



# LENNOX AND ADDINGTON COUNTY GENERAL HOSPITAL

## MINUTES BOARD OF DIRECTORS February 6, 2018 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 February 6, 2018.

**PRESENT:**

<b>Board:</b>	Allan MacGregor (Chair)	Chris Seeley
	Bob Vrooman	Diane Airhart
	Wayne Coveyduck	Tracy Kent-Hillis
	Dr. Morrison	Deb Lowry
	Eric Smith	Wendy Brockmeyer
	Elaine Stillwell	Robert Paul

**REGRETS:**

Lori Francis	Michelle Smith
Bob Clancey	Norm Clark
Tony Brazda	Dr. Mitchell

<b>Staff in Attendance:</b>	Tracy Ringrose	Nancy Manion
	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 the following items:

- 8.2 Parking Lot
- 8.3 Post Rehab Program

**Motion #1**

*Rationale: Normal Practice*

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***Motion: The Board of Directors hereby approves the amended agenda of February 6, 2018.***

Moved by: Wendy Brockmeyer  
 Seconded by: Deb Lowry

**The motion was carried.**

**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: The Board of Directors hereby approves the minutes of the previous meeting dated January 9, 2018.**

Moved by: Deb Lowry  
Seconded by: Wendy Brockmeyer

**The motion was carried.**

## **5. Business Arising**

### **5.1 Health Information System (HIS)**

Allan MacGregor inquired whether there were any questions regarding the pre-circulated HIS Motion (with explanatory notes) and reminded the Board members that he has voiced the concerns of (1) LACGH not being held back or going backwards throughout the implementation process; and (2) ensuring that the appropriate governance structure was in place (stipulating each hospital has equal say) prior to a RFP being sent out.

BGH, Providence Care, KHSC and PSFDH have all passed the amended motion to move forward. Perth Smiths-Falls sent in additional wording with their motion to voice concerns about affordability of a regional HIS.

The group has reviewed the Motion with explanation and are leaving it to Wayne and Allan to act in the hospitals' best interest. It was determined that the two concerns would be pulled from the meeting and sent with the motion (once passed) to the LHIN.

### **Motion #3**

*Rationale: As a follow up to the original Health Information System (HIS) motion, Board Chairs requested more detail in order for their Boards to be able to make an informed decision on the HIS. The additional information was provided in the form of explanations and pre-circulated to the Board members for consideration in their decision making. The motion with supplementary notes was reviewed and provided enough clarify to arrive at a decision.*

**Motion: The Board of Directors hereby approves the HIS Motion with the supporting explanation notes.**

Moved by: Deb Lowry  
Seconded by: Elaine Stillwell

**The motion was carried.**

## **6. Reports**

### **6.1 Quality Committee**

Deb Lowry highlighted the following from the January 16, 2018 Quality Committee meeting:

- Colin Catt provided the Committee with the annual IT presentation, slides attached to the pre-circulated minutes.
- Nadia Weese presented an infection report.



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### 6.2 Patient and Family Advisory Council

Wendy Brockmeyer noted that the PFAC had met the same day as the last Board meeting and there was nothing further to report.

### 6.3 Volunteer Services

Further to the minutes of January 9, 2018, Diane Airhart reported the following:

- Volunteer Services will be hosting a Valentine's Day Tea in the Airhart Conference Room from 1:00 p.m. to 3:00 p.m. on February 14, 2018.
- Our Hospital will be hosting this year's South East Region HAAO Spring Conference on May 30, 2018 at the Westdale Auditorium. Guest speaker is Annette Stuart who will be addressing the Breathe Program with rolled out in November.

Diane inquired about the possibility of the Volunteers having a yard sale along highway 2 on hospital property. There were no foreseen issues with this.

### 6.4 Medical Advisory Committee

Dr. Morrison highlighted the following from the January 11, 2018 Medical Advisory Committee meeting:

- The ICU "reset" continues to run well under the direction of the Internists.
- There were no credentialing applications this month to be reviewed.
- The meeting with Dr. Zelt, Vice President of Clinical (SE LHIN) went well. The importance of our hospital to the community was emphasized. Dr. Zelt was provided with a tour of the facility and feedback from the meeting has been very positive.

### 6.5 Finance Committee

Deb Lowry reviewed the following from the January 26, 2018 Finance Committee meeting:

#### 6.5.1 Systemic Therapy – new NAPRA Guidelines

The Finance Committee was provided with a presentation on *Hazardous and Non-hazardous Preparation* as it relates to our Pharmacy. Tracy Kent-Hillis outlined that new National Association of Pharmacy Regulatory Authorities (NAPRA) standards were adopted by the Ontario College of Pharmacists in September 2016. These new standards were implemented following the chemotherapy diluting incidents which impacted many chemo patients' treatments.

The standards cover both non-hazardous (within our Pharmacy) and hazardous (within Chemotherapy) areas of the hospital. The 104 page document covers six primary areas with an anticipated target date of January 1, 2019. Those primary areas of impact include:

- Personnel
- Policies and procedures
- Facilities and equipment
- Cleaning and disinfection
- Product preparation
- Quality assurance

The Committee was presented with two options for consideration:

- 1) KHSC mix and delivery model
- 2) LACGH upgrade



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In weighing both detailed options, the Committee determined that supporting the exploration of a LACGH upgrade would be in the best interest of both the Hospital and our patients. This could mean a financial impact of \$250,000-500,000. An external subject matter expert will be brought in to determine detailed cost implications of the upgrades needed to meet the NAPRA standards.

### **Motion #4**

*Rationale: In order to be compliant with the new NAPRA standards, changes will need to occur related to hazardous and non-hazardous sterile preparation areas of the Hospital (pharmacy, oncology). The Finance Committee was provided with two options for consideration: a KHSC "mix & deliver" model, or a renovation to LACGH's current facilities. A renovation at LACGH was determined to be the preferred option as it would keep care closer to home for these very sick patients with same day delivery of chemotherapy. This option would mean renovations to two areas of the hospital and could be a significant investment in capital costs, of which are yet to be determined.*

***Motion: The Board of Directors hereby approves moving forward with having an external subject matter expert determine detailed cost implications of renovating the Chemo area and the Pharmacy to meet the new NAPRA standards, as recommended by the Finance Committee.***

Moved by: Elaine Stillwell

Second by: Deb Lowry

***The motion was carried.***

### 6.5.2 Board, CEO and Senior Manager Expenses

The Finance Committee reviewed the Board, CEO, and Senior Management Expenses for November 2017 which totaled \$4,774.89 and December 2017 which totaled \$50.47. The Finance Committee recommends to the Board, that the following expenses be approved:



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### 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 Board, CEO and Senior Management Expenses, as recommended by the Finance Committee:**

#### November 2017

Name	Meals	Hospitality	Accommodation	Vehicle Rental/Own Used Mileage	Incidentals (Parking, tolls, etc.)	Fares	Total
Wayne Coveyduck	165.63		553.86	87.46		162.82	969.77
Allan MacGregor	165.63		553.86			162.82	882.31
Kim Morrison	165.63		553.86			162.82	882.31
Tracy Kent-Hillis				90.17			90.17
Gert Switzer	25.16			31.58			56.71
Nancy Manion	165.63		553.86			214.78	934.27
Tracy Ringrose	180.49		553.86			214.78	959.32
<b>TOTAL</b>	<b>868.17</b>		<b>2,769.30</b>	<b>209.21</b>	<b>10.19</b>	<b>918.02</b>	<b>\$4,774.89</b>

#### December 2017

Name	Meals	Hospitality	Accommodation	Vehicle Rental/Own Used Mileage	Incidentals (Parking, tolls, etc.)	Fares	Total
Gert Switzer	14.60						14.60
Nancy Manion	17.73			7.21			24.94
Tracy Ringrose	10.93						10.93
<b>TOTAL</b>	<b>43.26</b>			<b>7.21</b>			<b>\$50.47</b>

Moved by: Deb Lowry

Seconded by: Wendy Brockmeyer

**The motion was carried.**

#### 6.5.3 November Financial Statements and Cheque List

The Finance Committee reviewed the November 2017 Financial Statements and Cheque List which totaled \$2,524,205.32. No concerns were noted by the Finance Committee or the Board.

### Motion #6

*Rationale: Normal Practice.*

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

- November 2017 Cheque List totaling \$2,524,205.32
- November 2017 Financial Statements

Moved by: Deb Lowry

Seconded by: Wendy Brockmeyer

**The motion was carried.**



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### 6.5.4 December Financial Statements and Cheque List

The Finance Committee reviewed the December 2017 Financial Statements and Cheque List which totaled \$2,564,633.92. No concerns were noted by the Finance Committee or the Board.

#### **Motion #7**

*Rationale: Normal Practice.*

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

- December 2017 Cheque List totaling \$2,564,633.92
- December 2017 Financial Statements

Moved by: Bob Vrooman

Seconded by: Diane Airhart

**The motion was carried.**

### 6.5.5 Capital Equipment Requests

The Finance Committee reviewed a request for the allocation of \$14,600 towards the purchase of: ER, Ultrasound (\$7,000) Added cost; Human Resources, Furniture (\$7,600) Due to room change. No concerns were noted by the Finance Committee or the Board.

#### **Motion #8**

*Rationale: The Board of Directors is required to review and approve capital requests.*

**Motion: The Board of Directors hereby approves the following capital requests totaling \$14,600, as recommended by the Finance Committee:**

- ER. Ultrasound. (\$7,000) added cost.
- Human Resources (\$7,600) due to room change.

Moved by: Robert Paul

Seconded by: Eric Smith

**The motion was carried.**

### 6.5.6 Volunteer Appreciation Dinner

The Finance Committee reviewed a request to allocate \$2,500 towards the Volunteer Appreciation Dinner. No concerns were noted by the Finance Committee or the Board.

#### **Motion #9**

*Rationale: The Hospital has traditionally held a Volunteer Appreciation dinner to honour members of the Volunteer Services group. Approval from the Finance Committee and the Board is required for requests that fall outside of the annual budgeting process.*

**Motion: The Board of Directors hereby approves the allocation of \$2,500 towards the Volunteer Appreciation Dinner, as recommended by the Finance Committee.**

Moved by: Robert Paul

Seconded by: Eric Smith

**The motion was carried.**



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### 6.5.7 Portable X-ray Unit

The request for an allocation of \$250,000 towards the purchase of a portable x-ray unit for the Diagnostic Imaging department was reviewed. This unit will serve as a back-up unit, should the x-ray room be down for several hours for any reason.

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

Bob Vrooman wondered if this unit could be purchased through the Foundation and noted he would put this on the Foundation's Finance meeting agenda for discussion.

#### **Motion #10**

*Rationale: Capital requests which fall outside of the normal capital budget requests require the review and approval of the Finance Committee and the Board of Directors.*

**Motion: The Board of Directors hereby approves the following capital equipment item at a total cost of \$250,000, as recommended by the Finance Committee:**

- Diagnostic Imaging. Portable x-ray unit.

Moved by: Chris Seeley

Seconded by: Diane Airhart

**The motion was carried.**

### 6.5.8 Assisted Living

Wayne Coveyduck provided an update on the assisted living project proposed for the Lenadco Complex. Wayne highlighted that the original business plan submission did not match with the LHINs vision of an assisted living facility and asked us to consider a more independent living model (which would exclude meal delivery). The LHIN would be supportive of units, each equipped with their own kitchen, in a model of care that would support residents' independence. For this to come to fruition, the footprint of the architect drawings would need to be amended, creating units that were slightly larger to include a kitchen. This change would mean the number of units would be reduced to 20 units in total (19 one-bedroom units and one bachelor unit), down from 28 units.

Wayne went through the updated proforma with the Board.

It is anticipated that with these changes, the LHIN will provide their support of the project and, additionally, have indicated that they would be able to provide funding for services. It was unclear if the funding would be rolled up into base funding but it would most likely become part of an accountability agreement. An inquiry was made about criteria for residents to get in to the apartments. It was felt that the LHIN (former CCAC) staff would be involved and have a say in who gets in to the apartments. The group discussed continuum of care for the seniors as they become increasingly frail but are not yet at the stage of needing long-term care. It was felt that there are services in the community which could assist (i.e. meals on wheels, homemakers).

The Board was in agreement in principle for Wayne to move forward with the plans, including the amended proformas with 20 apartments that were discussed.

No concerns were noted with having the architect amend the drawings at a cost of \$40,000.



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### Motion #11

*Rationale: Capital requests which fall outside of the normal capital budget requests require the review and approval of the Finance Committee and the Board of Directors.*

***Motion: The Board of Directors hereby approves having the architect amend the assisted living drawings, at a cost of \$40,000, to reflect 20 units, each equipped with a kitchen, as recommended by the Finance Committee.***

Moved by: Deb Lowry

Seconded by: Wendy Brockmeyer

**The motion was carried.**

### 6.5.9 Universal Viewer

Wayne highlighted that the Picture Archiving & Communication System (PACS) was initially implemented at KGH/HDH, LACGH and PSFDH in 2005. There was a plan in place to upgrade the system last year, however several issues delayed the project. The transformation funding, which was earmarked for our portion of upgrade was to be spent in the last fiscal. Subsequently, with the delays, that did not happen. With all parties ready to move forward, we are committed to coming up with the money to cover the costs of an upgrade which is particularly critical for the radiologists when reading CT's. For LACGH, we account for 6.77% of the system utilization or \$54,195.

### Motion #12

*Rationale: Capital requests which fall outside of the normal capital budget requests require the review and approval of the Finance Committee and the Board of Directors.*

***Motion: The Board of Directors hereby approves the capital portion of a PACS upgrade in the amount of \$54,195, as recommended by the Finance Committee.***

Moved by: Diane Airhart

Seconded by: Chris Seeley

**The motion was carried.**

### 6.5.10 HRIS System

Tracy Ringrose highlighted the current allocation of \$22,500 within the 2018/19 capital budget for a workplace management solution to assist with employee health processes.

Upon further investigation, a workforce management solution has been found which will better suit our requirements with increased flexibility and will eliminate a number of manual processes for employee health, human resources and recruitment. The system under consideration would require an additional cost of \$15,000 for an all-in cost of \$37,500. This total cost also includes implementation and training of staff. No concerns were noted



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### Motion #13

*Rationale: Capital requests which fall outside of the normal capital budget requests require the review and approval of the Finance Committee and the Board of Directors.*

***Motion: The Board of Directors hereby approves the additional allocation of \$15,000 towards the HR/Employee Health workplace management solution for a total cost of \$37,500, as recommended by the Finance Committee.***

Moved by: Chris Seeley  
Seconded by: Bob Vrooman

**The motion was carried.**

### 6.6 Foundation Report

Bob Vrooman noted that the Foundation is anticipating a great Gala celebration on February 8. It was felt that with the theme being “Acquiring a CT Scanner”, sponsorship increased this year by \$39,500.

### 6.7 Chief Executive Officer’s Report

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

#### CT Update

We have received communication from the Assistant Deputy Minister confirming approval to develop up to stage 4.1 of the planning process and working towards implementation stage.

The Ministry requested that Wayne review with the Board that the CT will be put in place at no cost to the Ministry, who also wanted assurance that the anticipated cost of \$60,000 to install will be covered by the Hospital. The Board confirmed that they are good with this.

#### Canadian Mental Health – ER Trial

It was noted that Canadian Mental Health (CMH) workers are now set up in our ER for a set number of hours. Tracy Kent-Hillis reported that trial funding was awarded to CMH for this initiative and that health records is developing reports for data indicators stats. CMH has been a wonderful organization to partner with and we look forward to further developing this partnership in the coming months.

#### NURA Clinic Update

There are no new developments at this time to report on the NURA Clinic. Work continues as we push this item forward.

### Motion #14

*Rationale: Normal Practice*

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

Moved by: Deb Lowry  
Seconded by: Elaine Stillwell

**The motion was carried.**



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### 7. Correspondence Received up to January 17, 2018

There was nothing further to report for correspondence.

### 8. New Business

#### 8.1 Hospice Budget - CAPS for MSAA

Gert provided a general overview of the Hospice L&A budget for 2018-19.

This budget makes up part of the Multi-Service Sector Accountability Agreement for the LHIN, which requires approval from the Board of Directors. It is a balanced budget and very similar to what was submitted last year.

No concerns were noted.

#### **Motion #15**

*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 2018-19 budget.***

Moved by: Bob Vrooman

Seconded by: Chris Seeley

**The motion was carried.**

#### 8.2 Parking Lot

Letters has been received by Wayne Coveyduck and Allan MacGregor which were sent on behalf of the Volunteer Services group to express their frustration with the parking situation. During the early morning hours and many times mid-day, the parking lot has been congested. A number of times when volunteers arrive for their patient care duties at 0700, the designated volunteer services parking spaces are completely full.

Wayne proposed a possible solution for overflow during the day time when congestion is at its peak. He wondered about how the Board felt about us connecting with the Church across the street to inquire about the possibility of using their parking lot Monday to Friday during the day for overflow. In exchange for this, we could provide an annual donation to the church, if the Board felt that would be appropriate. No concerns were noted.

It was felt that communication to staff and physicians might also help with the situation as a reminder about leaving the parking spaces closer to the entrances for visitors, patients and other individuals who might have mobility challenges.

#### 8.3 Post Cardiac-Rehab Program

A former patient of the Cardiac Rehab program has reached out to advocate for the initiation of a post Cardiac-rehab program. It was felt that the successes achieved through the program would continue if there was a means for the group to stay connected.

Sarah Detomasi has connected with the individual and extended an invitation to participate in the planning currently taking place for the Cardio-pulmonary Program at the Westdale Complex. She has also reached out to Queens to inquire about the possibility of a research opportunity. Perhaps we



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could introduce a mentorship program where this individual could participate in mentoring Cardiac Rehab program participants.

Wayne updated the Board on the progress for the Cardio-pulmonary program at Westdale. Currently, the focus group is in the process of reviewing the drawings. They are looking at adding another elevator on the east side of the second floor which would be large enough to get a gurney down to the main level to exit the building near the auditorium, if needed.

### 9. Closed Session

At 7:50 p.m., the Board moved into closed session.

#### **Motion #16**

*Rationale: Normal Practice*

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

Moved by: Chris Seeley

Seconded by: Diane Airhart

**The motion was carried.**

At 8:18 p.m., the Board rose from closed session.

#### **Motion #17**

*Rationale: Normal Practice*

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

Moved by: Chris Seeley

Seconded by: Bob Vrooman

**The motion was carried.**

### 10. Next Meeting

The next regular meeting of the Board is scheduled for March 6, 2018 at 6:30 p.m., in the Airhart Conference Room.

### 11. Adjournment

The meeting was adjourned at 8:19 p.m.

#### **Motion #18**

*Rationale: Normal Practice*

***Motion: The Board of Directors hereby adjourns their meeting at 8:19 p.m. on February 6, 2018.***

Moved by: Diane Airhart

Seconded by: Bob Vrooman

**The motion was carried.**