

MINUTES OF THE OPEN MEETING OF THE LAKERIDGE HEALTH BOARD OF TRUSTEES HELD ON THURSDAY,
DECEMBER 19, 2024 (920 CHAMPLAIN COURT, WHITBY / BOARDROOM A/ VIA MICROSOFT OFFICE TEAMS).

Voting Members:					
P	Cordelia Clarke Julien, Chair	P	Lewis Hooper	P	Ijade Maxwell Rodrigues
P	Christine Ashton	P	Duncan Mathieson	P	Bill Sims
P	Melissa Belliveau	P	Mark Mulima	P	Mary Flindall-Simpson
P	Shashi Bhatia	P	Steven Murphy	P	Dr. Kirk Stewart
P	Scott Briggs	P	Anita Neeson	P	Rachel Traore-Takura
P	Peter Hobb	R	Anuj Pasrija		
Other Members:					
P	Cynthia Davis (Ex Officio)	P	Dr. Randy Wax (Ex Officio)	P	Dr. Megha Suri (Ex Officio)
P	Petrina McGrath (Ex Officio)	P	Dr. Julie Ann Francis (Ex Officio)	P	Sharon Pye, (Recorder)
R	Dr. Rebecca Wray				
Guests:					
P	Chris Squire	P	Tabitha Carrol	P	Cheri Smith
P	Annette Down	P	Pauline Warden	P	Nancy Shaw
P	Shara Santan	P	Dr. Nadia Ismiil	P	Hanna ter Weeme
P	Brian Pollard	P	John Perenack		
P= Present R=Regrets TC= teleconference					

1. LAND ACKNOWLEDGEMENT

C. Ashton shared the Land Acknowledgement which included her reflections and commitment to reconciliation.

2. CALL TO ORDER

2.1 Strategic Planning at a Glance

The Strategic Plan at a Glance outlines the strategic directions and annual priorities. This document is included in the package each month and is meant as a reminder to help ensure the Board of Trustees remains aligned with the organization's strategic goals and objectives.

2.2 Declaration of Conflict of Interest

No conflict of interest was declared.

2.3 Approval of Agenda

MOTION: It was MOVED by L. Hooper and SECONDED by D. Mathieson that the Board of Trustees approves the revised Open Agenda for the Lakeridge Health Board of Trustees meeting held December 19, 2024.

CARRIED

3. DISCUSSION AGENDA

3.1 Strategic Planning Approach

The organization is in the planning phase of its next a strategic planning cycle. A high-level overview of the timeline and process was shared with the Board.

Discussion focused on whether the existing mission, vision, and values remain appropriate or require updates. Specifically, whether the mission, which emphasizes "empowering patients for best health," adequately reflects the organization's broader role in providing care. It was noted that the mission could benefit from language that better captures its essence, balancing empowerment with the caring aspect of its operations. However, it was recognized that any update to the mission, vision, or values is potentially complex and requires extensive community engagement. Further discussion will take place at the February 2025 Governance Committee meeting, ensuring alignment as we move into the strategic planning phase.

3.2 Financial Update

The organization faced a year-to-date deficit at the end of October, but retroactive funding announcements will significantly impact this figure. Issues like overtime and sick time have been closely monitored, with a temporary rise in October following the implementation of a new scheduling system. Encouragingly, compensation levels for November returned to September norms. However, November's sick time data increased, reflecting seasonal trends tied to respiratory illnesses affecting staff and the public. These fluctuations are expected to stabilize, and overall, the outlook on these challenges is cautiously optimistic.

3.3 Affiliate Designation

The discussion revolved around a new affiliation category designed to formalize relationships with healthcare providers, researchers, and educators without granting them hospital privileges. This approach was proposed to expand collaborative opportunities, particularly in family and community medicine, while managing risk and administrative burden. Unlike privileged staff, affiliates would not be covered under the Public Hospitals Act, avoiding the complexities of credentialing, and allowing for a more flexible, less permanent arrangement. This category is seen as beneficial for fostering external relationships without overextending hospital obligations.

Legal counsel reviewed the process and confirmed its compliance with regulations, emphasizing that it posed less liability than granting privileges or having no formal structure. The policy includes a vetting process, particularly for unregulated professionals, with provisions for background checks if necessary. Some board members expressed concerns about criteria for background checks, noting potential risks and inconsistencies, while others compared the process to that for hospital volunteers, where police checks are mandatory. It was agreed that background checks will be necessary for Affiliate Designation positions.

Ultimately, the board recognized the importance of balancing access and risk, ensuring due diligence for affiliates while maintaining flexibility. The new process formalizes a framework for collaborations already occurring, streamlining relationships and enhancing oversight.

4. CONSENT AGENDA: FOR DECISION

4.1 Board of Trustees Draft Open Meeting Minutes: October 17, 2024

MOTION: It was MOVED by R. Traore-Takura and SECONDED by P. Hobb that the Board of Trustees approves the Board open meeting minutes for the Lakeridge Health Board of Trustees Meeting of October 17, 2024.

This item has been deferred to the next Board of Trustees meeting.

4.2 Recommended by Resources Committee

4.2.1 Scope Change: Upgrading SAP Software

MOTION: As RECOMMENDED by the Resources Committee, the Board of Trustees APPROVES the change in scope and cost associated with the SAP upgrade previously recommended for approval at the December 2, 2022 Resources Committee meeting.

- Whereas Lakeridge Health is one of seven health organizations currently partnered with Mohawk Medbuy and engaged in upgrading a shared software platform for procurement and accounting;
- Whereas the group of seven health organizations voted to approve a change in scope based on recommendations from the project working group;
- Whereas the Board of Trustees has previously approved a project budget of \$4,500,000;
- Whereas no additional scope changes are anticipated for the project;
- It was MOVED by M. Belliveau and SECONDED by S. Bhatia that as recommended by the Resources Committee, the Board of Trustees approves an increase of \$750,000 to the SAP upgrade project budget, bringing the total project capital approval from \$4,500,000 to \$5,250,000, exclusive of HST.

CARRIED

4.2.2 Bowmanville Hospital Redevelopment – Release of Request for Proposals

MOTION: It was MOVED by P. Hobb and SECONDED by R. Traore-Takura that as recommended by the Resources Committee, the Board of Trustees approves to proceed with issuance of the Request for Proposals (RFP) for the Lakeridge Health Bowmanville Redevelopment Design, Build, Finance partner, following completion of the Request for Qualification (RFQ) process.

BE IT RESOLVED THAT:

The Lakeridge Health Resources Committee recommends that the Lakeridge Health Board of Trustees hereby approves the results of the RFQ evaluation process and the release of the RFP for the Lakeridge Health Bowmanville Redevelopment Project using a Design, Build and Finance delivery model to the Pre-Qualified Proponents (as defined in the RFP), being a) Bowmanville Health Partners, and b) PCL Partnerships, subject to:

- Prequalification of the Mechanical and Electrical subcontractors for the Pre-Qualified Proponents; and

- Prior approval of the Ministry of Health (“MOH”) and Infrastructure Ontario board of Directors.

CARRIED

4.2.3 Bowmanville Hospital Redevelopment Early Works Submission Signoff

MOTION: It was MOVED by Dr. K. Stewart and SECONDED by B. Sims that as recommended by the Resources Committee, the Board of Trustees approves the Lakeridge Health Chair of the Board of Trustees and President & Chief Executive Officer (CEO) to approve and sign the Ministry of Health Hospital (Traditional) Technical Submission Checklist for the Bowmanville Redevelopment Early Works project, submitted on November 13, 2024.

CARRIED

4.2.4 Laboratory Equipment, Reagents and Service

MOTION: Whereas the current chemistry analyzer equipment in LHAP has reached its end of life and the Capital Management Committee has approved replacing the equipment;

It was MOVED by M. Mulima and SECONDED by M. Flindall-Simpson that as recommended by the Resources Committee, the Board of Trustees approves securing a contract with Siemens Healthineers via non-competitive procurement. This approach will ensure consistency, standardization of equipment across all LH laboratory sites. The total estimated value of a ninety-six-month contract is \$3.2M.

CARRIED

4.3 Recommended by Governance Committee

4.3.1 2024/25 Resources Committee Work Plan

MOTION: It was MOVED by I. Maxwell Rodrigues and SECONDED by C. Ashton that as recommended by the Governance Committee, the Board of Trustees approves the 2024/25 Resources Committee Work Plan.

CARRIED

4.3.2 2024/25 Board Work Plan

MOTION: It was MOVED by S. Murphy and SECONDED by S. Briggs that as recommended by the Governance Committee, the Board of Trustees approves the 2024/25 Board Work Plan.

CARRIED

4.4 Recommended by Quality Committee

4.4.1 2025/26 Annual Business Plan (ABP)

MOTION: It was MOVED by Dr. K. Stewart and SECONDED by B. Sims that as recommended by the Quality Committee, the Board of Trustees

approves the 2025/26 Annual Business Plan (ABP) and Corporate Scorecard measures and targets.

CARRIED

5. CONSENT AGENDA: FOR INFORMATION

MOTION: It was MOVED by A. Neeson and SECONDED by B. Sims to receive the Lakeridge Health Board of Trustees December 19, 2024, Consent Agenda for Information Items 5.1 – 5.13.

- 5.1 Board Chair Report
- 5.2 Chief Executive Officer Report
- 5.3 Chief of Staff Report
- 5.4 Governance Committee Draft Meeting Minutes: December 4, 2024
- 5.5 Resources Committee Draft Meeting Minutes: December 6, 2024
- 5.6 Quality Committee Draft Meeting Minutes: December 5, 2024
- 5.7 IDEAA Committee Draft Meeting Minutes: December 3, 2024
- 5.8 Medical Advisory Committee Draft Meeting Minutes: November 26, 2024
- 5.9 Board Committee Chair Consolidated Report
- 5.10 Peer Evaluation Process
- 5.11 Governance Review Recommendations
- 5.12 Board Evaluation: 2024 OHA Board Assessment Survey Results and Action Plan
- 5.13 Lakeridge Health's Five-Year (2023-2028) Accessibility Plan

CARRIED

MOTION TO MOVE IN-CAMERA

MOTION: It was MOVED by D. Mathieson and SECONDED by L. Hooper to move in-camera.

CARRIED

6. IN-CAMERA MATTERS

MOTION TO COME OUT OF IN-CAMERA

MOTION: It was MOVED B. Sims and SECONDED by Dr. K. Stewart to come out of in-camera.

CARRIED

MOTION TO APPROVE ACTIONS TAKEN IN-CAMERA

MOTION: It was MOVED by C. Ashton and SECONDED by I. Maxwell Rodrigues to accept actions taken in-camera.

CARRIED

7. TERMINATION OF MEETING

7.1 Next Meeting: February 20, 2025

7.2 Adjournment

MOTION: It was MOVED by S. Briggs and SECONDED by S. Murphy that the Board of Trustees approves adjournment of the meeting of December 19, 2024.

CARRIED



Cordelia Clarke Julien, Chair