

Annual General Meeting

Monday, June 24, 2013
7:00 PM

Bracebridge Sportsplex
110 Clearbrook Trail, Bracebridge, Ontario

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| 1. Chair's Welcome/Call To Order | Larry Saunders |
| 2. Approval of the Agenda* | Larry Saunders |
| 3. Approval of the Minutes of the Previous Annual General Meeting* | Larry Saunders |
| 4. Report of the Board Chair | Larry Saunders |
| 5. Report of the Chief Executive Officer | Natalie Bubela |
| 6. Report of the Chief of Staff | Dr. Jan Goossens |
| 7. Board Award of Excellence | Phil Matthews |
| 8. Receipt of the Annual Reports* | Larry Saunders |
| 9. Report of the Auditor | Oscar Poloni |
| • Presentation of the Audited Financial Statements* | Gregg Evans |
| • Appointment of Auditors* | Gregg Evans |
| 10. Report of the Governance Committee | Evelyn Brown |
| • Bylaw Amendments* | |
| 11. Report of the Nominations Committee | Evelyn Brown |
| • Election of Directors* | |
| 12. Termination of Meeting* | Larry Saunders |

* denotes motion required

**MINUTES OF THE ANNUAL GENERAL MEETING
FOR THE MEMBERS OF THE CORPORATION,
MUSKOKA ALGONQUIN HEALTHCARE
MONDAY, JUNE 18, 2012, 7:00 P.M.**

Active Living Centre, Huntsville, Ontario

Approval Pending

MEMBERS PRESENT:

Sven Miglin
Larry Saunders
Charlie Forret
Evelyn Brown
Bill Garriock

Wayne Twaits
Gregg Evans
Catherine King
Eric Spinks
John Sinclair

Phil Matthews
Natalie Bubela
Dr. Jan Goossens
Bev McFarlane

Mr. Sven Miglin, Chair of the Board of Directors called the 2012 annual meeting of the Corporation of Muskoka Algonquin Healthcare to order at 7:05 pm and declared the meeting duly constituted with a quorum present for the transaction of business.

It was moved, seconded and carried **THAT THE AGENDA BE ADOPTED AS CIRCULATED.**

1. Previous Minutes

The minutes of the previous annual meeting were provided to all in attendance along with the Annual Report. Copies of the Annual Report are available from Administration. There was no business arising from the minutes of the previous annual meeting.

It was moved, seconded and carried

THAT THE MINUTES OF THE JUNE 20, 2011 ANNUAL GENERAL MEETING OF THE CORPORATION OF MUSKOKA ALGONQUIN HEALTHCARE BE ADOPTED AS CIRCULATED.

2. Report of the Board Chair and Chief Executive Officer

The Chair introduced the Annual Report and highlighted portions of the written report of the Board Chair and Chief Executive Officer. N. Bubela also spoke to the report briefly. Appreciation and gratitude was extended to all of the truly dedicated and committed staff, physicians and volunteers.

3. Strategic Planning Committee Report

Bill Garriock provided an overview of the new 2012-2014 Strategic Plan and thanked Committee members for their participation and commitment to the development of the new Plan.

4. Report of the Chief of Staff

Dr. Jan Goossens spoke to the report included in the meeting package noting the excellent care provided by the Medical Staff at Muskoka Algonquin Healthcare and thanked the members of the Medical Advisory Committee. Also key to the success of the medical staff is recruitment and the past year the organization welcomed four new physicians to the community.

5. Board Committee Reports

Brief reports were provided by the Chairs of the Quality & Patient Safety Committee, the Resources Committee and the Governance Committee. The reports were included in the meeting package.

6. Nominations Report - Election and Appointment

Mrs. Catherine King presented the Nominations Committee Report noting the departure of Mr. Wayne Twaits. Mr. Twaits was acknowledged and thanked for his contributions to the work of the Board since 2009. In addition, Larry

Saunders made remarks regarding the outgoing Board Chair, Sven Miglin. Mr. Miglin's two-year term as Chair is ending, however, he will be remaining as a Director until June 2013.

It was moved, seconded and carried

THAT THE MEMBERS OF THE CORPORATION APPROVE THE FOLLOWING SLATE OF DIRECTORS

- **EVELYN BROWN FOR A THREE-YEAR TERM ENDING 2015;**
- **ERIC SPINKS FOR A THREE-YEAR TERM ENDING 2015;**
- **WILLIAM GARRIOCK FOR A THREE-YEAR TERM ENDING 2015;**
- **JOSEPH SWINIARSKI FOR A THREE YEAR TERM ENDING 2015.**

7. Report of the Audit Committee

Mr. John Sinclair presented the Audited Financial Statements for the fiscal year ending March 31, 2012. Mr. Sinclair recognized the Committee members and noted that the Auditors letter noted that 2012 audit was complete to their satisfaction without any conditions. It was stated that the financial position of the organization ended the fiscal year with an operating surplus of \$480,000, the best year operationally since amalgamation in 2005. However, it was also noted that the organization still maintains a capital deficit of approximately \$10 million which is a culmination of the operating deficits over many years. At the Annual General Meeting, it is the responsibility of the Members of the Corporation to appoint the corporate auditors for the coming year. The Board of Directors recommended that reappointment of KPMG in this capacity.

It was moved seconded and carried

THAT AUDITED FINANCIAL STATEMENTS FOR THE YEAR ENDING MARCH 31, 2012 BE RECEIVED BY THE MEMBERS OF THE CORPORATION.

It was moved seconded and carried

THAT KPMG BE REAPPOINTED AS AUDITOR OF MUSKOKA ALGONQUIN HEALTHCARE FOR THE FISCAL YEAR 2012 – 2013 AT A FEE TO BE ESTABLISHED BY THE AUDIT COMMITTEE OF THE BOARD OF DIRECTORS.

8. Affiliated Organization Remarks

The South Muskoka and Huntsville Auxiliaries provided an overview of their respective activities for the past year. S. Miglin expressed appreciation and gratitude to all volunteers at Muskoka Algonquin Healthcare.

Mr. Colin Miller and Ms. Debi Davis each spoke to the highlights and challenges faced by the South Muskoka and Huntsville Foundations as outlined in the reports included in the meeting package.

9. Resources Committee Report & Board Award of Excellence

Mr. Charlie Forret outlined the purpose and criteria for nominations for the Board Award of Excellence. All nominees were thanked and noted for their outstanding contribution to the organization. The 2012 Board Award of Excellence were presented to Kristen Bell, Dr. David Johnstone, Frankie Dewsbury, and Christine Loshaw.

10. Meeting Termination

It was moved, seconded and carried

THAT 2012 ANNUAL GENERAL MEETING BE TERMINATED AT 8:17 P.M.

1. Report of the Chief of Staff/Medical Advisory Committee
2. Report of the Quality & Patient Safety Committee
3. Report of the Resources Committee
4. Report of the Audit Committee
5. Report of the Governance Committee
6. Report of the Nominations Committee
7. Report of the South Muskoka Hospital Auxiliary
8. Report of the Huntsville District Memorial Hospital Auxiliary
9. Report of the South Muskoka Hospital Foundation
10. Report of the Huntsville District Memorial Hospital Foundation

APPENDIX

- A. Audited Financial Statements
- B. Revised Bylaw
- C. Annual General Meeting Presentation

ANNUAL MEDICAL ADVISORY COMMITTEE REPORT 2012-2013



SUBMITTED TO: Members of the Corporation
SUBMITTED BY: Dr. Jan Goossens, Chief of Staff

FOR RECEIPT

The purpose of this report is to summarize the activities and accomplishments of the Medical Advisory Committee during the 2012-13 Board year. The report is being presented in the Annual Report to the Members of the Corporation.

The Annual General Meeting is a special time of year when the Chief of Staff is able to reflect and look back at where we have been, what we have accomplished, and where we plan to go.

This year has been a year of challenges! We have just finished a tough budgetary process brought about by changes to health care funding reform. The reform process is known as Health Based Allocation Method or HBAM. And yes that is indeed a 4 letter word. I am pleased to report the administration, physicians and the community worked to come up with a budget we could all live with. Although budget cuts are not pleasant, I think overall the process was fair and inclusive. We now have our work cut out for us. A total of 5 acute care beds will be removed from both Huntsville and Bracebridge hospitals. Our challenge is to become more efficient at treating our patients and at the same time raise the bar to provide even safer higher quality care the public has grown accustomed to at Muskoka Algonquin Healthcare.

The Medical Advisory Committee meets monthly providing general supervision over the professional staff practice in the hospital and, through its sub-committees, monitors and provides direction in setting, maintaining and promoting professional standards all with the goal to improve the quality of care at Muskoka Algonquin Healthcare. With the recent review of our Medical Staff Bylaws the Committee felt it was timely that we now focus on the restructuring of the Professional Staff Rules and Regulations.

Another key role of the Medical Advisory Committee is to make recommendations to the Board of Directors concerning every application for privileges. During the 2012-2013 year, I am pleased to report that we have recruited and welcomed several new physicians to MAHC:

Dr. John Simpson - Family Medicine/Emergency Medicine
Dr. Chris Richardson - Anaesthesiology/Family practice
Dr. Alison Halpert - Family Practice
Dr. Yaskaravitch – Emergency Medicine

I would very much like to thank everyone for their input and support over the last year. My thanks to our inter-professional group of nurses, allied health, physicians, general staff and volunteers for working effectively as a team during the last year.

I would also like to express my sincere appreciation to the members of the Medical Advisory Committee and other Physician Leaders for your commitment and dedication in continuing our efforts and focus on quality to ensure that our patients and community receive the best possible care. The Board and members of the community can be very proud of the physician team at MAHC and the good work that continues to be provided in this organization.

I look forward to working with all of you further in the future.

ANNUAL QUALITY & PATIENT SAFETY COMMITTEE REPORT 2012-2013



SUBMITTED TO: Members of the Corporation
SUBMITTED BY: Charles Forret, Vice-Chair/Committee Chair

FOR RECEIPT

The purpose of this report is to summarize the activities and accomplishments of the Quality & Patient Safety Committee during the 2012-13 Board year and to identify recommendations for consideration in next year's committee work plan. The report is being presented for receipt by the Members of the Corporation. There were five meetings of the Quality & Patient Safety Committee this year as per work plan projections - August, October, December, February and April.

I. Summary list of key accomplishments this year:

- Maintained continual oversight of the Balanced Scorecard which includes indicators from the Quality Improvement Plan as well as the Patient Safety Plan. The year ended with successfully meeting 85% of the targets included in the Balanced Scorecard.
- Reviewed an update regarding the implementation of the Goals of Care Policy.
- Endorsed a new Quality of Care Review policy and recommended its approval by the Board of Directors
- Received full Accreditation for Muskoka Algonquin Healthcare from Accreditation Canada.
- Completed a review of a comprehensive analysis of the data regarding the Patients Left Without Being Seen indicator which included an overview of the identified actions for improvement.

II. Is the Committee following their work plan and meeting their terms of reference?

- A work plan for the committee was approved in September 2012 based on the Terms of Reference, and as of the end of May 2013, the majority of the deliverables will have been met.

III. Overview of key committee responsibilities with any recommendations for consideration in the upcoming year:

- The Committee completed its annual review of the Terms of Reference
- Received regular updates and milestone reviews of the Strategic Plan Initiatives regarding Quality, Safety, Care Practices and the Customer Service Excellence Program.
- Completed a review of the indicators included in the Balanced Scorecard on a bi-monthly basis which included an overview of any indicators not meeting target along with applicable action plans for improvement.
- Approved the Quality Council and Medical Quality Assurance Committee Terms of Reference.
- Scheduled presentation of the Disclosure of Patient Safety Incidents policy and procedure.
- Received regular updates related to the work of the Ethics Committee and the implementation of the program.
- Reviewed and advised the Board of the integrity and completeness of the appointment, reappointment and credentialing process for professional staff.
- Reviewed the patient relations data quarterly.
- Reviewed the expectations for the 2013-2014 Quality Improvement Plan as set out by the Ministry of Health and Long-Term Care. Recommended approval of the Quality Improvement Plan to the Board of Directors.

IV. Are there any emerging risks or recommendations arising from the Committee's work that the new Committee or the full board should be aware of?

- With the next Accreditation scheduled to occur in the Fall of 2014, it is advised that planning and the reconvening of the Accreditation Steering Committee begin in 2013 to oversee the preparation process.
- That further education related to the Quality Based Procedures be provided to gain a better understanding of the impact on the organization.
- Continued focus on the strengthening and communications of the Ethics Program framework.

ANNUAL RESOURCES COMMITTEE REPORT 2012-2013



SUBMITTED TO: Members of the Corporation
SUBMITTED BY: Philip Matthews, Treasurer/Committee Chair

FOR RECEIPT

The purpose of this report is to summarize the activities and accomplishments of the Resources Committee during the 2012-13 Board year and to identify recommendations for consideration in next year's committee work plan. The report is being presented for receipt by the Members of the Corporation.

There were five meetings of the Resources Committee this year as per work plan projections - September, November, February, March and May.

I. Summary list of key accomplishments this year:

- Received and reviewed updates regarding the Strategic Action Plan initiatives related to partnerships, utilization review, revenue review, process improvement training, Information Management/Information technology Strategic Plan and technological innovation.
- Continual oversight of the Human Resource key performance indicator including the implementation and monitoring of the Attendance Management Program.
- Received the results of the Employee Engagement Survey and provided feedback into the action plan.
- Reviewed and recommended to the Board the Financial Statements and financial information package on a bi-monthly basis.
- Reviewed and recommended to the Board receipt of the Board and Senior Leadership Team expense reports.
- Received the annual Insurance update and approved the issuance of the annual notice.
- Reviewed and recommended to the Board the approval of the Energy Initiative Project and received subsequent updates regarding the progress of the project.
- Reviewed and approved the Enterprise Risk Management Framework for implementation.
- Reviewed and recommended to the Board approval of the Hospital Service Accountability Agreement Extension.
- Reviewed and recommended to the Board the recipients of the Board Award of Excellence to be presented at the Annual General Meeting.
- Reviewed and recommended to the Board participation in the Ministry of Health and Long-Term Care Capital Relief Program.
- Reviewed and recommended that the Board proceed with an engagement process related to proposed cost saving initiatives related to the 2013-2014 Operating Budget.
- Recommended approval of the Annual Attestation related to the Broader Public Sector Accountability Act.
- Received the annual Capital Needs List.

II. Is the Committee following their work plan and meeting their terms of reference? Overview of key committee responsibilities with any recommendations for consideration in the upcoming year:

- A work plan for the committee was approved in September 2012 based on the Terms of Reference, and as of the end of May 2013, all deliverables will have been met.
- It is recommended that in the upcoming year, the Resources Committee continue diligent oversight of the the IT and Energy Projects along with the implementation of the Budget Plan.

III. Are there any emerging risks arising from the Committee's work that the full board should be aware of?

- The details and full impact of the Health System Funding Reform remain unknown, however it can be expected that there will be several years with no financial increase to operating budgets. This is an undefined risk at this time.

ANNUAL AUDIT COMMITTEE REPORT 2012-2013



SUBMITTED TO: Members of the Corporation
SUBMITTED BY: John Sinclair, Committee Chair

FOR RECEIPT

The purpose of this report is to summarize the activities and accomplishments of the Audit Committee during the 2012-13 Board year and to identify recommendations for consideration in next year's committee work plan. The report is being presented for receipt by the Members of the Corporation.

There were two meetings of the Audit Committee this year as per work plan projections - January 22 and June 3, 2013.

I. Summary list of key accomplishments this year:

- Completed the annual review of the Committee's terms of Reference and recommended a minor revision to the Board of Directors.
- Reviewed with the Hospital's auditors the Audit Planning Report for 2013.
- Received and reviewed the draft engagement letter.
- Reviewed Muskoka Algonquin Healthcare's Fraud Risk Matrix.
- Met with the Hospital's auditors and reviewed the draft Audited Financial Statement for the year ended March 31, 2013, in conjunction with the report of the external auditor, and subsequently recommended them for Board approval.
- Met privately with both the external auditor and management to ascertain where there were any concerns that needed to be brought to the Committee's attention. There were no concerns or issues raised during these meetings.
- Recommended to the Board of Directors the appointment of the Auditors for Fiscal 2013.

II. Is the Committee following their work plan and meeting their terms of reference? Overview of key committee responsibilities with any recommendations for consideration in the upcoming year:

- A work plan for the committee was approved in January 2013 based on the Terms of Reference, and as of June 3, 2013, all deliverables will have been met.

III. Are there any emerging risks arising from the Committee's work that the full board should be aware of?

- There were no recommendations or emerging risks identified by the Audit Committee.

ANNUAL GOVERNANCE COMMITTEE REPORT 2012-2013



SUBMITTED TO: Members of the Corporation
SUBMITTED BY: Evelyn Brown, Committee Chair

FOR RECEIPT

The purpose of this report is to summarize the activities and accomplishments of the Governance Committee during the 2012-13 board year and to identify recommendations for consideration in next year's committee work plan. There were six meetings of the Governance Committee this year; as per work plan projections five of these meetings were scheduled in September, November, January, March and May. In addition, the Committee also held a teleconference in May to conduct a final review of Bylaw revisions.

V. Summary list of key accomplishments this year:

- The Committee continues with its oversight of ensuring regular review of board policies. There were thirteen policies reviewed in the past year along with the development of a new policy regarding external requests for Donations. In addition, the Committee revised the policy manual framework.
- The new board meeting evaluation process was successfully implemented. Meeting evaluations were completed in December, March and May. As a result some minor revisions to the questions were made.
- An action plan was developed and implemented to address any of the yellow flags received in the previous Accreditation Canada survey with regards to the Sustainable Governance standards.
- The Committee hosted the Annual Governance Education session in April which included presentations from the North Simcoe Muskoka LHIN, the Ministry of Health & Long-Term Care and the Ontario Hospital Association. Over fifty registrations were received from both internal and external participants, however due to inclement weather there were approximately 25 participants.
- The Governance Committee oversaw the review of the Professional Staff Bylaws along with the development of a new Credentialing and Appointment Policy. These revisions were reviewed in detail and were followed by a recommendation to the Board. An overview is provided at the end of this report.
- The Annual Board Evaluations were completed in April and a summary was presented to the Board in June along with recommendations for approval.

VI. Overview of key committee responsibilities with recommendations for consideration in the upcoming year:

Governance Policies

- To continue work on improving the Decision Making Framework to align the organizational ethics with that of the clinical ethics framework.

Board Meeting Evaluation

- The Governance Committee recommends that the meeting evaluation process be reviewed to determine the effectiveness of the frequency of the surveys.

VII. Is the Committee following their work plan and meeting their terms of reference?

- A work plan for the committee was approved in October 2012 and, as of the end of May 2013, all deliverables will have been met.

VIII. Are there any emerging risks/issues arising from the Committee's work that the full board should be aware of in preparation for the coming year?

- The Not-For-Profit Corporations Act is scheduled to come into force in January 2014; the new Governance Committee will need to incorporate these changes into the 2013-2014 work plan.
- The Committee is requested to undertake a review and consideration of adopting formal rules of order.
- The Committee is to receive feedback from the Medical Advisory Committee regarding the implementation of criminal record screens for all new applicants and further discuss if more frequent criminal reference screens should be implemented for all staff and physicians.
- It is recommended that the Committee consider revising the Board meeting agenda format that would allow the linkage of the agenda items and reports directly to strategic directions and priorities.

- It is recommended that the Committee consider revising the quarterly Board Meeting Evaluation to a monthly evaluation that would be completed in hardcopy at the Board meeting and linked to the agenda items.

IX. Bylaw Revisions - Background

- Beginning in September 2012, a working group of Physicians and Administration initiated a review of the Professional Staff portion of the MAHC Bylaws.
- The review included legal advice from both MAHC legal counsel as well as legal counsel of the Ontario Medical Association.
- As part of the consultation process, all medical staff were provided with a copy of the revisions and invited to provide feedback.
- The Governance Committee reviewed the final version March 27th as approved by the Medical Advisory Committee. Some further suggestions and revisions were made by the Governance Committee. These were presented at the May Medical Advisory Committee meeting for feedback and support. These were then presented to the Board of Directors June 13th with a recommendation to present to the Members of the Corporation for approval.

X. An Overview Of The Bylaw Amendments

- Generally, there are wording and editorial changes throughout the document to provide clarity and to be in line with industry standards; an example of this is that 'Credentialed Professional Staff' has been changed to 'Professional Staff'. The following chart provides a high level overview of the most significant amendments:

<i>Original Bylaw Article</i>	<i>New Bylaw Article</i>	<i>Rationale</i>
Article 10.3 - Policies & Rules	Article 10.3 Clinical Services Resource Plan	More definitively outlines the requirements.
Article 11 - Appointment & Reappointment to the Professional Staff	Article 10.4 through to Article 10.7	The process and procedures pieces of appointment and re-appointment have been removed from the Bylaw and placed into policy.
Article 12 - Categories of Professional Staff <ul style="list-style-type: none"> • Active • Associate • Courtesy • Regional Affiliate • Locum Tenens • Temporary • Honourary 	Article 11 - Categories of Professional Staff <ul style="list-style-type: none"> • Active • Associate • Modified Active • Regional Affiliate • Term • Locum Tenens • Temporary • Honourary 	These changes were made to add clarity to each category and to be in line with industry standards.
Article 12.11 - Site Specific Privileges	<i>Not applicable</i>	Site specific privileges have been removed.
Article 13 - Professional Staff Duties and Responsibilities	Article 12 - Professional Staff Duties and Responsibilities	Wording changes for clarity and to be in concert with industry standards.
Article 16.03 & 16.04 - Emergency Room Director	<i>Not applicable</i>	This section was removed as it is more appropriate outside of Bylaw.
Schedule A - Muskoka Algonquin Healthcare Mandate	<i>Not applicable</i>	This section was removed, the information was dated and legal advice was that it is not typically included in Bylaws.

Note - the Board of Directors approved a Professional Staff Credentialing and Appointment Policy June 13, 2013.

ANNUAL NOMINATIONS COMMITTEE REPORT 2012-2013



SUBMITTED TO: Members of the Corporation
SUBMITTED BY: Evelyn Brown, Committee Chair

FOR RECEIPT

The purpose of this report is to summarize the activities of the Nominations Committee during the 2012-13 board year.

- Members of the Nominating Committee include Evelyn Brown as Chair, Gregg Evans, Eric Spinks and Natalie Bubela.
- In December 2012, the Nominations Committee met and reviewed the expiring Director terms, the skills profile for the Board. Following the meeting, Evelyn Brown - Chair of the Nominations Committee contacted each of the four Directors to ascertain their interest in renewing their term.
- Written confirmation of interest in renewal of their terms was received from Larry Saunders and Phil Matthews.
- Sven Miglin and Rick Durst both provided written communication of their decision to not renew their terms.
- At the same time, formal resignations were received from Bill Garriock and John Sinclair.
- As a result, it was identified that there was a need to fill four vacancies for the 2013-2014 Board year.
- An advertising campaign took place throughout March with print advertisements in the *Weekender* and *What's Up Muskoka*, along with information posted on www.mahc.ca.
- As of March 27th (application deadline), 11 applications were received for full Board membership and 2 applications were received for Community Representatives.
- The Nominations Committee reviewed all of the applications and short listed based on the skills matrix to interview 6 individuals for the four Board vacancies.

RECOMMENDED COURSE OF ACTION - DIRECTOR NOMINATIONS:

Upon review of the application and outcome of the interview process, the recommended candidates for the four Board vacancies are as follows:

1. Christine Featherstone
 - *demonstrated a strong desire to become part of the MAHC board, her research on MAHC was impressive. Well-spoken and extensive experience on other boards and understands the role of a board member.*
 2. Kevin King
 - *dynamic, related health care experience, tremendous work experience and community board involvement. Demonstrated desire to be part of the board through research.*
 3. Donna Denny
 - *highly recommended, extensive background on boards locally and provincially, can make the difficult decisions, very enthusiastic.*
 4. Cameron Renwick
 - *strong health background, very accomplished in business and community board involvement, intelligent, expresses himself well, easily understood.*
- All references for the above were very positive with no weaknesses identified.

MOTION: *That the following individuals be appointed by the Members of the Corporation to the Muskoka Algonquin Healthcare Board of Directors:*

- *Phil Matthews for a three-year term ending 2016;*
- *Larry Saunders for a three-year term ending 2016;*
- *Christine Featherstone for a three-year term ending 2016;*
- *Kevin King for a three year term ending 2016;*
- *Donna Denny for a one-year term ending 2014;*
- *Cameron Renwick for a two-year term ending 2015.*

REPORT OF THE SOUTH MUSKOKA MEMORIAL HOSPITAL AUXILIARY

It's hard to believe that one year of serving as President of SMMH Auxiliary has passed. This year has been a very rewarding and yet challenging time. Working with so many individuals, Auxiliary Members as well as MAHC Management/Staff has certainly been enjoyable. Management, given the challenges they have had to face have continuously been very approachable and supportive of the Auxiliary. And I thank them whole heartedly.

Our Volunteers continue to work diligently at their tasks doing their best to help in any way they can to make patient and visitors welcome to our hospital. Given the Influenza outbreak in December and January our volunteer hours are less than in the past year. But we are still proud to report hours from April 2012 to end of March 2013, total - 24,583.

September 13, 2012, a presentation was made to Natalie Bubela with a cheque in the amount of \$100,000.00 fulfilling the Auxiliary's commitment, towards the purchase of the Central Monitoring System and Bedside Monitors.

Thanks to our Member at Large who is in charge of Fund raising, all of the willing Auxiliary Members, as well as the supporters and local merchants who so generously give to our cause, as well as funds generated by our Retail Programs has allowed us to donate another \$96,900.00 towards the purchase of: 4 HI-Lo Beds, 5 Regular patient beds, 1 Phototherapy Light Stand, 1 Fetal Heart Monitor.

"Little Things Mean a Lot" Challenge is presently underway. As in the past staff members will be asked to get together with their colleagues and name their special wishes. These wishes could be equipment for staff or patients...perhaps the kind of things that never make it to the hospital's official "wish list". Awards of \$2,000.00 ea, (total of \$10,000.00) will be available to 5 departments. Awards will be chosen randomly as in the past. Draw to take place at the Auxiliary Annual General Meeting June 27 2013.

Spring Fashion Show Fund Raising Event planning is underway. We are hopeful that is years' event will be bigger and better than ever. Fairways of Kirrie Glen will be our host facility. Tickets became available May 1st.

Our Constitution/By-laws Committee has been working diligently over the past couple of months finalizing the approved Revisions and Amendments to the Constitution and By-laws dated June 16, 2011. A vote by ballot for approval was taken at our General Meeting on February 28th. Executive Members approved the Amendments at the April 25th Executive Meeting. A copy of the Constitution/By-laws will be provided for the Board of Directors.

Regretfully two of our Executive Members, due to personal reasons have resigned. Cathie Turley acting Vice President will be replaced by Interim Vice President Jan Davidson. Vicki West Treasurer will be replaced by Cheryl Millar. Vicki will make herself available to assist Cheryl as long as is necessary. New Executive as of May 2013 will consist of:

Brigitte Boehm, President	Donna Green, Member at Large
Jan Davidson, Interim Vice President	Cheryl Millar, Interim Treasurer
Rayma Balymires, Secretary	Sharon Pattinson, Past President

It is with pleasure to report that one of our esteemed volunteers Bill Quemby has been selected by the Town of Bracebridge to receive the 2013 Ontario Medal of Good Citizenship. Presentations to be made at the Rene Caisse Theatre June 6 2013. We congratulate him on his award.

It is with much sadness to report the loss of one of our much loved and devoted members who passed away March 7th 2013. Bill (William) MacKaskill. Bill joined the Auxiliary in 1986 and received the HAAO Provincial Life Member Award in 2008. Bill is dearly missed by his friends and colleagues.

Dates to Remember: Tag Days July 12. Bracebridge and Gravenhurst, July 13, Port Carling, Bala, Widernere and Raymond

As always the Auxiliary Members and the Executive thank the Management and Staff of South Muskoka Memorial Hospital for their continued support and good working relationship.

We extend our wish for a Healthy and Happy Summer.

Respectfully submitted,
Brigitte Boehm - SMMH Hospital Auxiliary President

REPORT OF THE HUNTSVILLE DISTRICT MEMORIAL HOSPITAL AUXILIARY

This was a very busy year for the Huntsville Hospital Auxiliary with our 140 members celebrating the completion of their commitment for \$100,000 toward the vital signs monitors in the ICU and Emergency departments as well as providing 16,097 hours in service to the Huntsville Hospital. When you add in the fund raising and committee meeting hours, the total of volunteer hours for 2012-13 is 22,443. I am proud to be a member of such a vital and energetic team.

Our community fundraisers for 2012-13 included a Spring Bulb sale, Spring Card party, annual Tag Day, BBQ at Robinson's, 3rd annual Auxiliary BMO Golf Tournament, "Sunshine" bags, Santa's Village ticket sales, Fall House Tour and Luncheon, "Huntsville on Stage" variety night, Cookie Delight and Christmas gift wrapping in the mall. I am thankful to the conveners who did a great job organizing and attracting dedicated work teams for these events. The Branches Gift Shop continues to be major contributor for our fundraising efforts.

The Committee Conveners who provide leadership and scheduling for the clinics, community and retail areas and conferences are very much appreciated by the Executive. Many of the committees require hours of work each month.

At the General meeting in January, we approved our fundraising goal this year to replace up to fourteen patient beds for approximately \$100,000. These new beds are safer and more comfortable for the patients and easier for the staff. Our slogan for this project is: Join us in "making" safe, comfortable beds for our patients - your loved ones and ours.

The Executive team was installed at our Annual General meeting in April. They include from left:

Helen Sparkes, Past-president;
Sharon McNally,
2nd Vice-president and Gift Shop Co-convenor;
Susan Bionda, Recording Secretary;
Joanne Matthews, President;
Nancy Waxl, 1st Vice-president;
Vera McWade, Treasurer;
Gwen Todd, Corresponding Secretary.

Missing is Irene Parker, Co-convenor for the Gift Shop.



We were very pleased to honor our four new Provincial Life members, Beryl Clayson, Vera McWade, Irene Parker and Jean Wagner at the HAAO conference in Toronto in October. The Auxiliary is also very proud of our members who received 2013 Ontario Service awards in May at the Algonquin Theatre. They included Kaye Fowler, Pat Cooper, Verna Stephenson, Jean Wagner, Jane Rutledge and Lynn Fletcher.

The Auxiliary is happy to announce our two scholarship winners for 2013. From the hospital staff, Catherine Keeling will receive \$500 as she furthers her education in The Food Service and Nutrition Management Program. A very talented Huntsville High School student, Gregory Gibson, will be using his \$500 scholarship towards his studies in Honors Life Sciences at the University of Waterloo.

The Huntsville Hospital Auxiliary is grateful for the generous support of our community as we raise funds to support our patients, their families and the healthcare team. Fundraisers in the planning stages for this year include:

- Annual Tag Day in Huntsville, Dorset and Port Sidney, June 28
- Charity BBQ at Robinson's, July 12, 13 and 14
- 4th annual Huntsville Hospital Auxiliary BMO Golf Tournament, August 19
- Algonquin Theatre Variety Show "Huntsville on Stage" SNS Productions, October 26

The members of the Auxiliary would like to thank our families and the hospital staff, doctors and administration for their support of our activities and appreciation of our efforts.

Respectfully submitted,

Joanne Matthews - President, Huntsville Hospital Auxiliary

REPORT OF THE SOUTH MUSKOKA HOSPITAL FOUNDATION

On behalf of the Board of the South Muskoka Hospital Foundation, I am pleased to report another successful year of fundraising. We have accomplished much through the strong support of our community.

Over the last year, Foundation donors gave in excess of \$1.5 million that will be used to purchase new equipment and fund important building renovations. The equipment purchases range in size and complexity – everything from new blood pressure cuffs and wheelchairs to a paediatric crash cart for infants in cardiac failure or other trauma related injury. We also purchased a new and important piece of technology for Pharmacy – a Unit Dose Packaging System that enhances patient safety and infection control as well as allowing for significant savings on wastage by packaging medications in a different way.

One significant commitment the Foundation has made is to renovate and upgrade the Central Supply Reprocessing (CSR) department to ensure that reusable medical and surgical instruments are decontaminated and sterilized. The upgrade will bring our hospital in line with evolving healthcare standards and ensure that we maintain our accreditation. These improvements will add to MAHC's excellent reputation for infection control.

This past year, we received our "largest-ever-donation" from an individual, which came from Eileen Sugg in memory of Bert Sugg, a dedicated, community-minded, long-term Bracebridge resident. Their gift of \$750,000 reflects how fortunate we are to have a community made up of people like the Sugg family, who know that supporting their hospital is integral to supporting their community.

Over the past year or so, we have received continued praise from our patients and external sources about how we have exceeded their expectations. This feedback has certainly buoyed us up as we now face new challenges. As healthcare funding is changing in Ontario, we enter this new phase with a solid foundation of positivity and energy from our donors, stakeholders and patients. Our hospital is seeking and finding creative ways to adapt to this new playing field to ensure current services are preserved while creating the capacity to bring in new services.

As we near the end of our fiscal year, our foundation board is already busily planning and preparing for a new campaign year and I have every confidence that together, we will accomplish our goals.

Thank you and I hope you have a wonderful summer.

George Edwards,
Chair, South Muskoka Hospital Foundation

REPORT OF THE HUNTSVILLE DISTRICT MEMORIAL HOSPITAL FOUNDATION

I look back in 2012/13 and see the amazing amounts of donated dollars that have been used to buy new vital signs monitors, digital imaging equipment and a fabulous new dialysis service. All of these things and many more are here because our donors care enough to give. It's been another record year of giving to our hospital.

Huntsville Hospital capital needs continue to grow. New CT Scanner equipment will be installed this year to replace a machine that is almost 10 years old. That project will require \$2 million. Your Foundation has pledged to meet that vital need.

Muskoka Algonquin Healthcare has made a decision to take this organization into the digital world. Your Foundation supports this decision. So not far in your future, your hospital will have pharmacy, patient records and other systems upgraded to serve you in a safer faster way. We know that at least \$4 million will be needed in the next 3 years to get that project well underway.

I have every confidence that the community will respond with generous help. After all, what is more important than our healthcare for life?

Most of us who live work and play around Huntsville have experienced at least one moment at Huntsville Hospital. Based on what research tells us, those moments usually include advanced medicine provided by people who go above and beyond to provide the very best care.

We're fortunate. Huntsville is home to an amazing emergency facility, the District Stroke Centre, brilliant physicians, and it is the hub of a complete system of healthcare in the area.

We're well looked after. But if you followed any of the local news through the winter, you know this hospital, like all smaller centres in Ontario, is under extreme cost pressures. We have skilled management staff doing what they can to both protect what exists and lead the way in creating sustainable models for the future. But they need our help.

Sustainable healthcare requires community fund-raising for capital equipment, technology and facilities, much of which is not covered by our taxes. There will be more needs every year and there is no time to waste.

Huntsville Hospital Foundation is creating a program now called Healthcare for Life. If you value the care you can receive in Huntsville, you'll want to learn more and provide support. If you believe local healthcare is important to your peace of mind here, you'll want to get involved. If you've had just one moment where this hospital served you well, you'll want to give a little back.

For all those moments to come.

Visit www.hhfoundation.ca for giving information and to keep track of what we're doing for you. Send us your email and we'll keep you updated (without overwhelming your inbox). And stay tuned in July when your Huntsville Hospital Foundation launches *Healthcare for Life. Here.*

Respectfully submitted,

Leyone Edmondson, Chair - Huntsville Hospital Foundation

