



LENNOX AND ADDINGTON COUNTY GENERAL HOSPITAL

MINUTES BOARD OF DIRECTORS May 1, 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 May 1, 2018.

PRESENT:

Board:	Allan MacGregor (Chair)	Eric Smith
	Wayne Coveyduck	Wendy Brockmeyer
	Dr. Morrison	Deb Lowry
	Lori Francis	Robert Paul
	Chris Seeley	Bob Clancey
	Bob Vrooman	Michelle Smith
	Tony Brazda	Elaine Stillwell
	Tracy Kent-Hillis	

REGRETS:

Diane Airhart	Norm Clark
Dr. Mitchell	

Staff in Attendance:	Tracy Ringrose	Gert Switzer
	Nancy Manion	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 as circulated.

<p>Motion #1</p> <p><i>Rationale: Normal Practice</i></p> <hr/> <p>Motion: The Board of Directors hereby approves the agenda of May 1, 2018.</p> <p>Moved by: Lori Francis Seconded by: Eric Smith</p> <p style="text-align: right;">The motion was carried.</p>

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 April 3, 2018.

Moved by: Robert Paul

Seconded by: Tony Brazda

The motion was carried.

5. Business Arising

5.1 Regional Updates

Allan MacGregor reported that the Chair/Vice Chair Forum (CVCF) has not met since the last Board meeting. The next planned CVCF is scheduled to take place on June 7, 2018 in Brockville.

Wayne did not have any updates to share.

5.2 Board Evaluation Results

Allan MacGregor highlighted on the following items from the Board Evaluation Summary:

Overall, the results were quite good. There was one section of particular note, Board Composition and Quality, where there were some responses of "Disagree".

Allan reminded the Directors of the criteria for director selection, found on the Board Portal, which stipulates that Directors are selected based on skill, personal attributes and experience. In years when there are multiple vacancies, an ad hoc Nominating Committee is struck to select candidates from an external pool of applicants. Interviews are conducted which result in a recommendation to the Governance Committee who complete their own review and pass on their recommendation(s) to the Board of Directors.

In years like this one, with only one vacancy, and with previous Director having expressed an interest in returning to the Board once the mandatory one-year rest period was up, a recommendation was made to the Governance Committee to have him return to the Board. As a candidate, the criteria of skill, experience and personal attributes fit the mandate for any potential Director. It was therefore decided to not make an external plea for potential candidates.

It was noted that by not making the vacancy public, the Board is not made aware of who is out there with interest in serving on the Board of Directors. Many great Directors have been selected through this method and it speaks to transparency. It was felt that this should be a standard practice in the coming years.

6. Reports

6.1 Quality Committee

Elaine Stillwell highlighted the following from the April 17, 2018 Quality Committee meeting.

John McBride attended the meeting to provide the Committee with the annual Medication Management Report:



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- The new facility standards set out by the National Association of Pharmacy Regulatory Authorities (NAPRA) were discussed in that they will affect LACGH and all healthcare facilities. The rigid guidelines will be challenging to meet.
- A few action items were identified as part of Pharmacy Accreditation. The pharmacy is required to demonstrate a clinical review has been completed on every medication with every ordering “touched” by a Pharmacist. John and Marie France will be working together to come up with a solution for this item. John will reach out to inquire about what other facilities are doing and get back to the Quality Committee.

6.2 Patient and Family Advisory Council

Wendy Brockmeyer highlighted the following from the April 3, 2018 PFAC meeting:

Transgender sensitivity was discussed and the PFAC provided input into a gender neutral pictogram being considered for the KIOSKS.

Cannabis use was discussed. With the change in legislation on July 1, 2018 in which Canada is moving to legalization of non-medical cannabis, there are a number of concerning public health related harms of non-medicinal cannabis use. The PFAC discussed the smoke-free property policy, risks and security implications and disorderly patients. Dr. Morrison noted that there is no medical evidenced-based research indications that cannabis use helps in the vast majority of cases. Therefore, cannabis will not be considered for addition to the hospital’s formulary, nor will it be added to any order sets.

Mary Mayo will be leaving the PFAC as she takes on the role of Volunteer Services President for the upcoming term.

6.3 Volunteer Services

The Volunteer Services minutes of April 10, 2018 were briefly reviewed as circulated.

6.4 Ethics Committee

Elaine Stillwell noted that a number of activities took place as part of National Health Ethics Week (NHEW) April 2 to 8, 2018 including:

- Emails were sent to staff as a reminder that we have an ethical framework with the information attached (ethics framework and pocket guide)
- Invitation for staff to attend an Ethics Committee organized education session
- NHEW Display in the cafeteria (handouts, ethics committee member listing, education session information) and flyers on the TVs
- Word search (49 participated) with ethics related words to find. 4 staff members won Bluetooth speakers for participating.

As part of NHEW, an education session was organized on the topic of “*Ethics and Managing Difficult Conflict in Clinical Settings*”. David Campbell, an Ethicist from KHSC facilitated the session for 21 participants from a diverse cross-section of departments. Based on post-education evaluation feedback, the education session was well received with participants feeling the session was informative.

6.5 Medical Advisory Committee

Dr. Morrison highlighted the following from the April 12, 2018 Medical Advisory Committee meeting:



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Dr. Ven Hota will be retiring at the end of June after 21 years of service with our Hospital. A new General Surgeon has been recruited and the Medical Advisory Committee will be looking at a new model for the new General Surgeon(s).

The Opioid Learning Module will become a mandatory training requirement for re-appointment to the LACGH medical staff each year.

Dr. Andrawis, with the addition of Dermatology privileges is holding Primary Care Dermatology Clinics here on a referral basis to fill a much needed gap in service for our community.

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

- Dr. Daniel Curran - Active (Family Medicine with Emergency)
- Dr. Crystal Gonu - Active (Family Medicine)
- Dr. Christina Klassen – Locum Tenens (Family Medicine)
- Dr. Carl Lee - Active (Family Medicine)
- Dr. Martine McKay – Locum Tenens (Family Medicine)
- Dr. Craig Mitchell - Active (Family Medicine)
- Dr. Kieran Moore – Courtesy without Admitting (Family Medicine, Emergency & Public Health)
- Dr. Kimberley Morrison - Active (Family Medicine)
- Dr. Liz Touzel - Active (Family Medicine)
- Dr. Tom Touzel – Active (Family Medicine)
- Dr. Tara Baetz- Consulting (Oncology)
- Dr. James Biagi- Consulting (Oncology)
- Dr. Christopher Booth - Consulting (Oncology)
- Dr. Jill Dudebout - Consulting (Oncology)
- Dr. - Consulting (Oncology)
- Dr. Julie Francis - Consulting (Oncology)
- Dr. Richard Gregg - Consulting (Oncology)
- Dr. Nazik Hammad - Consulting (Oncology)
- Dr. David Lee - Consulting (Oncology)
- Dr. Clementine Janet Lui - Consulting (Oncology)
- Dr. Vickie Martin - Consulting (Oncology)
- Dr. Mihaela Mates - Consulting (Oncology)
- Dr. Wendy Parulekar - Consulting (Oncology)
- Dr. Andrew Robinson - Consulting (Oncology)
- Dr. Anna Tomiak - Consulting (Oncology)
- Dr. Jessica Biederman - Active (Radiology)
- Dr. Mathew Downey - Active (Radiology)
- Dr. Nadia Gammal - Consulting (Radiology)
- Dr. Susan James - Active (Radiology)
- Dr. Apurva Patel - Active (Radiology)
- Dr. Vivek Singh - Consulting (Radiology)



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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. Daniel Curran - Active (Family Medicine with Emergency)
- Dr. Crystal Gonu - Active (Family Medicine)
- Dr. Christina Klassen – Locum Tenens (Family Medicine)
- Dr. Carl Lee - Active (Family Medicine)
- Dr. Martine McKay – Locum Tenens (Family Medicine)
- Dr. Craig Mitchell - Active (Family Medicine)
- Dr. Kieran Moore – Courtesy without Admitting (Family Medicine, Emergency & Public Health)
- Dr. Kimberley Morrison - Active (Family Medicine)
- Dr. Liz Touzel - Active (Family Medicine)
- Dr. Tom Touzel – Active (Family Medicine)
- Dr. Tara Baetz- Consulting (Oncology)
- Dr. James Biagi- Consulting (Oncology)
- Dr. Christopher Booth - Consulting (Oncology)
- Dr. Jill Dubebout - Consulting (Oncology)
- Dr. - Consulting (Oncology)
- Dr. Julie Francis - Consulting (Oncology)
- Dr. Richard Gregg - Consulting (Oncology)
- Dr. Nazik Hammad - Consulting (Oncology)
- Dr. David Lee - Consulting (Oncology)
- Dr. Clementine Janet Lui - Consulting (Oncology)
- Dr. Vickie Martin - Consulting (Oncology)
- Dr. Mihaela Mates - Consulting (Oncology)
- Dr. Wendy Parulekar - Consulting (Oncology)
- Dr. Andrew Robinson - Consulting (Oncology)
- Dr. Anna Tomiak - Consulting (Oncology)
- Dr. Jessica Biederman - Active (Radiology)
- Dr. Mathew Downey - Active (Radiology)
- Dr. Nadia Gammal - Consulting (Radiology)
- Dr. Susan James - Active (Radiology)
- Dr. Apurva Patel - Active (Radiology)
- Dr. Vivek Singh - Consulting (Radiology)

Moved by: Deb Lowry

Seconded by: Wendy Brockmeyer

The motion was carried.

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



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- Dr. Mamdouh Andrawis – Active (Family Medicine) *addition of Dermatology*
- Dr. Aaron McGregor – Active (Family Medicine) *Associate staff to Active*
- Dr. Sonal Patel – Active (Family Medicine) *Associate staff to Active*
- Dr. Pierre Robichaud – Active (Family Medicine with Emergency) *Associate staff to Active with addition of U/S Independent Practitioner*

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 #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 re-appointments to the LACGH Medical Staff with the noted changes, as recommended by the Medical Advisory Committee:

- Dr. Mamdouh Andrawis – Active (Family Medicine) *addition of Dermatology*
- Dr. Aaron McGregor – Active (Family Medicine) *Associate staff to Active*
- Dr. Sonal Patel – Active (Family Medicine) *Associate staff to Active*
- Dr. Pierre Robichaud – Active (Family Medicine with Emergency) *Associate staff to Active with addition of U/S Independent Practitioner*

Moved by: Lori Francis

Seconded by: Eric Smith

The motion was carried.

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

- Dr. Karen Yeates – Consulting (Nephrology)

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 #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 appointment to the LACGH Medical Staff, as recommended by the Medical Advisory Committee:

- Dr. Karen Yeates – Consulting (Nephrology)

Moved by: Chris Seeley

Seconded by: Wendy Brockmeyer

The motion was carried.

6.6 Finance Committee

Deb Lowry reviewed the following from the April 23, 2018 Finance Committee meeting:



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The Investment Manager attended the meeting to provide a report on portfolio performance. Despite recent market turmoil, the investments are doing quite well. The Business Office is wrapping up year-end activities for another couple weeks, following which the Auditors will be on site to complete their year-end Financial Audit.

6.6.1 Board, CEO and Senior Manager Expenses

The Finance Committee reviewed the Board, CEO, and Senior Management Expenses for March 2018 which totaled \$203.74. The Finance Committee recommends to the Board, that the following expenses be approved:

Motion #6

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 which totaled \$203.74, as recommended by the Finance Committee.

March 2018

Name	Meals	Hospitality	Accommodation	Vehicle Rental/Own Used Mileage	Incidentals (Parking, tolls, etc.)	Fares	Total
Wayne Coveyduck				41.48			41.48
Gert Switzer	21.36						21.36
Tracy Kent-Hillis	22.98			72.13			95.11
Nancy Manion	38.58			7.21			45.79
TOTAL	82.92			120.82			\$203.74

Moved by: Robert Paul

Seconded by: Tony Brazda

The motion was carried.

6.6.2 March Financial Statements and Cheque List

The Finance Committee reviewed the March 2018 Financial Statements and Cheque List which totaled \$3,293,855.75. 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:

- March 2018 Cheque List totaling \$3,293,855.75;
- March 2018 Financial Statements.

Moved by: Deb Lowry

Seconded by: Wendy Brockmeyer

The motion was carried.

6.6.3 Capital Equipment Requests

The Finance Committee reviewed a request for the allocation of \$99,911.30 towards the purchase of: Building, entrance overhead heater and air curtain (\$10,270.52) to maintain



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consistent air temperature in winter months; Kitchen, Hot water heater (\$5,224.45) replacement; Building, C-arm room reno (\$78,880.98) funded by the Foundation; C-arm Room Reno, Air conditioning (\$4,806.27) funded by the Foundation; Building, roof (\$729.08) added cost.

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 \$99,911.30, as recommended by the Finance Committee for:

- *Building. Entrance overhead heater and air curtain. (\$10,270.52). To maintain consistent air temperature in winter months.*
- *Kitchen. Hot water heater. (\$5,224.45). Replacement.*
- *Building. C-arm Room Reno. (\$78,880.98). Funded by the Foundation.*
- *C-arm Room Reno. Air conditioning. (\$4,806.27). Funded by the Foundation.*
- *Building. Roof. (\$729.08). Added cost.*

Moved by: Deb Lowry
Seconded by: Robert Paul

The motion was carried.

6.6.4 Accounts Receivable Write Offs

The Finance Committee reviewed the bad debt write offs, in the amount of \$46,996.76 for 2017-18. The majority of the increase was incurred from unpaid ambulance bills and from one out of country patient who passed away prior to being issued an OHIP card.

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

Motion #9

Rationale: Normal Practice.

Motion: The Board of Directors hereby approves to write off bad debt for 2017/18 in the amount of \$46,996.76, as recommended by the Finance Committee.

Moved by: Wendy Brockmeyer
Seconded by: Chris Seeley

The motion was carried.

6.7 Foundation Report

Bob Vrooman noted the Foundation's annual golf tournament is now sold out and the raffle tickets are almost sold out as well. The Foundation is holding their annual general meeting at 5:00 p.m., on June 27, 2018. Bob extended an invitation for the Board to attend if they wish to.

6.8 Chief Executive Officer's Report

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



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We still have not received word on any of the “asks” of the LHIN and Ministry. Attempts to connect with the LHIN via email have been unsuccessful. Wayne reported he has a teleconference meeting scheduled with Paul Huras on May 3.

The new Central Intake process for hip/knee replacements was discussed. A referral for hip or knees is now sent to a central intake where patients are assessed by an advanced physiotherapist. Since a large number of hip/knee referrals actually do not need replacements, but rather injections or physio, this new process will cut down on the number of patients referred to surgeons who actually do not need replacement surgery. Patients requiring surgery will be provided with the choices of: first available surgeon, hospital of choice and surgeon of choice. We will be piloting the electronic intake at LACGH.

Wayne brought forward a request to recognize the significant contributions that Dr. Ven Hota has made to the hospital in his 21 years of service within the community to extend consideration for a gift in the amount of \$5,000 and a social celebration. No concerns were noted.

Motion #10

Rationale: Past practice has been to recognize the 25 year milestone of active staff physician’s service to the Hospital. The Board was asked to consider extending this same courtesy to Dr. Ven Hota, by providing an exception to the 25-year rule, given his significant level of service to the Hospital in keeping the surgical program running and viable.

Motion: The Board of Directors hereby approves \$5,000 towards a retirement gift and celebratory event for Dr. Ven Hota in recognition of his significant contributions and service to the community.

Moved by: Deb Lowry
Seconded by: Robert Paul

The motion was carried.

Motion #11

Rationale: Normal Practice

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

Moved by: Deb Lowry
Seconded by: Robert Paul

The motion was carried.

- 7. **Correspondence Received up to April 12, 2018**
There was nothing further to report for correspondence.
- 8. **New Business** – none.
- 9. **Closed Session**
At 7:12 p.m., the Board moved into closed session.



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Motion #12

Rationale: Normal Practice

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

Moved by: Deb Lowry
Seconded by: Robert Paul

The motion was carried.

At 8:02 p.m., the Board rose from closed session.

Motion #13

Rationale: Normal Practice

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

Moved by: Wendy Brockmeyer
Seconded by: Deb Lowry

The motion was carried.

10. Next Meeting

The next regular meeting of the Board is scheduled for June 5, 2018 at 6:30 p.m., in the Airhart Conference Room.

11. Adjournment

The meeting was adjourned at 8:03 p.m.

Motion #14

Rationale: Normal Practice

Motion: The Board of Directors hereby adjourns their meeting at 8:03 p.m. on May 1, 2018.

Moved by: Robert Paul
Seconded by: Tony Brazda

The motion was carried.