

LENNOX & ADDINGTON COUNTY GENERAL HOSPITAL



BOARD OF DIRECTORS MEETING MINUTES February 2, 2021 Zoom Videoconference

A meeting of the Board of Directors of the Lennox & Addington County General Hospital was held via Zoom at 6:30 p.m. on February 2, 2021.

	PRESENT:	
Board:	Allan MacGregor (Chair)	Geoff Griffin
	Deb Lowry	Jamie Uson
	Michelle Smith	Dr. Kim Morrison
	Wayne Coveyduck	Dr. Crystal Gonu
	Norm Clark	Tracy Kent-Hillis
	Bob Clancey	Adrienne Harris-Hale
	Chris Seeley	Susan Jack
	Robert Paul	Ric Bresee
	Lori Francis	
	REGRETS:	
	Alice Carlson	
Staff in Attendance:	Darlene Moore	Erin Brown
	Tracy Ringrose	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.

Motion #1

Rationale: Normal Practice

Motion: That the Board of Directors hereby approves the agenda dated February 2, 2021.

Moved by: Lori Francis

Seconded by: Bob Clancey

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: That the Board of Directors hereby approves the minutes of the previous meeting dated January 12, 2021.

Moved by: Deb Lowry
Seconded by: Jamie Uson

The motion was carried.

5. Business Arising

5.1 Regional Updates

Allan MacGregor reported that the SE Sub-region Hospital Chairs/Vice Chairs meeting has been pushed back with a tentative date set for February 22, 2021.

Regional HIS Project

Darlene Moore highlighted that mid-February it is expected that the sales order will be completed with Cerner. The Total Cost of Ownership (TCO) for Board decision-making, as it is understood from the negotiations team, is still a few months out.

FLA-OHT

Dr. Morrison noted that she had provided an overview presentation to the Medical Advisory Committee in relation to the FLA-OHT. She offered to provide a similar presentation to the Board members, if desired.

Working groups and support structures are currently being worked on to ensure the right people are in the right places. Our OHT is very fortunate to have the Health Services and Policy Research Institute (HSPRI) from Queen's working with us. They are putting a solid evaluation framework together to be able to measure effectiveness before we even start moving forward.

The Leadership Collaborative continues to work with the municipalities to get them engaged and involved.

An indigenous consultant has done some work on a report to ensure broad indigenous peoples engagement. All the pieces are meant to be in place and level setting done from day one before the OHT project starts.

BLG provided the KHSC Board with information on what collaborative governance means. They are happy to present to other Boards as well. It was felt this would be helpful to have this same information.

6. Reports

6.1 Quality Committee

Chris Seeley had nothing to highlight from the January 19, 2021 Quality Committee meeting. The Committee members were reminded to complete the Committee evaluations and submit them to Sarah Fiddler before the next meeting in February.

6.2 Medical Advisory Committee

Dr. Morrison highlighted the following from the January 14, 2021 Medical Advisory Committee meeting:



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

- Andre Tan - Consulting (ENT)
- David Good - Consulting (Pathology and Molecular Medicine)
- Patricia Farmer - Consulting (Pathology and Molecular Medicine)
- Yanping Gong - Consulting (Pathology and Molecular Medicine)
- Darren Beiko - Consulting (Urology)
- Robert Christopher Doiron - Consulting (Urology)
- Michael Leveridge - Consulting (Urology)
- Stephen Steele - Consulting (Urology)

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 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, as recommended by the Medical Advisory Committee:

- Andre Tan - Consulting (ENT)
- David Good - Consulting (Pathology and Molecular Medicine)
- Patricia Farmer - Consulting (Pathology and Molecular Medicine)
- Yanping Gong - Consulting (Pathology and Molecular Medicine)
- Darren Beiko - Consulting (Urology)
- Robert Christopher Doiron - Consulting (Urology)
- Michael Leveridge - Consulting (Urology)
- Stephen Steele - Consulting (Urology)

Moved by: Geoff Griffin

Seconded by: Robert Paul

The motion was carried.

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

- Craig McGann – Consulting (Respirology)

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.

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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 following appointments to the LACGH Medical Staff, as recommended by the Medical Advisory Committee:

- *Craig McGann – Consulting (Respirology)*

Moved by: Robert Paul
Seconded by: Geoff Griffin

The motion was carried.

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

- Christopher Davis – Consulting (Respirology)

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 application and approved the appointment for a term of June 1, 2021, at which time a reappointment will come back to the Board for review.

Motion #5

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 following appointment to the LACGH Medical Staff, for the period ending June 1, 2021:

- *Christopher Davis – Consulting (Respirology)*

Moved by: Geoff Griffin
Seconded by: Deb Lowry

The motion was carried.

6.3 Patient & Family Advisory Council

The Patient & Family Advisory Council minutes from the January 19, 2021 PFAC meeting were briefly reviewed as circulated.

6.4 Audit Committee

Michelle Smith reviewed the following from the January 25, 2021 Audit Committee meeting:

Lori Huber, KPMG, attended the meeting to provide the Committee with an overview of the Audit Plan. There were no concerns noted with the Audit Planning Report.

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Motion #6

Rationale: Normal Practice.

Motion: The Board of Directors hereby approves the Audit Planning Report for fiscal year ending March 31, 2021, as recommended by the Audit Committee.

Moved by: Deb Lowry
Seconded by: Robert Paul

The motion was carried.

6.5 Finance Committee

Michelle Smith reviewed the following from the January 25, 2021 Finance Committee meeting:

6.5.1 Board, CEO and Senior Manager Expenses

The Finance Committee reviewed the Board, CEO, and Senior Management Expenses for November 2020 which totaled \$102.52. The Finance Committee recommends to the Board, that the following expenses be approved:

Motion #7

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 \$102.52, as recommended by the Finance Committee.

November 2020

Name	Meals	Hospitality	Accommodation	Vehicle Rental/Own Used Mileage	Incidentals (Parking, tolls, etc.)	Fares	Total
Wayne Coveyduck	25.64	76.88					102.52
TOTAL	25.64	76.88					\$102.52

Moved by: Chris Seeley
Seconded by: Ric Bresee

The motion was carried.

6.5.2 November Financial Statements and Cheque List

The Finance Committee reviewed the November 2020 Financial Statements and Cheque List which totaled \$ 4,419,560.66. No concerns were noted by the Finance Committee or the Board.

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Motion #8

Rationale: Normal Practice.

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

- November 2020 Cheque List totaling \$4,419,560.66;
- November 2020 Financial Statements.

Moved by: Deb Lowry

Seconded by: Michelle Smith

The motion was carried.

6.5.3 December Financial Statements and Cheque List

The Finance Committee reviewed the December 2020 Financial Statements and Cheque List which totaled \$3,186,567.25. No concerns were noted by the Finance Committee or the Board.

Motion #9

Rationale: Normal Practice.

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

- December 2020 Cheque List totaling \$3,186,567.25;
- December 2020 Financial Statements.

Moved by: Chris Seeley

Seconded by: Norm Clark

The motion was carried.

6.5.4 Capital Equipment Requests

The Finance Committee reviewed a request for the allocation of \$103,118 towards the purchase of:

- CVC and IPU. Specialty Mattress. (\$5454). Replacement.
- Maintenance (Lenadco Complex). Replacement of existing lighting with LED. (\$44,832). \$21,000 of project costs to be reimbursed by Save on Energy program.
- Building. Variance application for fuel oil tank and leak monitoring. (\$52,832). Mandated repair.

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



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Motion #10

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 \$103,118, as recommended by the Finance Committee for:

- CVC and IPU. Specialty Mattress. (\$5454). Replacement.
- Maintenance (Lenadco Complex). Replacement of existing lighting with LED. (\$44,832). \$21,000 of project costs to be reimbursed by Save on Energy program.
- Building. Variance application for fuel oil tank and leak monitoring. (\$52,832). Mandated repair.

Moved by: Lori Francis

Seconded by: Bob Clancey

The motion was carried.

6.5.5 Internal Medicine Medical Director

The Finance Committee reviewed a requested increase to the annual remuneration for the Medical Director, Internal Medicine.

Upon review, it was determined that this request was requested due to the significantly expanded scope of work falling under the Internal Medicine Directorship, including, but not limited to:

- Expanded roster of internists;
- Amount of activity associated with the cardiac rehab/respiratory rehab programs;
- Internal medicine consult associated with every ICU admission;
- Frequent number of consults in the ED;
- Work associated with recruitment activities and attracting a number of new specialists to the community and hospital.

It was requested that the annual remuneration for the Internal Medicine Medical Director be increased by \$12,000 annually, which was felt to be reasonable and warranted.

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

Motion #11

Rationale: Adjustments to increase medical staff remuneration pay envelope requires the consideration and approval of the Finance Committee and the Board of Directors.

Motion: The Board of Directors hereby approves the medical staff stipend for the internal medicine medical director be increased from \$6,000 per year to \$18,000 per year as recommended by the Finance Committee.

Moved by: Robert Paul

Seconded by: Deb Lowry

The motion was carried.

6.6 Volunteer Services Report

Susan Jack shared that things remain relatively quiet with the Volunteers. They will be working on some Valentine's Day notes for the Long-term Care Residents to keep members engaged and busy.

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Dr. Morrison highlighted the need for Volunteers when the time comes to roll out COVID-19 vaccinations to the community. Susan was pleased that the Volunteers would be included and would make an effort to gather people to help out.

6.7 Foundation Report

In addition to her pre-circulated Foundation Report, Adrienne Harris-Hale noted the following:

- The Foundation will be providing the Hospital with a cheque by week's end for the remaining cost for the IV Pumps;
- The Foundation is waiting for equipment invoices before they will advance any additional money for equipment requested by the Hospital;
- The Foundation Board has "approved in principle", the amount requested by the Hospital for the Chemotherapy Expansion Project (\$628,553.57). The Foundation plans to develop a fundraising strategy for payment of this ask.

6.8 Chief Executive Officer's Report

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

The Ontario Hospital Association (OHA) is looking to develop their new Strategic Plan for 2021-2024. Because of the pandemic and interaction with different agencies, including Ontario Health, the future is appearing somewhat different in years to come.

Wayne Coveyduck has requested of the LHIN, some data analysis for our own Strategic Plan refresh. It was hoped that this information would be received prior to fiscal year end, at which point the LHINs would be fully rolled up into Ontario Health.

Motion #12

Rationale: Normal Practice

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

Moved by: Norm Clark

Seconded by: Michelle Smith

The motion was carried.

7. Correspondence Received up to January 28, 2021

There was nothing further to report for correspondence.

8. New Business - none

9. Closed Session

At 7:30 p.m., the Board moved into closed session with elected Board members.



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Motion #13

Rationale: Normal Practice

Motion: That the Board of Directors hereby moves into closed session.

Moved by: Jamie Uson

Seconded by: Robert Paul

The motion was carried.

At 7:46 p.m., the Board rose from closed session.

Motion #14

Rationale: Normal Practice

Motion: That the Board of Directors hereby rises from closed session.

Moved by: Geoff Griffin

Seconded by: Norm Clark

The motion was carried.

10. Next Meeting

The next regular meeting of the Board is scheduled for 6:30 p.m., on Tuesday March 2, 2021.

11. Adjournment

The meeting was adjourned at 7:47 p.m.

Motion #15

Rationale: Normal Practice

Motion: That the Board of Directors hereby adjourns their meeting at 7:47 p.m. on February 2, 2021.

Moved by: Bob Clancey

Seconded by: Robert Paul

The motion was carried.