



# LENNOX AND ADDINGTON COUNTY GENERAL HOSPITAL

## BOARD OF DIRECTORS

### MEETING MINUTES

April 5, 2022

Zoom | ACR

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A meeting of the Board of Directors of the Lennox and Addington County General Hospital (LACGH) was held in the Airhart Conference Room and via Zoom at 6:30 p.m. on April 5, 2022.

#### PRESENT:

<b>Board:</b> Deb Lowry (Chair)	Wayne Coveyduck
Allan MacGregor	*Tracy Kent-Hillis
*Bob Clancey	Dr. Kim Morrison
Norm Clark	*Adrienne Harris-Hale
*Geoff Griffin	*Susan Jack
Robert Paul	
*Jamie Uson	

#### REGRETS:

Michelle Smith	Dr. Sonal Patel
Lori Francis	Alice Carlson

<b>Staff in attendance:</b> Erin Brown	Sanjeev Kumar
Tracy Ringrose	T. Stuart/A. Nussberger(Recorder)
Justin Turner	

\* Attended via zoom

## 1. Meeting Opening

### 1.1 Call to Order/Opening Remarks

The meeting was called to order at 6:25 p.m., by Deb Lowry. Deb welcomed COO Sanjeev Kumar to his new position at LACGH as well as the new Manager of Information Systems, Chris Garrah. Deb recognized Nancy Wicks for her 37 years of service at LACGH and wished her all the best in her upcoming retirement.

### 1.2 Land Acknowledgement

Deb Lowry started the meeting with the following Land Acknowledgment:

*A Land Acknowledgement 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.*

### 1.3 Approval of the Agenda

The agenda was approved as circulated with the addition of new business 5.1 ONCA.



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Motion #1

*Rationale: Normal Practice*

***Motion: That the Board of Directors hereby approves the agenda with the amendment dated April 5, 2022.***

Moved by: A. MacGregor

Seconded by: G. Griffin

The motion was carried.

#### 1.4 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.

#### 1.5 Approval of Previous Board Meeting Minutes

The minutes of the previous meeting were approved as circulated.

Motion #2

*Rationale: Normal Practice*

***Motion: That the Board of Directors hereby approves the minutes of the previous meeting dated March 1, 2022.***

Moved by: B. Clancey

Seconded by: R. Paul

The motion was carried.

## 2. Business Arising

### 2.1 Regional Updates

Deb Lowry reported on the following items:

- The Regional Board Chairs and Vice Chairs haven't met recently. Tracey will circulate the OHA Chairs report to the Board of Directors.

Wayne Coveyduck reported on the following items:

- The MLTC project is moving forward.
- There is no official update regarding the Hospitals application for a MRI machine. The hospital was to have heard by March 31, 2022.

Kim Morrison reported on the following items:

- The HIS project has come to the pilot stage for primary care. There aren't enough budgetary resources to fund the pilot.
- OHT ended year 1 with approved roll over of \$100,000 to next fiscal. Ongoing funding beyond September 2022 has not yet been confirmed.
- The governance framework for OHTs is being developed



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#### 2.2 LTC Updates

Deb Lowry reported on the following items:

- The Minister of LTC, Paul Calandra, along with Daryl Kramp and media visited LACGH the last week in March to discuss the upcoming LACGH LTC project. The day before the visit, the Ministry announced that 3 other homes in the area were receiving funding.
- The LTC documents will be sent to OFA this week and we are waiting on a supporting letter from the Deputy Minister. OFA will complete and sign only after they have a complete package. We are hoping all this can be done before the WRIT (May 4).

#### 3. Reports

##### 3.1 Quality Committee

Erin Brown highlighted the following from the March 15, 2022 Quality Committee meeting:

- The final draft of the 2022/23 QIP was approved with the changes suggested by the quality committee. A discussion ensued regarding the process in which new targets were decided upon.
- The 2021/22 end-of-year QIP submission was approved

#### Motion # 3

*Rationale: Our hospital is required to annually submit a Quality Improvement Plan based on requirements under the Excellent Care for All Act, 2010 (ECFAA). Our 2022/2023 QIP sets out key strategies to enhance our quality of care, improve safety, increase satisfaction and achieve better clinical outcomes for patients and residents.*

***Motion: The Board of Directors hereby approves the 2022-23 Quality Improvement Plan, with amendments, as recommended by the Quality Committee.***

Moved by: A. MacGregor

Seconded by: G. Griffin

The motion was carried

#### Motion # 4

*Rationale: It is mandatory, under the Excellent Care for All Act (ECFAA) to link compensation for the Chief Executive Officer (CEO) and other executives reporting to the CEO to the achievement of performance targets in our organizations Quality Improvement Plan (QIP). Performance-based executive compensation is linked to achieving specific QIP targets, as well as achieving success on selected corporate goals and objectives. The amount of compensation that is performance-based for the executive team has been set at 3% for 2022-23.*

***Motion: The Board of Directors hereby approves the proposed indicators linked to the 3% executive compensation for the 2022-23 Quality Improvement Plan, as recommended by the Quality Committee and tied to the achievement of the following selected corporate goals and objectives:***



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- Percentage of staff who, because of measures put in place to address workplace violence, strongly agree that they feel safe at work increases from 45% to 60%
- Implement an ER wait time dashboard that compares the variable factors linked to wait time (HR resource details, ancillary testing, admission process, discharge resources etc.) and initiate 3 quality process improvements
- Percentage of Patients who respond "completely" to the survey question "Before you left the hospital, did you have a clear understanding about all of your prescribed medications, including those you were taking before your hospital stay" increased from 78% to 84%.

Moved by: B. Clancey

Seconded by: A. MacGregor

The motion was carried

The evidence submission for Accreditation is not yet completed. Evidence will be submitted by the May deadline. T. Kent-Hillis has been working to develop the Transition of Care Policy. Meditech has been modified and is in the audit stage. Space assignment for the reprocessing device is being evaluated.

### 3.2 Medical Advisory Committee

Dr. Morrison highlighted the following from the March 10, 2022 Medical Advisory Committee meeting:

The Medical Advisory Committee reviewed Policy AO-33, Completion of Health Records, with the noted changes:

*Motion # 5*

*Rationale:*

***Motion: The Medical Advisory Committee hereby recommends to the Board of Directors approval of Policy AO-33, Completion of Health Records, with the noted changes:***

- Under *Incomplete Document Escalation Timelines, Emergency Documents*, the **1 & 7** day notification should be changed to **3 & 7** day.
- Under *Inpatient Documents #1, the Admission History & Physical*, any Consultant Note is reflective of an Admission Note

Moved by: G. Griffin

Seconded by: R. Paul

The motion was carried.

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

- *Tara Baetz – Consulting (Oncology)*
- *Scott Berry – Consulting (Oncology)*



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- 
- *Christopher Booth – Consulting (Oncology)*
  - *Negar Chooback – Consulting (Oncology)*
  - *Jill Dudebout– Consulting (Oncology)*
  - *George Gray– Consulting (Oncology)*
  - *Nazik Hammad – Consulting (Oncology)*
  - *Annette Hay – Consulting (Oncology)*
  - *Janarthanan Kankesan – Consulting (Oncology)*
  - *David Lee – Consulting (Oncology)*
  - *Roger Levesque – Consulting (Oncology)*
  - *Clementine Lui – Consulting (Oncology)*
  - *Heather Ostic – Consulting (Oncology)*
  - *Wendy Parulekar – Consulting (Oncology)*
  - *Andrew Robinson – Consulting (Oncology)*
  - *Robin Britton – Active (Family Medicine)*
  - *Daniel Curran– Active (Family Medicine with Emergency)*
  - *Jeanette Dietrich – Locum Tenens (Family Medicine)*
  - *Daniel Glatt – Active (Family Medicine)*
  - *Crystal Gonu – Active (Family Medicine)*
  - *Carl Lee – Active (Family Medicine)*
  - *Kimberley Morrison – Active (Family Medicine)*
  - *Sonal Patel – Active (Family Medicine)*
  - *Molly Touzel – Active (Family Medicine)*
  - *Olga Bougie – Consulting (Gynaecology)*
  - *Marie Eve Sophie Gibson – Consulting (Gynaecology)*
  - *Marie-Andree Harvey – Consulting (Gynaecology with Urology)*
  - *Ashley Waddington – Consulting (Gynaecology)*
  - *Sasha Bhan – Consulting (Radiology)*
  - *Jessica Biederman – Active (Radiology)*
  - *Nicola Gambarotta – Active (Radiology)*
  - *Susan James – Active (Radiology)*
  - *Annette Polanski – Active (Radiology)*
  - *Binyamin Rokach – Active (Radiology)*

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 # 6

*Rationale: Pursuant to the Professional Staff By-laws, the MAC is required to review and make recommendations on appointments to the Professional Staff.*

***Motion: The Medical Advisory Committee hereby recommends to the Board of Directors approval of the following re-appointments to the LACGH Professional Staff:***



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- Scott Berry – Consulting (Oncology)
- Christopher Booth – Consulting (Oncology)
- Negar Chooback – Consulting (Oncology)
- Jill Dudebout – Consulting (Oncology)
- George Gray – Consulting (Oncology)
- Nazik Hammad – Consulting (Oncology)
- Annette Hay – Consulting (Oncology)
- Janarthanan Kankesan – Consulting (Oncology)
- David Lee – Consulting (Oncology)
- Roger Levesque – Consulting (Oncology)
- Clementine Lui – Consulting (Oncology)
- Heather Ostic – Consulting (Oncology)
- Wendy Parulekar – Consulting (Oncology)
- Andrew Robinson – Consulting (Oncology)
- Robin Britton – Active (Family Medicine)
- Daniel Curran – Active (Family Medicine with Emergency)
- Jeanette Dietrich – Locum Tenens (Family Medicine)
- Daniel Glatt – Active (Family Medicine)
- Crystal Gonu – Active (Family Medicine)
- Carl Lee – Active (Family Medicine)
- Kimberley Morrison – Active (Family Medicine)
- Sonal Patel – Active (Family Medicine)
- Molly Touzel – Active (Family Medicine)
- Olga Bougie – Consulting (Gynaecology)
- Marie Eve Sophie Gibson – Consulting (Gynaecology)
- Marie-Andree Harvey – Consulting (Gynaecology with Urology)
- Ashley Waddington – Consulting (Gynaecology)
- Sasha Bhan – Consulting (Radiology)
- Jessica Biederman – Active (Radiology)
- Nicola Gambarotta – Active (Radiology)
- Susan James – Active (Radiology)
- Annette Polanski – Active (Radiology)
- Binyamin Rokach – Active (Radiology)

Moved by: A. MacGregor

Seconded by: J. Uson

*The motion was carried.*

Dr. Drover joined the March MAC meeting to review the HIS project. Daniel Glatt will be the hospital champion for L&A.

Also, a discussion regarding the criteria for a mandatory Admission Note was reviewed. A Consultant Note was deemed to have the same elements as an Admission Note and therefore they would be interchangeable on admission.



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3.3 Ethics Committee

Tracy Kent-Hillis highlighted the following from the March 2, 2022 Ethics Committee meeting:

- Work is being done to create a guiding document for addiction harm reduction for admitted patients.
• MAID is expanding in March 2023 to include mental illness.

3.4 Finance Committee

Allan Macgregor reviewed the following from the March 28, 2022 Finance Committee meeting:

3.4.1 Board, CEO and Senior Manager Expenses

There were no expenses for review.

February Financial Statements and Cheque List

The Finance Committee reviewed the February 2022 Financial Statements and Cheque List which totaled \$2,880,424.08. No concerns were noted by the Finance Committee or the Board.

Motion #7
Rationale: Normal Practice
Motion: The Finance Committee recommends to the Board of Directors approval of the
• February 2022 Cheque List totalling \$2,880,424.08.
• February 2022 Financial Statements.
Moved by: R. Paul
Second by: G. Griffin
The motion was carried.

3.4.2 Capital Equipment Requests

The Finance Committee reviewed a request for the allocation of \$31,500 towards the replacement purchase of: Operating Room, Gastroscope (\$31,500); 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 \$31,500, as recommended by the Finance Committee for:
• Operating Room. Gastroscope (\$31,500) Replacement.
Moved by: B. Clancey
Seconded by: A. MacGregor
The motion was carried.

3.5 Volunteer Services Report

Susan Jack noted that there is a lack of volunteers and they are actively recruiting. Susan will stay on as President for another year and a Vice President will need to be recruited, as the current VP is moving into the Treasurer position.



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3.6 Foundation Report

Adrienne Harris-Hale noted that there will be a 'shot gun' start at the Annual Golf Tournament this year. Any purse donations for the virtual auction can be brought to the Foundation Office.

3.7 Chief Executive Officer's Report

- Further to the written report provided in the Board package, and the regional updates concerning the LTC development, Wayne Coveyduck indicated there was nothing further to report.

Motion #9
Rationale: Normal Practice
Motion: The Board of Directors hereby accepts the reports from the Quality Committee, Medical Advisory Committee, Ethics Committee, Finance Committee, Volunteer Services, Foundation and the CEO.
Moved by: R. Paul
Seconded by: B. Clancey
The motion was carried.

4. Other

4.1 Correspondence Received up to March 31, 2022

There was nothing further to report for correspondence.

5. New Business

5.1 ONCA

The group discussed the presentation by Nick Pasquino from BLG which preceded the Board Meeting. The group agreed that the ONCA transition is significant and external assistance and advice will be needed. This transition may be supported by BLG however, there will be a cost associated. It was noted that the timeline shared by Nick for this project is reasonable and would need to be done in sections and brought back to be approved. Further discussion will need to be held regarding membership and whether it will remain 'open' as it is now versus becoming a 'closed' membership.

The shift to ONCA legislation will impact The Foundation and Volunteer Services as well, and the hope is the transition will evolve in close partnership with the Hospital. Consultation with Hospice will occur.

It was agreed that the Board would pursue a working agreement with BLG. The following items should be included:

- Scope of project
Cost? Should we tender out to get competitive quotes?
Guidance through the project (Ministry, etc.)
Costing for inclusion of Volunteer Services and Foundation

6. Closed Session

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





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Motion #10

*Rationale: Normal Practice*

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

Moved by: R. Paul

Seconded by: B. Clancey

The motion was carried.

At 7:54 p.m., the Board rose from closed session.

Motion #11

*Rationale: Normal Practice*

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

Moved by: B. Clancey

Seconded by: G. Griffin

The motion was carried.

**7. Meeting Closing**

**7.1 Next Meeting**

The next regular meeting of the Board is scheduled for 6:30 p.m., on Tuesday May 3, 2022.

**7.2 Adjournment**

The meeting was adjourned at 7:54 p.m.

Motion #12

*Rationale: Normal Practice*

***Motion: That the Board of Directors hereby adjourns their meeting at 7:54 p.m. on April 5, 2022.***

Moved by: B. Clancey

Seconded by: R. Paul

The motion was carried.