

# BOARD OF DIRECTORS

## OPEN SESSION AGENDA



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(V) denotes participation virtually; (R) denotes regrets received

<b>Elected Directors:</b>	Dave Uffelmann	Carla Clarkson-Ladd	Bruce Schouten	Michael Righetti	Ruth Chalmers	Jody Boxall
	Dr. William Evans	Marni Dicker	Colleen Nisbet	Mary Lyne	Don Macintosh	Beel Yaqub
<b>Ex-Officio Directors:</b>	Cheryl Harrison	Dr. Khaled Abdel-Razek	Andrea Lucas	Dr. Helen Dempster	Dr. Rohit Gupta	
<b>Executive Support:</b>	Alasdair Smith	Mary Silverthorn	Tammy Tkachuk			
<b>Guests:</b>	Alex Doughty	Barb Duffy	Bobbie Clark			

PAGE #	ITEM # / LEAD	TOPIC - WHAT IS TO BE ACCOMPLISHED/MOTION <small>♦ denotes attachment    ☒ denotes attachment to follow</small>	STRATEGIC THEME	GOVERNANCE ROLE	TIME (Min.)
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### 1.0 CALL TO ORDER

	1.1 D. Uffelmann	Land Acknowledgment <b>We, Muskoka Algonquin Healthcare, acknowledge that we are situated on the traditional territory of the Anishinaabe. We wish to deepen our understanding of the culture of the local Indigenous communities to develop appropriate culturally safe health care services by building trust through respectful relationships that acknowledge past harms and mistakes to move forward in the spirit of Truth and Reconciliation based on the Seven Grandfather Teachings.</b>			4:00 – 4:05 (5)
	1.2 D. Uffelmann	Approval of Agenda <b>MOTION: That the meeting agenda be approved as circulated.</b>	<i>Not applicable</i>	Decision Making	
---	1.3 D. Uffelmann	Declaration of Conflict of Interest <i>To remind members that conflicts are to be declared for any agenda items and the Director is to excuse him/herself from the meeting for the duration of the discussion.</i>	<i>Not applicable</i>	<i>Not Applicable</i>	
---	1.4 A. Doughty & B. Duffy	Patient Experience <i>To ground governance discussions in real-world impacts and ensure strategic oversight remains patient-centered.</i>	Quality Care & Safety	Information	4:05 – 4:25 (20)

### BUSINESS ARISING

*There is no business arising for this meeting*

### 2.0 REPORTS

---	2.1 D. Uffelmann	Chair's Remarks <i>To receive the report of the Chair.</i>	Strengthens all Strategic Themes	Information	4:25 – 4:30 (5)
<b>4</b>	2.2 C. Harrison	Report of the Chief Executive Officer♦ <i>To receive the report.</i>	Strengthens all Strategic Themes	Information	4:30 – 4:40 (10)

### 3.0 PROGRAM QUALITY & EFFECTIVENESS

<b>15</b>	3.1 Dr. K. Abdel-Razek	Report of the Chief of Staff & Medical Advisory Committee♦ <i>To receive the report.</i>	Quality & Safety	Oversight	4:30 – 4:40 (10)
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<b>3.0 Program Quality &amp; Effectiveness Continued...</b>					
17	3.2 Dr. K. Abdel-Razek	Credentialed Staff By-Law♦ <b>MOTION: See briefing note for motion to approve and move by-law forward to Members.</b>	Quality & Safety	Decision Making	4:40 – 4:55 (15)
<b>4.0 RELATIONSHIPS</b>					
---	4.1 B. Clark	Corporate Communications Overview <i>To receive an overview presentation of advancements made with respect to communications.</i>	Strengthens all Strategic Themes	Education	4:55 – 5:05 (10)
21	4.2 C. Harrison	Corporate Communications Strategy 2026-2027♦ <b>MOTION: That the Board of Directors endorse the Corporate Communications Strategy for fiscal year 2026-2027.</b>	Strengthens all Strategic Themes	Decision Making	5:05 – 5:10 (5)
<b>5.0 BOARD EFFECTIVENESS</b>					
---	5.1 C. Nisbet	Report of the Governance Committee Chair <i>To receive a verbal report regarding the activities of the Committee.</i>	Strengthens all Strategic Themes	Oversight	5:10 – 5:15 (5)
27	5.2 C. Nisbet	Board Diversity Questionnaire♦ <b>MOTION: That the Board of Directors endorse the introduction of a self-identification/diversity questionnaire for the Board and authorize the next steps in its development and implementation.</b>	Our Team is Our Strength	Decision Making	5:15 – 5:30 (15)
33	5.3 D. Uffelmann	Chief of Staff Selection Committee Appointment♦ <b>MOTION: That the Board appoint the selection committee as outlined in the report dated May 7, 2026 and authorize the committee to proceed with the search and interview process, ensuring all necessary resources are available to support a thorough and effective recruitment of the Chief of Staff.</b>	Our Team is Our Strength	Decision Making	5:30 – 5:40 (10)
<b>6.0 FINANCIAL AND ORGANIZATIONAL VIABILITY</b>					
35	6.1 M. Lyne	2025/2026 Staff/Credentialed Staff Engagement Survey Results♦ <b>MOTION: That the Board of Directors receive the engagement survey results.</b>	Our Team is Our Strength	Oversight	5:40 – 5:50 (10)
44	6.2 M. Lyne	Information Technology: Risk & Security♦ <i>To receive an update.</i>	Innovative Future	Oversight	5:50 – 6:00 (10)
<b>7.0 CONSENT AGENDA - To approve/receive the items listed below without further debate.</b>					
<b>MOTION: That the following items be approved or received as indicated:</b>					
47	7.1	Approval of the Board of Director Meeting Minutes of March 26, 2026♦	Strengthens all	Decision Making	6:00 – 6:05
52	7.2	Approval of Attestation – Fighting Against Child Labour in Supply Chains Act♦	Strengthens all	Decision Making	
<b>8.0 ADJOURNMENT</b>					
---	8.1 D. Uffelmann	<b>MOTION: That the open session be adjourned.</b>	<i>Not applicable</i>	<i>Not Applicable</i>	6:05
<b>Break: 6:05 – 6:30 (25)</b>					

**PATIENT- AND FAMILY-CENTERED CARE** at Muskoka Algonquin Healthcare (MAHC) is a philosophy of care that ardently promotes the partnership between patients, families, and health care providers at all points of the patient’s journey including key transition points such as transfer to another facility, another unit in the hospital, or discharge home.

### MAHC DEFINITION OF QUALITY

Quality at MAHC results in shared decision-making between the patient/family and health care team to achieve a patient identified desired health outcome. MAHC will deliver safe, effective, patient-centered services, efficiently, and in a timely fashion, resulting in optimal health status for our patients.

Defining Elements of Quality Care		
<i>Element</i>	<i>Patient Meaning</i>	<i>Provider Meaning</i>
Safe	I will not be harmed by the health system.	The care my patient receives does not cause the patient to be harmed.
Effective	I receive the right treatment for my condition, and it contributes to improving my health.	The care I provide is based on best evidence and produces the desired outcome.
Patient Centered	My goals and preferences are respected. My family and I are treated with respect and dignity.	Decisions about my patient’s care reflect the goals and preferences of the patient and his or her family or caregivers.
Efficient	The care I receive from all practitioners is well coordinated and efforts are not duplicated.	I deliver care to my patients using available human, physical, and financial resources efficiently, with no waste to the system.
Timely	I know how long I have to wait to see a doctor or for tests or treatments I need and why. I am confident this wait time is safe and appropriate.	My patient can receive care within an acceptable time after the need is identified.
Equitable	No matter who I am or where I live, I can access services that benefit me. I am fairly treated by the health care system.	Every individual has access to the services they need, regardless of his/her location, age, gender, or socio-economic status.

### ISSUE FOCUSED ETHICAL DECISION MAKING FRAMEWORK

The intent of this framework is to enable decision makers to address complex and challenging issues in a comprehensive and logical manner. It is a reflective process intended to stimulate discussion to identify explicit reasons for or against a proposed course of action, and to do that in the context of the Mission, Vision and Values.



<b>SITUATION</b> <b>Understand the Problem</b>	<b>BACKGROUND</b> <b>Set the Context</b>
Tell the Story  What exactly is the problem we have to solve?  Who needs to be involved in the decision-making?  Who has the authority to make the decision?	What values or principles are either engaged or are in conflict?  How do MAHC’s Mission, Vision and Values fit?  Is there relevant law?  Is there relevant MAHC policy/procedure?  Is there relevant professional ethical policy?  What is my personal context and/or bias?  Was the ethicists’ assistance required?
<b>ASSESSMENT</b> <b>Consider the Options</b>	<b>RECOMMENDATION</b> <b>Develop an Action Plan</b>
Ask first – is doing nothing an option?  What are the Benefits or Strengths?  What are the Harms / Limitations / Consequences?  How does this align with values?  How does this align with relevant MAHC Values/Principles/Policies and Legislation/Laws?	What is the decision?  Does the decision pass the TV test?  What is the implementation plan?  Who has to take action?  What is the communication plan?  How do we evaluate/revise the action plan if required?