

## Report of the Chair Annual General Meeting 2019

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It is a privilege to be here today to not only reflect on the progress through 2018-2019, but also to reflect on the pride that I share with my fellow Board members in this hospital—a hospital that aspires to provide exceptional care and patient experience to every patient—every time thereby meeting the standards of an exemplary hospital as designated by accreditation Canada.

I have spoken in the past about the old Chinese blessing of “may you live in interesting times” and this year was no exception—from changes in the Senior Leadership in the hospital to the evolution of our joint health information initiative to the changes in the health care environment initiated by the provincial government.

Anchored by the 2018-2021 strategic plan identifying priorities of patient and family experience, sustainability, quality and safety and engagement, the hospital proved to be up to the challenges of adapting to these interesting times thanks to dedicated leadership, staff, board members, volunteers and strong partnerships.

The patient and family experience is what we measure ourselves against, but our energy is focused on putting in place the right foundation to help ensure that the hospital is in position to provide that exceptional care. One of the elements of that foundation that we identified in our strategic plan is the strengthening relationships with our partners. The recent provincial legislation entitled “The Connected Care Act of 2019” presents opportunities to further align our services with others in pursuing even better and more integrated care to individuals and families throughout our region. Needless to say this means the health care landscape is evolving, creating uncertainties about the future status quo. However, the objectives match those laid out in our plans and the hospital and its physicians are actively engaged at multiple levels, currently exploring opportunities to work within the new Ontario Health Team initiatives as announced by the province.

It is important to note that our organization is extremely well placed to participate in integration models as it already has successfully integrated 3 elements of the six laid out by the province for Ontario Health Teams including the hospital, mental health and support services. Moreover, Lanark County Sexual Assault and Domestic Violence is led within our organization by Mary Pat Bingley in a compassionate and professional manner.

Another element of that foundation is modern technology—including an effective health information system—one that permits health professionals to access information, share records with other health care providers in a timely manner (and eliminate the possibility of errors and inefficiencies of repeated manual data entry). Significant efforts are currently underway to replace the existing system --put in place in the early 1990s—in a collaborative effort with five other hospitals in South Eastern Ontario. Hopefully by this time next year we will be able to report that implementation is underway.

The foundational changes do not come without a cost however—and the current projection is that our capital costs have roughly doubled over the next 10 years, factoring in the acquisition of PSFDH’s share of the new Health Information System. The hospital has spent a great deal of effort engaging the public in the past year to more clearly articulate the challenges of funding capital requirements—specifically, that these requirements are not typically addressed by the province, but rather by the communities through the two foundations supporting our hospital. This outreach has taken two tracks: the first to our municipal partners where four local governments budgeted contributions of over \$500,000, bringing us halfway to our target for annual municipal funding. In addition, a Capital Alliance was formed among the hospital, the GWM and the Smiths Falls Foundations to look to new ways of meeting the enhanced requirements. The growing awareness of these challenges was enhanced by Lake 88’s initiative to hold a Radiothon in May 2019.

The hospital’s fiscal sustainability challenges are not limited to capital requirements but also to operating requirements due to the adverse impacts of the province’s existing medium sized hospital funding formula—as Barry will discuss.

Overall, we can look back on the past year as one in which significant progress has been made and it is again with pride that I reflect on the strength and compassion of the people and groups who shape and have shaped this hospital—our leaders, our physicians, our people, our volunteers, our foundations and auxiliaries, our patients, our partners and our community—so it can continue to advance through changing times to provide exceptional care.

In January, Bev McFarlane, our CEO who had been on extended medical leave, stepped aside from her role, having left behind a legacy of a culture embedded in high quality and compassionate care so that others could pick up the baton and carry on. And although she has been absent for over a year her presence is still strongly felt. Among those who carried the baton were the Vice-Presidents (Brian Allen, Nancy Shaw and Michele Bellows) who rotated through the role as President and CEO through to the fall. As Bev’s leave was extended, Vickie Kaminski with CEO and Executive experience in health care across Canada and globally rounded out the Leadership team as Acting CEO—applying her vast experience to connecting with health leaders in the province, coaching individuals, engaging physicians and working towards efficiencies in a changing environment as well as leading the hospital. We are truly grateful for her immense contribution. And now, we welcome Barry Guppy who has already hit the ground running—his background as a neurologist, Chief of Staff, temporary CEO at the Central LHIN and Ministry advisor, all provide him with strong and broad experience—but even more importantly, he has drive and vision and the ability to engage partners inside and outside of the hospital. I believe we are in good hands to face the future.

It is not only the executive team who provided leadership—and the last year has proven that in spades. Kate Stolee was an extremely strong support to the Executive Team and took her Chief of Staff responsibilities to a new level in this her first year in the role. Management stepped up to fill gaps and often leadership was demonstrated at a peer-to-peer level. As mentioned earlier, whether it involves housekeeping, infrastructure, direct patient care or administration, there is commitment by our people to our patients and families. And, when I refer to “our people” I refer not only to staff, but to the volunteers who provide endless hours and effort and to our patients who advise on multiple issues.

Our foundations and auxiliaries at each of the two sites are important partners (maybe even family members!) and are often viewed as the front face of our community engagement. I would like to extend thanks for years of strong partnerships and look forward to more of the same.

Patients and families give us feedback on their experience, helping us to continuously improve—in fact some participate as members of our Patient and Family Advisory Committee and some actively contribute to our Board Committees, grounding the Board’s perspective in what really matters.

My fellow Board members are a strongly committed group of individuals, bringing their unique perspectives and experience to the table to continually look to the future, while providing oversight to the hospital. As will be noted by the Committee Chairs, many have gone above and beyond in the past year and I would like to echo our appreciation. Moreover, I would like to take a moment to acknowledge the extensive contribution that Cheryl Beckett has made to our Board over the last nine years—in various roles including Vice Chair of the Board, Chair of the Finance Committee and effectively our legal advisor andrewriter of bylaws! She will be sorely missed.

At the same time I would like to welcome Conny Menger and Christina Dolgowicz to our Board and thank them in advance for their upcoming contribution.

I would like to also acknowledge that, as most of you know, Brian Allen, our Vice President and CFO, retired effective May 31, 2019 but has continued to support PSFDH until a successor has been selected. Brian has spent the past several years working with PSFDH, ensuring that we are on a sound financial footing, allowing us to provide the quality of care that our community relies upon. It has not always been easy but we have been fortunate to have Brian's skills and ability to guide us through the business of financing our hospital.

Finally, I cannot close without highlighting individuals who have made significant contributions to our hospital and are moving on or have moved on in the past year and those who have:

- Michele Bellows our former CNE who is now CEO of the Rideau Community Health Centre—we look forward to future collaborative partnerships with her and her team and welcome Nancy Shaw to her new role as CNE
- Aubrey Churchill leaving as Chair of the GWM Foundation and to Paul Martin incoming Chair
- Diana McDonnell leaving as Executive Director of Lanark County Mental Health and the new Executive Director Rebecca Fromowitz; and
- Debi McEwen retiring from the position of Executive Director of Lanark County Support Services and welcoming Heidi Bedor as the new ED.

Respectfully submitted,  
Donna Howard  
Chair, Board of Directors