



# LENNOX AND ADDINGTON COUNTY GENERAL HOSPITAL

## BOARD OF DIRECTORS

### MEETING MINUTES

October 5, 2021

Zoom | ACR

A meeting of the Board of Directors of the Lennox and Addington County General Hospital was held in the Airhart Conference Room and via Zoom at 6:30 p.m. on October 5, 2021.

**PRESENT:**

<b>Board:</b>	Deb Lowry (Chair)	Wayne Coveyduck
	Allan MacGregor	Tracy Kent-Hillis
	Michelle Smith*	Dr. Kim Morrison
	Bob Clancey	Dr. Sonal Patel*
	Lori Francis*	Adrienne Harris-Hale*
	Geoff Griffin*	
	Robert Paul	

**REGRETS:**

Susan Jack	Ric Bresee
Alice Carlson	Jamie Uson
Norm Clark	

<b>Staff in attendance:</b>	Erin Brown	Tracy Ringrose
	Colin Catt*	AK Sharma
	Darlene Moore	Sheila Mabee (Recorder)

\* Attended via zoom

**1. Call to Order/Opening Remarks**

The meeting was called to order at 6:30 p.m., by Deb Lowry.

**2. Land Acknowledgment**

Deb Lowry begin this new season of Board meetings with the following Land Acknowledgment:

*A Land Acknowledgment recognizes the traditional territories of the Indigenous peoples, before the arrival of settlers, and their unique and continuing relationship with these lands. In particular, we acknowledge that Lennox and Addington County General Hospital is built on the ancestral and traditional territory of the Anishinaabeg and Haudenosaunee Peoples, including the Mohawks of the Bay of Quinte, and on the land of the Huron-Wendat Nation. As the LACGH Board of Directors, we are dedicated to honouring Indigenous history and culture, and are committed to moving forward in the spirit of reconciliation and respect.*

This Land Acknowledgment will occur annually at the October Board meeting, at the Annual General Meeting, and at other events, as deemed appropriate, by the Board.

In addition, Deb offered a suggestion that the Board consider asking the Art Décor Committee to pursue the commissioning of a piece of aboriginal artwork for a Land Acknowledgment plaque, which would be replicated and installed at each of the main entrances for each of the LACGH health campus buildings.

Deb inquired if anyone wished to comment or have a discussion on the suggestion. It was suggested that the Land Acknowledgment be read at each of the Board meetings. The Board was in support of commissioning of Land Acknowledgment plaques.



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#### Motion #1

*Rationale: A Land Acknowledgements marks a small and important step in the process of reconciliation and building a positive relationship with Indigenous peoples. By making a Land Acknowledgement we are taking part in an act of reconciliation, and honouring the land and Indigenous presence which dates back thousands of years.*

***Motion: That the Board of Directors ask the Art Décor Committee to pursue the commissioning of aboriginal artwork for a Land Acknowledgement plaque, which will be replicated and installed at each of the main entrances for all of the LACGH health campus buildings.***

Moved by: Lori Francis

Seconded by: Allan MacGregor

The motion was carried.

### 3. Approval of the Agenda

The agenda was approved as circulated.

#### Motion #2

*Rationale: Normal Practice*

***Motion: That the Board of Directors hereby approves the agenda dated October 5, 2021.***

Moved by: Robert Paul

Seconded by: Bob Clancey

The motion was carried.

### 4. 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.

### 5. Minutes of the Previous Meeting

The minutes of the previous meeting were approved as circulated.

#### Motion #3

*Rationale: Normal Practice*

***Motion: That the Board of Directors hereby approves the minutes of the previous meeting dated June 1, 2021.***

Moved by: Bob Clancey

Seconded by: Geoff Griffin

The motion was carried.

### 6. Business Arising

#### 6.1 Local and Regional Updates

Deb Lowry reported on the following items:

- The Chairs / Vice Chairs Forum (CVCF) has not met, consistent with the last number of months.



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- Deb and Wayne participated in an education session related to the Ontario Not-for-Profit Corporations Act, which is said to come into effect towards the end of 2021. There were no huge surprises. Some work will need to be undertaken to align our By-laws with the model that is supplied. The biggest item detected will be that any member of the corporation will have the option to request the audited financial statements up to 21 days prior to the annual meeting. Typically we get these from the auditors a week before the annual meeting so something will need to be done on that front.

Dr. Morrison reported on the following items:

- *Regional HIS Project*: the HIS project is at the pre-engagement stage of selecting the project team(s). Dr. Morrison has been chosen to lead the physician group for the project, which kicks off in March. There is a newly formed sub-committee, the Primary Care Working Group, who may choose to interact with the HIS. This group will define and scope to determine if the Regional HIS will meet the needs of this group.
- *FLA-OHT Update*: The FLA-OHT is holding its first retreat on October 14, 2021. The retreat will be held via zoom and will be focused on the landing of the health home as the foundation with the OHT. Where the value of it will be; why should I be involved, etc., the landing of the vision of the Health Home. The second half of the day will be focused on engaging with the leadership of the OHT.

Wayne Coveyduck reported on the following items:

- *Regional Hospital CEOs Forum*: the last number of months there have been conversations around the HIS initiative and funding for the project. Ministry support for the project has been indicated, with money for the project being provided by the Ontario Funding Authority (OFA) in the form of a loan for those who need it.
- *Covid-19 and Vaccinations*: the forth wave, together with the mandatory vaccination initiatives have taken up a tremendous amount of time and resources. We have had some staff, who chose not to get vaccinated within the desired timeframe, go off on unpaid leave. There is a large shortage across the region, and even across Ontario, for health human resources. What this will mean is very high costs for organizations on how this will be addressed. There are some who are mentally fatigued or experiencing burnout and there is a reluctance to work more than they currently are. Regionally, there is discussions about various alternatives for shared resources and how our hospitals are able to support each other. We are not alone in our significant issues with staffing. Home care has not yet come under the umbrella of mandatory vaccinations, with no reporting on the status of vaccinations for this particular group. This is causing issues with those requiring home care refusing PSWs entry into their homes.

## 7. Reports

### 7.1 Quality Committee

Lori Francis highlighted the following from the September 21, 2021 Quality Committee meeting:

- As the group is aware, Chris Seeley has resigned as Director on the Board. As such, Lori has taken over as Chair of the Quality Committee. Allan MacGregor has agreed to take on the role as Vice Chair for the Committee. Sheila Mabee has taken over as administrative support for the Committee.
- Lori congratulated the hospital on the 2021 OAMRS award achievement.
- The balanced scorecard, over the summer months, has been completely overhauled. This will continue to be worked on to streamline reports to the Committee. Overall the new look was appealing and easier to navigate.



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#### 7.2 Medical Advisory Committee

Dr. Morrison highlighted the following from the June 10, 2021 and September 9, 2021 Medical Advisory Committee meetings:

The region has a new Transfusion Specialist, Dr. Callum, from the Toronto area, with a goal to streamline all hospitals in the region around appropriate utilization of blood products. She has been an excellent resource and addition to our region.

The Medical Advisory Committee reviewed draft changes to the Medical Assistance in Dying policy (B-27) which was updated to align with legislative changes passed earlier in the year. No concerns were noted by the MAC; therefore, the MAID policy was recommended to the Board of Directors for approval.

#### Motion #4

*Rationale: Rationale: Changes to clinical practice/policy requires the review and approval of the MAC; updates to Board policies require the review and approval of the Board of Directors.*

***Motion: The Board of Directors hereby approves the Medical Assistance in Dying Policy (B-27), as recommended by the Medical Advisory Committee, which was updated to reflect the March 2021 legislative changes.***

Moved by: Geoff Griffin

Seconded by: Robert Paul

The motion was carried.

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

- Natasha Satkunam (Consulting Oncology)
- Barbara Farnell (Active Emergency with Family Medicine)
- Jennifer Hacking (Active Emergency Medicine)
- Michael McDonnell (Locum Tenens Emergency Medicine)
- John P Raleigh (Active Emergency Medicine)
- Logan Seaman (Locum Tenens Emergency with Family Medicine)
- Jessica Andrews (Active General Surgery)
- Wiley Chung (Consulting General Surgery)
- James Michael Hendry (Consulting Plastic Surgery)
- Mykola Khokhotva (Active General Surgery)
- Glykeria Martou (Consulting Plastic Surgery)
- Doug McKay (Consulting Plastic Surgery)
- Shaila Merchant (Locum Tenens General Surgery)
- Scott Rieder (Locum Tenens General Surgery)
- David Robertson (Active General Surgery)
- John (Fred) Watkins (Consulting Plastic Surgery)
- Joseph Campbell (Consulting Cardiology)
- Cathy Dai (Locum Tenens Internal Medicine)
- Jocelyn Garland (Consulting Nephrology)
- Rachel Holden (Consulting Nephrology)



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- David Holland (Consulting Nephrology)
- Eduard Iliescu (Consulting Nephrology)
- John Matthews (Consulting Hematology)
- Nicola Matthews (Active Internal Medicine)
- Craig McGann (Consulting Respiriology)
- Mohammad Shamseddin (Consulting Nephrology)
- Samuel Silver (Consulting Nephrology)
- Christine White (Consulting Nephrology)
- Ruobing Yang (Consulting Respiriology)
- Karen Yeates (Consulting Nephrology)
- Catherine Koester (Courtesy with Admitting Family Medicine)

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

- *Natasha Satkunam (Consulting, Oncology)*
- *Barbara Farnell (Active, Emergency with Family Medicine)*
- *Jennifer Hacking (Active, Emergency Medicine)*
- *Michael McDonnell (Locum Tenens, Emergency Medicine)*
- *John P Raleigh (Active, Emergency Medicine)*
- *Logan Seaman (Locum Tenens, Emergency with Family Medicine)*
- *Jessica Andrews (Active, General Surgery)*
- *Wiley Chung (Consulting, General Surgery)*
- *James Michael Hendry (Consulting, Plastic Surgery)*
- *Mykola Khokhotva (Active, General Surgery)*
- *Glykeria Martou (Consulting, Plastic Surgery)*
- *Doug McKay (Consulting, Plastic Surgery)*
- *Shaila Merchant (Locum Tenens, General Surgery)*
- *Scott Rieder (Locum Tenens, General Surgery)*
- *David Robertson (Active, General Surgery)*
- *John (Fred) Watkins (Consulting, Plastic Surgery)*
- *Joseph Campbell (Consulting, Cardiology)*
- *Cathy Dai (Locum Tenens, Internal Medicine)*
- *Jocelyn Garland (Consulting, Nephrology)*
- *Rachel Holden (Consulting, Nephrology)*
- *David Holland (Consulting, Nephrology)*
- *Eduard Iliescu (Consulting, Nephrology)*
- *John Matthews (Consulting, Hematology)*



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- Nicola Matthews (Active, Internal Medicine)
- Craig McGann (Consulting, Respiriology)
- Mohammad Shamseddin (Consulting, Nephrology)
- Samuel Silver (Consulting, Nephrology)
- Christine White (Consulting, Nephrology)
- Ruobing Yang (Consulting, Respiriology)
- Karen Yeates (Consulting, Nephrology)
- Catherine Koester (Courtesy with Admitting, Family Medicine)

Moved by: Lori Francis  
Seconded by: Allan MacGregor

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:

- Benjamin Chen (Consulting, Internal Medicine) *change from Active to Consulting staff*
- Irene Zouros (Courtesy with Admitting, Emergency Medicine) *addition of methadone initiation*
- Madelaine Wernham (Active, Internal Medicine) *change from Associate to Active*
- Christy Stephenson (Locum Tenens, Family Medicine with Emergency) *addition of Emergency 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.

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 appointment to the LACGH Medical Staff, with the noted change, as recommended by the Medical Advisory Committee:***

- Benjamin Chen (Consulting Internal Medicine) *change from Active to Consulting*
- Irene Zouros (Courtesy with Admitting Emergency Medicine) *addition of methadone initiation*
- Madelaine Wernham (Active Internal Medicine) *change from Associate to Active*
- Christy Stephenson (Locum Tenens Family Medicine with Emergency) *addition of Emergency Medicine*

Moved by: Robert Paul  
Seconded by: Michelle Smith

The motion was carried.

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

- Stephanie Vanner (Locum Tenens, Family Medicine)
- Michael Weersink (Locum Tenens, Family Medicine)
- Ruobing Yang (Consulting, Respiriology)
- Cathy Dai (Locum Tenens Internal, Medicine)



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- Amelia Wilkinson (Locum Tenens, Internal Medicine)
- Julia Chow (Locum Tenens, Anesthesia)

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 #7

*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:**

- Stephanie Vanner (Locum Tenens, Family Medicine)
- Michael Weersink (Locum Tenens, Family Medicine)
- Ruobing Yang (Consulting, Respiriology)
- Cathy Dai (Locum Tenens Internal, Medicine)
- Amelia Wilkinson (Locum Tenens, Internal Medicine)
- Julia Chow (Locum Tenens, Anesthesia)

Moved by: Bob Clancey  
Seconded by: Lori Francis

The motion was carried.

**7.3 Governance Committee**

Allan MacGregor highlighted the following from the September 23, 2021 Governance Committee meeting:

- The Committee had a good discussion about the retreat. The facilitator was good. The Committee spoke about both the OHT and LTC.
- There was a good open discussion about director succession planning. As well as the immediate vacancy, there are also some directors nearing the end of their terms so this will be a real focus for Governance in planning for the future. New (or existing) board members will be asked to take on leadership roles to fill the need.
- A number of motions were put forward with a recommendation for Board approval as part of the Governance Committee’s work plan.

Motion #8

*Rationale: As part of their Work Plan, the Governance Committee is required to review and make updates to the Board of Directors annual Work Plan.*

**Motion: That the Board of Directors hereby approves the 2021-22 Board Work Plan, as recommended by the Governance Committee.**

Moved by: Robert Paul  
Seconded by: Geoff Griffin

The motion was carried.



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Motion #9

*Rationale: As part of the Governance Committee's annual work plan, the Committee is tasked with reviewing the Board's Committee Structure.*

**Motion: That the Board of Directors hereby approves the updated Committee Structure for 2021-22.**

Moved by: Allan MacGregor

Seconded by: Michelle Smith

The motion was carried.

Motion #10

*Rationale: The Governance Committee, as part of their work plan, is required to review the Boards Statement of Roles and Responsibilities, as well as the Board and Officer Position descriptions.*

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

- Chair
- Vice Chair
- Treasurer
- Board Director
- President & CEO
- Chief of Staff

Moved by: Robert Paul

Seconded by: Lori Francis

The motion was carried.

Motion #11

*Rationale: The Guide to Good Governance recommends that Hospitals develop a Board Accountability Statement for viewing by the public. As part of the Governance Committee's work plan, this Statement gets reviewed on an annual basis.*

**Motion: The Board of Directors hereby approves the amended Board Accountability Statement, as recommended by the Governance Committee.**

Moved by: Bob Clancey

Seconded by: Michelle Smith

The motion was carried.

**7.4 Finance Committee**

Michelle Smith reviewed the following from the September 27, 2021 Finance Committee meeting:

- The Committee had a significant discussion around the hospital insurance provider. There was a comparison between our current provider and HIROC, with quite significant savings that the Committee felt it in the best interest of the hospital to switch providers.





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- The Committee reviewed a number of motions and recommended to the Board approval of those motions, which follow.

#### 7.4.1 April, May, June and July 2021 Financial Statements and Cheque Lists

The Finance Committee reviewed the April, May, June and July 2021 Financial Statements and Cheque Lists, which were pre-approved via email over the summer months and came to the Committee for formal approvals. No concerns were noted by the Finance Committee or the Board.

Motion #12

*Rationale: Normal Practice.*

**Motion: The Board of Directors hereby approves the following Financial Statements and Cheque Lists, as recommended by the Finance Committee:**

- April 2021 Financial Statements;
- May 2021 Financial Statements;
- May 2021 Cheque List totaling \$3,207,523.57;
- June 2021 Financial Statements;
- June 2021 Cheque List totaling \$2,474,645.32;
- July 2021 Financial Statements;
- July 2021 Cheque List totaling \$3,272,457.64.

Moved by: Robert Paul

Seconded by: Geoff Griffin

The motion was carried.

#### 7.4.2 Hospital Insurance

The Finance Committee reviewed the insurance quotes from Intact, the current insurance provider, and HIROC. There has been significant discussion on this item over the last several months with the Finance Committee ultimately deciding to proceed with HIROC, due to the significant cost savings. A line by line comparison was completed and the Committee felt they were acting in the best interest of the organization by switching providers.

No concerns were noted by the Board.

Motion #13

*Rationale: The Finance Committee is tasked with reviewing and making recommendations concerning insurance coverage.*

**Motion: The Board of Directors hereby approves moving forward in a change in hospital insurance coverage from Intact to HIROC, as recommended by the Finance Committee.**

Moved by: Robert Paul

Seconded by: Lori Francis

The motion was carried.



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#### 7.4.3 Insurance Provider Premium Payment

The Finance Committee discussed how to proceed with payment of the remaining 50% of the premium with Intact. It was determined that the remainder of the premium would be paid in full with the expectation that the prorated amount be refunded once the 60 days' notice was concluded.

The Board discussed the process in which to proceed with changing insurance carriers. It was determined that HIROC, once they were notified of a Board decision to proceed in a change in carriers, would provide an updated contract which would be circulated for electronic approval to the Board. Following acceptance of the contract, Intact would be provided with their 60 days' notice to terminate our agreement.

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

#### Motion #14

*Rationale: The Finance Committee is tasked with reviewing and making recommendations concerning Insurance coverage premium payment to our existing vendor.*

**Motion: That the Board of Directors hereby approves paying the total premium for this year's insurance with Intact, with the understanding that a portion would be refunded after 60 days' notice is given to terminate the relationship, as recommended by the Finance Committee.**

Moved by: Geoff Griffin

Seconded by: Robert Paul

The motion was carried.

#### 7.4.4 August Financial Statements and Cheque List

The Finance Committee reviewed the August 2021 Financial Statements and Cheque List which totaled \$3,261,427.36. No concerns were noted by the Finance Committee or the Board.

#### Motion #15

*Rationale: Normal Practice.*

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

- August 2021 Cheque List totaling \$3,261,427.36;
- August 2021 Financial Statements.

Moved by: Michelle Smith

Seconded by: Bob Clancey

The motion was carried.

#### 7.4.5 Capital Equipment Requests

The Finance Committee reviewed a request for the allocation of \$35,500 towards the purchase of: OR, Gastroscope (replacement). No concerns were noted by the Finance Committee or the Board.



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#### Motion #16

*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 \$35,500, as recommended by the Finance Committee for:**

- *OR. Gastroscope (\$35,500) Replacement.*

Moved by: Lori Francis

Seconded by: Geoff Griffin

The motion was carried.

#### 7.4.6 Acknowledgments – Hospitalizations and Bereavement

The Finance Committee reviewed a proposed increase to funeral acknowledgements (flowers/donation) from the current \$100 to \$150, and the hospitalization acknowledgment from the current \$75 to \$100.

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

#### Motion #17

*Rationale: Normal Practice*

**Motion: That the Board of Directors hereby approves the following increases, as recommended by the Finance Committee:**

- *Funeral acknowledgment from current amount of \$100 to \$150.*
- *Hospitalization acknowledgement from \$75 to \$100.*

Moved by: Robert Paul

Seconded by: Michelle Smith

The motion was carried.

#### 7.5 Patient Family Advisory Council

In absence of Alice Carlson, the Board briefly reviewed the PFAC report circulated with the Board meeting package.

#### 7.6 Volunteer Services Report

In absence of Susan Jack, the Board briefly reviewed the Volunteer Services report circulated with the Board meeting package.

#### 7.7 Foundation Report

Further to her written report circulated with the meeting package, Adrienne Harris-Hale noted that the totals for the local Tim Horton's Smile Cookie campaign were in. The Foundation received a cheque in the amount of \$26,808 from the local campaign. Adrienne thanked the local Tim Horton's who did much of the work decorating cookies, as well as the Foundation Board and community members who stepped up to volunteer their time this year.



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7.8 Chief Executive Officer’s Report

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

- Ontario’s Not-for-Profit Corporations Act: the OHA has engaged on the development of corporate by-laws which will be reflective of the legislative changes brought about by ONCA. Historically there was a transition away from having the Ministry review and approve any corporate by-law changes. With the passing of this new legislation, we are reverting back to the old ways of getting by-law approval by the Ministry of Health.
- There are a number of people engaged in reviewing the working drawings for the LTC plans. We have been moving forward with the assumption of approval from the MLTC. The Board will be briefed, later in the closed session, about an issue with the project. There is concerns with underground water issues which will prohibit us from putting in a basement. This will then mean that all construction will be required to be above grade (2 ½ stories instead of the original 2).
- Supportive Living is close to being fully occupied with 17 of the 20 suites rented. Supportive Living is a wonderful facility to visit and to see the community they have created. This facility has enriched the lives of those who occupy the space in so many ways (for those who might have been otherwise at risk, lonely or isolated).

<p>Motion #18</p> <p><i>Rationale: Normal Practice</i></p> <hr/> <p><b>Motion: The Board of Directors hereby accepts the reports from the Quality Committee, Medical Advisory Committee, Governance Committee, Finance Committee, Patient Family Advisory Council, Volunteer Services, Foundation and the CEO.</b></p> <p>Moved by: Allan MacGregor          Seconded by: Lori Francis</p> <p style="text-align: right;">The motion was carried.</p>
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8. Correspondence Received up to September 22, 2021

There was nothing further to report for correspondence and no comments or inquiries made.

9. New Business

9.1 Annual Director Declaration and Consent Forms

Deb reminded Board members to complete and submit the annual director declaration and consent forms to Sheila Mabee before the next Board meeting. Electronic copies were circulated with the Board meeting package.

9.2 Board Development Retreat

Deb Lowry provided a summary of responses from the Board Development satisfaction survey collected thus far (9 of a potential 17):

- (1) To what extent were you satisfied with the accommodations provided at the DGC?
  - Very good, as an average
- (2) To what extent were you satisfied with the dinner and lunch provided by the DGC?
  - Fair to good, as an average



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- (3) To what extent were you satisfied with the conference room?
  - Very good, as an average
- (4) To what extent were you satisfied with the facilitator, Paula Blackstien-Hirsch?
  - Very good to excellent, as an average
- (5) Summary of top three take-away items:
  - Review and streamlining of quality reports and how data is presented
  - More info on OHT / communication / need to take initiative on fostering collaborative OHT governance
  - LTC discussion / single board governance model
  - Succession planning for board and executives
  - Better understanding of quality (STEEEP)
  - Importance of and need for board engagement and generative discussions
  - Shifting / maintaining focus on patients and patient outcomes
  - Open discussions

As more responses come in, Deb will update the above lists.

**9.3 LTC Capital Development Committee**

Wayne Coveyduck noted that the last LTC Capital Development Committee was focused on the preliminary drawings for the 128-bed LTC home. The MLTC has provided some good feedback on what has been submitted to them so far.

The MLTC, and our Project Manager have slotted us in to meeting at a 6-week time interval. At the first meeting their design specialist had provided a bit of feedback on the preliminary drawings. Those changes were updated by the Architect in good time and are working towards working drawings.

There is a sizable issue to be addressed, but once corrected the architect can make the required changes within about 3 weeks' time. The architect will be engaged to meet with the Committee to assure that we are on time, with a potential for cost estimates as well. The next logical meeting is likely just prior to meeting with the Ministry representatives. As we get to working drawings, the Committee may wish to meet more frequently as we get towards going to tendering.

**10. Other Business**

Just prior to moving into closed session, Deb took a pause to inquire if anyone wished to have further discussion on any of the items covered at tonight's meeting. There were no identified items to discuss further.

**11. Closed Session**

At 7:27 p.m., the Board moved into closed session.

<p>Motion #19</p> <p><i>Rationale: Normal Practice</i></p> <hr/> <p><b>Motion: That the Board of Directors hereby moves into closed session.</b></p> <p>Moved by: Robert Paul          Seconded by: Bob Clancey</p> <p style="text-align: right;">The motion was carried.</p>
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At 8:14 p.m., the Board rose from closed session.

Motion #20

*Rationale: Normal Practice*

***Motion: That the Board of Directors hereby rises from closed session at 8:14 p.m.***

Moved by: Geoff Griffin

Seconded by: Bob Clancey

The motion was carried.

**12. Next Meeting**

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

**13. Adjournment**

The meeting was adjourned at 8:15 p.m.

Motion #21

*Rationale: Normal Practice*

***Motion: That the Board of Directors hereby adjourns their meeting at 8:15 p.m. on October 5, 2021.***

Moved by: Robert Paul

Seconded by:

The motion was carried.