



LENNOX AND ADDINGTON COUNTY GENERAL HOSPITAL

MINUTES BOARD OF DIRECTORS March 3, 2020 Airhart Conference Room

A meeting of the Board of Directors of the Lennox and Addington County General Hospital was held in the Airhart Conference Room at 6:30 p.m. on March 3, 2020.

PRESENT:

Board:	Allan MacGregor (Chair)	John Wise
	Deb Lowry	Robert Hough
	Michelle Smith	Mary Mayo
	Wayne Coveyduck	Dr. Kim Morrison
	Norm Clark	Dr. Sonal Patel
	Bob Clancey	Tracy Kent-Hillis
	Lori Francis	

REGRETS:

Chris Seeley	Geoff Griffin
Robert Paul	Jamie Uson
Gert Switzer	Jane Good

Staff in Attendance:	Darlene Moore	Colin Catt
	Tracy Ringrose	Sheila Mabee (Recorder)
	Erin Brown	

1. Call to Order/Opening Remarks

The meeting was called to order at 6:31 p.m., by Allan MacGregor.

2. Approval of the Agenda

The agenda was approved with an amendment to item 8.1 from Accreditation Survey to OHA Board Self-Assessment.

<p>Motion #1</p> <p><i>Rationale: Normal Practice</i></p> <hr/> <p>Motion: That the Board of Directors hereby approves the amended agenda dated March 3, 2020.</p> <p>Moved by: Lori Francis Seconded by: Deb Lowry</p> <p style="text-align: right;">The motion was carried.</p>
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3. 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.

4. Minutes of the Previous Meeting

The minutes of the previous meeting were approved as circulated.



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Motion #2

Rationale: Normal Practice

Motion: That the Board of Directors hereby approves the minutes of the previous meeting dated February 4, 2020.

Moved by: Mary Mayo

Seconded by: Robert Hough

The motion was carried.

5. Business Arising

5.1 Regional Updates

Allan MacGregor noted a number of expressed regrets had come in for the meeting. Among those Board members unable to attend the Board meeting, he shared that Jane Good, the Board representative for the Patient & Family Advisory Council (PFAC) had tendered her resignation citing that she had a number of personal family health related commitments which she needed to attend to and be present for. Allan noted that Jane's contributions and insights will be missed at the Board table and requested that Erin Brown and Tracy Kent-Hillis seek a new PFAC Board representative to fill her place.

Regional HIS Update

Wayne highlighted that LACGH, along with Providence Care have signed off approvals for moving to the next Phase of the Regional HIS Project (proponent negotiations). The remaining Hospital Boards have until the end of March to notify the Project Team of their decisions.

FLA-OHT Update

The FLA-OHT Steering Committee continues to meet every two weeks. Progress is slow, but moving forward. The readiness assessment has been submitted to the Ministry and we are waiting to hear from them if the FLA-OHT will be invited to full application. In the meantime, work continues as if that has/will happen. Working groups are beginning to be set, with a goal of ensuring that the right engagement is occurring with the appropriate integration messaging.

It has been acknowledged that for the OHT to be a transformational success, an Executive sponsor and a Project Manager are required as dedicated project resources to complete the amount of work to get the FLA-OHT up and running. A tentative amount of \$400,000 is being tossed about, with a proportional rate proposed for each of the agencies. There has not been a lot of commitment at the Steering Committee table as of yet. It was noted that the two positions would be publically posted, with interviews to take place to find a successful candidate.

6. Reports

6.1 Quality Committee

Deb Lowry highlighted the following from the February 18, 2020 Quality Committee meeting:

- Tracy Ringrose presented the workplace violence report. Detailed information was included in the Board package with the Quality Committee meeting minutes.

6.2 Volunteer Services

Mary Mayo had nothing further to highlight from the February 21, 2020 Volunteer Services meeting minutes circulated in the meeting package.



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6.3 Governance Committee

Deb Lowry noted the following from the February 20, 2020 Governance Committee meeting:

The Governance Self-Assessment was completed by the Governance team as part of the preparation for Accreditation. An action plan was developed and has been reviewed by the Governance Committee. This is a roadmap to address gaps or changes which need to be made before the 2021 Accreditation survey.

The Governance Committee had an important discussion regarding Board succession planning. Members who form the Board Executive are quickly nearing the end of their terms (Board Chair nearing 5 year max term; Vice Chair nearing 12 year max term). With that in mind, and as we enter into a phase of change with the development of an OHT, the Governance Committee considered providing an amendment to the Corporate By-laws to extend the maximum term for elected Board members from 12 years to 15 years. This will provide a bit of breathing space/continuity as we move forward.

Allan noted that this did not preclude Board members from letting their name stand for the Executive positions, nor did it mean that Board members were expected to stay on for the full 15 years, although that would be an option, if desired. There were no concerns noted by the Board, therefore the amended Corporate By-laws would go to the June 2020 Annual Meeting for approval by the membership.

Motion #3

Rationale: Changes to the Corporate By-laws require the review and approval of the Governance Committee and the Board before proceeding to the Annual Meeting.

Motion: The Board of Directors approves that the maximum term for elected Board members be amended in the Corporate By-laws, as recommended by the Governance Committee:

- **Article 4.8: Maximum Terms**
 - o *Each Director referred to in subsection 4.1(a) shall be eligible for re-election provided that such Director shall not be elected or appointed for a term that will result in the Director serving more than ~~twelve (12)~~ fifteen (15) consecutive years. Such Director may also be eligible for re-election for another term or terms (to a maximum of ~~twelve (12)~~ fifteen (15) consecutive years) if one (1) or more years have elapsed since the termination of his or her last term.*

Moved by: Lori Francis
Seconded by: Mary Mayo

The motion was carried.

6.4 Pastoral Care Committee

Tracy Kent-Hillis reported that the February 20, 2020 Pastoral Care Committee meeting was mainly focused on the planning of the Annual Memorial Service. The Memorial Service will take place at 2:00 p.m., on Sunday April 19, 2020 at the Westdale Park Free Methodist Church.

6.5 Finance Committee

Michelle Smith reviewed the following from the February 24, 2020 Finance Committee meeting:

A significant amount of time was allocated to discussion on the need to closely monitor outflow of money, given that finances are presently tight following purchase of the external properties from the Foundation.



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6.5.1 Board, CEO and Senior Manager Expenses

The Finance Committee reviewed the Board, CEO, and Senior Management Expenses for January 2020 which totaled \$147.51.

The Finance Committee recommends to the Board, that the following expenses be approved:

Motion #4

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 \$147.51, as recommended by the Finance Committee.

January 2019

Name	Meals	Hospitality	Accommodation	Vehicle Rental/Own Used Mileage	Incidentals (Parking, tolls, etc.)	Fares	Total
Wayne Coveyduck				43.28	6.76		50.04
Tracy Kent-Hillis				90.16			90.16
Tracy Ringrose	7.31						7.31
TOTAL	7.31	-	-	133.44	6.76	-	\$147.51

Moved by: Robert Hough

Seconded by: Michelle Smith

The motion was carried.

6.5.2 Line of Credit

The Finance Committee agreed to having the CFO establish a line of credit.

No concerns were noted by the Finance Committee or the Board.

Motion #5

Rationale: Normal Practice.

Motion: The Board of Directors hereby provides approval for the CFO to explore establishing a line of credit with a credit facility, as recommended by the Finance Committee.

Moved by: Norm Clark

Seconded by: John Wise

The motion was carried.

6.5.3 January Financial Statements and Cheque List

The Finance Committee reviewed the January 2020 Financial Statements and Cheque List which totaled \$3,611,036.74.

No concerns were noted by the Finance Committee or the Board.



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Motion #6

Rationale: Normal Practice.

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

- January 2019 Cheque List totaling \$3,611,036.74;
- January 2019 Financial Statements.

Moved by: Bob Clancey

Seconded by: Michelle Smith

The motion was carried.

6.6 Ethics Committee

Tracy Kent-Hillis reported the following from the February 26, 2020 Ethics Committee meeting:

Specific cases were discussed at length by the Committee. The legislative changes to the Medical Assistance in Dying were discussed with implementation seemingly in the distant future.

The Ethics Committee reviewed and approved an updated Ethical Framework, which was circulated in the Board meeting package. The framework mirrors what is currently in use at KHSC, utilizing the ASSIST Ethical Decision-Making Framework. No concerns were noted by the Board, therefore the updated Ethical Framework was approved.

Motion #7

Rationale: The Ethics Committee is tasked with the development of a standardized approach in working through ethical issues and making decisions. The ethical framework and decision-making guide is reviewed by the Committee on a regular basis.

Motion: The Board of Directors hereby approves ASSIST Ethical Framework and Ethical Decision-Making Guide, as recommended by the Ethics Committee.

Moved by: Robert Hough

Seconded by: Michelle Smith

The motion was carried.

6.7 Foundation Report

Robert Hough noted that the June 2020 Golf Tournament is nearly full. Robert mentioned that the Board may have noticed signs on the tables outside the Boardroom about donating a car. The Foundation received their first donation for this which amounted to \$75.

A choir has been arranged as part of the series of events planned in celebration of the Foundation's 25 years. This event is planned for April 16 at 7:30 p.m., at the Westdale Complex. This is a word of mouth only event with no media releases or invites being sent out.

6.8 Chief Executive Officer's Report

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

Conversations with the Ministry of Health are still occurring with regards to the Transitional Care beds. Right now they are looking at our proposal as a type of hybrid model (mixture of LTC beds and



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MOH beds), which crosses over their boundaries. Wayne has been told the Ministry contact will be in touch with us in the next few weeks.

As shared in the CEO Report, there are instances where the Ministry has been investing in transitional care beds (reactivation models) in order to address hallway healthcare and ease the burden on Hospitals. It was noted that these are not new builds, but a retrofit of existing buildings. Hope has not been lost that our proposal will be accepted.

On the LTC front, and in speaking with officials within the Ministry of Long-term Care, Wayne has inquired about what steps are needed to dust off our LTC bed application. To date, only 50% of the LTC beds have been allocated, leaving approximately 5,500 remaining. Wayne will be following up with his contact in the near future.

Motion #8

Rationale: Normal Practice

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

Moved by: Bob Clancey

Seconded by: Michelle Smith

The motion was carried.

7. Correspondence Received up to February 13, 2020

In addition to the correspondence shared in the Board meeting package, Wayne highlighted that the OHA has circulated an email related to an issue raised by Haliburton Highlands Health Services with respect to a cap on Business Interruption Insurance after a flood took place in their nursing home.

To help other hospitals from experiencing the same issue, the OHA reached out to all small hospitals with licenses for nursing homes to participate in a teleconference to hear about the issue and how it can collectively be addressed through OHA advocacy.

Wayne noted that we currently do not have Business Interruption Insurance, and although the risk is small, he felt it might be worth exploring how much this type of insurance coverage would cost through our insurer.

There was nothing further to report for correspondence.

8. New Business

8.1 OHA Board Self-Assessment Survey Results

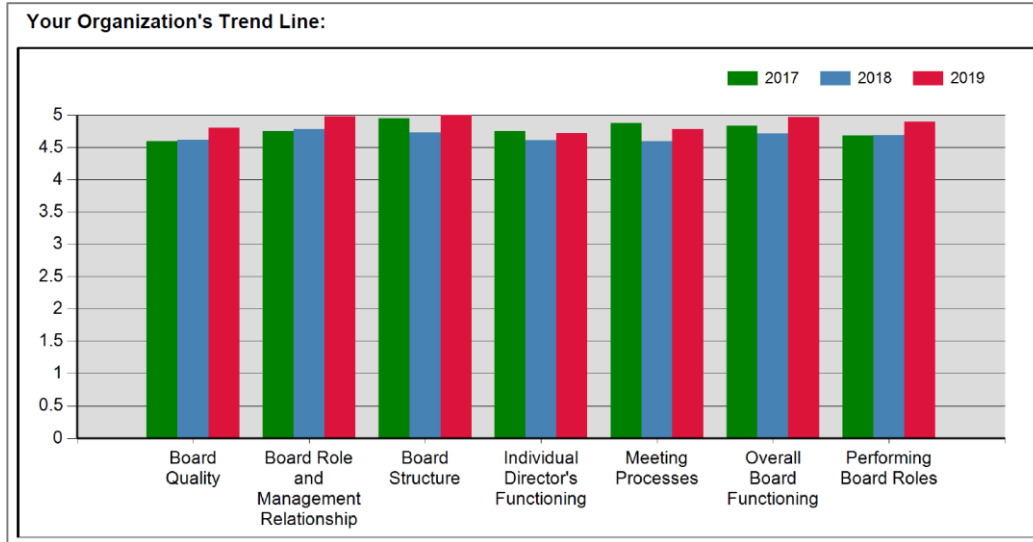
Allan MacGregor highlighted the following summary from the OHA Board Self-Assessment report:

Overall, in comparison to other Hospitals, we are doing quite well and trending above in the categories. The heat map shows that the 2019 survey results were improved from the 2017 & 2018 results.



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It was no surprise that we scored lower on the sections related to “meetings without management”, something that the Board made the conscious decision a number of year ago to not do.

Allan pointed out that some Board members do not feel comfortable with participating in discussions at the Committee and Board levels. He offered to have one to one conversations with Board members, should there be any concerns that he can help with.

Deb noted the buddy system will be reinstated. Newer Board members will be buddied up with a seasoned Board member, who will be able to assist with addressing any questions or concerns if they feel they are a “beginner” in certain areas.

A follow-up Board Orientation session has been scheduled for March 10, 2020 at 11 a.m., immediately following the Quality Committee meeting. Erin Brown will be providing an overview of what Board members can expect leading into Accreditation. An agenda will be circulated and Board members will all be invited to join in the discussion, if they wish to attend.

8.2 SAA – Amending Agreements

Darlene Moore provided the Board with an overview of the Amending Agreements for the following:

- Hospital Service Accountability Agreement (HSAA);
- Long-term Care Home Service Accountability Agreement (LSAA); and
- Multi-Sector Service Accountability Agreement (MSAA).

The Amending Agreements allow us to continue to be funded to the end of June 2020 (3-month extension) and also allows for the transition to Ontario Health from the LHIN. Language changes included more generic terminology from “LHIN” to “funder”.

Allan noted that the reference to the Bond policy was retained in the HSAA, which was nice to see.

The amendments were highlighted in the pre-circulated package for the Board to review. No concerns were noted, therefore the HSAA, LSAA, and MSAA Amending Agreements were approved.



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Motion #9

Rationale: Annually, the hospital is required to submit Annual Planning Submissions, including Budgets that formulate parts of our Hospital Service Accountability Agreement (H-SAA); Long-term Care Home Service Accountability Agreement (L-SAA) and Multi-sector Service Accountability Agreement (M-SAA).

Motion: That the Board of Directors hereby approves the Amending Agreements with respect to the Hospital Service Accountability Agreement, Long-term Care Home Service Accountability Agreement and the Multi-sector Service Accountability Agreement, all of which are extended for the period of April 1, 2020 to June 30, 2020.

Moved by: Norm Clark

Seconded by: John Wise

The motion was carried.

8.3 Coronavirus Prep

Allan MacGregor requested that Dr. Morrison and Tracy Kent-Hillis provide the Board with an overview of the COVID-19 (current state) and preparations currently underway as Ontario cases are now on the rise.

Dr. Morrison started by stating that there is an “infodemic” occurring in the media and the information being relayed to the public is not necessarily the most reliable. The KFL&A Public Health is doing a really good job of providing information and reliable resources. COVID-19 is a virus, much the same as SARS and MERS. There is no stopping the spread of this virus, the goal is to try to prevent, as much as possible, the transmission. In order to limit transmission there are three important items which everyone can do:

- 1) Wash your hands;
- 2) If you are sick, stay home; and
- 3) If you have a cough, cover it.

Public Health is leading the education on this. They have been in touch with both the Hospital and with Primary Care. A live map was shared which depicts real time data of cases being reported around the world.

Transmission is most likely droplet, not airborne, which means you get COVID-19 from spit, by coming into contact with an infected person’s spit. This is really important information in terms of masks. Masks that are loose actually create a false sense of security and are not necessary by the general public. N95 respirators are fit tested and necessary protection for health care workers interacting/treating those who are sick.

- Symptoms have ranged from mild, cold-like symptoms to severe illness with fever, cough, difficulty breathing and pneumonia.
- 80% of those infected with COVID-19 will get a cold like virus.
- 12-14% of those infected with COVID-19 will require hospitalization and ventilation. Minimizing the spread is key, so we do not overburden our health care system (there are only so many ventilators).

As of this afternoon, testing for COVID-19 can be done by family physician, by our ER, or by KHSC. Respiratory testing centres are likely to be implement soon to keep people away from the Hospital.



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Our hospital is working with our regional partners to ensure PPE supplies are sent to us, when needed. Currently, we have the bare minimum. We are providing lots of education to staff – how to screen, how to protect themselves, how to test for COVID-19, how to notify Public Health, how to transport infected patients to KHSC for treatment. Currently we are in the preliminary stages of reviewing our pandemic plan. Public Health will assist with pandemic planning for this particular event.

9. Closed Session

At 7:21 p.m., the Board moved into closed session.

Motion #10

Rationale: Normal Practice

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

Moved by: Mary Mayo
Seconded by: Robert Hough

The motion was carried.

At 7:52 p.m., the Board rose from closed session.

Motion #11

Rationale: Normal Practice

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

Moved by: Lori Francis
Seconded by: Deb Lowry

The motion was carried.

10. Next Meeting

The next regular meeting of the Board is scheduled for April 7, 2020 at 6:30 p.m., in the Airhart Conference Room.

11. Adjournment

The meeting was adjourned at 7:53 p.m.

Motion #12

Rationale: Normal Practice

Motion: That the Board of Directors hereby adjourns their meeting at 7:53 p.m. on March 3, 2020.

Moved by: Lori Francis
Seconded by: Deb Lowry

The motion was carried.