welcomed to the Committee as the new Lab Lead
- The Q1 BSC was presented to the group with a discussion that followed on Lumeo/MRI and ER volumes



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- Justin Turner provided a summary of a recent critical incident and the recommended actions related to the findings.

It was noted that the new upwards trend of complaints involving timing is interesting as one member thought this would be a common complaint.

3.2 Medical Advisory Committee

Dr. Morrison highlighted the following from the June 6 and September 21, 2023 Medical Advisory Committee meeting:

- In June, MAC reported that mask mandates were being lifted and fast forward to September masks are being reintroduced in patient facing areas.
- The hard work of the lab was highlighted in the lab reports in both June and September by Pam Hodgen, now retired, and her successor Justine Feeney.
- LACGH is very close to the Choosing Labs Wisely designation which will allow us to be even closer to the ultimate goal of a Choosing Wisely Hospital.
- There was a discussion on the Common Credentialing System, which is used for physicians to renew privileges they may hold at the 6 regional hospitals all by completing one application. The concern and subsequent discussion was around LACGH physicians who renew their privileges but don't provide services to LACGH. It was suggested that a discussion could be had with any physician who has not provided services in the last 12 months, and perhaps they could decide on their own that they would not re-apply. If they decide to re-apply for another term with no intention of providing services to the hospital the application could then be brought to MAC for further discussion.

Dr. Morrison highlighted that it is the MAC's due diligence to review physician's re-appointment applications and agree that the applicant has shown competence and meets the standards for the privileges requested, however, this is challenging if the physician hasn't provided services to LACGH in the last 12 months. The Board recognized that approving these appointment applications is ultimately their responsibility.

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

- Doug Barton- Active (Emergency)
- Barbara Farnell- Active (Emergency)
- Joy Hataley – Active (Emergency)
- Christopher Kirwan - Locum Tenens (Emergency)
- Jeffrey Dawson – Active (Emergency)
- Andrei Garcia Popov – Active (Emergency)
- Jennifer Hacking – Active (Emergency)
- Matthew Martin – Active (Emergency)
- Madeline Morris – Active (Emergency)
- John Raleigh – Active (Emergency)
- Mark Waldron – Active (Emergency)
- Zachary Warren – Active (Emergency)
- Stephen White – Active (Emergency)
- Wiley Chung – Consulting (General Surgery)
- Jessica Andrews - Active (General Surgery)



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- Robert Edmunds – Consulting (Plastic Surgery)
 - Linden Head – Consulting (Plastic Surgery)
 - James Hendry – Consulting (Plastic Surgery)
 - Mykola Khokhotva – Active (General Surgery)
 - Glykeria Martou – Consulting (Plastic Surgery)
 - Doug McKay – Consulting (Plastic Surgery)
 - C Dale Mercer – Consulting (General Surgery)
 - Shaila Merchant – Consulting (General Surgery)
 - David Robertson – Active (General Surgery)
 - Julia Chow - Locum Tenens (Anesthesia)
 - Dale Engen - Courtesy without Admitting (Anesthesia)
 - Valerie McLeod – Active (Anesthesia)
 - Kristina Polsinelli - Locum Tenens (Anesthesia)
 - Timothy Roche – Active (Anesthesia)
 - Mirna Attalla – Consulting (Internal Medicine – Respiriology)
 - Joseph Campbell – Consulting (Cardiology)
 - Christopher Davis – Consulting (Internal Medicine – Respiriology)
 - Genevieve Digby – Consulting (Internal Medicine – Respiriology)
 - Jocelyn Garland – Consulting (Nephrology)
 - Taleen Haddad – Consulting (Internal Medicine – Geriatrics)
 - Rachel Holden – Consulting (Nephrology)
 - David Holland – Consulting (Nephrology)
 - Eduard Iliescu – Consulting (Nephrology)
 - Jennifer Leung – Consulting (Oncology)
 - Nicola Matthews – Active (Internal Medicine)
 - John Puxty – Consulting (Internal Medicine – Geriatrics)
 - Madelaine Gordon – Active (Internal Medicine) *formally Wernham
 - Mohammad Shamseddin – Consulting (Nephrology)
 - Samuel Silver – Consulting (Nephrology)
 - Christine White - Consulting (Nephrology)
 - Ruobing Yang – Consulting (Internal Medicine)
 - Andre Tan - Consulting (Otolaryngology)
 - Sonal Patel – Active (Family Medicine)
 - Natasha Satkunam – Consulting (Oncology)
 - Stephanie Vanner – Locum Tenens (Family Medicine)
 - Andrew O’Dea – Locum Tenens (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:

- Doug Barton- Active (Emergency)



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- Barbara Farnell- Active (Emergency)
- Joy Hataley – Active (Emergency)
- Christopher Kirwan - Locum Tenens (Emergency)
- Jeffrey Dawson – Active (Emergency)
- Andrei Garcia Popov – Active (Emergency)
- Jennifer Hacking – Active (Emergency)
- Matthew Martin – Active (Emergency)
- Madeline Morris – Active (Emergency)
- John Raleigh – Active (Emergency)
- Mark Waldron – Active (Emergency)
- Zachary Warren – Active (Emergency)
- Stephen White – Active (Emergency)
- Wiley Chung – Consulting (General Surgery)
- Jessica Andrews - Active (General Surgery)
- Robert Edmunds – Consulting (Plastic Surgery)
- Linden Head – Consulting (Plastic Surgery)
- James Hendry – Consulting (Plastic Surgery)
- Mykola Khokhotva – Active (General Surgery)
- Glykeria Martou – Consulting (Plastic Surgery)
- Doug McKay – Consulting (Plastic Surgery)
- C Dale Mercer – Consulting (General Surgery)
- Shaila Merchant – Consulting (General Surgery)
- David Robertson – Active (General Surgery)
- Julia Chow - Locum Tenens (Anesthesia)
- Dale Engen - Courtesy without Admitting (Anesthesia)
- Valerie McLeod – Active (Anesthesia)
- Kristina Polsinelli - Locum Tenens (Anesthesia)
- Timothy Roche – Active (Anesthesia)
- Mirna Attalla – Consulting (Internal Medicine – Respiriology)
- Joseph Campbell – Consulting (Cardiology)
- Christopher Davis – Consulting (Internal Medicine – Respiriology)
- Genevieve Digby – Consulting (Internal Medicine – Respiriology)
- Jocelyn Garland – Consulting (Nephrology)
- Taleen Haddad – Consulting (Internal Medicine – Geriatrics)
- Rachel Holden – Consulting (Nephrology)
- David Holland – Consulting (Nephrology)
- Eduard Iliescu – Consulting (Nephrology)
- Jennifer Leung – Consulting (Oncology)
- Nicola Matthews – Active (Internal Medicine)
- John Puxty – Consulting (Internal Medicine – Geriatrics)
- Madelaine Gordon – Active (Internal Medicine) *formally Wernham
- Mohammad Shamseddin – Consulting (Nephrology)
- Samuel Silver – Consulting (Nephrology)
- Christine White - Consulting (Nephrology)
- Ruobing Yang – Consulting (Internal Medicine)
- Andre Tan - Consulting (Otolaryngology)
- Sonal Patel – Active (Family Medicine)
- Natasha Satkunam – Consulting (Oncology)



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- Stephanie Vanner – Locum Tenens (Family Medicine)
- Andrew O’Dea – Locum Tenens (Family Medicine)

Moved by: Geoff Griffin
Seconded by: Tony Brazda

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:

- Scott Rieder – Active (General Surgery) **From Associate to Active Staff**
- Sasha Kheyson – Associate (Anesthesia with FM) **From Locum to Associate**
- Julia Chow - Consulting (Anesthesia) **From Locum tenens to Consulting**
- Logan Seaman – Active (Emergency Medicine) **From Associate to Active**

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 #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 appointment to the LACGH Medical Staff, with the noted change, as recommended by the Medical Advisory Committee:

- Scott Rieder – Active (General Surgery) **From Associate to Active Staff**
- Sasha Kheyson – Associate (Anesthesia with FM) **From Locum to Associate**
- Julia Chow - Consulting (Anesthesia) **From Locum tenens to Consulting**
- Logan Seaman – Active (Emergency Medicine) **From Associate to Active**

Moved by: Laurie French
Seconded by: Norm Clark

The motion was carried.

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

- Homa Anvari - Locum Tenens (Internal Medicine)
- Sunil Patel – Consulting (General Surgery)
- Stephanie Chan -Locum Tenens (Internal Medicine)
- Jessica Holmes – Consulting (Oncology - Extended Class Nursing)
- Laura Patton – Consulting (Oncology - Extended Class Nursing)
- Peter Szasz – Consulting (General Surgery)
- Mylini Saposan - Locum Tenens (Family Medicine)
- Jenna Moodie - Locum Tenens (Family Medicine)
- Karine Gauthier – Consulting (Oncology)
- Charlotte Bowes - Locum Tenens (Emergency Medicine)



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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:

- Homa Anvari - Locum Tenens (Internal Medicine)
- Sunil Patel – Consulting (General Surgery)
- Stephanie Chan -Locum Tenens (Internal Medicine)
- Jessica Holmes – Consulting (Oncology - Extended Class Nursing)
- Laura Patton – Consulting (Oncology - Extended Class Nursing)
- Peter Szasz – Consulting (General Surgery)
- Mylini Saposan - Locum Tenens (Family Medicine)
- Jenna Moodie - Locum Tenens (Family Medicine)
- Karine Gauthier – Consulting (Oncology)
- Charlotte Bowes - Locum Tenens (Emergency Medicine)

Moved by: Bob Clancey
Seconded by: Tony Brazda

The motion was carried.

3.3 Governance Committee

Deb Lowry, in Allan’s absence, reviewed the following from the September 20, 2023 Governance Committee meeting:

- LACGH is fully compliant with ONCA. There are 2 items that need to be clarified with BLG; Minute book and MOU with Foundation and VS.
- Board education sessions were discussed and Longwoods was suggested as a resource for prerecorded education videos. Deb noted that if any Board members have any topics of interest to please forward them to her.
- The 2023 Board Retreat was a success with excellent and energizing presentations. Andrea was thanked for organizing the event. Deb reminded the Board members to submit their retreat evaluations to assist in planning for next year.
- A number of motions were put forward with a recommendation for Board approval as part of the Governance Committee’s work plan.

Motion #6

Rationale: As part of their Work Plan, the Governance Committee is required to review and make updates to the Board of Directors Work Plan.

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



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Moved by: Laurie French
Seconded by: Tony Brazda

The motion was carried.

Motion #7

Rationale: The Governance Committee, as part of their work plan, is required to review the Board and Officer position descriptions as well as the Statement of Roles and Responsibilities of the Board and the Committee Structure.

Motion: The Governance Committee hereby approves the Statement of Roles and Responsibilities of the Board document and the Committee Structure, along with the following position descriptions:

- Board Director
- Chair
- Vice Chair
- Treasurer
- President & CEO
- Chief of Staff

Moved by: Geoff Griffin
Seconded by: Jamie Uson

The motion was carried.

Motion #8

Rationale: The Guide to Good Governance recommends that Hospitals develop a Board Accountability Statement for viewing by the public. As part of the Governance Committee's work plan, this Statement gets reviewed on an annual basis.

Motion: The Board of Directors hereby approves the Board Accountability Statement, as recommended by the Governance Committee.

Moved by: Rosaleen Cutler
Seconded by: Tony Brazda

The motion was carried.

3.4 Finance Committee

Jamie Uson highlighted the following from the September 25, 2023 Finance Committee meeting:

- Peter Rawson Investment manager left Scotia Bank and Brian Swales has taken over his portfolios. Brian attended the Finance meeting, on short notice, to introduce himself and reviewed the investments with the Committee. Brian will do some rebalancing of both account 1 and 2. The Committee's initial impression of Brian was positive.
- The total overtime costs spent year to date is approx. \$540k. The hospital has received approx. \$2M in HIRF funding which will be used to replace the boilers and transformers.



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3.4.1 *August Financial Statements and Cheque List*

The Finance Committee reviewed the August 2023 Financial Statements and Cheque List which totaled \$7,701,099.15. No concerns were noted by the Finance Committee or the Board.

<p>Motion #9</p> <p><i>Rationale: Normal Practice.</i></p> <hr/> <p>Motion: The Board of Directors hereby approves the following, as recommended by the Finance Committee:</p> <ul style="list-style-type: none"> • August 2023 Cheque List totaling \$7,701,099.15; • August 2023 Financial Statements. <p>Moved by: Geoff Griffin Seconded by: Tony Brazda</p> <p style="text-align: right;">The motion was carried.</p>
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3.5 Volunteer Services Report

Marg Isbester highlighted that VS are in an excellent state however the announcement of masking in patient facing areas will come with its challenges. On October 14, 2023 the VS has their 60 for 60 celebration and Marg highlighted that all are welcome to attend. A lot of hard work has been put into this event which will include a surprise announcement. The VS annual Christmas Bazaar will be held on November 15th at the Westdale Campus.

3.6 Foundation Report

Kelly Roantree highlighted that with the contracted assistance of 1dea Design & Marketing Inc., photos and videos were taken the week of September 10th for the MRI campaign. Staff who participated in the interviews and videos were thanked for their part in the promotional video.

Kelly highlighted that McDonald’s Hospital Day in August raised a total of \$4,692. The 50/50 draws continue; \$20,000 was raised last year. The 26th annual LACGH Foundation Golf Tournament raised over \$65,000.

On October 11th the Foundation will hold their Donor Appreciation Event which will recognize donors with life amounts of \$1,000 or more with special recognition to Atura Power and the Greater Napanee Community Development Fund. Guest speakers will include AK Sharma and Karen Pearson who will present on the MRI Project. Kelly highlighted that the MRI Campaign has raised \$150,000 to date without the campaign officially being launched.

3.7 Chief Executive Officer’s Report

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

PCCS Request

Anita Ramski sent an email, on behalf of the PCCS asking if MPP Bresee could do a walkthrough at LACGH and the new LTC Build site as part of a short film spotlighting healthcare and “Building Ontario”. The Board highlighted some patient confidentiality concerns with this request, however, saw no concerns with MPP Bresee doing a LTC site visit, given proper safety equipment is worn. Wayne stated he will discuss this request with the LTC site supervisor.



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Counties of Leeds and Grenville Request

An email was received from the Project Management Specialist with the Counties of Leeds and Grenville inquiring if a representative from LACGH would be open to joining a special meeting of their Council to discuss the possible future use options of their existing 30,000 square foot LTC facility. The request is for Wayne or delegate to discuss the LACGH campus of care model; the progress to date, the positives, the challenges, the learnings etc., to their members of Council. A discussion amongst the LACGH Board of Directors ensued and it was agreed that Wayne would call the Project Management Specialist and see what exactly she was looking for and extend whatever assistance we can in helping out.

LTC Licensing Update

An updated licensing agreement and attestation has been received from the Ministry for our existing 22 CVC beds. This agreement and attestation is due November 15, 2023.

Motion #10

Rationale: Normal Practice

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

Moved by: Laurie French

Seconded by: Norm Clark

The motion was carried.

4. Other

4.1 Correspondence Received up to September 29, 2023.

There was nothing further to report for correspondence.

5. New Business

5.1 Annual Director Declaration and Consent Form

Deb highlighted that the annual director declaration and consent form was distributed in the Board meeting package which requires everyone to sign and submit to Andrea Nussberger. Hard copies are available if needed.

5.2 Board Retreat

See item 3.3.

6. Closed Session

At 7:57 p.m., the Board moved into closed session.

Motion #11

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.



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At 8:47 p.m., the Board rose from closed session.

Motion #12

Rationale: Normal Practice

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

Moved by: Tony Brazda

Seconded by: Jamie Uson

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 November 7, 2023.

7.2 Adjournment

The meeting was adjourned at 8:48 p.m.

Motion #13

Rationale: Normal Practice

Motion: That the Board of Directors hereby adjourns their meeting at 8:48 p.m. on October 3, 2023.

Moved by: Tony Brazda

Seconded by: Jamie Uson

The motion was carried.