



LENNOX AND ADDINGTON COUNTY GENERAL HOSPITAL

MINUTES BOARD OF DIRECTORS October 6, 2015 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 October 6, 2015.

PRESENT:

Board: Peggy Rice (Chair)	Dr. Kim Morrison
Chris Seeley	Cathie Vick
Bob Clancey	Tony Brazda
Judge Geoff Griffin	Deb Lowry
Robert Paul	Michelle Smith
Norm Clark	Tracy Kent-Hillis
Wayne Coveyduck	Elaine Stillwell

Staff in attendance: Shari Sampson
Gert Switzer
Nancy Manion
Sheila Mabee (Recorder)

REGRETS: Allan MacGregor
Eric Smith
Dr. Mark Waldron

1. Call to Order/Opening Remarks

The meeting was called to order at 6:30 p.m. by Peggy Rice .The Chair advised the Board members that flu shots would soon be available and to expect an email from Dawn Clare advising of the date.

Peggy reminded the Board that the next meeting will occur a week later than usual, due to staff and Board members attending the OHA Health Achieve conference in Toronto. Mike Airhart from McDougall Insurance will be providing an education session on the Hospital's insurance coverage at 6:00 p.m.

2. Approval of the Agenda

The agenda was approved as circulated.

Motion 1

Rationale: Normal Practice

Motion: The Board of Directors hereby approves the agenda of October 6, 2015.

Moved by: E. Stillwell

Seconded by: D. Lowry

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.



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4. Minutes of Previous Meetings

The minutes of June 29, 2015 were reviewed and no changes were noted.

Motion 2

Rationale: Normal Practice

Motion: The Board of Directors hereby approves the minutes of the previous meetings dated June 29, 2015.

Moved by: Deb Lowry
Seconded by: Chris Seeley

The motion was carried.

5. Business Arising

5.1 Executive Report

The Executive Committee did not meet over the summer.

Peggy requested that Gert provide the Board with an explanation regarding the IT breakdown and challenges which occurred over the summer.

Gert reported two main issues, the first being a core switch failure, the second the email server. Due to the breakdown of the core switch, email exchange went down a few weeks later. The email server was approved for replacement but not completed before it went down. It was decided to move forward with the Base Information Technology Integration (BITI), a LHIN mandated configuration of a regional exchange server which IT has been working on since 2012.

Wayne explained the regional IT system and the lack thereof in the southeast region is well behind the rest of the province. Although KGH is the 'hub' that houses the BITI information system, we are not getting expedient service from KGH, an issue which Gert is making headway with. A decision on whether to keep with the BITI or opt out may be needed within the next little while. While the initiative was LHIN mandated, not all hospitals decided to be on the BITI, so talks are underway with the LHIN to determine if they are planning to resurrect the BITI project and what their plan of action is.

5.2 Health Care Tomorrow Update

The letter approving LACGH to move forward to Phase 2 was sent to the LHIN over the summer. All hospitals involved in the Health Care Tomorrow initiative were in favour of moving forward.

6. Reports

6.1 Quality Committee

Elaine highlighted that Accreditation Canada has approved our patient survey process. This will be a requirement to submit survey results during our next accreditation survey in June 2017.



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6.2 Medical Advisory Committee

Dr. Morrison reviewed the Medical Advisory Committee highlights from the meeting held on September 3, 2015.

The Medical Advisory Committee reviewed the reappointment applications for the following:

- Dr. Madeline Morris – Active staff privileges (Emergency)
- Dr. Filip Gilic – Courtesy staff with Admitting privileges (Emergency)
- Dr. Craig Simpson – Active staff privileges (Emergency)
- Dr. John (Jack) Raleigh - Courtesy staff with Admitting privileges (Emergency)

No concerns were noted by the MAC; therefore, the reappointment applications were recommended to the Board for approval. The Board reviewed the credentialing applications and no concerns were noted.

Motion 3

Rationale: Applications for the reappointment 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 reappointment of the following as recommended by the Medical Advisory Committee:

- Dr. Madeline Morris – Active staff privileges (Emergency)*
Dr. Filip Gilic – Courtesy staff with Admitting privileges (Emergency)
Dr. Craig Simpson – Active staff privileges (Emergency)
Dr. John (Jack) Raleigh - Courtesy staff with Admitting privileges (Emergency)

Moved by: Norm Clark
Seconded by: Elaine Stillwell

The motion was carried.

The Medical Advisory Committee also reviewed the appointment applications for the following:

- Dr. Melissa Keith – Locum Tenens staff privileges (Emergency)
- Dr. Sasha Bhan – Consulting staff privileges (Radiology)
- Dr. Apurva Patel – Consulting staff privileges (Radiology)
- Dr. John Garvey – Consulting staff privileges (Respirology)
- Dr. Joshua Lakoff – Consulting staff privileges (Endocrinology)
- Dr. Rebecca Woolnough – Consulting staff privileges (Paediatrics)

No concerns were noted by the MAC; therefore, the reappointment applications were recommended to the Board for approval. The Board reviewed the credentialing applications and no concerns were noted.



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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 appointment and reappointment of the following as recommended by the Medical Advisory Committee:

*Dr. Melissa Keith – Locum Tenens staff privileges (Emergency)
Dr. Sasha Bhan – Consulting staff privileges (Radiology)
Dr. Apurva Patel – Consulting staff privileges (Radiology)
Dr. John Garvey – Consulting staff privileges (Respirology)
Dr. Joshua Lakoff – Consulting staff privileges (Endocrinology)
Dr. Rebecca Woolnough – Consulting staff privileges (Paediatrics)*

Moved by: Norm Clark
Seconded by: Elaine Stillwell

The motion was carried.

6.3 Volunteer Services Committee

Further to the written report sent out in the Board package, Cathie noted that the Volunteer Services annual fall harvest and bake sale is taking place tomorrow, October 7th.

6.4 Ethics Committee

Elaine provided a summary from the Ethics Education session that the Ethics Committee organized which took place on September 9, 2015. Hannah Kauffman introduced participants to IDEA as an ethical decision making model. The workshop was well attended with 27 participants, a third of which were physicians as well as a number of staff, board and committee members.

The Ethics committee will be reviewing the IDEA Framework at their next meeting with a possibility of adopting its use for ethical decision making within the hospital.

6.5 Finance Committee

Deb Lowry provided the following highlights from the Finance Committee meeting held on September 15, 2015.



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6.5.1 – Board, CEO and Senior Management Expenses

The Finance Committee reviewed the Board, CEO and Senior Management Expenses for July which totaled \$172.23. The Finance Committee recommends to the Board that the following expenses be approved:

Motion 5

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 expenses which totaled \$172.23 as recommended by the Finance Committee:

July 2015

Name	Meals	Hospitality	Accommodations	Vehicle Rental/Own used Mileage	Incidentals (Parking, tolls, etc.)	Fares	TOTAL
Wayne Coveyduck				170.42	1.81		\$172.23
TOTALS				\$170.42	\$1.81		\$172.23

Moved by: Michelle Smith
Seconded by: Geoff Griffin

The motion was carried.

6.5.2 May and June Board, CEO and Senior Management Expenses, Financial Statements and Cheque Lists

The Finance Committee did not meet in June and July; however, the expenses, financial statements and cheque lists were circulated via email to the committee members for approval. No concerns were expressed from the Finance Committee so they have recommended them to the Board for approval.

Motion 5

Rationale: Normal Practice

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

*May Board, CEO and Senior Management Expenses totaling \$2,027.77
May 2015 Financial Statements
May Cheque List totaling \$2,721,348.14
June Board, CEO and Senior Management Expenses totaling \$1,048.47
June Financial Statements
June 2015 Cheque List totaling \$2,250,397.33*

Moved by: Judge Geoff Griffin
Second by: Norm Clark

The motion was carried.



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6.5.3 - July Financial Statement and Cheque List

The Finance Committee reviewed the July 2015 Financial Statement and Cheque List which totaled \$2,262,545.65 and no concerns were noted by the Finance Committee or the Board.

Motion 5

Rationale: Normal Practice

Motion: The Board of Directors hereby approves the July Financial Statement and July Cheque List which totaled \$2,262,545.65 as recommended by the Finance Committee.

Moved by: Tony Brazda
Second by: Bob Clancey

The motion was carried.

6.5.4 - Capital Equipment Requests

The Finance Committee reviewed a request for the allocation of \$124,348.00 towards the purchase of an OR cystoscope (17,800), a laser printer for Pharmacy (1,140) a systemic therapy vital signs monitor (3,750), an stretcher for Ultrasound (9,630), a DI software upgrade (16,650), a German needle driver for the OR (623 added cost), emergency programming modifications (4,755) and the IT Core switch replacement (70,000 move project ahead one year to avoid downtime since service contract no longer reliable due to age of equipment – redirect \$50,000 of approved hospital funds from server cluster to this replacement as server cluster is now paid for by small hospital funding).

Motion 6

Rationale: Normal Practice

Motion: The Board of Directors hereby approves the allocation of \$124,348.00 towards the purchase of the following equipment as recommended by the Finance Committee:

- OR Cystoscope (17,800).
- Pharmacy Laser Printer (1,140).
- Systemic Therapy Vital Signs Monitor (3,750).
- Ultrasound Stretcher (9,630).
- DI Software upgrade (16,650).
- OR German Needle Driver (623) – added cost.
- Emergency Programming modifications, chief complaint outbound (4,755).
- IT Core switch replacement (70,000).

Moved by: Cathie Vick
Second by: Chris Seeley

The motion was carried.



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6.5.5 – Foundation Leasehold Agreement

The Finance Committee reviewed the request for discontinuing the \$250,000 payment from the Foundation to the Hospital to offset leasehold improvement costs for the SOS project. The Finance Committee recommended that the Board approve the discontinuing the \$250,000 payment from the foundation and continue with capital equipment contributions.

Motion 7

Rationale: Normal Practice

Motion: The Board of Directors hereby approves the recommendation from the Finance Committee that the Foundation Agreement to offset leasehold improvements be redirected to fund capital equipment and software.

Moved by: Deb Lowry
Second by: Tony Brazda

The motion was carried.

6.5.6 – Added Professional Fees

The Finance Committee reviewed the request for added professional fee payment to KPMG (1,800) and professional fee for HST advice (500-750) regarding the building transfers from the Hospital to the Foundation.

Motion 8

Rationale: Normal Practice

Motion: The Board of Directors hereby approves the allocation of the following added professional fees as recommended by the Finance Committee:

- KPMG (1,800)
- HST advice (500 to 750).

Moved by: Elaine Stillwell
Second by: Chris Seeley

The motion was carried.

6.5.7 - Non-union Benefits

The Finance Committee reviewed the request to provide non-union staff with the equivalent of the best of the union contracts in which there will be an increase in non-union chiropractic coverage from \$350 to \$500 per calendar year, an increase in the percentage in lieu of benefits from 13% to 14% for employees not in the pension plan and an increase in the percentage in lieu of benefits from 9% to 14% for employees in the pension plan.



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Motion 9

Rationale: Normal Practice

Motion: The Board of Directors hereby approves the following changes to non-union benefits as recommended by the Finance Committee:

- Increase in non-union chiropractic coverage from \$350 to \$500 per calendar year
- Increase in the percentage in lieu of benefits from 13% to 14% for employees not in the pension plan
- Increase in the percentage in lieu of benefits from 9% to 14% for employees in the pension plan

Moved by: Michelle Smith

Second by: Geoff Griffin

The motion was carried.

6.6 - Foundation

Robert Paul reminded the Board about the Annual Donor Tea taking place tomorrow, October 7; the Foundation is expecting approximately 170 guests to join them in celebrating their 20th Anniversary.

Plans are also underway for the Foundation's Gala which is occurring on February 11, 2016. Tickets, at a cost of \$125, will be limited to the first 200 to register. Peggy encouraged the Board to attend.

6.7 - Chief Executive Officer's Report

Further to the written report sent out with the Board package, Wayne noted the following additional items:

A letter was received notifying the Hospital's CC Licencing has been approved and extended to November 2018.

The Hospital's two Regional Patient Advisory Committee (RPAC) members (Mary Mayo and Joyce Tucker Brumwell) have resigned their participation in Health Care Tomorrow initiatives. Peggy will be sending them a note thanking them for their participation and Wayne is working on finding their replacements.

Wayne noted that he had met with Dr. John Rudan regarding future surgical services and the potential relationship which could emerge between the KGH General Surgery Group and LACGH. Wayne highlighted LACGH's current surgical manpower roster and identified some gaps in our service capability. Specifically, our surgical on call coverage is somewhat of a concern by us not being able to provide 24/7 coverage. Operatively, we do have a number of OR slots which could be utilized to make our OR more efficient. Dr. Rudan highlighted that there were several KGH based surgeons interested and willing to operate at LACGH. With this, Wayne agreed to review this opportunity with Kim and Dave, our Chief of Staff and Chief of Surgery to see where we go as a next step.



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Wayne drew the Boards attention to the SECHEF information that was provided in his Admin Report. Specifically, the reference to Governance and the potential of creating a co-lead and working group of Board members to look at Governance Change Management and role of the Boards in the Health Care Tomorrow Project. Peggy commented that at the most recent meeting of the Hospital Board Chairs, it was determined that there was no need of organizing that there was no need of organizing co-leads and working group. It was felt and decided that the Boards would meet more frequently to stay informed of Health Care Tomorrow.

Motion 10

Rationale: Normal Practice

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

Moved by: Elaine Stillwell

Second by: Deb Lowry

The motion was carried.

7.0 Other

7.1 Correspondence Received Up to September 17, 2015

There were no additional further items to report.

8.0 New Business

8.1- Retreat Evaluation

Peggy reviewed the summary notes from the Retreat:

- Overall, it was felt that the retreat itself was excellent. The knowledge gained will be beneficial to us as we go forward.
- The venue itself is very nice indeed. However, the Board and break out rooms are very cramped. We should look at an alternative for next year.
- The facilitator was again, very good. However, for the work ahead of us, we recognize that we need to look into having a different facilitator.
- One significant gap or weakness in our local area is the lack of community based support for seniors, particularly supportive housing. This might be an area we might want to investigate in seeing any potential for our involvement.

8.2 - Strategic Committee

Peggy advised the Board that a Strategic Committee has been proposed to oversee the efficient and effective development and operation of the Westdale Complex and Lenadco Complex. Members of the committee include the Chairs and Vice Chairs of both the Hospital Board and the Foundation Board as well as the Hospital CEO and Foundation Executive Director. At this time an initial meeting date and frequency of meetings has yet to be determined.



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8.3 - Westdale and Lenadco

Wayne reported that he will be connecting with Pathways to Independence this week to firm up the ABI suite lease.

Construction and town approvals are moving along for the Dialysis Unit.

9.0 Closed Session #1

At 8:05 p.m., the Board moved into closed session #1.

Motion 11

Rationale: Normal Practice

Motion: The Board of Directors hereby moves into closed session #1.

Moved by: Elaine Stillwell

Seconded by: Deb Lowry

The motion was carried.

At 8:08 p.m., the Board rose from closed session #1.

Motion 12

Rationale: Normal Practice

Motion: The Board of Directors hereby rises from closed session #1.

Moved by: Bob Clancey

Seconded by: Chris Seeley

The motion was carried.

10. Closed Session #2

At 8:10 p.m., the Board moved into closed session #2 (elected members only).

Motion 13

Rationale: Normal Practice

Motion: The Board of Directors hereby moves into closed session #2.

Moved by: Deb Lowry

Seconded by: Tony Brazda

The motion was carried.



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At 8:24 p.m., the Board rose from closed session #2.

Motion 14

Rationale: Normal Practice

Motion: The Board of Directors hereby rises from closed session #2.

Moved by: Bob Clancey

Seconded by: Chris Seeley

The motion was carried.

11. Next Meeting

The next regular meeting of the Board is November 10, 2015.

12. Adjournment

The meeting was adjourned at 8:25 p.m.

Motion 15

Rationale: Normal Practice

Motion: The Board of Directors hereby adjourns their meeting at 8:25 p.m. on October 6, 2015.

Moved by: Deb Lowry

Seconded by: Chris Seeley

The motion was carried.