



LENNOX AND ADDINGTON COUNTY GENERAL HOSPITAL

MINUTES BOARD OF DIRECTORS

March 1, 2016

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 1, 2016.

PRESENT:

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

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

REGRETS:

Tony Brazda	Dr. Mark Waldron
Robert Paul	Elaine Stillwell
Gert Switzer	

1. Call to Order/Opening Remarks

The meeting was called to order at 6:30 p.m. by Peggy Rice.

2. Approval of the Agenda

The agenda was approved with the addition of item 5.2 Past Physician Recognition Plan.

Motion 1

Rationale: Normal Practice

Motion: The Board of Directors hereby approves the revised agenda of March 1, 2016.

Moved by: Eric Smith
Seconded by: Michelle 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 February 2, 2016 meeting were reviewed; a slight change to the financial calculation in Motion 8 was noted.



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Motion 2

Rationale: Normal Practice

Motion: The Board of Directors hereby approves the minutes of the previous meeting dated February 2, 2016.

Moved by: Bob Clancey

Seconded by: Chris Seeley

The motion was carried.

5. Business Arising

5.1 Health Care Tomorrow Update

Wayne reported that at SECHEP and within the working groups, they are being encouraged to recognize that there is more to the Health Care Tomorrow project than the financials, the value-add to the patients should also be considered.

A discussion around the February 24, 2016 Board to Board webcast occurred. Among the items discussed, was the timelines for Phase 2 and how the June deadline is fast approaching of when business cases are to be presented to the Boards. Will any of the business cases be ready in this short timeframe?

5.2 Past Physician Recognition Plan

Peggy noted that she and Patti Scott had met with Dr. Ollson, in follow up to February's Board meeting, when a motion was passed in support of a 50th Anniversary Physician Recognition Event. Dr. Ollson is Chair of the *Ad Hoc Committee to Honour Previous LACGH Physicians* as part of the 50th anniversary of the Hospital.

Representing the Art Décor Committee, Peggy and Patti discussed with Dr. Ollson, the particulars of the ad hoc committee's proposal. The proposal aims to recognize the Hospital's founding physicians, past physicians who had met the criteria for 25 years of active service (but before the 25 year policy came into effect) and those who had held the Chief of Staff and/or President of Medical Staff roles throughout the 50 years of the Hospital.

What was decided during the meeting is as follows: The 25 year club wall would be reconfigured to include the additional identified physicians who met the 25 year club criteria and, as the wall is getting quite full, the wall would need to be re-done within the next few years anyhow. It was decided that the Chief of Staff/President of Medical Staff plaque would be hung outside of the Physician's Lounge, located on the second floor. The founding physician's photos (5" x 7") would be displayed collage style in a frame similar to that of the Board of Directors, to be hung in the hall near the switchboard office.

6. Reports

6.1 Quality Committee

In Elaine Stillwell's absence, Deb Lowry reviewed the February 16, 2016 Quality Committee minutes with the following highlights:



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The Balance Scorecard which was sent as part of the Board package, showed good results with our Hospital being on target in just about every category.

Dawn Clare, Manager of Health & Safety/Infection Control, attended the Quality meeting to provide the committee with an Infection Control presentation, which was very informative.

The Committee reviewed the draft 2016/17 Quality Improvement Plan, to be discussed in greater detail under new business.

6.2 Medical Advisory Committee

Dr. Morrison reviewed the February 4, 2016 Medical Advisory Committee minutes with the following highlights:

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

- Dr. Mary Anne Jamieson – Consulting privileges (Gynaecology)
- Dr. Julie Francis – Consulting privileges (Oncology)
- Dr. Vickie Martin – Consulting privileges (Oncology)
- Dr. Carl Lee – Active staff privileges (Family Practice)
- Dr. Kimberley Anne Morrison – Active staff privileges (Family Practice)
- Dr. Christopher Sosnowski – Active staff privileges (Family Practice)
- Dr. Liz Touzel – Active staff privileges (Family Practice)
- Dr. Tom Touzel – Active staff privileges (Family Practice)

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 the Medical Advisory Committee and the Board of Directors.

Motion: The Board of Directors hereby approves the re-appointment applications of the following, as recommended by the Medical Advisory Committee:

- *Dr. Mary Anne Jamieson – Consulting privileges (Gynaecology)*
- *Dr. Julie Francis – Consulting privileges (Oncology)*
- *Dr. Vickie Martin – Consulting privileges (Oncology)*
- *Dr. Carl Lee – Active staff privileges (Family Practice)*
- *Dr. Kimberley Anne Morrison – Active staff privileges (Family Practice)*
- *Dr. Christopher Sosnowski – Active staff privileges (Family Practice)*
- *Dr. Liz Touzel – Active staff privileges (Family Practice)*
- *Dr. Tom Touzel – Active staff privileges (Family Practice)*

Moved by: Deb Lowry
Seconded by: Chris Seeley

The motion was carried.

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



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- Dr. Jill Dudebout – Consulting privileges (Oncology)
- Dr. Glykeria Martou – Consulting privileges (Plastic Surgery)
- Dr. Pierre-Marc Robichaud – Associate staff privileges (Family Practice)

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 4

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

Motion: The Board of Directors hereby approves the appointment applications of the following, as recommended by the Medical Advisory Committee:

- *Dr. Jill Dudebout – Consulting privileges (Oncology)*
- *Dr. Glykeria Martou – Consulting privileges (Plastic Surgery)*
- *Dr. Pierre-Marc Robichaud – Associate staff privileges (Family Practice)*

Moved by: Michelle Smith

Seconded by: Eric Smith

The motion was carried.

The Medical Advisory Committee reviewed the re-appointment applications, with the noted changes, for the following:

- Dr. Mamdouh Andrawis – Active staff privileges (Family Practice) **Addition of Orthopedic surgery (joint/bursa injection)*
- Dr. Crystal Gonu - Active staff privileges (Family Practice) **Removal of ER privileges (at doctors request)*
- Dr. John H. Matthews - Consulting privileges (Oncology/Internal Medicine) **Addition of Internal Medicine*

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.



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Motion 5

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

Motion: The Board of Directors hereby approves the re-appointment applications, with the noted changes of the following, as recommended by the Medical Advisory Committee:

- *Dr. Mamdouh Andrawis – Active staff privileges (Family Practice) *Addition of Orthopedic surgery (joint/bursa injection)*
- *Dr. Crystal Gonu - Active staff privileges (Family Practice) *Removal of ER privileges (at doctors request)*
- *Dr. John H. Matthews - Consulting privileges (Oncology/Internal Medicine) *Addition of Internal Medicine*

Moved by: Michelle Smith

Seconded by: Eric Smith

The motion was carried.

As a follow up to last month's Board meeting, when Dr. Morrison disclosed that gaps in credentialing had been identified, Dr. Morrison was happy to update that all physicians who were part of the group with identified gaps, are now all up to date. Letters have been sent to the individual physicians to notify them that a gap was identified, affecting date A to date B and outlined that corrective measures have been, and are in the process of being put in place as a preventative measure to a future reoccurrence.

Motion 6

Rationale: Pursuant to the Medical Staff By-laws, the Medical Advisory Committee is required to review and make recommendations to the Board of Directors regarding.

Motion: The Board of Directors has reviewed and accepts the report which identifies credentialing gaps over the last two years at LACGH as recommended by the Medical Advisory Committee.

Moved by: Allan MacGregor

Seconded by: Michelle Smith

The motion was carried.

6.3 Volunteer Services

Cathie Vick had nothing to add to the Volunteer Services February 9, 2016 minutes which were distributed for review in the Board package. The minutes were briefly reviewed and no concerns were noted.

Cathie presented the Board of Directors with a cheque, on behalf of Volunteer Services, in the amount of \$50,000, to be allocated towards the purchase of a colonoscope for the Operating Room. The Board applauded the donation and Peggy noted how very hard all of the Volunteers work for every penny received. A great tribute to the dedication of all our Volunteers at LACGH!

6.4 Governance Committee

Allan MacGregor highlighted the following from the February 18, 2016 meeting:



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The recently suspended Board Naming Rights policy has been reviewed and updated. The policy now highlights *exemplary service to the Hospital*, provides instruction if a named area ceases to exist and the monetary values have been updated. No concerns were noted by the Governance Committee; therefore, the updated Terms of Reference were recommended to the Board of Directors for approval.

Motion 7

Rationale: The Standing Committees of the Board of Directors are required to review their relevant policies on an annual basis.

Motion: The Board of Directors approves the updated Board Naming Rights Policy No. B-04 as recommended by the Governance Committee.

Moved by: Michelle Smith

Seconded by: Allan MacGregor

The motion was carried.

The Governance Committee reviewed the Board Member Terms. It was noted that the President of Volunteer Services and Foundation Board Chair roles will change for the upcoming Board term. All elected Board Directors have indicated they would like to continue serving on the Board of Directors. Allan thanked all for their continued dedication and support in what might be a challenging year ahead.

The Governance Committee reviewed changes to the Nominating Committee's Terms of Reference. Changes included an updated Membership section and the addition of Duties of the Chair. No concerns were noted by the Governance Committee; therefore, the updated Terms of Reference were recommended to the Board of Directors for approval.

Motion 8

Rationale: Changes to the Terms of reference for the Nominating Committee were reviewed by the Governance Committee.

Motion: The Board of Directors approves the revised Terms of Reference for the Nominating Committee, as recommended by the Governance Committee.

Moved by: Cathie Vick

Seconded by: Eric Smith

The motion was carried.

Allan highlighted that the Governance Committee had reviewed the Hospital's Risk Profile Summary and noted that the Committee was satisfied that we are managing, adhering and reviewing all of the key areas regularly.

Also of note, the Committee reviewed an invitation from a SE LHIN Board Member, who was seeking representation by one of our Governors to participate in a forum for the Central Sub-Region. Peggy and Chris have volunteered to participate in the forum and will report back to the Board once more information is known.



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6.5 Finance Committee

Deb Lowry highlighted the following from the February 23, 2016 Finance Committee meeting:

6.5.1 – Board, CEO and Senior Management Expenses

The Finance Committee reviewed the Board, CEO and Senior Management Expenses for January which totaled \$1,528.10. The Finance Committee recommends to the Board that the following expenses be approved:

Motion 9

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 January expenses which totalled \$1,528.10, as recommended by the Finance Committee.

January 2016

Name	Meals	Hospitality	Accommodation	Vehicle Rental/Own Used Mileage	Incidentals (Parking, tolls, etc.)	Fares	Total
Wayne Coveyduck	31.55			124.44			\$155.99
Peggy Rice		1,125.00					\$1,125.00
Gert Switzer	25.69			48.25			\$73.94
Shari Sampson	22.57			147.89	2.71		\$173.17
TOTAL	\$79.81	\$1,125.00		\$320.58	\$2.71		\$1,528.10

Moved by: Deb Lowry
Seconded by: Chris Seeley

The motion was carried.

6.5.2 - January Financial Statements and Cheque Lists

The Finance Committee reviewed the January 2016 Financial Statement and Cheque List which totaled \$3,511,931.78. No concerns were noted by the Finance Committee or the Board.

Motion 10

Rationale: Normal Practice

Motion: The Board of Directors hereby approves the January 2016 Cheque List totaling \$3,511,931.78 and January 2016 Financial Statements, as recommended by the Finance Committee.

Moved by: Deb Lowry
Second by: Chris Seeley

The motion was carried.

6.5.3 – Capital Equipment Requests

The Finance Committee reviewed a request for the allocation of \$8,431 towards the purchase of: Chemo Vital Signs Monitor (\$473) added cost; Lab Coagulation Analyzer (\$5,945) added cost; ER Trauma Stretcher (\$47) added cost; IT Network Attached Storage (\$270) added cost; IT Core Switch (\$16,615) added cost



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(Peripherals needed as well); and Telemedicine, Telemedicine Equipment (\$5,600) Replacement. No concerns were noted by the Finance Committee or the Board.

Motion 11

Rationale: Normal Practice

Motion: The Board of Directors hereby approves the allocation of \$28,950 towards the purchase of the following equipment as recommended by the Finance Committee:

- Chemo Vital Signs Monitor (\$473) added cost.
- Lab Coagulation Analyzer (\$5,945) added cost.
- ER Trauma Stretcher (\$47) added cost.
- IT Network Attached Storage (\$270) added cost.
- IT Core Switch (\$16,615) added cost (Peripherals needed as well).
- Telemedicine, Telemedicine Equipment (\$5,600) Replacement.

Moved by: Chris Seeley

Second by: Bob Clancey

The motion was carried.

6.5.4 - Investment Mandate Statement

The Finance Committee reviewed the Investment Mandate Statement and recommend to the Board of Directors, that the Asset Mix Parameters by Geographic Allocation percentages be updated.

Motion 12

Rationale: The Finance Committee is required to review the Investment Mandate Statement to ensure it meets with our standard practice.

Motion: The Board of Directors hereby approves the revisions to the Investment Mandate Statement percentages of the Asset Mix Parameters by Geographic Allocation, as recommended by the Finance Committee.

Moved by: Bob Clancey

Second by: Chris Seeley

The motion was carried.

6.5.5 - Capital Request

The Finance Committee reviewed and recommends to the Board of Directors, the approval of the allocation of cardiac rehab funds and general equipment replacement funds in the amount of \$16,500 to purchase three refurbished, replacement treadmills.

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



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Motion 13

Rationale: Normal Practice.

Motion: The Board of Directors hereby approves the allocation of \$16,500 towards the purchase of three replacement treadmills, as recommended by the Finance Committee.

Moved by: Chris Seeley
Second by: Bob Clancey

The motion was carried.

6.6 Foundation

In absence of Robert Paul, Peggy shared that an Auditorium Use Policy and Letter to L&A SOS had been included in the Board packages, for information purposes. The Foundation's Auditorium Use Policy is regarding what was formerly referred to as the Westdale Auditorium at the LACGH Westdale Complex. The Foundation created a policy regarding Auditorium Use to assist with clearing up some misconceptions. A letter was sent to L&A SOS in response to their inquiry regarding Auditorium Use at the LACGH Westdale Complex.

6.7 Chief Executive Officer's Report

Further to the written report sent out with the Board package, Wayne relayed that he had received a thank you note from a patient's family who requested he share their gratitude for the excellent care with the Board members. The note was passed on to Nancy Manion to share with the Quality Committee.

Wait Time Strategy (WTS) Base Funding: Wayne noted that correspondence has been received acknowledging that LACGH will be provided with additional base funding in the amount of \$107,634 for the 2015-16 fiscal year.

HIRF: Under the Hospital Infrastructure Renewal Fund (HIRF), a request was made for additional residual funding. This request was approved and the amended agreement has been awarded.

Motion 14

Rationale: Normal Practice

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

Moved by: Norm Clark
Second by: Deb Lowry

The motion was carried.

7. Other

7.1 Correspondence Received Up to February 23, 2016

There were no additional correspondence items to report.



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8. New Business

8.1 QIP 2016/17 for Ontario Hospitals

As part of the requirements under the *Excellent Care for All Act, 2010 (ECFAA)*, Nancy Manion provided the Board with the annual overview of the Quality Improvement Plan for 2016-17. This year, we were permitted to combine the Hospital's Quality Improvement Plan with the Long-Term Care Home's Quality Improvement Plan.

Motion 15

Rationale: Our Hospital and Long-Term Care Home are required to submit an annual Quality Improvement Plan based on the requirements under the Excellent Care for All Act, 2010 (ECFAA)

Motion: The Board of Directors hereby approves the combined 2016/17 Quality Improvement Plan, as recommended by the Quality Committee.

Moved by: Geoff Griffin

Second by: Deb Lowry

The motion was carried.

Motion 16

Rationale: The Excellent Care for All Act, 2010 (ECFAA) requires that the compensation of the President & CEO and other executives be linked to the achievement of performance improvement targets laid out in the Performance Improvement Plan which forms part of the Quality Improvement Plan. The Board, in their consideration respects the level of compensation at risk in this organization, to be at the minimum rather than the maximum end. Therefore, the Board would like to remain consistent in setting 3% as the amount to be used this year for the Quality Improvement Plan compensation at risk.

Motion: The Board of Directors will hold 3% of the compensation for the pay at risk component of the 2016/17 Quality Improvement Plan. This will affect:

President & CEO/Long Term Care Administrator

Chief of Medical Staff

Chief Nursing Officer/Director of Care

Chief Financial Officer

Director of Quality, Support Services and Operational Efficiencies

Moved by: Geoff Griffin

Second by: Deb Lowry

The motion was carried.

8.2 L-SAA Schedule E Compliance Declaration

Under the Hospital's Long-Term Care Service Accountability Agreement (L-SAA) we are required to submit an annual Declaration of Compliance to indicate any exceptions not fulfilled under the Long-Term Care Service Accountability Agreement. There were no exceptions identified as not being met under the L-SAA.



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Motion 17

Rationale: Under the Long-Term Care Service Accountability Agreement, it is a requirement that all our facility if required to complete the Schedule E Declaration of Compliance on an annual basis which identifies exceptions of the agreement not being fulfilled.

Motion: The Board of Directors hereby accepts the Schedule E Declaration of Compliance which acknowledges that our Hospital has fulfilled its obligations under the Long-Term Care Service Accountability Agreement for the period of January 1, 2015 to December 31, 2015.

Moved by: Michelle Smith
Second by: Allan MacGregor

The motion was carried.

8.3 H-SAA Amending Agreement

The Board reviewed the 2008-16 Hospital Sector Accountability Agreement (H-SAA) for 2016-17.

Motion 18

Rationale: As part of the Hospital Sector Accountability Agreement, our Hospital was required to review our local obligations along with our final performance targets and provide comment back to the LHIN.

Motion: The Board of Directors hereby approves the 2008-16 Hospital Sector Accountability Agreement (H-SAA) Amending Agreement and Local Performance Obligations and Performance Targets for 2016-17.

Moved by: Allan MacGregor
Second by: Chris Seeley

The motion was carried.

8.4 Capital Equipment Request

Tracy Kent-Hillis reviewed an urgent need for the purchase of an additional *Ligasure* device due to the increase in clinical practice and pressing need for certain surgical procedures. The cost for an additional *Ligasure* device, including cart and associated foot switches, totals \$11,500.

Motion 19

Rationale: Normal Practice

Motion: The Board of Directors hereby approves the Capital Request in the amount of \$11,500 for an additional Ligasure.

Moved by: Chris Seeley
Second by: Allan MacGregor

The motion was carried.



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8.5 Patients First: Action Plan for Health Care, Ontario

Wayne Coveyduck provided the Board with an overview of the discussion paper *Patients First: A Proposal to Strengthen Patient-Centred Health Care in Ontario*, which was released in December of 2015.

9. Closed Session

At 9:02 p.m., the Board moved into closed session.

Motion 20

Rationale: Normal Practice

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

Moved by: Norm Clark

Second by: Deb Lowry

The motion was carried.

At 9:21 p.m., the Board rose from closed session.

Motion 21

Rationale: Normal Practice

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

Moved by: Cathie Vick

Second by: Michelle Smith

The motion was carried.

10. Other Business

Peggy Rice took the opportunity to acknowledge this Board meeting as being Shari Sampson's last meeting before she commences her retirement. Peggy, on behalf of the Board of Directors, provided Shari with a bouquet of flowers a token of appreciation for all that Shari has contributed and accomplished since she started work at LACGH on January 26, 1987.

Shari expressed heartfelt appreciation for the flowers and reflected on her career at LACGH, which has seen some really satisfying accomplishments and growth over the years. Shari thanked the Board, Wayne Coveyduck and the Senior Leadership team for their support and efforts towards making our small hospital a wonderful place to work with great culture and leadership.

11. Next Meeting

The next regular meeting of the Board is scheduled for April 5, 2016 at 6:30 p.m. in the Airhart Conference Room.

12. Adjournment

The meeting was adjourned at 9:33 p.m.



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Motion 22

Rationale: Normal Practice

Motion: The Board of Directors hereby adjourns their meeting at 9:33 p.m. on March 1, 2016.

Moved by: Norm Clark
Seconded by: Bob Clancey

The motion was carried.