



- Present:** Marc Goudie (President), Alec Ross (Treasurer), Pamela Paterson (Secretary), Anna Johnson, Michael Judd, Catherine Isaacs, Radha Pooran, Raymonde Degbey
Regrets: Joëlle Gingras (Vice President), Maha Othman, MarieJo Cleghorn, Marie-Line Jobin, Ningjing (Natalie) Zhang
Staff: Ben Gooch (CEO), Amanda Brown (Executive Assistant)

	Discussion	Motion/Action
1.	<p>Call to Order The meeting was called to order at 4:32 p.m.</p> <p>Marc acknowledged the Anishinaabe and Haudenosaunee First Nations Peoples, and their traditional land that KCHC is situated on and Raymonde delivered the land acknowledgment in French.</p>	
2.	<p>Consent Agenda & Previous Meeting Minutes The Board meeting agenda was amended to defer the staff presentation.</p> <p>The December 16, 2025, Board meeting minutes were approved and signed by Pamela Paterson.</p>	<p>Moved by: Anna Seconded by: Michael To accept the agenda as amended and the December 16, 2025 meeting minutes. CARRIED</p>
3.	<p>Conflict of Interest There were no conflicts of interest declared.</p>	
4.	<p>Treasurer’s Report Alec confirmed that all payments/remittances/bank statements for December 2025 are up to date, in order, and on file with the finance department.</p>	<p>Moved by: Alec Seconded by: Catherine To accept the Treasurer’s report as presented. CARRIED</p>
5.	<p>Board Liaison Report Marie-Line sent her regrets for this meeting; therefore, no Board Liaison Report was provided.</p>	



	Discussion	Motion/Action
6.	<p>CEO Report: <u>Legislative Compliance Report:</u> The CEO reported that the organization demonstrates high compliance with mandatory legislative training and professional registrations. Key training areas include AODA, Occupational Health and Safety, WHMIS, Workplace Violence and Harassment, privacy and confidentiality, and regulated health professional requirements.</p> <p>Overall compliance rates are strong, with most categories achieving 90% or higher. Factors affecting 100% compliance include staff on leaves of absence, new hires, and annual training cycles where snapshots are taken prior to renewal due dates.</p> <p>HR is reviewing the training tracking process, as some trainings require both completion in the Bamboo HR system, and document uploads, but not all steps are consistently completed by staff even when the training itself is accomplished.</p> <p>The CEO emphasized that this report focuses on staff-level legislative compliance and does not address governance, financial filings, risk management, or accreditation compliance.</p> <p><u>Theme for 2025-2026 Annual Report:</u> The CEO shared the proposed theme for the 2025-2026 Annual Report: “Care at Kingston Community Health Centres Happens Through People”. The draft text version of the Annual Plan will be available for the Board to review in April 2026, with the completed version presented in June 2026.</p> <p><u>Annual Planning Progress:</u> The CEO provided an update on the organizational Annual Planning process for 2026–2027. The Annual Plan process includes two components: organization-wide priorities, which have been</p>	<p>Moved by: Catherine Seconded by: Michael To approve the proposed theme for the 2025-2026 Annual Plan as presented in the Board meeting package. CARRIED</p>



	Discussion	Motion/Action
	<p>established by the Senior Leadership Team and will be reported on to the Board; and team-level priorities, which include each individual team identifying one to three priority projects that align with the Strategic Plan.</p> <p>The Senior Leadership Team has currently identified seven organizational priority projects to complete over the 2026-2027 fiscal year, which align with the three pillars of the new Strategic Plan.</p> <p>Under the pillar of enhancing access and improving service quality, priority projects include advancing population-based service frameworks which focus on maternal and child health, youth, seniors, people who use substances, and newcomers. A second priority project is to position KCHC as a regional leader in HPV self-swab cervical cancer screening to improve equitable access and early detection.</p> <p>Under advancing equity and inclusion, priorities include stabilizing funding and the service model for the Access+ Clinic and proactively planning for the future of the Consumption and Treatment Services in the context of funding, lease agreement, and political uncertainty.</p> <p>Under strengthening and sustaining the organization, the organizational priority projects focus on enhancing quality, safety, and accountability systems; building leadership capacity at all levels; and addressing staff wellness and engagement.</p> <p>The CEO advised that the Leadership Team has been briefed on the seven identified organizational priority projects and will be developing their respective team-based priority projects over the coming weeks. Senior leaders remain open to final feedback regarding potential additions or removals from the current list of priority projects. The CEO will report back to the Board in March on the finalized Organizational Annual Plan Priority Projects for 2026–2027.</p>	<p>Amanda will conduct a survey to determine the preferred date for the Napanee site visits and the Board meeting.</p>



	Discussion	Motion/Action
	<p><u>March Meeting in Napanee:</u> The Board discussed traveling to Napanee for a site tour of both the Napanee Area Community Health Centre and the Greater Napanee Health Home. Then proceeding to have the regular Board meeting on March 24, 2026. It was noted that this date is feasible, along with potential dates in the fall of 2026. Amanda will conduct a survey to determine the preferred date for the site visits and the Board meeting.</p> <p><u>In Camera:</u> The Board moved in camera at 5:09 p.m. No motions were made during the in-camera session. The Board reconvened in open session at 5:39 p.m.</p>	
7.	<p>Planning and Decision Items: Review of the Bylaws The Board confirmed that they reviewed the Bylaws and identified no proposed amendments, with the exception of, adding page numbers to the document for clarity and reference.</p>	<p>Moved by: Alec Seconded by: Catherine That the Bylaws be accepted as amended with the addition of page numbers. CARRIED</p> <p>Amanda will add page numbers to the Bylaws.</p>
8.	<p>Governance Policies Review: The following Governance policies were posted on SharePoint for member review, allowing Board members to suggest edits as appropriate. Discussion confirmed that all proposed revisions were reviewed and agreed upon. The policies reviewed included the Preamble and Definitions; GOV-4: Governance Policy Framework; GOV-20: Board and Committee Attendance; GOV-23: Board Accountability and Self-Assessment; GOV-24: Board Policy Development and Review; and GOV-25: Voluntary Dissolution. A range of amendments were recommended to clarify language and better define policy objectives. Amanda will modify the Governance Manual to reflect the approved revisions.</p>	<p>Moved by: Catherine Seconded by: Michael That the Governance Policies listed be accepted as amended. CARRIED Amanda will modify the Governance Manual to reflect the approved revisions.</p>



Kingston Community
Health Centres
Centres de santé
communautaire de Kingston

**KINGSTON COMMUNITY HEALTH CENTRES
BOARD MEETING**
Tuesday, January 27, 2026
Boardroom and virtual meeting, 263 Weller Ave.
4:30 p.m.

	Discussion	Motion/Action
9.	Mission Moment: Completed Next Board Meeting: Tuesday, February 24, 2026 - 4:30 p.m.	
10.	Adjournment The meeting was adjourned by Alec at 6:03 p.m.	Moved by Alec to close the meeting at 6:03pm.

Signature

February 24, 2026

Date