

BOARD OF DIRECTORS MEETING
OPEN SESSION
 Thursday, March 26, 2026
 5:30 pm – La Verendrye General Hospital / Webex

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 – February 26, 2026 * Pg 4 2.2 Board Chair & Senior Leadership General Report – D. Clifford, H. Gauthier, D. Harris, C. Larson, J. Ogden, Dr. L. Keffer * Pg 6 2.3 Governance Committee Report – B. Norton 2.4 Audit & Resources Committee Report – B. Norton * Pg 8 2.5 Quality Safety Risk Committee Report – M. Kitzul * Pg 11 2.6 Auxiliary Reports * Pg 13	
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: April 30, 2026	
11.	Termination	

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




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

Thursday, March 26, 2026

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.



VISION
Caring, Together

MISSION
Improving The Health of Our Communities

VALUES
Progressive • Integrity • Caring • Accountable

STRATEGIC PILLARS

ONE RIVERSIDE
Supporting a consistent and enabling organizational culture

INVESTING IN THE PEOPLE WHO SERVE
Creating a plan to strategically leverage human resources

TOMORROW'S RIVERSIDE TODAY
Making investments today, to support Riverside tomorrow

STRIVING TO EXCEL IN EQUITY, DIVERSITY & INCLUSION
We will support EDI in all we do

 **Riverside
Health Care**

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

Date of Meeting: February 26, 2026

Time of Meeting: 5:30 pm

Location of Meeting: Webex / LVGH Board Room

PRESENT: H. Gauthier Dr. L. Keffer D. Clifford E. Bodnar
 D. Pierroz D. Loney M. Jolicoeur B. Norton
 Dr. K. Arnesen K. Lampi *via Webex

STAFF: B.Booth, C. Larson, D. Harris, J. Ogden*

REGRETS: M. Kitzul, A. Beazley

GUESTS: S. LeBlanc

1. CALL TO ORDER:

D. Clifford called the meeting to order at 5:30 pm. B. Booth recorded the minutes of this meeting. B. Norton read the Indigenous Acknowledgment and the Mission Statement. D. Clifford welcomed everyone to the meeting and reminded all of the virtual meeting etiquette. Round table introductions took place.

1.1 Quorum

D. Clifford shared there were 2 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: M. Jolicoeur SECONDED BY: K. Lampi
THAT the Board approves the Agenda as circulated.
CARRIED.

4. Patient / Resident Safety Moment

J. Ogden shared a patient story on behalf of Samantha Keown, RHC's ALC Community Nurse:

ALC Community Nurse Program – Riverside Health Care

J. Ogden shared Samantha will be leaving us to move closer to family. She will be greatly missed, and we need more people like her. Our district is losing a great individual.

An older adult living alone faced declining health, increasing loneliness, and challenges maintaining independence, despite initially resisting support and future planning. Through ongoing, relationship-based care and coordination, trust was built over time, allowing for meaningful conversations about needs, safety, and transitions in care. The case highlights the importance of person-centered support,

emphasizing that dignity, connection, and timely access to appropriate services are as critical as medical interventions.

Discussion took place regarding Assisted Living facilities and having an actual facility in our district and who would potentially manage this type of facility. Further discussion occurred around expansion of this service as well as support of the ALC Nurse position. Conversation ensued around a possible volunteer/visiting program and possibly linking with the Palliative Care Committee to investigate this.

D. Clifford thanked J. Ogden for sharing this story.

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: B. Norton THAT the Board go in-camera at 5:43 pm.	SECONDED BY: D. Loney CARRIED.
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9. OTHER MOTIONS/BUSINESS:

There was no other motions/business.

10. DATE AND LOCATION OF NEXT MEETING:

March 26, 2026

11. TERMINATION:

It was, MOVED BY: E. Bodnar THAT the meeting be terminated at 6:53 pm.	CARRIED.
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Chair

Secretary/Treasurer



Board Chair, Chief of Staff & Senior Leadership Report – March 2026 Open Session

Strategic Pillars & Directions

Investing in Those Who Serve - Strategically Leveraging our Human Resources

- **Cybersecurity Training**
Cybersecurity training from Infosec IQ will be provided for staff across all Northern Hospitals. This training is being provided through the guidance of the NW Security Operations Centre.
- **RC Outbreak – West Wing**
RHC and the Northwestern Public Health Unit declared a Respiratory Outbreak on the West Wing of Rainycrest Long Term Care Home on March 10, 2026.
 - There is no cross-facility staffing unless approved by your supervisor in consultation with Infection control.
 - Visitation is restricted to two (2) individuals, at one time, per patient. Medical masking is required for all visitors.
 - Thorough hand hygiene is mandatory for all staff.
 - Increased high-touch cleaning is ongoing.
 - Appropriate droplet and contact precautions are in place. Signage has been posted.
 - Enhanced Masking remains in place for all resident care areas, including required for all staff entering the West Wing Unit as well as for visitors.

One Riverside - Promoting a Consistent and Empowering Culture

- **Privacy Impact Assessments**
New legislation requires RHC to complete a Privacy Impact Assessment (PIA) for any new system or device that will collect, use/process, retain, store, disclose, secure or dispose of personal information.
- **Payroll Project**
Go-live of the UKG payroll and HR system is deferred to April 28, 2026. This project was originally scheduled to go-live at the start of 2026.

Tomorrow's Riverside Today - Investing Today to Support Tomorrow

- **AI Leadership**
The ongoing evolution of AI across the health care system, including the benefits and challenges created, are garnering considerable attention at the district and regional levels. IT leadership at the regional level is working collaboratively to advance policy and procedure development and technology onboarding in a consistent and aligned manner.

As a result of this evolving technology RHC's communication lead has agreed to serve as AI Lead for the organization, ensuring synergies are addressed across all aspects of the organization, and that there is a coordinated effort to manage this new technology as its role in health care continues to expand.
- **Fundraising/Grants**
The "Lights, Camera, DIAGNOSIS" campaign to fund the acquisition of the Rainy River District's first-ever MRI machine and new Digital Radiography (X-ray) units for La Verendrye General Hospital (LVGH) in Fort Frances and the Rainy River Health Centre continues to progress well. Funds raised to date are around \$1.45 million and the remaining fundraising target is at \$165k. Canadian Tire donated \$20,000 to the campaign on March 11, 2026. This is the largest contribution from a district business for this campaign. Fundraising efforts continue to include 50/50 raffles, ongoing donations/grant opportunities. The Lakers Hockey Fights Cancer night and the Tim Horton's April Smile Cookie campaign are specific events that further support this campaign.

Striving To Excel in Equity, Diversity & Inclusion (EDI)

- **Hospital To Home (H2H)**
Hospital to Home funding was recently approved for Q4 of this fiscal year. The Hospital to Home (H2H) program consists of integrated models of care designed to support patients as they safely transition home following a hospital visit or stay, especially those at risk of being designated Alternate Level of Care (ALC) or already designated ALC. H2H will ensure patients are aligned with the right program, avoids unnecessary transitions, prioritize higher complexity patients, minimize service disruption, support smooth transition planning, improve data sharing, promote collaboration, and improve key metrics related to patient outcomes.

Board Chair, Chief of Staff & Senior Leadership Report – March 2026
Open Session

- **MOU with GHAC**
The draft MOU with GHAC has been reviewed and returned to GHAC for final review. The agreement governs Indigenous supports such as Indigenous Care Coordinators that work within RHC sites in support of Indigenous communities.
- **Indigenous Services Plan**
Communications will be working with our Indigenous Liaison and leadership to update the Indigenous Services Plan (ISP). In addition, an additional education session for Surge Learning is being developed to communicate the contents of the ISP to RHC staff.

Thank you to the Riverside Team for their submissions, they are invaluable in the preparation of this report.

Respectfully Submitted,
Diane Clifford, Board Chair
Dr. Lucas Keffer, Chief of Staff
Diana Harris, Chief Nursing Executive
Carla Larson, Chief Financial, Information & Technology Officer
Joanne Ogden, Quality Assurance & OHT Executive Lead
Henry Gauthier, President & CEO
RHC Directors, Managers & Supervisors



Audit & Resources Committee Report – March 2026

2.4.1 Financial Report – February 2026 *



Operating Revenue & Expense Summary
April 1, 2025 to February 28, 2026

	April 1, 2025 to March 31, 2026 Annual Budget	April 1, 2025 to March 31, 2026 Adjusted Annual Budget (with Agency Costs)	2025-2026 YTD Budget	2025-2026 YTD Adjusted Budget (with Agency Costs)	2025-2026 YTD Actual	Overall Change	Overall Change Adjusted Budget (with Agency Costs)	YTD Actual Percent (%) Over(Under) YTD Budget	YTD Actual Percent (%) Over(Under) YTD Adjusted Budget (with Agency Costs)
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Fund Type 1 - OH Funded - Hospital Services

REVENUE										
OH - Base Funding	A-1	\$33,784,517	\$33,959,137	\$30,915,147	\$31,074,936	\$35,344,876	\$4,429,728	\$4,269,939	13.11%	12.57%
QBP Funding	A-2	\$1,078,300	\$1,078,300	\$986,718	\$986,718	\$1,701,383	\$714,665	\$714,665	66.28%	66.28%
Other Funding (19*) - Bundled Care, Hospice, Oncology Drug Reimbursement	A-3	\$2,496,065	\$2,496,065	\$2,284,070	\$2,284,070	\$2,234,262	(\$49,808)	(\$49,808)	-2.00%	-2.00%
OH - One Time Funding	A-4	\$625,127	\$625,127	\$572,034	\$572,034	\$5,968,006	\$5,395,972	\$5,395,972	863.18%	863.18%
MOHLTC - One Time Funding	A-5	\$354,426	\$354,426	\$324,324	\$324,324	\$322,012	(\$2,312)	(\$2,312)	-0.65%	-0.65%
Other Revenue MOHLTC - HOCC	A-6	\$847,404	\$847,804	\$775,433	\$775,799	\$952,203	\$176,770	\$176,404	20.86%	20.81%
Paymaster	A-7	\$0	\$0	\$0	\$0	\$0	\$0	\$0	#DIV/0!	#DIV/0!
Cancer Care Ontario	A-8	\$12,722	\$12,722	\$11,642	\$11,642	\$11,297	(\$345)	(\$345)	-2.71%	-2.71%
Recoveries & Miscellaneous	A-9	\$2,467,200	\$2,467,200	\$2,257,657	\$2,257,657	\$2,446,839	\$189,182	\$189,182	7.67%	7.67%
Amortization of Grants/Donations Equipment	A-10	\$731,350	\$731,350	\$669,235	\$669,235	\$683,477	\$14,242	\$14,242	1.95%	1.95%
OHIP Revenue & Patient Revenue from Other Payors	A-11	\$2,284,781	\$2,284,781	\$2,090,731	\$2,090,731	\$2,253,128	\$162,397	\$162,397	7.11%	7.11%
Differential & Copayment	A-12	\$932,877	\$932,877	\$853,646	\$853,646	\$868,810	\$15,163	\$15,163	1.63%	1.63%
TOTAL REVENUE	A-13	\$45,614,769	\$45,789,789	\$41,740,638	\$41,900,793	\$52,786,293	\$11,045,655	\$10,885,499	24.22%	23.77%
EXPENDITURES										
Compensation - Salaries & Wages	A-14	\$26,077,132	\$26,077,132	\$23,862,362	\$23,862,362	\$21,742,697	(\$2,119,664)	(\$2,119,665)	-8.13%	-8.13%
Compensation - Purchased Service	A-15	\$572,660	\$2,572,660	\$524,023	\$2,354,160	\$7,780,208	\$7,256,185	\$5,426,048	1267.10%	210.91%
Benefit Contributions	A-16	\$7,301,597	\$7,301,597	\$6,681,461	\$6,681,461	\$5,499,852	(\$1,181,609)	(\$1,181,609)	-16.18%	-16.18%
Future Benefits	A-17	\$71,000	\$71,000	\$64,970	\$64,970	\$26,720	(\$38,250)	(\$38,250)	-53.87%	-53.87%
Medical Staff Remuneration	A-18	\$2,604,262	\$2,604,262	\$2,383,078	\$2,383,078	\$2,905,291	\$522,213	\$522,213	20.05%	20.05%
Nurse Practitioner Remuneration	A-19	\$544,665	\$544,665	\$498,406	\$498,406	\$708,004	\$209,598	\$209,598	38.48%	38.48%
Supplies & Other Expenses	A-20	\$8,626,606	\$8,626,606	\$7,893,935	\$7,893,935	\$8,475,527	\$581,592	\$581,592	6.74%	6.74%
Amortization of Software Licenses & Fees	A-21	\$195,887	\$253,324	\$179,250	\$231,809	\$206,876	\$27,626	(\$24,933)	14.10%	-9.84%
Medical/Surgical Supplies	A-22	\$1,435,851	\$1,435,851	\$1,313,902	\$1,313,902	\$1,439,559	\$125,657	\$125,657	8.75%	8.75%
Drugs & Medical Gases	A-23	\$2,825,169	\$2,825,169	\$2,585,223	\$2,585,223	\$2,219,150	(\$366,073)	(\$366,073)	-12.96%	-12.96%
Amortization of Equipment	A-24	\$1,264,810	\$1,264,810	\$1,157,388	\$1,157,388	\$1,162,766	\$5,378	\$5,378	0.43%	0.43%
Rental/Lease of Equipment	A-25	\$252,174	\$252,174	\$230,756	\$230,756	\$195,397	(\$35,359)	(\$35,359)	-14.02%	-14.02%
Bad Debts	A-26	\$175,000	\$175,000	\$160,137	\$160,137	\$270,711	\$110,575	\$110,575	63.19%	63.19%
TOTAL EXPENSE	A-27	\$51,946,813	\$54,004,250	\$47,534,892	\$49,417,588	\$52,632,759	\$5,097,867	\$3,215,171	9.81%	5.95%
SURPLUS/(DEFICIT)	A-28	(\$6,332,044)	(\$8,214,461)	(\$5,794,254)	(\$7,516,794)	\$153,534	\$5,947,788	\$7,670,328	-93.93%	-93.38%

Fund Type 1 - OH Funded - Rainy River Clinic

REVENUE										
MOH Funding	B-1	\$2,920,208	\$2,870,100	\$2,672,190	\$2,626,338	\$2,630,925	(\$41,265)	\$4,587	-1.41%	0.16%
Nurse Practitioner Funding thru RHC	B-2	\$122,853	\$122,853	\$112,419	\$112,419	\$194,377	\$81,958	\$81,958	66.71%	66.71%
Recoveries & Miscellaneous	B-3	\$0	\$0	\$0	\$0	\$9,321	\$9,321	\$9,321	#DIV/0!	#DIV/0!
TOTAL REVENUE	B-4	\$3,043,061	\$2,992,953	\$2,784,609	\$2,738,757	\$2,834,623	\$50,014	\$95,866	1.64%	3.20%
EXPENDITURES										
Rainy River Clinic Salaries	B-5	\$295,497	\$226,681	\$270,400	\$207,429	\$254,018	(\$16,382)	\$46,589	-5.54%	20.55%
Rainy River Clinic Benefits	B-6	\$76,272	\$58,510	\$69,794	\$53,541	\$73,205	\$3,411	\$19,664	4.47%	33.61%
Physician Remuneration	B-7	\$2,095,122	\$2,262,110	\$1,917,180	\$2,069,986	\$2,186,267	\$269,087	\$116,281	12.84%	5.14%
Physician Travel	B-8	\$190,066	\$200,000	\$173,923	\$183,014	\$201,194	\$27,271	\$18,180	14.35%	9.09%
Nurse Practitioner Expenditures	B-9	\$226,026	\$226,026	\$206,829	\$206,829	\$194,377	(\$12,452)	(\$12,452)	-5.51%	-5.51%
Other Sundry	B-10	\$8,112	\$6,223	\$7,423	\$5,694	\$26,124	\$18,701	\$20,430	230.53%	328.29%
Rainy River Clinic Rent	B-11	\$75,758	\$58,115	\$69,324	\$53,179	\$64,756	(\$4,568)	\$11,577	-6.03%	19.92%
Rainy River Clinic Software	B-12	\$76,208	\$58,461	\$69,736	\$53,496	\$65,083	(\$4,653)	\$11,587	-6.11%	19.82%
TOTAL EXPENSE	B-13	\$3,043,061	\$3,096,126	\$2,784,609	\$2,833,167	\$3,065,024	\$280,415	\$231,857	9.21%	7.49%
SURPLUS/(DEFICIT)	B-14	\$0	(\$103,173)	\$0	(\$94,410)	(\$230,401)	(\$230,401)	(\$135,991)	#DIV/0!	131.81%



Operating Revenue & Expense Summary
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Fund Type 2 - OH Funded - Counselling & Non Profit Housing Programs
Mental Health - Case Management - Housing - Addictions - Problem Gambling

TOTAL REVENUE	C-1	\$2,529,663	\$2,529,663	\$2,314,815	\$2,314,815	\$2,413,073	\$98,258	\$98,258	3.88%	3.88%
TOTAL EXPENSE	C-2	\$2,529,663	\$2,529,663	\$2,314,815	\$2,314,815	\$2,443,082	\$128,267	\$128,267	5.07%	5.07%
SURPLUS/(DEFICIT)	C-3	\$0	\$0	\$0	\$0	(\$30,009)	(\$30,009)	(\$30,009)	#DIV/0!	#DIV/0!

Fund Type 3 - Other Ministry/Agency Funded - Non Hospital Services
Family Violence & Non Profit Supportive Housing Bricks & Mortar

TOTAL REVENUE	D-1	\$684,845	\$684,845	\$626,680	\$626,680	\$411,080	(\$215,600)	(\$215,600)	-31.48%	-31.48%
TOTAL EXPENSE	D-2	\$684,845	\$684,845	\$626,680	\$626,680	\$435,268	(\$191,412)	(\$191,412)	-27.95%	-27.95%
SURPLUS/(DEFICIT)	D-3	\$0	\$0	\$0	\$0	(\$24,188)	(\$24,188)	(\$24,188)	#DIV/0!	#DIV/0!

Fund Type 2 - OH Funded - RainyCrest Community Support Services
(Home Support, Assisted Living, Adult Day, Meals on Wheels)

TOTAL REVENUE	E-1	\$3,201,384	\$3,201,384	\$2,929,486	\$2,929,486	\$2,862,442	(\$67,044)	(\$67,044)	-2.09%	-2.09%
TOTAL EXPENSE	E-2	\$3,201,384	\$3,201,384	\$2,929,486	\$2,929,486	\$3,424,271	\$494,786	\$494,786	15.46%	15.46%
SURPLUS/(DEFICIT)	E-3	\$0	\$0	\$0	\$0	(\$561,829)	(\$561,829)	(\$561,829)	#DIV/0!	#DIV/0!

**Fund Type 2 - OH Funded - RainyCrest
Long Term Care**

TOTAL REVENUE	F-1	\$15,330,585	\$15,330,585	\$14,028,535	\$14,028,535	\$15,845,875	\$1,817,340	\$1,817,340	11.85%	11.85%
Compensation	F-2	\$9,265,810	\$10,013,462	\$8,478,851	\$9,163,004	\$10,276,745	\$1,797,894	\$1,113,741	19.40%	11.12%
Purchased Service	F-3	\$0	\$781,103	\$0	\$714,763	\$2,037,042	\$2,037,042	\$1,322,279	#DIV/0!	169.28%
Benefits	F-4	\$2,580,947	\$2,580,947	\$2,361,744	\$2,361,743	\$2,265,272	(\$96,472)	(\$96,471)	-3.74%	-3.74%
Nurse Practitioner	F-5	\$149,394	\$417,394	\$136,706	\$381,944	\$373,919	\$237,213	(\$8,025)	158.78%	-1.92%
Medical Staff Remuneration	F-6	\$50,096	\$50,096	\$45,841	\$45,841	\$38,616	(\$7,225)	(\$7,225)	-14.42%	-14.42%
Supplies	F-7	\$1,669,915	\$1,669,915	\$1,528,087	\$1,528,087	\$1,641,189	\$113,102	\$113,102	6.77%	6.77%
Service Recipient Specific Supplies	F-8	\$0	\$0	\$0	\$0	\$0	\$0	\$0	#DIV/0!	#DIV/0!
Sundry	F-9	\$1,404,535	\$1,669,535	\$1,285,246	\$1,527,739	\$1,612,585	\$327,339	\$84,846	23.31%	5.08%
Equipment	F-10	\$572,484	\$672,484	\$523,862	\$615,369	\$375,206	(\$148,656)	(\$240,163)	-25.97%	-35.71%
Contracted Out	F-11	\$61,561	\$61,561	\$56,333	\$56,333	\$7,379	(\$48,954)	(\$48,954)	-79.52%	-79.52%
Building & Grounds	F-12	\$62,735	\$217,735	\$57,407	\$199,242	\$402,740	\$345,333	\$203,498	550.46%	93.46%
TOTAL EXPENSE	F-13	\$15,817,478	\$18,134,232	\$14,474,075	\$16,594,064	\$19,030,693	\$4,556,618	\$2,436,629	28.81%	13.44%
SURPLUS/(DEFICIT) including unfunded liabilities	F-14	(\$486,893)	(\$2,803,647)	(\$445,540)	(\$2,565,529)	(\$3,184,818)	(\$2,739,277)	(\$619,289)	562.60%	22.09%
Less: Unfunded Future Benefits	F-15	\$0	\$0	\$0	\$0	(\$68,996)	(\$68,996)	(\$68,996)	#DIV/0!	#DIV/0!
Less: Unfunded Amortization Expense	F-16	\$0	\$0	\$0	\$0	\$0	\$0	\$0	#DIV/0!	#DIV/0!
SURPLUS/(DEFICIT) excluding unfunded liabilities	F-17	(\$486,893)	(\$2,803,647)	(\$445,540)	(\$2,565,529)	(\$3,253,814)	(\$2,808,274)	(\$688,285)	576.77%	24.55%

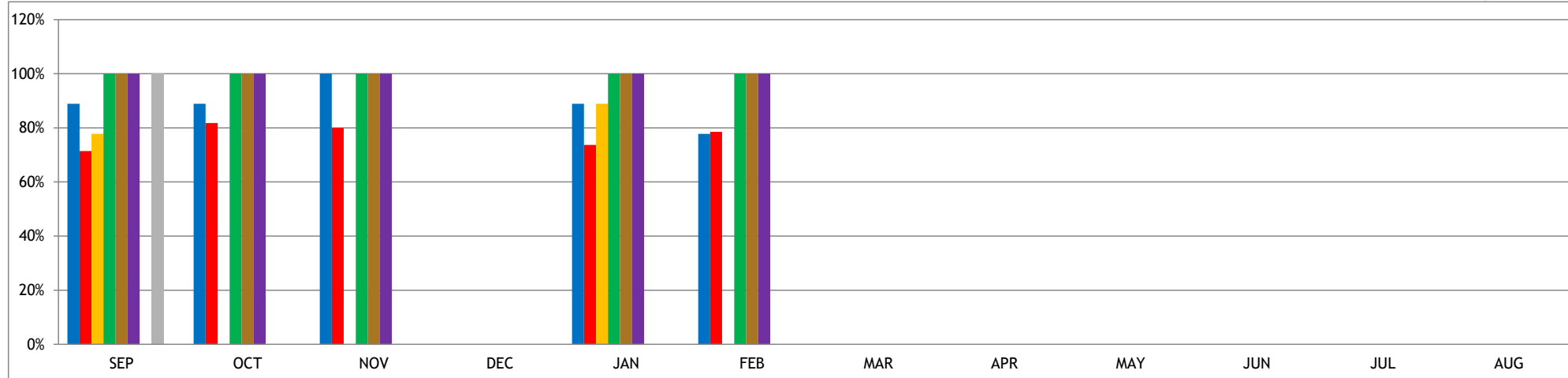
Operating Surplus(Deficit) - Hospitals & Long Term Care ONLY		(\$6,818,937)	(\$11,018,108)	(\$6,239,794)	(\$10,082,323)	(\$3,100,280)				
Total Operating Margin - Hospitals & Long Term Care ONLY		-11.19%	-18.03%	-11.19%	-18.03%	-4.52%				



Quality, Safety, Risk Committee Report – March 2026

2.5.1 Board Quality Metrics *

BOARD OF DIRECTORS - QUALITY METRICS - 2025-2026



- 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 every 3rd meeting.
 - 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	89%	89%	100%	#DIV/0!	89%	78%	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	89%	75%	14%	
2. Participation B	71%	82%	80%	#DIV/0!	74%	79%	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	77%	75%	2%	
3. Reflection A	78%	#DIV/0!	#DIV/0!	#DIV/0!	89%	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	83%	100%	-17%	
4. Reflection B										#DIV/0!			#DIV/0!	100%	#DIV/0!	
5. Decision Making	100%	100%	100%	#DIV/0!	100%	100%	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	100%	90%	10%	
6. Education A	100%	100%	100%	#DIV/0!	100%	100%	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	125%	100%	25%	min of 1 session/mtg
7. Education B	100%	100%	100%	#DIV/0!	100%	100%	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	100%	100%	0%	min of 2 items/mtg
8. Composition							#DIV/0!						#DIV/0!	89%	#DIV/0!	
9. Compliance	100%	#DIV/0!	#DIV/0!										#DIV/0!	90%	#DIV/0!	



Auxiliary Report – March 2026

Emo

No Report.

La Verendrye General Hospital

- On February 18, 2026, 200 snack bags were distributed for LVGH Staff Appreciation.
 - Continuing Care Patients: A bin of personal care items (e.g. hand lotions, dental care) and activity books (e.g. large print word search) has been left with the nursing staff. The intent is to provide items for long term patients who may not have family members visiting who could provide the extras. We will test the efficacy of this over the next 6 months and determine whether it is indeed filling a need. Plans are also underway to provide some programming for patients. This may include music, bingo, holiday decorating.
 - Welcome Baby Kits: We continue to partner with local agencies supporting children (provide brochures, dreamcatchers), suppliers of promotional baby products, to create welcome kits for all new babies. Gift items (teddy bears, hats) provided by LVGH Auxiliary and community volunteers are also included.
 - Rock'n for a Reason planning is underway. Once again, we will have a display at the FF Chamber of Commerce Expo (booth donated to us) being held May 22-23, 2026.
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Rainycrest

No Report.

Rainy River

The Rainy River Health Centre Auxiliary met in March with the following highlights:

- There is another Vendor's Market being held at the Legion on March 21, 2026, that the Tuck Shop will attend. Nevada tickets will also be sold.
- Our Strawberry Social is set for May 6, 2026, at the Legion from 2:00 to 4:00 p.m. It is our hope that Long Term Care residents, who wish to attend, will be transported to the event as one of their social events for May.
- We are making donations to Ronald McDonald House in Winnipeg to support one of our Rainy River families as they navigate health care for their daughter, as well as Tamarack House in Thunder Bay, as many of our Rainy River residents use this facility.
- Members will attend the St. Patrick's Day celebrations at the Health Centre for the Long-Term Care residents.
- We have paid for the vital signs machine in full and will be determining our next fundraising campaign in the near future.