



LENNOX AND ADDINGTON COUNTY GENERAL HOSPITAL

MINUTES BOARD OF DIRECTORS February 3, 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 February 3, 2015.

PRESENT:

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

REGRETS:

Norm Clark	Dr. Mamdouh Andrawis
Eric Smith	Peggy Rice

Staff in Attendance:	Gert Switzer	Shari Sampson
	Nancy Manion	Angela McCullough (Recorder)

1. Call to Order/Opening Remarks

The meeting was called to order at 6:33 p.m. by Allan MacGregor.

2. Approval of the Agenda

<p>Motion 1</p> <p><i>Rationale: Normal Practice</i></p> <hr/> <p>Motion: The Board of Directors hereby approves the agenda of February 3, 2015.</p> <p>Moved by: Robert Paul Seconded by: Judge Geoff Griffin</p> <p style="text-align: right;">The motion was carried.</p>

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 Meeting

The minutes of January 6, 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 meeting dated January 6, 2015.

Moved by: Bob Clancey

Seconded by: Cathie Vick

The motion was carried.

5. Business Arising

5.1 Health Care Tomorrow

SECHEF met on January 21st and was advised of the status of each of the working groups. The key message to the CEO's was to ensure that the unions represented at each of the hospitals are advised of the potential result in significant changes to the workforce over the long term. Shari Sampson is currently in the process of organizing meetings with our union representatives.

6. Reports

6.1 Quality Committee

Deb Lowry highlighted the following from the Quality Committee minutes of January 20, 2015:

Dawn Clare, Manager of Occupational Health Services, provided an Infection Control Review to the Quality Committee.

- She stated we are well above provincial averages for hand hygiene rates and below provincial averages for hospital acquired infections for VRE, MRSA and C-Diff. The hospital continually looks at what we are doing well and how we can maintain or improve our current performance.
- Our hand hygiene rates average is 98% compared to the provincial average of 86.24% for moment 1 (before patient contact) and 91.2% for moment 4 (after patient contact)
- The focus during the next year will be promoting patient/family engagement in hand hygiene. A plan is in place to hand out hand wipes during meal service to patients who are unable wash their hands themselves. There will also be an increased use of visual reminders.
- Influenza vaccination rates are up this year from 50% in 2013 to 65% in 2014. There have been no confirmed influenza cases from staff.



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- Consideration is being given to bundles of care provided by Greater Healthcare Now. Each bundle is a structured way of improving processes of care. In addition to C-diff and VRE we will be looking at a catheter urinary track bundle. If the hospital experiences an increase in infections the bundles will help us recognize gaps where the breach may have occurred and identify where we need to focus more attention. This review will be done in collaboration with nursing.

ER wait times were high in December and January due to increased volumes. This has also impacted the Dietary and Housekeeping departments.

Patient Experience will be a standing item on the Quality Committee's agenda. Education on the patient experience will be presented to the staff. Tracy Kent-Hillis reviewed the education material with the Quality Committee explaining the concept of the patient experience from an ABC perspective:

- A – Attentiveness (attentive to creating the best patient experience possible)
- B – Building and Facility
- C – Care Processes

6.2 Finance Committee

Deb Lowry provided the following highlights from the Finance Committee meeting held on January 27, 2015.

6.2.1 - Board, CEO and Senior Management Expenses

The Finance Committee reviewed the Board, CEO and Management expenses for December 2014 which totalled \$3,080.78. The Finance Committee recommends to the Board that the following expenses be approved.

Motion 3

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 December expenses which totalled \$3,080.78 as recommended by the Finance Committee:

December 2014

Name	Meals	Hospitality	Accommodation	Vehicle Rental/Own Used Mileage	Incidentals (Parking, tolls, etc.)	Fares	Total
Wayne Coveyduck	\$213.10		\$1331.49	\$439.38	\$51.21	\$566.94	\$2602.12
Allan MacGregor			\$204.80			\$122.27	\$327.07
Tracy Kent-Hillis	\$14.25			\$90.15			\$104.40
Shari Sampson	\$20.20						\$20.20
Gert Switzer	\$17.06			\$9.93			\$26.99
TOTAL	\$264.61		\$1536.29	\$539.46	\$51.21	\$689.21	\$3080.78

Moved by: Michelle Smith
Seconded by: Cathie Vick

The motion was carried.



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6.2.2 – December Financial Statements & Cheque List

The Finance Committee reviewed the December Financial Statements and Cheque List totalling \$2,587,267.67 and has recommended that they be approved by the Board.

Motion 4

Rationale: Normal Practice

Motion: The Board of Directors hereby approves the December Financial Statements and Cheque List which totalled \$2,587,267.67 as recommended by the Finance Committee.

Moved by: Judge Geoff Griffin
Seconded by: Chris Seeley

The motion was carried.

6.2.3 – Capital Requests

The Finance Committee has recommended to the Board approval of the allocation of \$2,885.00 towards the purchase of the following:

- Procedure light for the Clinic (Added Cost \$135.00)
- Copier/printer for one of our surgeon's office (Cost \$2,750.00)

Motion 5

Rationale: Normal Practice

Motion: The Board of Directors hereby approves the allocation of \$2,885.00 towards the purchase of the following as recommended by the Finance Committee.

- **Procedure light for the Clinic (Added Cost \$135.00)**
- **Copier/printer for one of our surgeon's office (Cost \$2,750.00)**

Moved by: Chris Seeley
Seconded by: Elaine Stillwell

The motion was carried.

6.2.4 – Volunteer Appreciation Dinner

Each year, the Hospital organizes a Volunteer Appreciation Dinner to honour members of our Volunteer Services Group. This year, the Hospital is requesting the allocation of \$2,500 for this dinner.

Motion 6

Rationale: The Hospital organizes an annual Volunteer Appreciation Dinner to honour members of our Volunteer Services Group.

Motion: The Board of Directors hereby approves the allocation of \$2,500.00 for the Volunteer Appreciation Dinner as recommended by the Finance Committee.

Moved by: Elaine Stillwell
Seconded by: Chris Seeley

The motion was carried.



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6.3 Audit Committee

Deb Lowry reported that the Audit Committee met on January 27, 2015 to review the Audit Planning Report for the year ended March 31, 2015. The materiality and fees remain the same as last year. The Audit Committee did not have concerns with the report and has recommended to the Board that it be approved.

Motion 7

Rationale: The Hospital is required to review and approve the annual Audit Planning Report.

Motion: The Board of Directors hereby approves the Audit Planning Report for the year ended March 31, 2015 as recommended by the Audit Committee.

Moved by: Judge Geoff Griffin

Seconded by: Chris Seeley

The motion was carried.

6.4 Governance Committee

Chris Seeley highlighted the following from the January 15, 2015 meeting of the Governance Committee.

At the November 11, 2014 Board meeting, members of the Board were asked to review the Board Policies, located on the Board Portal, and forward any changes to Angela McCullough. Angela advised the Committee that no changes had been received. The review date on all of the Board policies will be changed; however, the content of the policies will not be changed.

Chris thanked the members of the Board that completed the Board Self Assessment survey through Survey Monkey. The results of the survey were reviewed by the Governance Committee. Areas for improvement were identified as follows:

- Understanding the Board's role and annual work plan.
- Recruitment of new elected Directors.
- Board orientation.

In order to provide all of the Board members with a clear understanding of the Board's role, annual work plan and other documentation requiring the review by the Board, it was recommended by the Committee that a refresher education session on the Board Portal be provided. Due to the absence of several Board members at this meeting, the education session on the Board Portal will be provided at the March Board meeting.

6.5 Foundation

Robert Paul reported that the LACGH Foundation Gala will occur on February 12th at the LACGH Westdale Complex. To date, 212 tickets have been sold and \$120,000 in sponsorships have been received. We have been successful in purchasing the building located at 310 Bridge Street West in Napanee.



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6.6 Volunteer Services

Cathie Vick advised that minutes of the Volunteer Services meeting on January 13, 2015 were included in the Board package. Other than what is identified in the minutes, she had nothing further to report at this time.

6.7 Medical Advisory Committee

Dr. Kim Morrison provided the following highlights from the Medical Advisory Committee held on January 15, 2015.

KPMG came to the meeting to discuss the Health Care Tomorrow project.

For the most part, physicians are completing their charts in a timely manner. The MAC discussed the process for addressing the small number of physicians who have not conformed to the process.

The MAC continues to discuss whether a weight-based heparin nomogram is superior to a non-weight based nomogram. Further discussion on this topic will occur at the next MAC meeting.

6.8 Chief Executive Officer's Report

Wayne Coveyduck advised that at the last 3SO Board meeting, to which he is a member, KPMG attended the meeting to help explain the self-assessment that all 3SO Board members and senior level staff of 3SO were requested to complete. Each 3SO Board member was asked to complete the self-assessment for 3SO in its current service model and then complete the self-assessment for the desired future state for 3SO as the Share Service Model that provides Finance, Information Technology, Human Resources and Hotel Services for all seven SE LHIN hospitals. Similarly, the CEOs of the seven hospitals are being asked to complete the self-assessment for the current and future state of 3SO.

As Robert Paul reported earlier in the meeting, we have purchased the building located at 310 Bridge Street West. We are currently in the process of finalizing the leases with each of the tenants. The building is in good shape and there is potential for further development. Wayne has spoken with Paul Huras, CEO of the SE LHIN, regarding the purchase of the building and about the possibility of the Acquired Brain Injury Association becoming one of the tenants of the building.

KGH has requested a letter of support from the SE LHIN for the addition of a Dialysis Unit at the LACGH Westdale Complex. Wayne is scheduled to speak with the LHIN & KGH to determine what scope of works needs to be done.



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Motion 8

Rationale: Normal Practice

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

Moved by: Chris Seeley

Seconded by: Judge Geoff Griffin

The motion was carried.

7. Other

7.1 Correspondence Received Up to January 23, 2015

There was no further correspondence.

8. New Business

8.1 Board Skills Matrix/Education

Judge Geoff Griffin advised that at the last Governance Committee meeting on January 15, 2015, the Committee reviewed the current Board Skills Matrix. The Committee felt that members of the Board were being too modest in assessing the level of skill that they bring to the Board. A copy of the Board Knowledge, Skills and Experience survey was provided to those in attendance. Board members were requested to review the survey, think about it, and then complete the survey online using the link that Angela McCullough will send out following the Board meeting. The Board members were also asked to be consistent with their actual abilities. The results of this survey will be used by the Nominating Committee to determine what skills are required in the recruitment of new Board members.

Judge Griffin also advised that the Governance Committee wants to provide a more transparent and consistent process in the recruitment of new Board members and will be reviewing the documented process at their next meeting.

9. Closed Session

At 7:26 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: Elaine Stillwell

Seconded by: Chris Seeley

The motion was carried.



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At 7:31 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: Cathie Vick

Seconded by: Michelle Smith

The motion was carried.

10. Next Meeting

The next regular meeting of the Board is scheduled for March 3, 2015 at 6:30 p.m. in the Airhart Conference Room.

11. Adjournment

The meeting was adjourned at 7:37 p.m.

Motion 14

Rationale: Normal Practice

Motion: The Board of Directors hereby adjourns their meeting at 7:37 p.m. on February 3, 2015.

Moved by: Judge Geoff Griffin

Seconded by: Bob Clancey

The motion was carried.