



LENNOX AND ADDINGTON COUNTY GENERAL HOSPITAL

BOARD OF DIRECTORS

MEETING MINUTES

May 6, 2025

Zoom | ACR

Motion #1

Rationale: Normal Practice

Motion: That the Board of Directors hereby approves the agenda dated May 6, 2025.

Moved by: Laurie French

Seconded by: Robin Thompson-McAvoy

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 April 1, 2025.

Moved by: Bob Clancey

Seconded by: Laurie French

The motion was carried.

2. Strategic Plan – Draft for Review

Prior to the meeting, Rob Wood joined the Board to present the final draft of the 2025-2028 LACGH Strategic Plan. Mike emphasized the comprehensive engagement process that shaped the new strategic plan which includes an updated mission, vision and values. Rob explained that the plan aims to initiate a new chapter for the organization, promoting a refreshed identity centered on togetherness, adaptability and empowerment.

Rob and Mike emphasized the commitment of the SLT to ensure the strategic plan is customized to our organization.

A brief discussion ensued which noted minor wordsmithing edits to the strategic plan. Rob and the SLT were thanked for their hard work on the strategic plan and the 2025-2028 Strategic Plan including Mission, Vision and Values, was approved as presented.

Motion #3

Rationale: Normal Practice

Motion: That the Board of Directors hereby approves the 2025-2028 Strategic Plan as presented.

Moved by: Allan MacGregor

Seconded by: Rebecca Murphy

The motion was carried.



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3. **Business Arising**

3.1 **Regional Updates**

Dr. Kim Morrison reported on the following items:

OHT

- The FLA-OHT is preparing an annual report highlighting its work during 2024–25. The report will be shared with Mike as needed.
- The FLA-OHT has submitted a proposal to the Ministry aimed at expanding access and connecting the remaining unattached residents in the FLA region to a primary care provider. The invitation to submit this proposal was based on the volume of unattached residents by postal code, with two postal codes in the FLA area identified. The proposal outlined the plan for the FLA-OHT to attach the remaining 30,000 residents to primary care by March 2027.

3.2 **Capital Projects Update**

AK Sharma shared photos of the progress on the LTC Home with the Board. The photos showed the exterior and interior work to date. AK highlighted that the flooring is nearing completion and the T-bars in the resident rooms are 90% complete.

It was noted that the project remains a construction site, therefore, a physical tour will be planned once the site is safe and convenient to view.

4. **Reports**

4.1 **Quality Committee**

Rosaleen Cutler highlighted the following from the April 15, 2025 Quality Committee meeting:

- Holly McCabe presented the annual Infection Control Review which highlighted no major concerns.
- Justin Turner presented the annual Medical Alert Device Report.
- Justin Turner presented the biannual Critical Incident Report which highlighted one critical incident since the last report in October 2024.

<p>Motion #4</p> <p><i>Rationale: Normal Practice</i></p> <hr/> <p>Motion: That the Board of Directors hereby accepts the Medical Device Alert Report and the Critical Incident Report, as recommended by the Quality Committee.</p> <p>Moved by: Robin Thompson-McAvoy Seconded by: Bob Clancey</p> <p style="text-align: right;">The motion was carried.</p>

4.2 **Medical Advisory Committee**

Dr. Kim Morrison highlighted the following from the April 10, 2025, Medical Advisory Committee meeting:

- Justine Feeney presented the quarterly Lab Services Report. Dr. Morrison acknowledged Justine’s significant efforts in extracting laboratory data from Lumeo, despite ongoing challenges with data collection. The report also noted that the hospital continues to perform above benchmark in its Choosing Wisely initiatives.



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- The MAC conducted a review of its Human Health Resources planning and confirmed that the organization is currently well-positioned with the necessary physician complement to support the various departmental operations.

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

- Emily Kerr - Active (Family Medicine)
- Daniel Glatt – Active (Family Medicine)
- Nathaniel Hart – Active (Family Medicine)
- Carl Lee – Active (Family Medicine)
- Kim Morrison – Active (Family Medicine)
- Pierre Robichaud – Active (Family Medicine with Emergency)
- Molly Touzel – Active (Family Medicine)
- Giancarlo Pukas – Associate (Family Medicine)
- Roger Levesque – Consulting (Oncology)
- Franciso Vera Badilo – Consulting (Oncology)

Motion #5

Rationale: Applications for appointment to the Medical Staff require the review and approval of the Medical Advisory Committee and the Board of Directors.

Motion: The Board of Directors hereby approves the following re-appointments to the LACGH Medical Staff, as recommended by the Medical Advisory Committee:

- *Emily Kerr - Active (Family Medicine)*
- *Daniel Glatt – Active (Family Medicine)*
- *Nathaniel Hart – Active (family Medicine)*
- *Carl Lee – Active (Family Medicine)*
- *Kim Morrison – Active (Family Medicine)*
- *Pierre Robichaud – Active (Family Medicine with Emergency)*
- *Molly Touzel – Active (Family Medicine)*
- *Giancarlo Pukas – Associate (Family Medicine)*
- *Roger Levesque – Consulting (Oncology)*
- *Franciso Vera Badilo – Consulting (Oncology)*

Moved by: Geoff Griffin

Seconded by: Rosaleen Cutler

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:

- Jordan Boudreau – Active (Family Medicine) **Change from Associate to Active**
- Victoria Candy – Active (Family Medicine) **Change from Associate to Active**



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- Andrew O’Dea – Active (Family Medicine) **Change 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 #6

Rationale: Applications for appointment to the Medical Staff require the review and approval of the Medical Advisory Committee and the Board of Directors.

Motion: The Board of Directors hereby approves the following appointment to the LACGH Medical Staff, with the noted change, as recommended by the Medical Advisory Committee:

- Jordan Boudreau – Active (Family Medicine) Change from Associate to Active
- Victoria Candy – Active (Family Medicine) Change from Associate to Active
- Andrew O’Dea – Active (Family Medicine) Change from Associate to Active

Moved by: Geoff Griffin
 Seconded by: Rebecca Murphy

The motion was carried.

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

- Matthew Barlow– Clinical Assistant (Emergency Medicine)
- Caitlin Lundell-Creagh - Clinical Assistant (Emergency Medicine with Family 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 #7

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:

- Matthew Barlow– Clinical Assistant (Emergency Medicine)
- Caitlin Lundell-Creagh - Clinical Assistant (Emergency Medicine with Family Medicine)

Moved by: Rebecca Murphy
 Seconded by: Allan MacGrgor

The motion was carried.

4.3 Ethics Committee

Allan MacGregor reviewed the following from the April 9, 2025 Ethics Committee meeting:



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- Two representatives from KHSC Respiriology presented a research collaboration proposal which examines chronic cough in patients with negative methacholine challenge tests. The Committee noted no concerns regarding the proposal.
- The KHSC Cancer Clinical research Team Manager presented a MY13 cancer program research study proposal which examines patients with newly diagnosed multiple myeloma who cannot undergo stem cell transplants. The ask was that LACGH join as a satellite site for the existing clinical trial. The Committee noted no concerns regarding the clinical trial proposal, however, stated that there are some logistical items to sort out before accepting.
- Christine Wilkinson presented the newly updated Ethics handbook which combines many ethics documents into one simplified handbook.
- The updated Draft of the Code of Conduct policy was reviewed noting that the newest iteration combines our Code of Ethical Conduct and the Code of Conduct into one. Ethics Committee member Monica Heine volunteered to organize the document into headings for clarity which will be brought forward for approval to a future Board meeting.

4.4 Governance Committee

Laurie French reviewed the following from the April 16, 2025 Governance Committee meeting:

- The Committee discussed action planning for accreditation as an follow-up to the results of the recent governance survey.
- The first draft of the Board of Directors Meeting policy was reviewed. Revisions were suggested, and the Committee extended its thanks to Rebecca for her significant contributions to the policy development.
- Board of Directors recruitment is ongoing and Laurie noted that there have been some really strong applicants to date. There will be a preliminary Nominating Committee meeting next Monday to review the applications. The Governance Committee will recommend 3 candidates to the Board at their June meeting.
- The delegation of authority that would typically take place at the April Governance Committee meeting has been deferred to the Special Meeting of the Board of Directors which will be held after the Annual Meeting on June 17, 2025. Doing so will allow the delegation of authority to be approved by the new Executive members.

Motion #8

Rationale: Normal Practice

Motion: The Board of Directors hereby approves the Board of Director Recruitment & Selection Policy, Process and appendix, as recommended by the Governance Committee

Moved by: Geoff Griffin

Seconded by: Laurie French

The motion was carried.

4.5 Art Décor Committee

Deb Lowry reviewed the following from the March 6, 2025 Art Decor Committee meeting:



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- The name of the Art Décor Committee has been changed to the Art Committee to align with some revisions that were made to the function of the Committee.

4.6 Volunteer Services Report

Marg Isbester noted nothing further to the report in the meeting package.

4.7 Foundation Report

There was nothing further to the report in the meeting package.

4.8 Chief Executive Officer's Report

Further to the written report provided in the Board package, Mike Bell shared the following information:

- The LTC budget is in the final stages of being developed and will be shared with the Board once finalized. A brief discussion followed, focusing on concerns related to maintaining a balanced LTC budget within the hospital's shared service model. The discussion also addressed questions surrounding Ontario Health at Home and its capacity to support the timely admission of 64 residents once occupancy is approved. It was clarified that the expectation is not to admit all 64 residents in a single day, but rather over a period of a few weeks.

Christine noted that as the opening of the LTC Home approaches, the hospital will conduct a staffing blitz, during which interested candidates will be invited to drop off their résumés and speak directly with management to learn more about employment opportunities at the LTC Home.

- The new organizational chart has been launched, and transitions and handoffs are currently underway. Discussions are ongoing regarding office space for the new managers, and job postings have been advertised for the remaining vacant positions reflected in the new structure.
- The bullet point within the CEO Report regarding Stability, Planning and Performance was emphasized. Specifically, the section that highlighted that as a sector, Ontario Hospitals are projecting a funding gap of \$2.5B (2 year cumulative).
- Mike highlighted that at the recent Small, Rural & Northern Hospitals meeting Jane Philpott spoke regarding the vision for Primary Care in Ontario and noted LACGH as a role model hospital.
- The year end financial statements and audit preparations are on track for the upcoming audit. There is a meeting scheduled tomorrow to discuss financial reporting documents which are included in the meeting packages to ensure that the Board has all of the information they require as well as some adjusts to reports to align with ministry reporting.

Motion #9

Rationale: Normal Practice

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



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Moved by: Laurie French
Seconded by: Robin Thompson-McAvoy

The motion was carried.

5. **Other**

5.1 **Correspondence Received up to May 1, 2025.**

There was nothing further to report for correspondence.

6. **Closed Session**

At 7:12 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: Bob Clancey
Seconded by: Allan MacGregor

The motion was carried.

At 7:21 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: Bob Clancey
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 June 3, 2025.

7.2 **Adjournment**

The meeting was adjourned at 7:21 p.m.

Motion #12

Rationale: Normal Practice

Motion: That the Board of Directors hereby adjourns their meeting at 7:21 p.m. on May 6, 2025.

Moved by: Rebecca Murphy
Seconded by: Jamie Uson

The motion was carried.