

**Kemptville District Hospital (KDH)
Board of Directors Meeting
Thursday, February 26, 2026
Via Microsoft Teams
Minutes**

Directors:	Present	Regrets		Present	Regrets		Present	Regrets
G. Bebeung	√		J. Nolan		√	F. Vassallo	√	
D. Boyce	√		M. Norenberg		√	T. Wood	√	
E. Bonokoski (Chair)	√		D. O'Sullivan		√	G. Wyse	√	
G. Enci	√		J. Panciuk	√		A. Yee		√
G. LeVasseur	√		K. Lawless	√		H. Zipes	√	
S. Mincoff	√		M. Jones	√		L. Armstrong	√	
Dr. Davison	√		Dr. C. Sentongo	√		E. MacPherson		√
K. Hogue	√		P. Snelling	√		M. Ruigrok	√	

Management, Staff & Guests:

B. Rivard		√	M. Laughton (Recorder)	√		S. Serino	√	
M. Prokopy								

1. Call to Order: E. Bonokoski, Board Chair, called the meeting to order at 6:30 pm. Quorum was established and there were no conflicts declared.

E. Bonokoski made the following Territorial Acknowledgement:

In the spirit and understanding that we continue to gain in today's world, we would like to acknowledge the Algonquin nation, whose traditional and unceded territory we are gathered upon today. Also, for those attending remotely, acknowledgement is given for the lands they are located on at the time of the meeting

2. Reaffirmation of the Mission: G. LeVasseur provided the reaffirmation of the Mission of KDH.

4. Education Session: Melissa Prokopy, Vice President, Policy and Advocacy of the Ontario Hospital Association (OHA), and Sandro Serino, Chief, Health System Planning, Performance and Accountability of the OHA, provided an education session to the Board.

M. Prokopy and S. Serino departed the meeting.

5. Additions / Changes to the Agenda: There were no changes to the agenda.

6. KDH Board Action Registry – (no outstanding items)

7. Consent Agenda

The Board noted that required corrections noted in the Compliance report have been made.

On a motion made and seconded, and carried without abstentions, the Board approved the consent agenda consisting of:

7.1 An approval of:

7.1.1. The January 29, 2026 Meeting Minutes

7.1.2. The authorization of the Chair, by resolution dated February 26, 2026 to sign off on the Declaration of Compliance Issued pursuant to the Long-Term Care Home Service Accountability Agreement, and declare to the Board of Directors of Ontario Health that:

After making inquiries of the Administrator, Katie Hogue (CNE), and other appropriate officers of the Health Service Provider (the “HSP”) and subject to any exceptions identified on Appendix 1 to this Declaration of Compliance, to the best of the Board’s knowledge and belief, the HSP has fulfilled, its obligations under the long-term care home service accountability agreement (the “Agreement”) in effect during the Applicable Period.

Without limiting the generality of the foregoing, the HSP confirms that:

- 1. it has complied with the provisions of the Connecting Care Act, 2019 and with any compensation restraint legislation which applies to the HSP; and*
- 2. every Report submitted by the HSP is accurate in all respects and in full compliance with the terms of the Agreement.*

Unless otherwise defined in this declaration, capitalized terms have the same meaning as set out in the Agreement between the Ontario Health and the HSP effective April 1, 2023.

7.2 An approval of the receipt of the following items:

- 7.2.1. Compliance Report**
- 7.2.2. KDH Foundation Report**
- 7.2.3. KDH Auxiliary Report**
- 7.2.4. Q3 Quality Improvement Plan Indicator Update**
- 7.2.5. Enterprise Risk Management – Q3 Update**
- 7.2.6. Accreditation Action Plans**
- 7.2.7. Mandatory Reporting – Q3 Update**
- 7.2.8. Q3 – 2025-26 Financial Update**
- 7.2.9. Auditor Proposal – June 13, 2024**
- 7.2.10. Q3 – Balanced Scorecard Results**
- 7.2.11. CNE Report**

On a motion duly made and seconded, the Board went in-Camera.

On a motion duly made and seconded, the Board came out of in-Camera.

11. Items for Approval

11.1 Credentialing

On a motion duly moved, seconded, and carried without abstentions, the Board approved that hospital privileges for the following physicians, who have been credentialed as set out under Article 7 Appointment and Reappointment to Professional Staff of the Professional Staff Bylaws, be approved by the Board of Directors:

Credentialing Report for February 2026:

Temp	App	Re-App	Physician	Privilege Category	KDH Primary	Change	Other
	√		Dr. Teresa FURTAK	COURTESY, Anesthesia			
	√		Dr. Stephen HALE	ASSOCIATE, Emergency			<i>With Conversion to Courtesy at the end of his training on July 1, 2026</i>
	√		Dr. Mitchell SABLOFF	COURTESY, Family Medicine, Transfusions			
	√		Dr. Emily BRECHER	COURTESY, Surgery, Surgical Assist			
		√	Dr. Senta Bauermeister	COURTESY, Surgery, Surgical Assist			<i>Conditional upon ongoing participation in continuing professional development in accordance with professional standards.</i>

11.2 Audit Plan and Remuneration of Auditors

On a motion duly moved, seconded, and carried without abstentions, the KDH Board of Directors approved the Audit Plan for the fiscal year ending March 31, 2026, and the proposed remuneration, in line with the schedules from the June 13, 2024 quote for services.

12. Committee Reports

12.1 Corporate Services Committee Report

G. Wyse highlighted the following:

- Increased out-of-province and out-of-country billing due to the CT scanner, resulting in an extra \$80,000 in revenue, a \$343,000 increase in Q3 global funding, and that a \$4 million low-interest loan from OFA to replace a higher-interest Scotiabank loan is being formalized.
- The hospital is forecasting a \$1 million deficit for the year, slightly higher than planned, primarily due to supply inflation and cost pressures. The Chief Financial Officer submitted the next financial forecast to the Ministry of Health (MOH) as previously discussed.

The President and CEO noted KDH's gratitude for a \$2,000 donation from the Mount Zion Masonic Lodge.

12.2 Quality and Safety Committee Report

H. Zipes noted that the Committee reviewed:

- The emergency department quality scorecard and initiatives
- The enterprise risk management (ERM) dashboard
- The balanced scorecard indicators
- The mandatory reporting indicators
- An update on the Patient and Family Advisory Committee strategic plan
- Follow-up actions resulting from accreditation.
- Updates to the format of the safety leadership rounds
- The Q3 2025-26 status update of the Quality Improvement Plan (QIP) and began discussing the draft for the upcoming year, with plans to present it to the Board.

3. Client Centred Care – Patient Stories: The Board noted that this item had been missed at the start of the meeting. K. Hogue reviewed a complaint and compliment received and learning opportunities for the hospital.

12.3 Governance Committee Report

G. LeVasseur noted that the Governance Committee:

- Reviewed the ERM dashboard.
- Reviewed and approved the workplan for the strategic planning ad-hoc sub-committee.

13. Items for Discussion

E. Bonokoski discussed the 'Pathway to the Future' document and is supporting the upcoming strategic planning cycle.

E. Bonokoski noted an upcoming in-person meeting for the strategic planning committee is scheduled where further analysis and detailed planning will occur, and that the Ontario Hospital Association's pattern of illness report will be circulated to support planning.

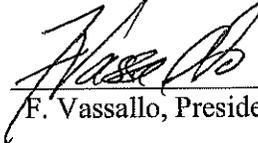
14. Next Meeting: Thursday, March 26, 2026, at 5:30 pm via Teams.

15. In-Camera Session

On a motion duly moved and seconded, the meeting went in-camera.

Staff, guests, and non-voting ex-officio members departed the meeting.

16. Meeting Termination: There being no further business, the meeting was terminated on a motion at 8:34 p.m.



F. Vassallo, President and CEO



Erin Bonokoski (Mar 27, 2026 10:47:59 EDT)
E. Bonokoski, Chair

