

LENNOX & ADDINGTON COUNTY GENERAL HOSPITAL



BOARD OF DIRECTORS MEETING MINUTES March 3, 2021 Zoom Videoconference

A meeting of the Board of Directors of the Lennox & Addington County General Hospital was held in the Airhart Conference Room and via Zoom at 6:30 p.m. on March 3, 2021.

Board:

PRESENT:	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	Alice Carlson

REGRETS:

	Lori Francis	Ric Bresee
Staff in Attendance:	Darlene Moore	Erin Brown
	Tracy Ringrose	Sheila Mabee (recorder)
	Colin Catt	

1. Call to Order/Opening Remarks

The meeting was called to order at 6:31 p.m., by Allan MacGregor.

2. Approval of the Agenda

The agenda was approved with removal of the Closed Session.

Motion #1

Rationale: Normal Practice

Motion: That the Board of Directors hereby approves the agenda dated March 3, 2021.

Moved by: Alice Carlson

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 February 2, 2021.

Moved by: Chris Seeley

Seconded by: Robert Paul

The motion was carried.

5. Business Arising

5.1 Regional Updates

Allan MacGregor reported that the Hospital Board Chairs/Vice Chairs Forum has not met since the last Board meeting.

FLA-OHT

Dr. Morrison reported that the FLA-OHT support structures have had initial meetings.

The FLA-OHT has its own framework, digital health strategy and a broader engagement strategy which all serve to align the services and create the foundation of the OHT as a health transformation vehicle for the defined population. Dr. Morrison will bring back updates from the working groups as efforts get underway.

There is an understanding from the Ministry that this work takes time; the building of teams and collaborations to build trust; it is all part of the OHT goals. Dr. Morrison highlighted that the FLA-OHT is very fortunate to have people from the Queens University Health Services and Policy Research Institute onboard to measure the work being done. This will be translatable to other OHTs.

The Board discussed the governance framework and the future role of voluntary governance. In total, there are 65 partners who have signed on to our OHT, including 24 primary care organizations. At one point in time, it was reported that there were 89 SAAs in the SE LHIN region. There is a lot of complexities when you take into account all of the various roles of all of the community and partner agencies, who all have their own voluntary governance. The government sees value in the role of voluntary governance, but that is in conflict with collaborative governance. The Board felt it might be helpful to get the OHAs take on collaborative versus voluntary governance.

Sheila Mabee was asked to distribute the list of FLA-OHT partners to the Board for information.

Regional HIS Project

Wayne Coveyduck reported that the SE Hospital administration groups are meeting mid-March for the Regional HIS Project. The CEO group will be the clearing house to ensure the Hospitals are satisfied with the agreement and financial obligations from the vendor. The TCO (finance) is manageable, however all of the ad-ons to the HIS product are coming back as very costly.

6. Reports

6.1 Quality Committee

Chris Seeley highlighted the following from the February 16, 2021 Quality Committee meeting:

- There is a new Risk and Contracts Project Manager, Justin Turner, who now sits on the Quality Committee;

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- Jenn Masson was in attendance at the meeting to provide an update on the Patient Oriented Discharge Summary (PODS) project;
- The Committee hoped to review the final QIP at their March meeting with a decision to be able to bring to the Board in April.

6.2 Medical Advisory Committee

Dr. Morrison highlighted the following from the February 11, 2021 Medical Advisory Committee meeting:

The Medical Advisory Committee welcomed Zack Warren to his first MAC meeting in his capacity as incoming ER Medical Director. The group discussed and updated Dr. Warren on their quality initiatives which get fed back to Erin Brown and the Quality Committee.

Tracy Kent-Hillis explained to the Board of Directors, the snoozelyn sensory room which is being created on the acute care ward. The room is to be equipped with stimulation (music, bubble lights, comfortable chairs) and is a private space which will be used multiple times a day to calm patients.

The Medical Advisory Committee also reviewed their Terms of Reference and aligned them with the Professional Staff By-laws. The Professional Staff By-laws were amended to add Erin Brown's position under *Article 10.1: Composition of the Medical Advisory Committee*.

No concerns were noted by the MAC or the Board.

Motion #3

Rationale: The Medical Advisory Committee is required to conduct a bi-annual review of the Professional Staff By-laws and submit proposed changes to the Board of Directors for review and approval.

Motion: The Board of Directors hereby approves following change to the Professional Staff By-laws, as recommended by the Medical Advisory Committee:

Article 10.1 Composition of Medical Advisory Committee

(2) In addition, the following shall be entitled to attend the meetings of the Medical Advisory Committee without a vote:

- (a) the Head of the Dental Division;
- (b) the President & CEO; ~~and~~
- (c) the Chief Nursing Officer; ~~and~~
- (d) **the Chief Diagnostic & Therapeutic Services Officer.**

Moved by: Geoff Griffin

Seconded by: Deb Lowry

The motion was carried.

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

- Jessica Biederman – Active (Radiology)
- Nicola Gambarotta – Active (Radiology)
- Susan James – Active (Radiology)
- Brandy Moran – Consulting (Radiology)
- Annette Polanski – Active (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 #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 re-appointments to the LACGH Medical Staff, as recommended by the Medical Advisory Committee:

- *Jessica Biederman – Active (Radiology)*
- *Nicola Gambarotta – Active (Radiology)*
- *Susan James – Active (Radiology)*
- *Brandy Moran – Consulting (Radiology)*
- *Annette Polanski – Active (Radiology)*

Moved by: Chris Seeley

Seconded by: Deb Lowry

The motion was carried.

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

- Sasha Bhan – Consulting (Radiology) *change from Active to Consulting staff*
- Binyamin (Ben) Rokach – Consulting (Radiology) *change from Active to Consulting staff*

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.

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, with the noted change, as recommended by the Medical Advisory Committee:

- *Sasha Bhan – Consulting (Radiology) change from Active to Consulting staff*
- *Binyamin (Ben) Rokach – Consulting (Radiology) change from Active to Consulting staff*

Moved by: Geoff Griffin

Seconded by: Jamie Uson

The motion was carried.

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

- Scott Rieder – Locum Tenens (General Surgery)
- Lilia Panamsky – Locum Tenens (Internal Medicine)

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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 #6

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:

- *Scott Rieder – Locum Tenens (General Surgery)*
- *Lilia Panamsky – Locum Tenens (Internal Medicine)*

Moved by: Bob Clancey
Seconded by: Michelle Smith

The motion was carried.

6.3 Patient & Family Advisory Council

Alice Carlson highlighted that the PFAC meeting minutes were included in the Board meeting package. The group has been meeting once every two months but had met again in February to finish up some agenda items from the previous meeting.

Alice noted that the group reviewed the OHA Family Caregiver Engagement survey results and found they were relatively in line with the rest of the PFAC's across the province.

Ideally, the PFAC would like to have a few more members. If any of the Board members knew someone who might like to fill this role, they could get in touch with Erin Brown.

6.4 Governance Committee

Deb Lowry highlighted the following from the February 18, 2021 Governance Committee meeting:

The Governance Committee reviewed the Board self-assessment results. There were no real surprises with the fairly static positive results. Deb noted the appreciation for the comments submitted that place marked the current COVID environment the Board is operating in (virtual meetings in place of face to face meetings, etc.).

The Governance Committee was pleased to see that all of the elected Board members have indicated their intent to stay on with the Board for the upcoming year. The Board Skills Matrix was discussed in that it was not circulated for completion, given that the elected Board members were not slated to change. Following discussion, it was determined that the matrix would be circulated to the elected Board members and items identified by Directors as requiring a change would be forwarded to Sheila Mabee to update the master listing.

The Governance Committee reviewed an amendment to the Statement of Roles and Responsibilities of the Board document. With respect to the document speaking about engagement of our community, Dr. Morrison said she and Wayne have recently completed a very informative series of training sessions on Indigenous Cultural Safety in Healthcare, offered through the OHT central system of supports. What was highlighted to her was the importance of recognizing the role as a Hospital Board in both in acknowledging the systemic issues that have led to mistrust and ensuring that our

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Indigenous patients and employees feel safe to seek care and work here. The Board discussed how they might engage with our Indigenous Community in a meaningful way to explore these issues. The group discussed the potential of having Indigenous representation on the PFAC and consideration for the next opening on the Board. It was agreed that this important item be discussed in further detail at the next Governance Committee meeting.

Upon review of the amendments to the Statement of Roles and Responsibilities of the Board document, no concerns were noted by the Committee or the Board.

Motion #7

Rationale: The Governance Committee, as part of their work plan, is required to review changes to the "Statement of Roles and Responsibilities of the Board" document. This document was developed to ensure that the Board of Directors has a shared understanding of its governance role and overall governance affairs of the hospital.

Motion: The Board of Directors approves the following change to the Statement of the Roles and Responsibilities of the Board document, as recommended by the Governance Committee:

Governance

- Establishing governance structures **using individualized mentorship approaches** to facilitate the performance of the Board's role and enhance individual Director performance.
- Ensuring **and participating in** ongoing Board training and education.

Moved by: Robert Paul

Seconded by: Geoff Griffin

The motion was carried.

6.5 Finance Committee

Michelle Smith reviewed the following from the February 22, 2021 Finance Committee meeting:

The Investment Mandate Statement and Investment Policy were both reviewed by the Finance Committee. There was the suggestion to amend section 4. *Permitted Investments* to be inclusive of global equities (in addition to Canadian Equities) to align with other parts of the Investment Mandate. In following up with the Investment Manager, post-meeting, he had suggested additional changes be made to the document. Michelle noted that the Investment Manager would be invited to the next Finance Committee meeting to discuss those additional changes with the Committee prior to coming to the Board for review and approval.

6.5.1 Small Hospital Fund – Capital Expenditure

Wayne Coveyduck provided the Board with details of replacing our Picture Archiving Communication System (PACS) for DI. Over the course of the last 4-5 years there has been ongoing challenges with our current PACS system and its connectivity with Quinte and Kingston. It was hoped that we could update to a more regional system with Kingston (as the Board approved about 6 years back), but that has not materialized. We have an excellent partnership with our Radiologists, who also work in Quinte. It was hoped that the upgraded system would allow for a more seamless workflow, while still maintaining a connection to Kingston. The Hospital is looking to use the Transformational Funding for both this year and next year to fund the hardware, year one costs and implementation services, so as not to drain Hospital reserves. There will still be a need for a broader (possibly provincial) solution down the road, however this will provide a great relief and improved work flow for our Radiologists.



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The total cost over F2020-21 and F2021-22 amounts to \$540,800.

The Finance Committee recommended to the Board, that the expense be approved.

Motion #8

Rationale: Capital expenditures which fall outside the normal budgeting approval requires the review and approval of the Finance Committee and the Board of Directors.

Motion: The Board of Directors hereby approves the following, as recommended by the Finance Committee: the local stand-alone Picture Archiving Communication System (PACS) through suggested vendor, Sectra. Approximate cost is estimated at \$540,800 broken down by fiscal year:

- F2020-21 = \$220,000 (hardware) + \$40,400 (50% year one costs)
- F2021-22 = \$40,400 (50% year one costs) + \$240,000 (implementation services)

Moved by: Chris Seeley

Seconded by: Deb Lowry

The motion was carried.

6.5.2 January Financial Statements and Cheque List

The Finance Committee reviewed the January 2021 Financial Statements and Cheque List which totaled \$3,317,398.86.

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:

- January 2021 Cheque List totaling \$3,317,398.86;
- January 2021 Financial Statements.

Moved by: Geoff Griffin

Seconded by: Jamie Uson

The motion was carried.

6.5.3 Capital Equipment Requests

The Finance Committee reviewed a request for the allocation of \$915,495 towards the purchase of the following items with costs being covered by the insurance claim (flood): Mammography. Senographe Pristina Mammography System. (\$250,977); Medical Imaging. GE Discovery Definium 656 HD Dedicated Xray unit. (\$318,468); Medical Imaging. Aymes Medical Lunar Bone Densimeter. (\$140,507); Medical Imaging. GE Discovery 656 Portable General Xray unit. (\$123,911); Various departments. Chairs. (\$6,012); Medical Imaging. Photocopier. (\$3,453); Medical Imaging. Ultrasound machine. (\$31,130); Diagnostic Imaging. Computer hardware: monitors, desktop computer, laptops, notebook, printer, scanner, towers. (\$13,019); Mammography. Technologist Work station. (\$15,738); Radiology. L900 Work station. (\$3,947); Diagnostic Imaging. Director's desk suite. (\$2,660); and Diagnostic Imaging. Clerical desk reception area. (\$5,674).



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

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 \$915,495, as recommended by the Finance Committee:

- Mammography. Senographe Pristina Mammography System. (\$250,977). Insurance claim coverage (flood).
- Medical Imaging. GE Discovery Definium 656 HD Dedicated Xray unit. (\$318,468). Insurance claim coverage (flood).
- Medical Imaging. Aymes Medical Lunar Bone Densimeter. (\$140,507). Insurance claim coverage (flood).
- Medical Imaging. GE Discovery 656 Portable General Xray unit. (\$123,911). Insurance claim coverage (flood).
- Various departments. Chairs. (\$6,012). Insurance claim coverage (flood).
- Medical Imaging. Photocopier. (\$3,453). Insurance claim coverage (flood).
- Medical Imaging. Ultrasound machine. (\$31,130). Insurance claim coverage (flood).
- Diagnostic Imaging. Computer hardware: monitors, desktop computer, laptops, notebook, printer, scanner, towers. (\$13,019). Insurance claim coverage (flood).
- Mammography. Technologist Work station. (\$15,738). Insurance claim coverage (flood).
- Radiology. L900 Work station. (\$3,947). Insurance claim coverage (flood).
- Diagnostic Imaging. Director's desk suite. (\$2,660). Insurance claim coverage (flood).
- Diagnostic Imaging. Clerical desk reception area. (\$5,674). Insurance claim coverage (flood).

Moved by: Robert Paul

Seconded by: Bob Clancey

The motion was carried.

6.5.4 Signing Authority Policy Review

The Finance Committee reviewed the following changes to the Signing Authority policy:

- Includes that the Board was authorizing the President & CEO and delegates to sign;
- Includes invoice approval;
- Creation of delegation of authority of signing authority form;
- Delegates unable to authorize disbursements for which they are the recipient;
- Person of next higher authority must authorize;
- Added planned transactions as a stand-alone point;
- Added references to travel expenses and procurement;
- Changed some threshold limits from \$25,000 to \$50,000;
- Signing authority updated to include COS for physician payments within approved budget
- Removed "with approval/delegation from" column as it is a Board policy.

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

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Motion #11

Rationale: The Finance Committee reviewed draft changes to the Board's Signing Authority Policy B-16, in advance of approval by the Board of Directors.

Motion: The Board of Directors hereby approves the amendments to the Signing Authority policy B-16, as recommended by the Finance Committee.

Moved by: Michelle Smith

Seconded by: Deb Lowry

The motion was carried.

6.6 Volunteer Services Report

In addition to the Volunteer Services update circulated with the Board meeting package, Susan Jack noted that the Volunteer Services Executive had met earlier in the day. The volunteers are in the process of identifying priority groups to submit their consent forms to begin receiving their COVID-19 vaccinations. Active Volunteers within in certain areas of the hospital were being prioritized.

Additionally, once fully vaccinated, a select group of Volunteers would also begin assisting with the community's local mass vaccination clinics.

6.7 Foundation Report

Further to the written report circulated with the Board meeting package, Adrienne Harris-Hale highlighted the following:

- The Catch-the-Ace promo is back with a first draw to be held March 4, 2021.
- The Foundation has begun working with Webworks to pivot to an online fundraising platform given the uncertainty about the ability to host in-person events in the near future.
- The Foundation is in talks with the local golf course about hosting the annual Golf Tournament in late August, early September. Planning for this won't commence until late spring when more is known about the current COVID situation.
- The Foundation was recently contacted by the Kingston Whig-Standard who were inquiring about the possibility of writing a story about the 55th anniversary of the Hospital. The inquiry has been forwarded to Communications Lead, Erin Brown, for response.

There was an open discussion about the financial commitment the Foundation made about a year ago now, to fund the Chemo Expansion project. At the time, the Foundation provided the Hospital \$500,000 in the form of an interest free loan to be able to start the project. The Hospital repaid this interest free loan to the Foundation a number of months ago. With the Chemo Expansion project set to shortly open, the Board wondered about where that commitment was at.

Adrienne shared that the Foundation is committed to following through with this, but could not specify an exact date as to when the Hospital might expect the money, as this is to be discussed at the next Foundation Finance meeting. Adrienne relayed that, with the wish to not have the Foundation campaign for this initiative (due to the current pandemic with so many businesses suffering financially and with both the Foundation and the hospital having assets and investments on hand) the rest of their Board would need to be consulted about looking at cash on hand and their investments to honour their commitment to the Chemo Expansion.

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6.8 Chief Executive Officer's Report

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

- The Hospital is awaiting the final data for the pre-capital submission to the Ministry with regards to the Transitional Care proposal. The SE LHIN is working with our internal Decision Support to come up with a formula to substantiate the data and showcase why we should have transitional care beds.
- Wayne inquired about Board member interest in attending a ribbon cutting ceremony for the Chemo Expansion project and the Supportive Living project.
- The Board discussed the Supportive Living suites and their availability to have people move in. SE LHIN Home and Community Care are taking the lead for intakes to these beds. It was hoped that media coverage via the ribbon cutting would pique more interest to have the rooms filled to capacity soon. The intakes would be monitored over the course of March to determine viability of the Supportive Living program. Should there be a lack of interest, it might warrant a business case review.

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, Governance Committee, Volunteer Services, Foundation and the CEO.

Moved by: Norm Clark

Seconded by: Deb Lowry

The motion was carried.

7. Correspondence Received up to February 22, 2021

There was nothing further to report for correspondence.

8. New Business - none

9. Next Meeting

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

Allan MacGregor recognized Dr. Crystal Gonu's last Board meeting as President of the Medical Staff. The Board thanked her for her attendance at the Board meetings and her input over the last few years. Allan acknowledged Dr. Gonu's large role in the rejuvenation of the medical staff and culture shift. Dr. Sonal Patel will take over as President of the Medical Staff effective April 1, 2021.

10. Adjournment

The meeting was adjourned at 7:43 p.m.

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Motion #13

Rationale: Normal Practice

Motion: That the Board of Directors hereby adjourns their meeting at 7:43 p.m. on March 2, 2021.

Moved by: Jamie Uson

Seconded by: Susan Jack

The motion was carried.