

**BOARD OF DIRECTORS MEETING**

**OPEN SESSION**

Thursday, May 27, 2021

5:30 pm – La Verendrye General Hospital / GoToMeeting

**A G E N D A**

Item	Description	Page
1.	Call to Order – 5:30 pm – Indigenous Acknowledgment & Reading of the Mission Statement 1.1 Quorum 1.2 Conflict of Interest and Duty	
2.	Consent Agenda 2.1 Board Minutes – April 29, 2021 * Pg 4 2.2 Board Chair & Senior Leadership General Report – J. Ogden, H. Gauthier, J. Loveday, C. Larson, Dr. K. Eltawil* Pg 6 2.3 Governance Committee Report – J. Begg – No Report 2.4 Audit & Resources Committee Report – D. Robinson * Pg 8 2.5 Quality Safety Risk Committee Report – S. Weir * Pg 11 2.6 Riverside Foundation for Health Care Report * Pg 13 2.7 Auxiliary Reports * Pg 20	
3.	Motion to Approve the Agenda	
4.	Patient / Resident Safety Moment	
5.	Business Arising - None	
6.	New Business - None	
7.	Opportunity for Public Participation	
8.	Move to In-Camera	
9.	Other Motions/Business	
10.	Date and Location of Next Meeting: June 22, 2021	
11.	Termination	

\* denotes attached in board package / \*\*denotes circulated under separate cover / \*\*\* denotes previously distributed



**BOARD OF DIRECTORS MEETING  
ANTICIPATED MOTIONS – OPEN SESSION**

**Thursday May 27, 2021**

3.	Motion to Approve the Agenda	THAT the RHC Board of Directors approve the Agenda as circulated/amended
8.	Move to In-Camera	THAT the RHC Board of Directors move to in camera session at (time)
9.	Other Motions/Business	
11.	Termination	THAT the RHC Board of Directors meeting be terminated at (time)

**Indigenous Acknowledgment:**

*Riverside acknowledges that the place we are meeting today is on the traditional lands of the Anishinaabeg people, within the lands of Treaty 3 Territory, as well as the home to many Métis.*

*Our Mission*  
Improving the health of every person we serve,  
responding to the needs of our communities.

# MISSION

**VISION** *Our Vision*  
Innovative, high quality health care - inspired  
and delivered by our team and partners.

*Our Values* **VALUES**  
Integrity • Respect • Excellence • Growth

# STRATEGIC PILLARS

Quality • Organizational Health • Partnerships • Advocacy

RIVERSIDE HEALTH CARE

**RIVERSIDE HEALTH CARE FACILITIES INC.  
MINUTES  
OPEN SESSION**

**Date of Meeting:** April 29, 2021

**Time of Meeting:** 5:30 pm

**Location of Meeting:** La Verendrye General Hospital – Board Room/GoToMeeting

**PRESENT:** H. Gauthier\*                      D. Robinson\*                      J. Ogden\*                      B. Norton\*  
K. Lampi\*                                      Dr. K. Eltawil\*                      C. Steiner\*                      J. Begg \*  
S. Weir\*    G. Copenace\*                      \*via OTN/teleconference/GoToMeeting

**STAFF:** J. Loveday\*, B.Booth\*, C. Larson\*

**REGRETS:** Dr. V. Patel

**1. CALL TO ORDER:**

J. Ogden called the meeting to order at 5:30 pm. B.Booth recorded the minutes of this meeting. J. Ogden read the Indigenous Acknowledgment and D. Robinson read the Mission Statement. Joanne shared she laid tobacco today wishing for a good meeting this evening. Joanne welcomed everyone and reminded all of the GoToMeeting etiquette. Joanne introduced Gus Copenace and welcomed him to the Board of Directors.

**1.1 Quorum**

Joanne shared there were no regrets. Quorum was present.

**1.2 Conflict of Interest**

No conflict of interest or duty was declared.

**2. CONSENT AGENDA**

The Chair asked if there were any items to be removed from the consent agenda to be discussed individually. There were no items removed.

**3. MOTION TO APPROVE THE AGENDA:**

It was,

MOVED BY: D. Robinson

SECONDED BY: C. Steiner

THAT the Board approves the Agenda as circulated.

CARRIED.

**4. Patient / Resident Safety Moment**

This item was moved to the In Camera session.

**5. BUSINESS ARISING:**

There was no business arising.

**6. NEW BUSINESS:**

There was no new business.

**7. OPPORTUNITY FOR PUBLIC PARTICIPATION**

There was no public participation.

**8. MOVE TO IN-CAMERA:**

It was,

MOVED BY: J. Begg

SECONDED BY: D. Robinson

THAT the Board go in-camera at 5:32 pm.

CARRIED.

**9. OTHER MOTIONS/BUSINESS:**

There was no other motions/business.

**10. DATE AND LOCATION OF NEXT MEETING:**

May 27, 2021

**11. TERMINATION:**

It was,

MOVED BY: D. Robinson

THAT the meeting be terminated at 6:57 pm.

CARRIED.

\_\_\_\_\_  
Chair

\_\_\_\_\_  
Secretary/Treasurer



## Board Chair, Chief of Staff & Senior Leadership Report – May 2021 Open Session

### Strategic Pillars & Directions

#### Quality

- **Long Term Care Conference**

The CEO, EVP of Clinical Services and both the Rainy River and Rainycrest Administrator attended the AdvantAge Ontario Virtual Conference for Long Term Care May 5-6, 2021. The conference offered a highly interactive approach as you could video conference in small groups with vendors and other participants. This year's sessions included a variety of topics but the overall focus of the conference was on resident, staff and self-care.

- **COVID-19 Vaccine**

Total Number

By Type - Residents: 333                      Staff: 487                      LTC Caregivers: 116                      Inpatients: 7

\*\*\* 167 people have completed their vaccination having received 2 doses of the vaccine.

By site - Rainycrest: 495                      EHC: 64                      RRHC: 103                      LVGH\*: 281

Percentage of Residents by site (majority have received 2<sup>nd</sup> dose):

Rainycrest: 97% completed                      EHC: 91.7% completed                      RRHC: 95.2% completed

Percentage of staff by site vaccinated to date (majority have received 1<sup>st</sup> dose):

Rainycrest: 87.2%                      EHC: 93.3%                      RRHC: 95.2%                      LVGH\*85.4%

- **Surgical Program**

On April 22, 2021 the Chief Medical Officer of Health (CMOH) issued Directive #2, resulting in all non-urgent and non-emergent surgeries ceasing across the province. On May 18, 2021 the CMOH rescinded Directive #2 to enable hospitals to perform non-emergent and non-urgent surgeries and procedures if criteria outlined by Ontario Health are met by the hospital. RHC leadership is meeting on May 19, 2021 to review the criteria; however, it is anticipated that we will begin performing non-urgent and non-emergent surgeries in the coming days. Resumption of services must be gradual and carefully considered to maintain the ability to rapidly respond to increases in COVID-19 case counts and hospitalizations and to support the well-being of health human resources. Hospitals that are impacted by high COVID-19 admissions will be unable to resume any additional surgical or procedural activity at this time.

- **Financial Audit**

The BDO Dunwoody Fort Frances office will initiate final audit field work via video conference on May 19, 2021 and through sharing of information through electronic means. The finance team has worked tirelessly, particularly with the added complexity added by COVID-19 reporting, to prepare for this year's audit.

### Organizational Health

- **Medical Laboratory Technologists (MLT)**

The Medical Lab Technologists (MLT) human resources continue to be a challenge in the north; the north region is seeking 16 MLT's to cover the vacancies. Medical Lab Assistants (MLAs) are working to their full scope to assist during this health human resource crisis. Riverside has hired 2 MLAs to assist in meeting the evolving needs of the laboratory.

- **Nursing Week**

International Nursing week was May 10-16, 2021. The theme this year was "We Answer The Call". Various draws, treats, and gifts were provided to nurses to celebrate. A video was shared with photographs of a number of nursing staff. The CEO & CNE did fun trivia games with some nurses where Riverside swag was given out.

### Partnerships

- **Ontario Health Team**

- GHAC signed a transfer payment agreement with the Ministry of Health for \$937,500 in 2021-22 to manage advancement of our OHT; a budget summary has been shared with the team for review and future discussion.
- Our team is currently looking at the opportunity to support evaluation and learning by adding an Impact Fellow that will provide hands on, locally tailored support to our OHT.
- The OHT visioning exercise was completed on April 27, 2021.
- The OHT team is working collaboratively to develop an application that expands upon the diabetes virtual care pilot project established at Riverside and in Thunder Bay in 2020-21.
- While review of care pathways in mental health and addictions advances, the OHT is working to also evolve review of diabetes care pathways.

- **Nourish Program**

GHAC and RHC submitted a Nourish Anchor Cohort application with wicked problems framed through a focus on Indigenous food ways and sovereignty. While our application was not successful, the Selection Committee indicated they

will be engaging both partners to join the Food is Our Medicine community of practice in lieu of the Anchor Cohort as they believe this is a more appropriate fit.

- **Patient and Family Advisory Council (PFAC)**  
Interviewed and confirmed a new member for our Patient & Family Advisory Council. She will be a good representative for the west end of the district.
- **Northwestern Health Unit**  
Riverside continues to work with the Northwestern Health Unit in managing the COVID-19 pandemic. Currently the priority has been COVID-19 vaccinations, whether it be the Health unit securing vaccines to cover our residents, patients, staff, and caregivers or our staff supporting public vaccination clinics. Collaboration has been strong with the unified goal of vaccinating our communities.
- **Horticultural Society**  
Rainycrest is collaborating with the Horticultural Society to improve the grounds for the spring and summer season. The Horticultural Society is providing and planting outdoor flower pots for the entrance of the Home.
- **GHAC**  
A recording of the Anishinabee Birth Helper presentation has been received by GHAC. This will be loaded on our Managing Obstetrical Risk Efficiently (MoreOB) website for all physicians and staff to view. This is to promote clinical staff supporting the traditional beliefs of the Anishinabee population.
- **TLC for LTC**  
TLC for LTC is a collaborative campaign designed to thank long-term care (LTC) team members for their efforts throughout the COVID-19 response and raise awareness of the importance of their mental health and well-being. Research demonstrates the connection between cultivating and giving gratitude to one's mental health and wellness; improved mental health for both those who give gratitude and for those who receive it. At Rainycrest, the residents, families and caregivers have really engaged in this opportunity to show their gratitude to Rainycrest staff. There is a display board in Mill's Square that holds all the gratitude notes for all to see and share.

Respectfully Submitted,

Joanne Ogden, Board Chair

Dr. Karim El-Tawil, Chief of Staff

Julie Loveday, Executive Vice President, Clinical Services & CNE

Carla Larson, Chief Financial Officer

Henry Gauthier, President & CEO



**Audit & Resources Committee Report – May 2021**

2.4.1 Financial Report – Draft Unaudited Year End \*





**Operating Revenue & Expense Summary**  
**DRAFT & UNAUDITED**  
**April 1, 2020 to March 31, 2021**

		2020/2021 Annual Budget	YTD Budget	YTD Actual	YTD Actual Dollars Over(Under) YTD Budget	YTD Actual Percent Over(Under) YTD Budget
<b>Fund Type 1 - LHIN Funded - Hospital Services</b>						
<b>REVENUE</b>						
LHIN - Base Funding	A-1	\$26,661,629	\$26,661,629	\$26,919,193	\$257,564	0.97%
Other Funding (19*) - Bundled Care, Hospice, Oncology Drug Reimbursement	A-2	\$1,624,458	\$1,624,458	\$2,795,610	\$1,171,152	72.09%
LHIN - One Time Funding	A-3	\$0	\$0	\$3,246,964	\$3,246,964	0%
MOHLTC - One Time Funding	A-4	\$222,275	\$222,275	\$222,268	(\$7)	0.00%
Other Revenue MOHLTC - HOCC	A-5	\$488,505	\$488,505	\$496,472	\$7,967	1.63%
Paymaster	A-6	\$0	\$0	\$0	\$0	0%
Cancer Care Ontario	A-7	\$21,563	\$21,563	\$9,948	(\$11,615)	-53.87%
Recoveries & Miscellaneous	A-8	\$1,485,678	\$1,485,678	\$1,741,709	\$256,031	17.23%
Amortization of Grants/Donations Equipment	A-9	\$270,000	\$270,000	\$407,628	\$137,628	50.97%
OHIP Revenue & Patient Revenue from Other Payors	A-10	\$1,725,505	\$1,725,505	\$1,404,095	(\$321,410)	-18.63%
Differential & Copayment	A-11	\$970,001	\$970,001	\$1,014,593	\$44,592	4.60%
<b>TOTAL REVENUE</b>	<b>A-12</b>	<b>\$33,469,614</b>	<b>\$33,469,614</b>	<b>\$38,258,479</b>	<b>\$4,788,865</b>	<b>14.31%</b>
Compensation - Salaries & Wages	A-13	\$18,775,421	\$18,775,421	\$20,746,561	\$1,971,140	10.50%
Benefit Contributions	A-14	\$5,081,817	\$5,081,817	\$5,408,030	\$326,213	6.42%
Future Benefits	A-15	\$163,200	\$163,200	\$170,085	\$6,885	4.22%
Medical Staff Remuneration	A-16	\$1,518,000	\$1,518,000	\$1,469,832	(\$48,168)	-3.17%
Nurse Practitioner Remuneration	A-17	\$122,800	\$122,800	\$149,481	\$26,681	21.73%
Supplies & Other Expenses	A-18	\$5,055,280	\$5,055,280	\$6,044,711	\$989,431	19.57%
Amortization of Software Licenses & Fees	A-19	\$34,887	\$34,887	\$34,887	\$0	0.00%
Medical/Surgical Supplies	A-20	\$720,889	\$720,889	\$1,069,956	\$349,067	48.42%
Drugs & Medical Gases	A-21	\$1,340,607	\$1,340,607	\$1,926,437	\$585,830	43.70%
Amortization of Equipment	A-22	\$641,257	\$641,257	\$967,074	\$325,817	50.81%
Rental/Lease of Equipment	A-23	\$147,252	\$147,252	\$149,478	\$2,226	1.51%
Bad Debts	A-24	\$82,000	\$82,000	\$164,319	\$82,319	100.39%
<b>TOTAL EXPENSE</b>	<b>A-25</b>	<b>\$33,683,410</b>	<b>\$33,683,410</b>	<b>\$38,300,851</b>	<b>\$4,617,441</b>	<b>13.71%</b>
<b>SURPLUS/(DEFICIT)</b>	<b>A-26</b>	<b>(\$213,796)</b>	<b>(\$213,796)</b>	<b>(\$42,372)</b>	<b>\$171,424</b>	<b>-80.18%</b>



**Operating Revenue & Expense Summary**  
**DRAFT & UNAUDITED**  
**April 1, 2020 to March 31, 2021**

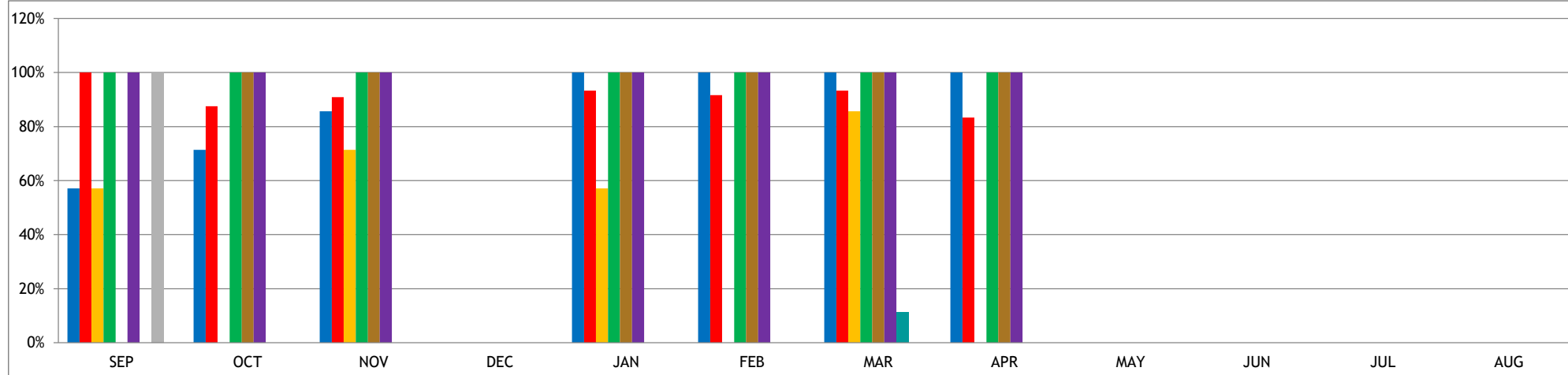
		2020/2021 Annual Budget	YTD Budget	YTD Actual	YTD Actual Dollars Over(Under) YTD Budget	YTD Actual Percent Over(Under) YTD Budget
<b>Fund Type 2 - LHIN Funded - Counselling &amp; Non Profit Housing Programs</b> <b>Mental Health - Case Management - Housing - Addictions - Problem Gambling</b>						
TOTAL REVENUE	B-1	\$1,560,807	\$1,560,807	\$1,739,173	\$178,366	11.43%
TOTAL EXPENSE	B-2	\$1,560,807	\$1,560,807	\$1,739,256	\$178,449	11.43%
SURPLUS/(DEFICIT) - DUE To LHIN	B-3	\$0	\$0	(\$83)	(\$83)	0.00%
<b>Fund Type 3 - Other Ministry/Agency Funded - Non Hospital Services</b> <b>Partner Assault Response - Family Violence</b>						
TOTAL REVENUE	C-1	\$191,338	\$191,338	\$257,665	\$66,327	34.66%
TOTAL EXPENSE	C-2	\$191,338	\$191,338	\$257,665	\$66,327	34.66%
SURPLUS/(DEFICIT) - DUE To Other	C-3	\$0	\$0	\$0	\$0	0.00%
<b>Fund Type 2 - LHIN Funded - RainyCrest Community Support Services</b> <b>(Home Support, Assisted Living, Adult Day, Meals on Wheels)</b>						
TOTAL REVENUE	D-1	\$1,340,836	\$1,340,836	\$1,559,004	\$218,168	16.27%
TOTAL EXPENSE	D-2	\$1,340,836	\$1,340,836	\$1,560,064	\$219,228	16.35%
SURPLUS/(DEFICIT) - DUE To LHIN	D-3	\$0	\$0	(\$1,060)	(\$1,060)	0.00%
<b>Fund Type 2 - LHIN Funded - RainyCrest</b> <b>Long Term Care</b>						
TOTAL REVENUE	E-1	\$13,044,393	\$13,044,393	\$14,847,219	\$1,802,826	13.82%
Compensation & Benefits	E-2	\$10,794,697	\$10,794,697	\$11,317,021	\$522,324	4.84%
Supplies	E-3	\$1,289,047	\$1,289,047	\$1,315,275	\$26,228	2.03%
Service Recipient Specific Supplies	E-4	\$0	\$0	\$0	\$0	0.00%
Sundry	E-5	\$675,873	\$675,873	\$956,037	\$280,164	41.45%
Equipment	E-6	\$234,600	\$234,600	\$481,437	\$246,837	105.22%
Contracted Out	E-7	\$343,883	\$343,883	\$213,207	(\$130,676)	-38.00%
Building & Grounds	E-8	\$26,877	\$26,877	\$22,746	(\$4,131)	-15.37%
TOTAL EXPENSE	E-9	\$13,364,977	\$13,364,977	\$14,305,724	\$940,747	7.04%
SURPLUS/(DEFICIT) including unfunded liabilities	E-10	(\$320,584)	(\$320,584)	\$541,495	\$862,079	-268.91%
Less: Unfunded Future Benefits	E-11	\$0	\$0	\$131,700	\$131,700	0%
Less: Unfunded Amortization Expense	E-12	\$0	\$0	\$35,312	\$35,312	0%
SURPLUS/(DEFICIT) excluding unfunded liabilities	E-13	(\$320,584)	(\$320,584)	\$708,507	\$1,029,091	-321.01%
Operating Surplus(Deficit) - Hospitals & Long Term Care ONLY		(\$534,380)	(\$534,380)	\$666,136		
Total Operating Margin - Hospitals & Long Term Care ONLY		-1.15%	-1.15%	1.25%		



**Quality, Safety, Risk Committee Report – May 2021**

2.5.1 Board Quality Metrics \*

# BOARD OF DIRECTORS - QUALITY METRICS - 2020-2021



**INDICATORS:**

- Participation A** - # of voting board members attending board meetings monthly.
- Participation B** - # of voting board members attending committee meetings monthly.
- Reflection A** - # of completed board meeting evaluation surveys bi-monthly.
- Reflection B** - # of members that complete the board self-assessment questionnaire annually (June).
- Decision Making** - # of board decisions made by detailed briefing notes/supporting documentation done monthly.
- Education A** - # of education sessions at board meetings monthly.
- Education B** - # of board meeting agenda items related to integration, quality or strategy monthly.
- Composition** - # of categories in the skills based board matrix met annually (March).
- Compliance** - # of new directors that attend board orientation annually (Sept).

INDICATOR	SEP	OCT	NOV	DEC	JAN	FEB	MAR	APR	MAY	JUN	JUL	AUG	YTD Actual	Target	Variance	Notes
1. Participation A	57%	71%	86%	#DIV/0!	100%	100%	100%	100%	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	88%	75%	13%	
2. Participation B	100%	88%	91%	#DIV/0!	93%	92%	93%	83%	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	92%	75%	17%	
3. Reflection A	57%	#DIV/0!	71%	#DIV/0!	57%	#DIV/0!	86%	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	68%	100%	-32%	
4. Reflection B										#DIV/0!			#DIV/0!	100%	#DIV/0!	
5. Decision Making	100%	100%	100%	#DIV/0!	100%	100%	100%	100%	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	100%	90%	10%	
6. Education A	0%	100%	100%	#DIV/0!	100%	100%	100%	100%	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	100%	100%	0%	min of 1 session/mtg
7. Education B	100%	100%	100%	#DIV/0!	100%	100%	100%	100%	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	100%	100%	0%	min of 2 items/mtg
8. Composition							11%						11%	89%	-78%	16/18 skills to meet (**LOW DUE TO BOARD VACANCY)

**Riverside Foundation for Health Care**  
**Board of Directors**  
*Minutes of Meeting*

**DATE:** Monday, April 26, 2021                      **TIME:** 11:30 a.m.

**LOCATION:** Go-To-Meeting

**PRESENT:**

AllisonCox	Bill Gushulak	Carlene Steiner
Bev Lagner	Irene Laing	Meghan Cox
Delaine McLeod	Rob Gushulak	Kim Jo Bliss
Susan Irvine	Paul Brunetta	

**1. Call to Order**

Delaine McLeod called the meeting to order at 1130 a.m. Sandra Beadle recorded the minutes of this meeting.

**2. Adoption of Agenda**

IT was,  
 MOVED BY:            Rob Gushulak                      SECONDED BY:    Kim Jo Bliss  
 THAT the Agenda be accepted as circulated.  
CARRIED.

**3. Confidentiality**

*All confidential information obtained through this committee will not be accessed or disclosed. All confidential information will not be altered, destroyed, copied or interfered with except with authorization and in accordance with the policies and procedures of RHC.*

**4. Conflict of Interest**

There was no conflict of interest.

**5. Approval of Minutes**

IT was,  
 MOVED BY:            Bill Gushulak                      SECONDED BY:    Paul Brunetta  
 THAT the minutes from the March 29, 2021 meeting be accepted as circulated.  
CARRIED.

**6. Correspondence**

There was no correspondence to be discussed.

## 7. New Business

### 7.1 Foundation Independence

Henry commented on the importance of Foundation and RHC remaining arm's length, recognizing we are in a smaller organization that impacts how this is achieved. Sandy's upcoming retirement and increased burden on financial services have us looking on what this means for our organization in terms of recruiting and on boarding new resources. This presents an obvious opportunity to reflect on how we provide services, and with MNP also now in the area there is increased opportunity to outsource Foundation services. With two firms in the area there is potential to segregate foundation supports and have them report directly to Allison. It is important to stress this is only at the exploratory stage.

Paul expressed concern regarding added expense to the Foundation and asked why there is a need for the hospital to be independent from the Foundation and how having their own bookkeeper would address that. Henry indicated that RHC already invests in the Foundation through in-kind resources and we would continue to allocate the equivalent funds to the Foundation regardless of which solution is selected. There is no direct concern, but the opportunity has presented itself and segregating back office services creates an opportunity to enhance the degree of independence and perceived arms-length relationship. RHC audit team is asked if it is arms-length from Foundation by our audit firm, and while it is, there is an opportunity to improve this. Some areas would never make sense to shift/change such as our integrated insurance coverage.

RHC is already looking at adding financial resources as demands on that department have increased. In the end, things may be status quo but while the opportunity presents itself we need to consider all options. Allison asked if things change would there be changes in regards to benefits, etc. Henry noted this would need to be explored but since she will remain a Foundation employee it shouldn't be an issue. Henry noted that the Foundation would be engaged as part of the review process. Henry noted he will be engaging partners in the region and beyond to determine what arrangement has worked best for them.

Delaine also expressed concerns regarding costs. Henry again assured that RHC will not put the Foundation in a position detrimental to their progress. Henry noted the only real question here is whether the administrative assistant and finance from RHC continue to provide the services or whether a separate individual is hired by the Foundation to support Allison. Riverside Health Care has an obligation to review opportunities whenever positions are becoming vacant or there are requests for additional resources. Instead of recruiting another individual in finance or a full-time administrative assistant some of these dollars could be redirected to the Foundation's distinct support services. We have adequate time to see if this is viable, and if it isn't we will remain status quo. The decision will be made by March 2022.

When Henry left the meeting there was some further discussion. Granted this is only in the exploration process but there will be close contact with Henry. The Foundation would like something that works for both parties not just RHC and they want input into









## 9.5 Foundation Director Report

The Family of Todd Baker was able to successfully raise over \$14,000 in his memory. This was enough to cover the full cost of the equipment for food and nutrition services for LVGH to keep patient meals warm, so senior leadership approved the purchase of it. It is expected to be ordered this week. Allison and Delaine met with the Baker family to accept the donation and have a photo taken. Ken Kellar did a great story that appeared in last week's Times. The story was shared via social media and has garnered a lot of attention.

AS stated in an email circulated this month, Alison reached out to Donna at Lowey's. She had already committed to running a gift certificate fundraiser for another group and normally wouldn't have an issue with helping multiple groups, however her overhead is too high and her profit margin is too low right now to accommodate more than one. If anyone has any other fundraising ideas please let Allison know. Delaine suggest reaching out to Hammonds with the same request. Allison will call them.

The Facilities were named in the Estate of Olive Eisenhower. The executor of the will reached out to Allison to explain that Olive would have like to see these funds go to the Foundation and that it should have been the Foundation named in the Estate. In speaking with the lawyer it was determined that a letter from the Facilities stating that the disbursement cheques are to be made to the Foundation as opposed to the Facilities would be sufficient enough to redirect the funds, so Lindsay is preparing this. We are expecting to receive somewhere between \$350-450K with an internment disbursement of \$100-\$150K occurring soon. In speaking with the executor, it is likely that the funds received will be directed towards the capital campaign.

The question of whether or not the Foundation has the ability to accept donations of publicly traded securities was brought up by the Campaign Cabinet. There is a benefit to donating securities because if they are donated to a registered charity, the donor does not have to pay capital gains on them and they receive a charitable tax receipt. In addition, this opens up the door to donors that may not have disposable income to donate but do have securities that they would like to donate. Allison met with Robin Wright to get some insight into this as he has this set up for Knox United Church and he gave her some background information on what would be needed to be completed for us to do this. We already have an account with TD Waterhouse as years ago, donations of securities were accepted. The account had to be updated with current information and Paul and Delaine have signed papers to be listed as authorized signatories on it. Allison will be creating a document that anyone who wishes to give donations of securities can fill out which will allow their fanatical advisor to transfer the securities to our TD Waterhouse account, at which time we can cash them out and deposit them into the Foundation general account.

Once this is all set up and ready to go, Allison will be including how donors can take advantage of this on a special "other ways to donate" page on the website.

The Facilities has an overabundance of old furniture (tables, chairs, bedside tables, etc) that are no longer in use but are still of good quality. They are taking up space in storage and Ed would like to get rid of them so he approached Alison with the idea of offering





**Auxiliary Report – May 2021**

**Emo**

There was no meeting held this past month.

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**La Verendrye General Hospital**

See attached report.

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**Rainycrest**

No Report.

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**Rainy River**

No Report.

## LAVERENDRYE GENERAL HOSPITAL AUXILIARY

### EXECUTIVE MINUTES

May 3, 2021

**ATTENDANCE VIA VIRTUAL MEETING:** Linda Booth, Marnie Cumming, Diane Glowasky, Brenda Cox, Jan Beazley, Holly Angus, Joy Lockman, Donna Penney, Linda Plumridge, Cindy Noble, Mary Ann Kitzul, Janet Lambert

**REGRETS:** Susan Sieders, Dolores Fraser, Judy Webster, Lenore Cates, Margie Gibson

Meeting was called to order at 1:08 P.M. Auxiliary Pledge was read by Diane Glowasky.

**AGENDA:** Accepted as distributed with addition: under Correspondence – a letter from Arrow Games. Under New Business: 4. Senior-Student Walk Fundraiser and 5. Grant from Trillium Fund for Charitable Organizations.

No conflict of interest declared

**MINUTES OF PREVIOUS MEETING:** accepted as distributed with change to Membership. Should read “since last meeting” instead of “for 2020-21”

**TREASURER’S REPORTS:** Report for March 2021 accepted as distributed

#### CORRESPONDENCE

Included Riverside Newsletters. Pepsi invoice, cheque from LVGH for purchases, Letter of Intent from Holly Angus and letter from Arrow Games re delay in price increase of lottery tickets to May 31

#### NEW BUSINESS:

**COMMUNICATIONS FACEBOOK/WEBSITE** – It was noted that there is no contact information on Facebook or Website pages. Marnie Cumming will be contact on Facebook for all items except Shop which will remain Susan Sieders domain. President will contact Kathryn Pierroz, Public Relations Officer regarding updating Riverside website to include contact person and phone number as well as update general information on LVGHA portion of website.

**ANNUAL GENERAL MEETING:** Purpose of meeting is to update membership on programs, approve budget for next fiscal year, and to install new Executive. If Past President Judy Webster is unable to attend, Irene Laing has agreed to install new executive as she is a Past President. Linda Booth, Marnie Cumming and Janet Lambert will form a Committee to develop a plan for a meeting and to ensure notices and votes are done in a timely fashion to meet Auxiliary policy and procedures. Usually held as luncheon meeting on second Monday in June. Will be changes due to Covid.

**BURSARY COMMITTEE:** Marnie Cumming and Jan Beazley to review and select bursary applicants for this year.

**SENIOR/STUDENT STEPS TO HEALTH FUNDRAISER** – was presented by Holly Angus. Plan to defer to May 2022 as too late to set up for this year and a similar event is being planned by another group.

**FUNDRAISING DONATION IDEA** – Diane Glowasky presented a report on approaching the Trillium Fund for donation as there are monies available for charitable organizations that have lost revenues due to the pandemic. Recommendation that she clear with Riverside Foundation to ensure this will not be an overlap in requests to the Fund.

**OLD BUSINESS:**

**ANNUAL FEES:** Discussion regarding increasing fees from \$5 to \$12 to address increased operational costs. Presentation by Holly Angus regarding a Loonie for Love Campaign. Plan to hold off on campaign until agreement on fee decided by membership at AGM. Holly will distribute Campaign poster to all executive. Also, discussion on how membership monies can be accepted. Linda Booth to seek guidance from Allison Cox, Foundation Director re e-transfers. Offering different methods of payment may enhance our on-line presence.

**MOTION; TO APPROVE AN INCREASE IN THE ANNUAL FEE FROM \$5 TO \$12 ANNUALLY COMMENCING IN NEW OPERATIONAL YEAR SEPTEMBER 2021-22 TO BETTER ADDRESS INCREASED OPERATIONAL COSTS TO THIS AUXILIARY.**

**MOVED BY: HOLLY ANGUS    SECONDED BY: BRENDA COX    CARRIED**

**FUNDRAISING** – The Rockin’ for a Reason and Annual Strawberry Social will be cancelled for this year. Plan to hold a Bakeless Bake Sale also deferred to next year. Will require a Chair for event. It was noted that the inability to fundraise during the pandemic will negatively impact the Auxiliary’s ability to contribute financially to the hospital.

**ANNUAL GENERAL MEETING REORTS:** Secretary put out reminder that Reports for AGM are due May 15.

**NOMINATING COMMITTEE REPORT:** All executive positions for 2021-22 are filled, except Vice President and Lobby Lottery Chair.

**DIRECTOR AND COMMITTEE REPORTS**

**MEMBERSHIP/PHONING/EMAIL:** Auxiliary membership is 213 with an additional 19 members residing at Rainycrest. The direct mail membership campaign last fall proved very effective and plans are underway to repeat in September.

**PATIENT SERVICES** – no report

**GIFT SHOP** – no report

**SOCIAL REPORT:** no report

**ADVERTISING AND PROMOTION:** no report

**NEWSLETTER:** Plans are underway for a moderated version of Newsletter to be released in late May or early June. Deadline for submissions is May 10. Send to [lenalcat@tbaytel.net](mailto:lenalcat@tbaytel.net) Letter has been sent to all Executive with details.

**LOBBY LOTTERY:** Deposit April 15, 2021 of \$918.65 for total bank balance of \$17,318.35 on May 1, 2021. Also, cash of \$200 in cash box and an Emergency Fund of \$280 in cash for payouts. Total bank and cash balance is \$17,798.35.

**HISTORIAN:** no report

**SICK AND VISITING:** One sympathy card sent.

**FOUNDATION REPRESENTATIVE:** No report

Meeting adjourned at 3:25 P.M.

Next meeting will be Monday, June 7, 2021 at 1 PM. Details to be confirmed.

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Linda Booth, President

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Janet Lambert, Secretary