

**MINUTES OF THE ALLIED BOARDS OF DIRECTORS  
MEETING HELD ON  
TUESDAY, JANUARY 24, 2023 AT 6:30 PM  
AGH OCTAGON ROOM – 95 SPRING STREET, ALMONTE**

**PRESENT:**

√	F. Bird	√	T. Moffa
√	A. Champagne	√	D. Oosterhoff
√	C. A. Esnard - Chair	√	D. Perley
√	J. Fournier	√	R. Probert
√	L. Gardiner	√	G. Smith
√	L. Hachey	√	M. Vermette
√	L. Heslop	√	M. Wilson Trider
√	R. Larkin	√	B. Young
√	B. Lowry Bagshaw		

**REGRETS:**

X	G. Buckley	X	J. Milko
X	G. McKillop	X	C. Snyder

**STAFF:**

√	S. Cousineau
√	K. Harbord
√	T. McLelland
√	R. Shaw

**GUESTS:**

√	L. McGreevy, CPDMH Foundation Board Chair
√	A. Roberts, AGH Foundation Managing Director
√	J. Steele, LCPS Superintendent

**Board Education: Medical Staff Credentialing, A. Champagne, COS**

A. Champagne provided an overview of the credentialing process and highlighted the following:

- Legislative Framework
- Process
  - Before an application is considered by MAC
  - Required documents
  - Credentials Committee
  - References / Regional Common Credentialing Letter of Good Standing
- Categories of Medical Staff
- Annual re-credentialing

Questions were raised and answered. Dr. Champagne was thanked for her presentation.


<b>1.0</b>	<b>Call to Order</b>
	The Chair called the meeting to order at 7:20 pm.
<b>2.0</b>	<b>Declaration of Conflict of Interest</b>
	No conflicts were declared.
<b>3.0</b>	<b>Reminder to Consider Ethical Issues</b>
	Directors were reminded to consider ethical issues.

4.0	<p><b>Approval of Agenda</b></p>
	<p><b>IT WAS MOVED AND SECONDED BY THAT THE AGENDA BE APPROVED.</b></p> <p style="text-align: right;"><b><u>MOTION CARRIED</u></b></p>
5.0	<p><b>Chair's Remarks</b></p>
	<p>The Chair addressed the following:</p> <ul style="list-style-type: none"> <li>• As the first meeting of the year, the Chair wished everyone a belated Happy New Year.</li> <li>• Mentioned with regret the passing of Betty Preston. B. Preston was elected to the AGH Hospital Board in June of 2008 and completed a nine-year term ending in June 2017. B. Preston served on various Board Committees, including Quality and Human Resources and served as the AGH Hospital Board representative on the Ottawa Valley Family Health Team (OVFHT) Board. B. Preston also volunteered regularly in the Pharmacy Department. In June 2017 was then elected to the AGH Foundation Board where B. Preston held multiple roles.</li> <li>• Reminded Directors that the meeting evaluation survey (in a Survey Monkey link) has been sent by T. McLelland to be completed after the meeting.</li> <li>• Drew Directors attention to the Inspiration Dinner information included in the AGH Foundation report and encouraged participation.</li> <li>• Invited A. Roberts to provide additional information regarding the AGH Foundation: A. Roberts showed poster boards of the AGH Foundation's rebranding with a new youthful look and tag line: "Your Health. Your Community. Your Hospital.</li> <li>• Invited L. McGreevy to provide additional information regarding the CPDMH Foundation. L. McGreevy congratulated A. Roberts on the rebranding and noted that the CPDMH Foundation is also brainstorming ideas to attract a younger audience as new families move into the area.</li> </ul>
6.0	<p><b>Consent Agenda Matters</b></p>
	<p><b>IT WAS MOVED AND SECONDED THAT THE FOLLOWING ITEMS CONTAINED IN THE CONSENT AGENDA BE APPROVED:</b></p> <ol style="list-style-type: none"> <li>a. Minutes of the Allied Boards of Directors meeting held November 22, 2022</li> <li>b. AGH Financial Statements for the eight month period ended November 30, 2022</li> <li>c. CPDMH Financial Statements for the eight month period ended November 30, 2022</li> <li>d. FRAC Policy IV-5 Resource Allocation</li> <li>e. Updated Governance Policies: <ul style="list-style-type: none"> <li>• Policy II-1 Succession Planning for the President &amp; CEO and Chiefs of Staff</li> <li>• Policy II-2 Delegation of Authority to the President &amp; Chief Executive Officer</li> <li>• Policy II-3 Significant Payments to the Chief Executive Officer</li> <li>• Policy II-7 Chief Executive Officer Expense Reimbursement and Travel</li> <li>• Policy II-10 Whistleblower</li> </ul> </li> </ol> <p style="text-align: right;"><b><u>MOTION CARRIED</u></b></p>
7.0	<p><b>Business Arising from the Minutes</b></p>
	<p>There was no business arising from the minutes.</p> <p>M. Vermette commented in follow up to a discussion held the previous year inquiring to make the minutes gender neutral. It was agreed that the minutes have been very well done and the efforts were appreciated.</p>

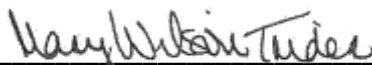
8.0	<p><b>Matters Requiring Decision</b></p> <p><b>8.1 Auditor Engagement ARO</b></p> <p>L. Gardiner reviewed the Memo included in the package and asked if there were any questions. No concerns were raised.</p> <p><b>IT WAS MOVED AND SECONDED THAT AUTHORIZATION OF THE CFO TO SIGN A LETTER OF ENGAGEMENT WITH KPMG TO PROVIDE SERVICES SUPPORTING THE NEW ACCOUNTING STANDARD FOR ASSET RETIREMENT OBLIGATION TO ALMONTE GENERAL HOSPITAL AND CARLETON PLACE AND DISTRICT MEMORIAL HOSPITAL FOR AN AMOUNT OF \$13,000 PLUS HST BE APPROVED.</b></p> <p style="text-align: right;"><b><u>MOTION CARRIED</u></b></p> <p><b>8.2 Policy II-8 Chief of Staff Expense Reimbursement and Travel (new for CPDMH)</b></p> <p>R. Larkin referred to the policy included in the package and noted that the policy was new for CPDMH and that changes to reflect the MRHA within the policy were being recommended. No concerns were raised.</p> <p><b>IT WAS MOVED AND SECONDED THAT POLICY II-8 CHIEF OF STAFF EXPENSE REIMBURSEMENT AND TRAVEL BE APPROVED.</b></p> <p style="text-align: right;"><b><u>MOTION CARRIED</u></b></p>
9.0	<p><b>Matters for Discussion</b></p> <p><b>9.1 Report of the CPDMH Chief of Staff</b></p> <p>The Chair noted that the CPDMH Chief of Staff Report was included in the package and asked if A. Champagne had anything further to report. No questions were raised.</p> <p><b>9.2 Report of the CEO &amp; Senior Team</b></p> <p>M. Wilson Trider noted that the Report was included in the package.</p> <p>R. Shaw reported that completion of HIRF projects is March 31, 2023 however, a request to extend the period for the sprinkler project at AGH has been made.</p> <p>A question was raised regarding the closure of beds at CPDMH due to the sprinkler project at CPDMH. L. Hachey reported that the two hospitals are working together to manage admissions and that the volume demand has not caused any concerns as of yet.</p> <p>An additional question was raised regarding the use of the operating rooms. L. Hachey reported that they are optimized at the best of their ability as there were numerous last minute cancellations during COVID.</p>
	<p><b>9.3 Quality of Care – Good Catch &amp; Quality of Care - Patient Compliment/Concern</b></p> <p>The Interim Vice President Patient &amp; Resident Services and Chief Nursing Executive (the “CNE”) L. Hachey noted that the “Near Miss of the Month” previously reported on has been renamed to “Good Catch” to portray a more positive message. A \$10 cafeteria voucher was provided to a staff member who reported that the nurse to nurse report on a patient transfer from another hospital to the CCC unit did not occur. The staff member followed up with the other hospital and a check list has since been created for AGH and CPDMH to help eliminate this from happening in the future.</p> <p><b>9.4 Quality of Care - Patient Compliment/Concern</b></p> <p>L. Hachey shared a concern received from an ultrasound patient who six months pregnant and felt unsafe waiting in a busy registration line with unwell patients and could not safely distance themselves. A new process for Diagnostic Imaging check in was created to enable patients to call in to</p>

	<p>register and upon arrival proceed directly to the Diagnostic Imaging department. The patient was updated and indicated that they were happy with the timely response.</p> <p>L. Hachey shared positive feedback received from patient who had surgery and expressed that staff were efficient and welcoming.</p>
<b>10.0</b>	<b>Matters for Information</b>
	The Chair noted that the Board Workplan was included for information.
<b>11.0</b>	<b>Other Business/Next Meeting</b>
	<p>There was no other business to discuss. The next meeting will be held on March 28, 2023.</p> <p>L. McGreevy and A. Roberts left the meeting.</p>
<b>12.0</b>	<b>Termination of Closed Session</b>
	The Chair noted that the closed session has been terminated.
<b>13.0</b>	<b>In-Camera Business</b>
	<p><b>IT WAS MOVED AND SECONDED THAT THE MEETING MOVE IN-CAMERA.</b></p> <p style="text-align: right;"><b><u>MOTION CARRIED</u></b></p>

Approved Minutes signed by:



C. A. Esnard, Board Chair



M. Wilson Trider, Secretary