

MINUTES OF THE ALLIED BOARDS OF DIRECTORS
MEETING HELD ON
TUESDAY, MARCH 25, 2025 AT 6:30 PM
CPDMH BOARDROOM

PRESENT:

√	A. Bennett	√	L. Learmonth
√	C. Crosby	√	M. Maidment
√	A. Champagne	√	S. Pirie
√	M. Fortune	√	R. Probert
√	J. Fournier	√	G. Smith
√	L. Gardiner - Chair	√	M. Vermette
√	B. Harrington	√	B. Young
√	K. Kirkpatrick		

REGRETS:

X	M. Bastin-Millar	X	B. Harvey
X	L. Bernes	X	B. Lowry Bagshaw
		X	S. Snow

STAF/GUESTS:

√	R. Arseneau – CPDMH Foundation Executive Director	√	B. Hilker – VP & CFO
√	S. Cousineau – VP HR/Occ Health/Diagnostic Services	√	P. Kenney – CPDMH Foundation Board Chair
√	V. Dimas – AGH Foundation Executive Director	√	S. Persi – Capital Projects Community Member
√	J. Hildebrand – VP Capital Development & Support Services	√	T. McLelland – Executive Assistant (minutes)

1.0 Welcome Guests

The Chair welcomed guests to the meeting.

Education Presentation

B. Harrington and B. Hilker were invited to provide a high-level overview on the MRHA Electronic Medical Record indicating that the Allied Boards will be asked to make a decision regarding what EMR platform is in it's best long-term interests

The following information:

- Why is this important: Ability of Practitioners to deliver effective and efficient care today is dependent on technology and a high functioning integrated EMR system. Improved quality of patient care, provider experience, data analytics, and need for regional alignment.
- Why now: GBIN is seeking substantial increases in investment to advance the Cerner Platform by March 2025. CHAMP Partnership in the region has collapsed and all regional hospitals are joining the Atlas Epic Instance hosted by TOH.
- FRAC is undertaking detailed review\oversight to provide recommendation to the Board in April\May 2025

Questions were raised and answered throughout the presentation.

	<p>B. Harrington and J. Hildebrand were thanked for the very informative presentation.</p> <p>L. Learmonth was invited to provide a presentation on the refreshed Clinical Services Plan. L. Learmonth reviewed the current items continuing and introduced some new areas of focus. The CSP will be monitored and updated throughout the year at the various hospital committees. The three top priorities identified are 1. Electronic Health Record evolution; 2. Workforce planning; 3. Space planning/utilization.</p> <p>L. Learmonth referred to the tracking document and indicated that a formal recommendation for approval will be presented at the next Board Quality and Allied Boards meeting.</p> <p>L. Learmonth was thanked for the presentation.</p>
2.0	Approval of Agenda
	<p>IT WAS MOVED BY AND SECONDED THAT THE AGENDA BE APPROVED.</p> <p style="text-align: right;"><u>MOTION CARRIED</u></p>
3.0	Chair’s Remarks
	<p>The Chair addressed the following:</p> <ul style="list-style-type: none"> • Reminded Directors to complete their meeting evaluation which T. McLelland will be sending out after the meeting. • Indicated that calendar invites have been sent out for the various Strategic Planning Sessions and Board Retreat and that all dates are posted on the Board Portal on the “Board of Directors” landing page. • Asked V. Dimas if there was anything to add to the AGH Foundation Report which was included in the package. V. Dimas added that they are currently recruiting two Directors. • Asked P. Kenny if there was anything to Report on behalf of the CPDMH. P. Kenney indicated that there was a video included in the report of the CPDMH new ED for those who were not able to take part in the celebrations or previews of the space. • Informed Directors that advertisements have been placed for recruitment of Allied Boards of Directors.
4.0	Consent Agenda Matters
	<p>IT WAS MOVED AND SECONDED THAT THE FOLLOWING ITEMS CONTAINED IN THE CONSENT AGENDA BE APPROVED:</p> <ul style="list-style-type: none"> a. Minutes of the Allied Boards of Directors Meetings held January 28, 2025 b. AGH Financial Statements for the 10-month period ended January 31, 2025 c. CPDMH Financial Statements for the 10-month period ended January 31, 2025 d. LCPS Financial Statements for the 1 month ended January 31, 2025 e. Authorization of the CEO to sign the LSAA Declaration of Compliance for the period dated January 1, 2024 to December 31, 2024 <p style="text-align: right;"><u>MOTION CARRIED</u></p>
5.0	Business Arising from the Minutes
	There was no business arising from the minutes.
6.0	Matters Requiring Decision
	6.1 AGH/CPDMH/FVM 2025/26 Quality Improvement Plan
	<p>L. Learmonth referred to the information included in the package and indicated that in preparation for the annual QIP, the draft is reviewed by several hospital committees including Patient Care/Quality and Integrated Risk Management, Medical Advisory Committees, Patient and Family Advisory Committee and the Board Quality Committee. Final approval is being recommended to the Allied Boards of Directors. L. Learmonth reviewed the contents of the QIP. No concerns were raised.</p> <p>IT WAS MOVED AND SECONDED BY THAT THE 2025-2026 QUALITY IMPROVEMENT PLAN FOR</p>

AGH/FVM AND CPDMH BE APPROVED.

MOTION CARRIED

6.2 Hospital Service Accountability Amending Agreements (AGH & CPDMH)

M. Vermette referred to the briefing note included in the package and indicated that they were discussed further at FRAC but that there were no changes to the agreements, they were simply extensions from the previous year. No questions were raised.

IT WAS MOVED AND SECONDED THAT AUTHORIZATION OF THE CEO TO SIGN THE HOSPITAL SECTOR ACCOUNTABILITY AGREEMENT AMENDING AGREEMENT ON BEHALF OF ALMONTE GENERAL HOSPITAL BE APPROVED.

MOTION CARRIED

IT WAS MOVED AND SECONDED THAT AUTHORIZATION OF THE CEO TO SIGN THE HOSPITAL SECTOR ACCOUNTABILITY AGREEMENT AMENDING AGREEMENT WITH A SUPPORTING LETTER IDENTIFYING AN ANTICIPATED OPERATIONAL DEFICIT ON BEHALF OF CARLETON PLACE & DISTRICT MEMORIAL HOSPITAL BE APPROVED.

MOTION CARRIED

6.3 Long Term Care Service Accountability Amending Agreement

M. Vermette referred to the memo included in the package and noted that the schedules to the LSAA have been updated with the required obligations. Management has reviewed the obligations and anticipates meeting the requirements with the exception of the Debt Coverage ratio which has not historically been met. No concerns were raised.

IT WAS MOVED AND SECONDED THAT AUTHORIZATION OF THE ALLIED BOARDS CHAIR AND THE CEO TO SIGN THE LONG-TERM CARE SECTOR ACCOUNTABILITY AMENDING AGREEMENT WITH A SUPPORTING LETTER IDENTIFYING THAT THE DEBT SERVICE RATIO WILL NOT BE MET FOR THE PERIOD APRIL 1, 2025 TO MARCH 31, 2026, ON BEHALF OF THE ALMONTE GENERAL HOSPITAL BE APPROVED.

MOTION CARRIED

6.4 2025/2026 Operating Budget (AGH)

M. Vermette commended B. Hilker on executing a thoughtful process to engage the Senior Team, Department Managers and the MAC's in which feedback was received by all.

B. Hilker reviewed the AGH Operating Budget noting that several assumptions have been made. A discussion was held.

IT WAS MOVED AND SECONDED THAT THE 2025/26 OPERATING BUDGET PRESENTED ON BEHALF OF ALMONTE GENERAL HOSPITAL BE APPROVED.

MOTION CARRIED

6.5 2025/26 Capital Budget (AGH & CPDMH)

M. Vermette reported that FRAC has reviewed and is recommending the 2025/26 Capital Budget and that the priority of clinical and non-clinical equipment was reviewed with the Senior Team, Department Managers and the MAC's.

M. Vermette noted the commitment of the two Foundations and thanked them for their continued commitment of funding capital equipment. M. Vermette also thanked all the Directors who donate to the foundations.

A discussion was held regarding purpose of a Contingency and B. Hilker informed that it is a mechanism for emergency items not previously approved in the Capital Budget.

IT WAS MOVED AND SECONDED THAT THE AGH 2025/26 CAPITAL BUDGET AS PRESENTED EXCLUDING THE EMR AND INCLUDING A \$100,000 GENERAL CONTINGENCY BE APPROVED.

MOTION CARRIED

IT WAS MOVED AND SECONDED THAT THE CPDMH 2025/26 CAPITAL BUDGET AS PRESENTED EXCLUDING THE EMR AND INCLUDING A \$100,000 GENERAL CONTINGENCY BE APPROVED.

MOTION CARRIED

The Chair thanked everyone involved in the budget process at all levels.

6.6 Borrowing Resolution

M. Vermette referred to the Briefing Note included in the package regarding a borrowing resolution which is required to be updated annually. The line of credit no longer needed as been removed.

No concerns were raised.

IT WAS MOVED AND SECONDED THAT AUTHORIZATION ANY TWO OF THE ALLIED BOARDS CHAIR, VICE-CHAIR, CEO AND CFO TO BORROW ON BEHALF OF CARLETON PLACE & DISTRICT MEMORIAL HOSPITAL, AN AMOUNT NOT TO EXCEED \$1,555,000 AT ANY ONE TIME TO MEET OPERATING EXPENDITURES OF THE CORPORATION UNTIL CURRENT REVENUE HAS BEEN RECEIVED, OR TO FUND CAPITAL EQUIPMENT PURCHASES AND THE EMERGENCY DEPARTMENT REDEVELOPMENT PROJECT UNTIL CAPITAL FUNDING HAS BEEN RECEIVED BY UTILIZING ANY OF THE OPERATING CREDIT LINES, LETTER OF CREDIT, PROMISSORY NOTE, SCOTIA LEASING DOCUMENTS OR SCOTIA BUSINESS CARD AGREEMENT FOR THE PERIOD APRIL 1, 2025 TO MARCH 31, 2026 BE APPROVED.

MOTION CARRIED

6.7 2025/2026 MRHA Corporate Goals

B. Young reported that the Governance Committee met to discuss the draft Corporate Goals for 2025-26 and noted that they were drafted by the Leadership and Senior Team together. It was agreed that the Goals are challenging but achievable and have been drafted in words that all can understand. Questions were raised and answered.

IT WAS MOVED AND SECONDED THAT THE 2025/2026 MRHA CORPORATE GOALS BE APPROVED.

MOTION CARRIED

6.8 2025/2026 Allied Boards Goals

B. Young referred to the Briefing Note included in the package and referenced the recommended Board Goals from the various Committees. B. Young thanked the Committees for their work on the proposed Goals. It was noted that these Goals are necessarily Goals that will be completed in 12 months and could be carried over. A discussion was held regarding monitoring the Goals and providing a red/yellow/green status when updates are provided by the Allied Boards Committees. No concerns were raised.

IT WAS MOVED AND SECONDED THAT THE 2025/2026 ALLIED BOARDS GOALS BE APPROVED.

MOTION CARRIED

6.9 MRHA Risk Management – Top 10 Risk Register

The CEO referred to the Briefing Note included in the package and reported that in 2023/24 the Risk Management framework was developed by Management and approved by the Allied Boards of Directors. In November 2023, the top 10 risks (Risk Register) were reviewed and re-approved by the

The CEO reminded the Directors that they have a fiduciary responsibility to ensure there is a risk management framework in place for the MRHA.

The CEO highlighted the updates to the Risk Register. A discussion was held regarding using mechanisms to filter and modify risk rankings.

IT WAS MOVED AND SECONDED THAT REFRESHED MRHA RISK MANAGEMENT - TOP 10 RISK REGISTER

	DATED MARCH 2025 BE APPROVED.	<u>MOTION CARRIED</u>
7.0	Matters for Discussion	
	7.1 Report of the AGH Chief of Staff	
	M. Fortune did not have anything further to report. A discussion was held regarding the move of Ambulatory Care Clinics out of the Emergency Department and into a new location sharing with the OBS/GYN clinics.	
	7.2 Report of the CPDMH Chief of Staff	
	A. Champagne did not have anything further to report but noted the recommendation to authorize the Boards Chair to send a letter of appreciation to R. Suttie for the leadership provided as Chief of the CPDMH Emergency Department. The Directors confirmed their agreement that a letter be sent. A question was raised regarding space barriers and recruitment of specialists. Dr. Champagne indicated that CPDMH offers the bulk of Ambulatory Care clinics which is valuable asset to patients and also to the family physicians who refer their patients to them. There are some barriers regarding space and stress on human health resources as the clinics grow. No further questions were raised.	
	7.3 Report of the CEO & Senior Team	
	B. Harrington noted that the Report was included in the package. A question was raised regarding the status of the Family Health Organization (FHO) Exemption. Dr. Champagne informed that this matter is being monitored with concern as loss of exemption status would have significant implications for Medical Staffing Inpatient coverage at CPDMH and would require significant advocacy from the MRHA and potentially an alternate staffing model to be implemented.	
	7.4 Quality of Care – Good Catch	
	L. Learmonth referred to the two “Good Catches” included in the package for information.	
	7.5 Quality of Care - Patient Compliment/Concern	
	L. Learmonth shared a concern received from a mother who was in the Emergency Department with their son who was in an altercation with other 2 other teenagers involving weapons. They had all received care and the OPP was on-site to investigate. The event was traumatic for all. The mother had heard a discussion amongst the nursing staff and antidotally from other staff talking during their shifts implicating their son without any proof. The Manger of the ED investigated speaking to all involved and assured the mother that there were no accusations being made. The mother was satisfied with the response. L. Learmonth shared a compliment which was received from a community member who called for an ambulance. They stated that the LCPS is a professional service who responded quickly, were composed, compassionate and waited with them until a bed was ready and wanted to make sure they were recognized for a job well done.	
8.0	Matters for Information	
	The Chair noted the Allied Boards Workplan included in the package for information.	
9.0	Other Business	
	The Chair wished goodnight to S. Persi, P. Kenny, R. Arseneau, V. Dimas, B. Hilker, S. Cousineau and L. Learmonth who all left the meeting.	
	9.1 Elected Members Discussion with CEO & COS’s	
	IT WAS MOVED AND SECONDED THAT THE MEETING MOVE IN-CAMERA.	<u>MOTION CARRIED</u>

9.1.1 AGH Chief of Staff 2025-2026 Goals

L. Gardiner noted that Directors would have read the Executive Committee minutes in the In-camera package recommending approval of the proposed AGH COS Goals and asked Directors if they had any questions for M. Fortune. It was noted that the Chief was onboarded after the March 2024 timeline for COS approval of Goals and these Goals were approved at the November meeting.

M. Fortune informed that the Goals are on track for spring completion and that results will be provided at the next meeting and in line with the policy. New Goals will also be submitted at the next Allied Boards meeting.

A discussion was held regarding the ongoing problem solving with the CPDMH COS on multiple areas and that a possible alignment in one or two Goals would be welcomed.

IT WAS MOVED AND SECONDED THAT THE 2025-2026 AGH CHIEF OF STAFF GOALS & OBJECTIVES BE APPROVED.

MOTION CARRIED

9.1.2 CPDMH Chief of Staff 2025-2026 Goals

L. Gardiner noted that Directors would have read the Executive Committee minutes in the In-camera package recommending approval of the proposed CPDMH COS Goals and asked Directors if they had any questions for A. Champagne. The Directors noted that they were pleased to see two Goals encompassing collaboration. No concerns were raised.

IT WAS MOVED AND SECONDED THAT THE 2025-2026 CPDMH CHIEF OF STAFF GOALS & OBJECTIVES BE APPROVED.

MOTION CARRIED

9.2 Elected Members Discussion with CEO

9.2.1 CEO 2025-2026 Goals & Objectives

L. Gardiner noted that Directors would have read the Executive Committee minutes in the In-camera package recommending approval of the proposed CEO Goals and asked Directors if they had any questions for B. Harrington.

B. Harrington reported that the 2024/2025 Goals have been completed and will be reported on at the next Board meeting as per policy timelines.

The Chair expressed that the Goals were clear, identifiable and measurable. No concerns were raised.

IT WAS MOVED AND SECONDED THAT THE 2025-2026 CEO GOALS & OBJECTIVES BE APPROVED.

MOTION CARRIED

The Chair wished goodnight to A. Champagne, M. Fortune and T. McLelland who all left the meeting.

Directors continued an in-camera discussion with the CEO. No minutes were recorded.

B. Harrington left the meeting.

9.2 Elected Members Only Discussion

Directors continued an in-camera discussion. No minutes were recorded.

IT WAS MOVED AND SECONDED THAT THE MEETING MOVE OUT OF CAMERA.

MOTION CARRIED

10.0 Next Meeting /Adjournment

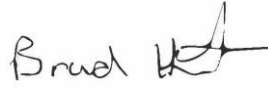
L. Gardiner indicated that the next Allied Boards meeting will be held on June 10, 2025.

IT WAS MOVED BY A. BENNETT THAT THE MEETING BE ADJOURNED.

Approved Minutes signed by:



L. Gardiner, Allied Boards Chair



B. Harrington, Allied Boards Secretary