



## December 15, 2025 - Meeting Book - KHSC Board of Directors - Open Meeting

KHSC Board of Directors Meeting - December 15, 2025 - Open Agenda

### 1.0 CALL TO ORDER, CONFIRMATION Of QUORUM, CONSENT AGENDA & APPROVAL OF AGENDA

1600 / 5 min

1.1 Welcome, Call to Order, Quorum Confirmation, Conflict of Interest, Chair's Remarks McCullough

1.2 Indigenous Acknowledgement Reflect All

We are grateful for the opportunity to meet today and are thankful to all the generations of people who care for these lands and waters. KHSC is located on the ancestral lands and waters of the Anishinaabeg, Haudenosaunee and serve a wider geographical area that encompasses many Indigenous communities including Tyendinaga, Katarokwi as well as communities within the Weeneebayko Area Health Authority. As we partner in care, discovery and learning to achieve better health outcomes for our communities, KHSC is committed to actively advocating for and acting upon the Truth and Reconciliation Committee's calls to Action on Health.

1.3 Opening Value Statement (Compassion, Respect, Partnership, Excellence, Innovation) Reflect Leslie

Verbal

1.4 Consent Agenda Items Decide / Amend McCullough

- a) Briefing: Summary of Consent Items - December 2025
- b) Minutes: Open Board Meeting Draft - October 27, 2025
- c) Report: Q2 Access and Flow
- d) Report: Q2 Quality Improvement Plan (QIP)
- e) Briefing: Approach to Development of 2026-27 QIP
- f) Report: Q2 Patient Experience Report
- g) Report: Q2 Patient Safety & Quality Report
- h) Service Accountability Agreement (SAA) Inclusion Report
- i) Q2 KHSC Strategic Performance Reporting
  - Briefing: Q2 KHSC Strategic Performance Report Summary
  - Readers Guide: Service Accountability Agreement (SAA)
  - [Link: Q2 Strategic Performance Report \(SPR\)](#)
  - [Link: Service Accountability Agreement \(SAA\)](#)
  - [Link: 2025-26 Strategic Performance Index](#)
- j) Quarterly Media Reports
  - Report: Q1 Media Report
  - Report: Q2 Media Report
- k) Update to Board Policies
  - Briefing: Sudden Successor Policy Updates
  - Appendix 1: III-1 CEO Selection and Succession Planning
  - Appendix 2: III-3 COS Selection and Succession Planning
  - Briefing: Update to Board Policies II-B-3 and II-B-6
  - Appendix 1: II-B-3 Nominations Process for Committees
  - Appendix 2: II-B-6 Board Meetings
  - Appendix 3: KHSC Board Membership Term Summary
- l) Briefing: Corporate Naming Recommendations
- m) Board Mentorship Program Update

	1.5 Approval of the Open Agenda	Decide / Amend	McCullough
	<b>2.0 BOARD EDUCATION &amp; LEADERHSIP DEVELOPMENT</b>		
1605 / 5 min	2.1 Framework for January Board 1:1 Meetings	Discuss / Inform	McCullough
	<b>3.0 BUSINESS ARISING FROM THE MINUTES</b>		
	No business arising from the minutes.		
	<b>4.0 MATTERS REQUIRING DECISION</b>		
1610 / 5 min	4.1 KHSC Board & Committee Size & Structure	Decide / Amend	Fell / Ilse
1615 / 5 min	4.2 Nominations/Selection Process for 2026-27	Decide/Amend	Fell / Ilse
	Briefing: Nominations/Selection Process for 2025-26		
	<a href="#">Link: II-A-3 Responsibilities of Individual Directors</a>		
	<a href="#">Link: II-A-6 Position Description for Board Officers and Committee Chairs</a>		
1620 / 5 min	4.3 Selection Process for Patient Experience Advisors to Board Committees	Decide/Amend	Fell / Ilse
1625 / 10 min	4.4 Briefing: Meeting Evaluation at Board and Committee	Decide/Amend	Fell / Ilse
	<b>5.0 MATTERS FOR DISCUSSION</b>		
1635 / 10 min	5.1 CEO Report to the Board - December 2025	Discuss/Inform	Pichora
1645 / 5 min	5.2 Chief of Staff Report & November MAC Meeting Report	Inform/Discuss	Fitzpatrick
1650 / 5 min	5.3 Update from the President of the Medical Staff Association (MSA)	Discuss/Inform	Daneshvar
	Verbal		
1655 / 5 min	5.4 UHKF President & CEO Update Report	Discuss/Inform	Zsolnay
	<b>6.0 REORTING &amp; UPDATES</b>		
1700 / 30 min	6.1 Board Committees - November Meeting Highlights	Presentation & Verbal Update at Meeting	
	a) Executive Committee		McCullough
	b) People, Finance & Audit Committee		Talbot-Allan
	c) Patient Care & Quality Committee		Shepherd
	Briefing: Program Service Presentation - Surgical Site Infection (SSI) Prevention		
	<a href="#">Presentation: Program Service Presentation Surgical Site Infection (SSI) Prevention</a>		
	<a href="#">Video: Program Service Presentation - Patient Video</a>		
	d) Research Committee		Davidson
	e) Governance Committee		Fell
	f) Redevelopment Special Committee		Desgagnés
1730 / 10 min	6.2 Governing Body Assessment (GBA) Survey Results and Work Plan	Inform/Discuss	Fell / Ilse
	<b>7.0 IN-CAMERA SEGMENT (Members of the Public/Guests depart meeting/break)</b>		
1740 / 15 min	7.1 Motion to Move In-Camera / Refreshment Break	Inform	McCullough
	<b>12.0 REPORT ON IN-CAMERA MATTERS</b>		
1835 / 5 min	12.1 Motion to Report on Decisions Approved In-Camera	Decide	McCullough
	Verbal		
	<b>13.0 MEETING SURVEY, DATE OF NEXT MEETING &amp; TERMINATION</b>		
	<a href="#">Link: Expression of Interest for KHSC Board &amp; Committee Work for 2026-27</a>		
	Date of Next Meeting/Education Session: Monday, January 26, 2026 16:00 to 19:00 hours		

## **Motion to Terminate the Meeting**

### **December 15th Holiday Board Social Agenda**

#### **INFORMAL IN-CAMERA SESSION OF ELECTED DIRECTORS**

As per policy II-B-6 Board Meetings. At the conclusion of each Board meeting and at the call of any two directors, an informal session of elected directors may be conducted without the presence of the ex-officio directors. The CEO and COS may be invited to participate in a part of the meeting upon the invitation of the Chair before being excused. This process provides an opportunity to the Chair to discuss areas where performance of the directors could be strengthened. Any matters pertaining to specific meeting agenda items, or all other aspects of the Board's roles and responsibilities must not be discussed in such a meeting. No decisions will be made, and no minutes will be prepared. Following the informal session, the Chair will discuss matters arising, as appropriate with the CEO and COS.

## **BOARD OF DIRECTORS OPEN MEETING: DECEMBER 15, 2025**

A regular meeting of the Board of Directors of the Kingston Health Sciences Centre was held in-person at Kingston Health Sciences Centre, Hotel Dieu Site, 166 Brock Street in the Henderson Board Room on Monday, December 15, 2025 from 1600 to 1900 hours. The following are the open minutes.

Elected Members Present (voting): Mélanie Josée Davidson, David Fell, Alfred Hendry, Patrick Johnston, Suzanne McGurn, Ben McIlquham, Emily Leslie, Sherri McCullough (Chair), Kevin Snedden, Laura Talbot-Allan, and Sandy Wilson.

Ex-officio Members Present (voting): Lisa Tannock

Ex-officio Members Present (non-voting): Parham Daneshvar, Mike Fitzpatrick, Jason Hann, and David Pichora

Regrets: Anne Desgagnés, Karen Humphreys-Blake, Mona Rahman and Margaret Shepherd

Staff: Nick Anand, Tessa Devos (Recording Secretary), Val Gamache-O'Leary, Chris Gillies, Renate Ilse, Indira Naraine, Caroline Reid, Steve Smith, and Tom Zsolnay.

### 1.0 CALL TO ORDER, CONFIRMATION OF NOTICE, QUORUM, CONFLICT DECLARATIONS, AGENDA APPROVAL

#### 1.1 Welcome, Call to Order, Confirmation of Quorum, Conflict Declarations, Agenda Approval

Sherri McCullough called the meeting to order, confirmed quorum and ensured everyone was able to hear the proceedings. No declarations of conflict were recorded. The chair reminded everyone that the January Board meeting will take place at Kingston General Hospital (KGH) in the Dietary 3 Boardroom to accommodate Board hospital tours prior to the meeting.

#### 1.2 Indigenous Acknowledgement

The Indigenous Acknowledgement was included on the agenda in advance of the meeting for Board members to reflect upon as they reviewed the materials.

#### 1.3 Opening Value Statement (Compassion, Respect, Partnership, Excellence, Innovation)

Emily Leslie provided the opening value statement speaking on the value of partnership. She emphasized that true partnership creates a sense of harmony and shared energy when people unite around a common purpose.

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## 1.4 Consent Agenda Items

Agenda materials were posted on the board portal on December 9, 2025. The following items were provided as part of the consent agenda:

- a) Briefing: Consent Agenda Items Summary – Open Agenda – December 2025
- b) Minutes: Draft KHSC Board of Directors Open Minutes - October 27, 2025
- c) Report: Q2 Access and Flow
- d) Report: Q2 Quality Improvement Plan (QIP)
- e) Briefing: Approach to Development of 2026-27 QIP
- f) Report: Q2 Patient Experience Report
- g) Report: Q2 Patient Safety & Quality Report
- h) Briefing: Service Accountability Agreement (SAA) Inclusion Report
- i) Briefing: Q2 KHSC Strategic Performance Reporting
- j) Reports: Quarterly Media Reports
- k) Briefing: Updates to Board Policies
- l) Briefing: Corporate Naming Recommendations
- m) Briefing: Board Mentorship Program Update

Moved by L. Talbot-Allan, seconded by E. Leslie:

THAT the consent agenda be approved as circulated.

CARRIED.

## 1.5 Approval of Agenda

The Chair drew attention to the pre-circulated agenda.

Moved by D. Fell, seconded by S. McGurn:

THAT the agenda be approved as circulated.

CARRIED.

## 2.0 BOARD EDUCATION & LEADERSHIP DEVELOPMENT

### 2.1 Proposed framework for the Annual Board Chair 1:1 meetings in January

Sherri McCullough provided an overview of the framework for the annual Board Chair 1:1 fireside chats slated for January 5-6, 2026. The meetings are intended to garner input from individual directors on the overall work of the board and committees, ideas for building on the board's strengths, as well as providing an opportunity for individual directors to reflect on their performance over the past year and identify goals for the coming year.

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### 3.0 BUSINESS ARISING FROM THE MINUTES

No items identified.

### 4.0 MATTERS REQUIRING DECISION

#### 4.1 Board Committee Size and Structure

The Chair drew attention to the pre-circulated briefing note and recommendations from the Governance Committee. David Fell, Chair of the Governance Committee, provided a brief overview of the key considerations as discussed at the November Governance Committee meeting around board size, committee structure and frequency of meetings for 2026-27.

Moved by P. Johnston, seconded by E. Leslie:

THAT, as recommended by the Governance Committee, the KHSC Board of Directors endorse that the overall size of the Board remain at 20 (14 elected directors and 6 ex-officio directors); and

THAT, as recommended by the Governance Committee, the KHSC Board of Directors, endorse the continuance of the same meeting frequency for 2026-27 for the board and committees, recognizing the potential for additional meetings if required.

CARRIED.

#### 4.2 Nominations/Selection process for 2026-27

Further to the Board's endorsement in October of the critical path for 2026-27 Board Nominations, members received copies of the Expression of Interest Survey, Updated Skills Matrix and Individual Director Self-Reflection tool as recommended by the Governance Committee.

Moved by A. Hendry, seconded by E. Leslie:

As recommended by the Governance Committee,

THAT the KHSC Board of Directors endorse the Expression of Interest Survey for 2026-27; and

THAT the KHSC Board of Directors endorse the Updated Skills Matrix Tool for 2026-27; and

THAT the KHSC Board of Directors endorse the Individual Director Self-Reflection Tool for 2026-27.

CARRIED.

Members were asked to complete the survey by December 31, 2025. For ease of access, a link was provided at the bottom of the open agenda, on the home page of BoardEffect. An email with a link to the survey will also be distributed following the meeting.

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#### 4.3 Selection Process for Patient Experience Advisors to Board Committees

David Fell provided an overview of the process for appointing Patient Experience Advisors (PEAs) to committees. At the November Governance Committee meeting, members discussed ongoing challenges in recruiting PEAs to Board committees, noting that most interested candidates prefer to serve on the Patient Care & Quality Committee. The Board also reviewed the distinction between the fiduciary responsibilities of Directors, who are required to act in the best interests of the hospital, and the non-fiduciary role of Patient Experience Advisors. It was further confirmed that eligibility to serve on a Board committee requires individuals to already be registered as a Patient Advisor with the hospital.

Moved by L. Tannock, seconded by L. Talbot-Allan:

THAT, as recommended by the Governance Committee, the KHSC Board of Directors endorse the annual process for identification of Patient Experience Advisors to serve on board committees be undertaken as outlined in Board Policy II-B-0.

CARRIED.

#### 4.4 Meeting Evaluation at Board and Committee

At its November meeting, the Governance Committee held an in-depth discussion on the topic of meeting evaluations. The Committee reviewed the history of prior discussions, changes implemented to date, and the recommended approach for the remainder of the year. David Fell noted that the Committee recommends adopting a hybrid evaluation model, which includes micro-surveys at the conclusion of each Board and Committee meeting to capture quick feedback and comprehensive evaluations twice per year to provide deeper insights. No additional concerns were raised regarding the renewed approach.

Meeting effectiveness surveys will be shared at the end of the agenda, displayed as a QR code on screen at the conclusion of Board and Committee meetings, and distributed by email following the meetings.

Moved by P. Johnston, seconded by S. McGurn:

THAT as recommended by the Governance Committee, the KHSC Board of Directors endorse the adoption of a hybrid meeting evaluation model with brief micro surveys after each meeting paired with in-depth surveys biannually; and

THAT as recommended by the Governance Committee, the KHSC Board of Directors endorse the continued piloting of the end of meeting evaluator by rotating members at the Governance Committee.

CARRIED.

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## 5.0 MATTERS FOR DISCUSSION

### 5.1 President & CEO Update

A written report was posted to the board portal on December 9, 2025 as part of the open agenda materials for review in advance of the meeting. David Pichora provided a few additional updates. First, the Ontario Hospital Association (OHA) has introduced a new performance dashboard that maps hospital efficiency against funding levels. The dashboard has been very helpful in comparing our performance to peer hospitals in the region and peer tertiary hospitals in the province. KHSC ranks very high on efficiency compared to most but low on funding. Similarly, Ontario Health has initiated a Local Delivery Group (LDG) process, originally designed to establish a top-down approach to cybersecurity management. This framework has now been expanded to include centralized intake for CT and MRI for select procedures. Looking ahead, we can expect the development of a regional central intake model.

Next, he noted that the UHKF CEO search is underway, with a firm selected and set to begin a national search shortly. In addition, Catholic Health International (CHI) has selected a new CEO, with Eileen Bowes, who was formerly a member of the senior leadership team at CHI, being the successful candidate.

Finally, KHSC (with the KHSC Research Institute (KHSC-RI)) was again named as one of Canada's Top 40 Research Hospitals in the annual Research InfoSource rankings. While KHSC's ranking declined from 23rd in the previous year despite an increase in research funding, Steve Smith noted that the differences in funding among ranked institutions were minimal. He also explained that reporting delays meant several recently announced and ongoing major research projects were not captured in the rankings.

### 5.2 Chief of Staff / MAC Report – November 2025

The Chief of Staff report was circulated in advance of the meeting. Mike Fitzpatrick provided a brief update on the Physician Wellness Index, noting a decline this year following post-pandemic improvements. While the index has not returned to pandemic lows, the decrease was anticipated after the implementation of Lumeo last year, and work is underway to address the challenges physicians are experiencing with the system.

A question was raised regarding the MyHealth Portal, which provides patients with access to clinical notes, laboratory results, pathology reports, and other health information. Expansion to additional clinics is planned for the new year and further work is also underway to introduce appointment reminder notifications through the portal, replacing traditional mail and phone reminders. A subsequent phase enabling patients to book and modify appointments directly is also being discussed.

A question was also raised regarding hospital capacity and patient flow with the onset of influenza season. Mike reported increasing patient volumes, though the hospital has not yet reached full capacity, and noted that community vaccination rates remain low.

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### 5.3 Update from the President of the Medical Staff Association (MSA)

Parham Daneshvar, President of the Medical Staff Association (MSA), provided an update from the November MSA meeting, noting ongoing discussions focused on physician engagement and strategies to enhance participation. He highlighted that MSA participation at KHSC is voluntary, unlike some hospitals where mandatory dues tied to credentialing increase engagement; however, KHSC is unable to adopt this approach as credentialing is managed by Queen's.

The MSA also reviewed the Physician Wellness Report, examining variations across departments and divisions to identify areas most affected. Mike Fitzpatrick noted that he and Chris Gilles meet annually with each department to review wellness survey feedback and address concerns. In addition, the MSA executive team plans to meet with departments to raise awareness of the Association and encourage involvement. The next MSA meeting is scheduled for January.

### 5.4 UHKF President & CEO Report – December 2025

Tom Zsolnay, President of the University Hospitals Kingston Foundation, highlighted key points from his written report. He noted that fundraising has reached approximately \$6.9 million toward the new revenue goal and, while currently below target, efforts to increase contributions are ongoing. He also highlighted strong media engagement with the Matching Gift Angel Challenge, which is helping to educate the community on the importance of giving, and noted that the rollout of a new text messaging system is showing early signs of improved engagement and reach.

## 6.0 REPORTING & UPDATES

### 6.1 Board Committee Meetings (Highlights from November 2025)

The Board Chair invited each of the Committee Chairs to provide an overview of discussions from their November meetings. KHSC Board committee meetings are held in-camera, and the minutes are provided to the Board as part of the in-camera agenda. Each committee received a summary report on strategic performance for Q1, including the strategic performance report (SPR), service accountability agreement (SAA), and the strategic performance index (SPI), also included in today's open consent agenda materials for information.

A slide presentation was provided, and the committee chair provided highlights of recent committee work.

#### a) Executive Committee.

Sherri McCullough, Chair of the Executive Committee reported on the activities of the November 19, 2025 meeting. The committee discussed the critical path for CEO and COS recruitment and selection. Committee recommendations on the items discussed have been included in the in-camera agenda for the Boards consideration.

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b) People, Finance & Audit Committee

Laura Talbot-Allan, Chair of the Finance & Audit Committee reported on the activities of the People, Finance & Audit Committees November 17<sup>th</sup> meeting, highlighting receipt of second quarter reporting on Major Capital Development & Infrastructure projects, Major Information Technology Projects, Information Security, 2025-26 Q2 Capital Budget, HSAA/MSAA financial indicators, Q2 People Dashboards, and occupational health & safety scorecards. The committee also received an overview of risk management insurance coverage and claims, briefing on long-term debt, statutory compliance update and HAPS/CAPS and H-SAA/M-SAA Update. The committee discussed accreditation criteria. the September 2025 financial results, a sustainability process update, an update on the Lumeo project, HR Information Management highlight and an update on the SEAMO 3-year HHR Plan. The committee's recommendation regarding Fire Alarm System Replacement and Emergency Power System Capacity Remediation has been included in the in-camera agenda for the Boards consideration.

c) Patient Care & Quality Committee

Patrick Johnston provided the update on behalf of Margaret Sheperd, Chair of the Patient Care and Quality Committee. The reported activities of the Patient Care & Quality Committee included receiving a number of Q2 reports including Access and Flow, Patient Safety & Quality, Patient Experience, Quality Improvement Plan, and the SAA Inclusion Report. Discussion focused on the approach to the development of the Quality Improvement Plan (QIP) for 2026-27, a presentation on critical incidents, an update on Lumeo and a review of accreditation criteria. The program presentation was on Hip and Knee Surgical Site Infection (SSI) Improvements, which has been posted to the portal.

d) Research Committee

Mélanie Josée Davidson, Chair of the Research Committee, provided an update on the committees discussions at their November 18, 2025 meeting. The committee received draft KHSC-RI Strategic Plan and Q2 Research Strategy Milestone Report, KHSC-Queen's University Affiliation Agreement, Q2 KHSC-RI Financials, and researcher profile of Theresa Purzner.

e) Governance Committee

David Fell, Chair of the Governance, provided a brief overview of the committee's activities at the November 18, 2025 meeting. The committee received the updates to Executive Committee Board Policies III-1 and III-3 and the Q1 and 2 Media Reports. The committee reviewed Board Policies II-B-3 and updates to Board Policy II-B-3 and II-B-6. The committee discussed board and committee size and structure for the coming year as well as the proposed nominations process. The committee discussed the approach to the Board Chair 1:1 meeting in early January, and the selection process for Patient Advisors to Board committees. The committee also reviewed the Board Mentorship program update, UHKF Naming Recommendations, an updated meeting evaluation approach, the results of the

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Governing Body Assessment (GBA) Survey, the proposed 2025-26 Board hospital tour schedule, and the conflict-of-interest handout. The committee's recommendations to the board were spread throughout the open and in-camera agendas.

f) Redevelopment Special Committee

Emily Leslie provided the Redevelopment Special Committee Update on behalf of Anne Desgagnes, Chair. At their December 1<sup>st</sup> meeting, they received the UHKF Campaign Readiness Report Briefing. They also discussed the Redevelopment Committee Terms of Reference, a Redevelopment Update, an update on Government and Stakeholder Relations, the next steps involved around local shares, and a the potential next steps for rebranding and the readiness study. The committee is recommending to the Board the UHKF Campaign Readiness Report and the Redevelopment Update Presentation.

6.2 Governing Body Assessment (GBA) Survey Results and Work Plan

The results of the Governing Body Assessment (GBA) survey and the accompanying work plan were included in the meeting package. The Governance Committee reviewed the findings from the GBA survey conducted in October and identified areas where additional education would be beneficial, including inclusion, quality and safety, stakeholder engagement, governance effectiveness, environmental stewardship, and information management and security. It was emphasized that the identified knowledge gaps largely reflect differences in member tenure and awareness rather than deficiencies in governance performance.

In response to the survey results, a work plan was developed outlining specific actions and timelines to address the identified knowledge gaps over the coming months. The accreditation mock tracer session is scheduled for January 19, 2026 at 9:30 a.m., and Board members were encouraged to continue reviewing the preparatory cheat sheets.

7.0 IN-CAMERA SEGMENT (Members of the Public/Guests depart / BREAK)

7.1 Motion to Move In-Camera

Moved by L. Talbot-Allan, seconded by L. Tannock:

THAT the Board move to an in-camera session.

CARRIED.

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## 12.0 REPORT ON IN-CAMERA MATTERS

### 12.1 Motion to Report on Decisions/Discussion from In-Camera Segment

The Chair provided the following report on in-camera items:

- The board approved the closed minutes of the October 27, 2025 meeting;
- The board received the most recent final board committee minutes
  - from the Executive Committee (October 8th),
  - People, Finance & Audit Committee (October 6th),
  - Patient Care & Quality Committee (October 6th),
  - Governance Committees (October 7th),
  - Research Committee (October 7th)
  - Redevelopment Committee (October 9th 2024 and June 18th 2025)
- The Board received the updated Critical Path for CEO and COS Recruitment and Selection;
- The Board received the Q2 People Dashboards;
- The Board received the HR Information Management Highlight;
- The board received the financial results for the month ended September 2025;
- The Board received the Q2 HSAA / MSAA Financial Indicators;
- The Board received a report on Debt Obligations and Repayment Planning;
- The board received the Q2 Update on Capital Budget;
- The board received an update on the Risk Management Insurance & Claims Review
- The board received a Sustainability Process Update
- The board approved a number of appointments and reappointments to the professional staff;
- The board approved a number of Housestaff appointments;
- The board received the Q2 Information Security Update
- The board received an update on the Lumeo project;
- The board approved the new KHSC/Queen's Affiliation Agreement
- The board received the UHKF Readiness Report
- The board received the Redevelopment Update Presentation
- The board approved the appointment of Susan Fitzpatrick as a Patient Experience Advisor on the Research Committee
- The board approved the Fire Alarm System Replacement Project
- The board approved the Emergency Power System Capacity & Infrastructure Remediation
- The board received a conflict-of-interest handout and examples list
- The board received an update from the President and CEO.

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## 13.0 DATE OF NEXT MEETING, MEETING SURVEY & TERMINATION

13.1 Date of Next Meeting: Monday, January 26, 2026 at 1600 hours.

The Chair drew attention to the survey link available on the event card and linked to the meeting agenda. Members were encouraged to complete the survey immediately following the meeting.

Members were also reminded to complete the Expression of Interest Survey for 2026-27 by December 31, 2025.

The meeting terminated at 1815 hours on motion of E. Leslie.

Sherri McCullough  
Chair