



LENNOX AND ADDINGTON COUNTY GENERAL HOSPITAL

MINUTES BOARD OF DIRECTORS

January 12, 2017
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 January 12, 2017.

PRESENT:

| | | |
|---------------|-------------------------|---------------------|
| Board: | Allan MacGregor (Chair) | Tracy Kent-Hillis |
| | Tony Brazda | Dr. Kim Morrison |
| | Eric Smith | Bob Clancey |
| | Peggy Rice | Deb Lowry |
| | Chris Seeley | Bob Vrooman |
| | Diane Airhart | Judge Geoff Griffin |
| | Wayne Coveyduck | Michelle Smith |
| | Norm Clark | |

REGRETS:

| | |
|------------------|------------------|
| Dr. Mark Waldron | Nancy Manion |
| Elaine Stillwell | Christina Detlor |

Staff in attendance: Gert Switzer Sheila Mabee (Recorder)

1. Call to Order/Opening Remarks

The meeting was called to order at 6:30 p.m. by Allan MacGregor.

2. Approval of the Agenda

The agenda was approved with the addition of 7.2 Hospital Fitness Facility.

Motion 1

Rationale: Normal Practice

Motion: The Board of Directors hereby approves the agenda of January 12, 2017.

Moved by: Peggy Rice

Seconded by: Eric Smith

The motion was carried.

3. Conflict of Interest

The Chair inquired if any member of the Board wished to declare a conflict of interest based on items identified in the Agenda. There were no identified conflicts of interest.

4. Minutes of Previous Meetings

The minutes of the previous meeting were approved as circulated.

Motion 2

Rationale: Normal Practice

Motion: The Board of Directors hereby approves the minutes of the previous meeting dated December 6, 2016.

Moved by: Tony Brazda

Seconded by: Norman Clark

The motion was carried.



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5. Business Arising

5.1 Health Care Tomorrow

Allan noted that both he and Tony had participated in the Chair/Vice Chairs teleconference meeting recently. Health Care Tomorrow was termed a “relaunch”. There seemed to be a softer tone with more realistic expectations; the focus appeared to be more operational than governance. There was an indication that a regional investment in IT may be coming.

Wayne reported the following highlights:

At the most recent SECHEF meeting, the CEOs were asked about interest in fulfilling the CEO Lead for HCT-HP at the project secretariat for Jim Flett who will be retiring. Bev MacFarlane offered to be Jim’s successor, so long as her CNO does not have to relinquish her role on the secretariat.

The CEOs of LACGH, Brockville, Quinte and Perth-Smith Falls were invited to participate in a KGH/HDH integration conference call this week, led by Kevin Smith, the CEO at St. Joseph’s Health System in Hamilton. The purpose of the call was for an expert advisory panel of health care colleagues to generate feedback regarding the integration of the two Kingston hospitals.

Deb Lowry inquired about the status of the January 9, 2017 sub-region stakeholder’s consultation as there was no communication sent out by the LHIN and nothing on their website making note of a scheduled consultation. Tracy reported that she had attended this invitation-only event with a number of community leaders, she was the only hospital representative present. LHIN staff provided an information presentation. Ministry-directed indicators were mentioned, which was a surprise as it was understood to be a LHIN-led initiative.

5.2 Strategic Plan

Wayne noted that the Strategic Plan development is progressing.

6. Reports

6.1 Quality Committee

The Quality minutes of December 20, 2016 were reviewed as circulated.

6.2 Volunteer Services

Diane Airhart highlighted the following news items from Volunteer Services:

- The volunteer services will be purchasing 10 transport wheelchairs for admitting and the emergency department at a cost of \$20,000. The wheelchairs have some great features that should help with keeping them in the building and not mysteriously disappearing.
- The gift shop door which was damaged in December has now been replaced and is functioning better than previously.
- The Ontario Hospital Auxiliary has been having ongoing discussions regarding the Auxiliary Prayer and inclusivity. For this reason, Volunteer Services has made the decision to change this to an Auxiliary Pledge.

6.3 Ethics Committee

The Ethics Committee minutes of December 14, 2016 were briefly reviewed as circulated.



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6.4 Medical Advisory Committee

Dr. Morrison reported the following highlights from the January 5, 2017 Medical Advisory Committee meeting:

Reports were received from the Transfusion Committee and Lab; John McBride presented a Medication Safety/Pharmacy and Therapeutics report.

The Surgical and the Acute/Emergency Clinical Teams are currently looking at strategies to decrease the number of controlled substance prescriptions; naloxone kits will soon be available in the ER for distribution, as suggested by public health.

The MAID admission order set was reviewed and passed by the Medical Advisory Committee. This is a solid foundational document so that physicians are prepared when/if a MAID case presents itself.

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

- Dr. Darren Beiko - Consulting (Urology)
- Dr. Jason IZard - Consulting (Urology)
- Dr. Robert Siemens - Consulting (Urology)
- Dr. Stephen Steele - Consulting (Urology)
- Dr. Rebecca Jane Woolnough - Consulting (Paediatrics)
- Dr. Patricia Farmer - Consulting (Pathology and Molecular Medicine)
- Dr. Dick Zoutman - Consulting (Laboratory Medicine & Internal Medicine (Infectious Disease))
- Dr. David Lee - Consulting (Oncology)
- Dr. Clementine Janet Lui - Consulting (Oncology)

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 the re-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-appointment applications to the LACGH Medical Staff, as recommended by the Medical Advisory Committee:

- *Dr. Darren Beiko – Consulting (Urology)*
- *Dr. Jason IZard – Consulting (Urology)*
- *Dr. Robert Siemens – Consulting (Urology)*
- *Dr. Stephen Steele – Consulting (Urology)*
- *Dr. Rebecca Jane Woolnough – Consulting (Paediatrics)*
- *Dr. Patricia Farmer – Consulting (Pathology and Molecular Medicine)*
- *Dr. Dick Zoutman – Consulting (Laboratory Medicine & Internal Medicine (Infectious Disease))*
- *Dr. David Lee – Consulting (Oncology)*
- *Dr. Clementine Janet Lui – Consulting (Oncology)*

Moved by: Peggy Rice

Seconded by: Eric Smith

The motion was carried.



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

- Dr. Michelle Zec - Consulting (Orthopaedics)

No concerns were noted by the MAC; therefore, the appointment application was recommended to the Board of Directors for approval. The Board reviewed the credentialing application and no concerns were noted.

Motion 4

Rationale: Applications for the 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 application to the LACGH Medical Staff, as recommended by the Medical Advisory Committee:

- Dr. Michelle Zec – Consulting (Orthopaedics)

Moved by: Chris Seeley

Seconded by: Norman Clark

The motion was carried.

The Medical Advisory Committee reviewed the re-appointment application to the LACGH Medical Staff, with the noted changes, for the following:

- Dr. Jay Jonathan Ross – Courtesy with Admitting (Anesthesia) *change from Locum Tenens to Courtesy with Admitting, addition of intraosseus line placement*

No concerns were noted by the MAC; therefore, the re-appointment application with the noted changes, was recommended to the Board of Directors for approval. The Board reviewed the credentialing application and no concerns were noted.

Motion 5

Rationale: Applications for the 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-appointment to the LACGH Medical Staff with the noted changes, as recommended by the Medical Advisory Committee:

- Dr. Jay Jonathan Ross – Courtesy with Admitting (Anesthesia) *change from Locum Tenens to Courtesy with Admitting, addition of intraosseus line placement*

Moved by: Chris Seeley

Seconded by: Deb Lowry

The motion was carried.

6.5 Foundation

Further to the written report provided in the Board package, Bob Vrooman noted that there are still a few tickets available for the upcoming Foundation Gala. Bob reported that the Foundation received a donation in December, which included a letter indicating that the donation would have been higher if the Hospital's ER wait times were more acceptable. Nancy Manion was following up on this feedback.



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6.6 Chief Executive Officer's Report

Wayne Coveyduck had nothing further to add to the written report provided in the Board package.

Motion 6

Rationale: Normal Practice

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

Moved by: Deb Lowry
Seconded by: Chris Seeley

The motion was carried.

7. Other

7.1 Correspondence Received up to January 3, 2017

There was no additional correspondence to report.

7.2 Hospital Fitness Facility

Wayne brought forward a request that would change the hospital's fitness facility policy to include our Volunteer Services members. Utilization of the gym was reviewed: the gym sees approximately 3 staff members during peak time (shift changes); the gym can accommodate ten at most. Of the approximate 200 volunteers, it was estimated that a likely number of gym users would be 30-40. No concerns were noted.

Motion 7

Rationale: Normal Practice

Motion: The Board of Directors was supportive of adapting the hospital's fitness facility policy to include the members of Volunteer Services.

Moved by: Deb Lowry
Seconded by: Michelle Smith

The motion was carried.

8. New Business

8.1 Hospice Budget – CAPS for MSAA

Gert provided a general overview of the Hospice L&A Budget. This Budget makes up part of the Multi-Service Sector Accountability Agreement for the LHIN, which requires approval by the Board of Directors.

Deb Lowry inquired if the budget includes the \$78,000 that was recently allocated to Hospice L&A. Gert noted that it did not as this grant money has not yet been received.

No additional concerns were noted.



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Motion 8

Rationale: Annually, the hospital is required to submit a Community Annual Planning Submission (CAPS), which includes a budget for Hospice L&A and formulates part of our Multi-Service Sector Accountability Agreement (MSAA).

Motion: The Board of Directors hereby approves the Hospice Lennox and Addington 2017-18 Budget, as recommended by the Finance Committee.

Moved by: Tony Brazda
Seconded by: Norman Clark

The motion was carried.

9. Closed Session

At 7:48 p.m., the Board moved into closed session.

Motion 9

Rationale: Normal Practice

Motion: The Board of Directors hereby moves into closed session.

Moved by: Bob Vrooman
Seconded by: Tony Brazda

The motion was carried.

At 8:39 p.m., the Board rose from closed session.

Motion 10

Rationale: Normal Practice

Motion: The Board of Directors hereby rises from closed session.

Moved by: Eric Smith
Seconded by: Peggy Rice

The motion was carried.

10. Other Business

A video came to light, taken recently by a family member of a patient in our ER. The family member was publically expressing displeasure of information received from the clerk, through social media. The video scans a few members of staff trying to assist as well as into the waiting room. It is difficult to make out any of the patient's in the waiting room and at this point none of them have come forward with a complaint. There have been a number of "shares" and "views" of the video with various comments, both derogatory and positive, being made with regards to the hospital, staff and the complainant. Traffic seems to be slowing down, but it was felt that the Board should be made aware and this may become a public relations issue in the future.

11. Next Meeting

The next regular meeting of the Board is scheduled for February 7, 2017 at 6:30 p.m. in the Airhart Conference Room.



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Christina Detlor will be providing an education session on the Health and Safety Orientation at 6:00 p.m., just prior to the Board meeting.

12. Adjournment

The meeting was adjourned at 8:47 p.m.

Motion 11

Rationale: Normal Practice

Motion: The Board of Directors hereby adjourns their meeting at 8:47 p.m. on January 12, 2017.

Moved by: Chris Seeley

Seconded by: Norman Clark

The motion was carried.