

**Minutes of the Meeting of the Board of Directors of the 14 Local Health Integration Networks,
operating as
Home and Community Care Support Services (HCCSS) - January 18, 2023**

A meeting of the HCCSS Board of Directors (Board) was held on
January 18, 2023, beginning at 1:20 pm.

PRESENT:

Voting Members:	Joe Parker, Board Chair Carol Annett, Member Anne Campbell, Member Stephan Plourde, Member Kate Fyfe, Member John Beardwood, Member Shanti Gidwani, Member Michael Dibden, Member Eugene Cawthray, Member
Regrets:	Glenna Raymond, Vice-Chair
Staff in Attendance:	Cynthia Martineau, Chief Executive Officer Barbara Bell, Chief Quality, Safety and Risk Officer Lisa Burden, Chief Patient Services Officer Lisa Tweedy, Chief Human Resources Officer Karin Dschankilic, Chief Corporate Services Officer and CFO Marla Krakower, Chief Transformation, Strategy and Engagement Officer Sabrina Grando, Agencies Legal Erica Jeffery, Corporate & Board Relations Manager and Executive Assistant to the CEO
Guests:	Karyn Lumsden, Cindy Ward, Janet Wright, Robert Delvecchio, Giuliano Celebre, Wanda Parrott, Kerby Audet, Karen Taillefer, Mary Gratten Gielen, Odelia Andrea, Daniel Merritt, Sarah Vertlieb, Richlyn Lorimer, Jamie Stevens, Trish Nelson, Janice Stephenson, Dina Chantzis, David McLelland, Sacha Bye

A. Convening the Meeting

A.1. Call to Order

A quorum was present and the meeting was called to order at 1:33pm.

A.2 Land Acknowledgement

The Board Chair shared a land acknowledgment.

A.3 Approval of the Agenda of January 18, 2023

It was moved by Carol Annett / John Beardwood

That the agenda of January 18, 2023 be adopted, as presented.

This motion was put to a vote and

CARRIED.

A.4 Conflict of Interest

None declared.

B. Board Education

B.1 Future of CHRIS for Ontario Health Teams

Guests from Ontario Health (OH) provided an overview of the future of CHRIS (Client Health Related Information System) for Ontario Health Teams (OHTs) in the context of Home and Community Care Modernization.

An overview of the current OH mandate and home care modernization was shared as well as an overview of what is known and unknown regarding modernization from a CHRIS perspective. The areas of CHRIS that will most be impacted by home care modernization include the use of CHRIS by HCCSS care coordinators, the local maintenance and support provided for CHRIS as well as provincial CHRIS management and hosting of CHRIS. OH affirmed the critical importance of remaining focused on continuity of patient care.

An overview of CHRIS Architecture was also outlined. There are 14 separate instances of CHRIS, one for each HCCSS organization. Staff confirmed that these instances cannot be split into OHT boundaries. There will need to be ongoing collaboration between OH and HCCSS to support standardization and ultimately transition of CHRIS to the future state.

There was discussion regarding ongoing use of CHRIS in the future state. OH is supportive of CHRIS being the system for the home care system, recognizing many aspects of the home care system are managed through CHRIS, including billing. Staff also advised that the timeframe it would take to move from CHRIS to a different solution would be lengthy and would have significant impacts to the system if this was to occur.

The Board inquired about the ongoing stability of CHRIS, recalling previous discussions about concerns related to CHRIS. OH confirmed that system stability is now quite high, having implemented some system changes. In addition, OH is awaiting funding confirmation from the Ministry of Health regarding CHRIS development.

It was proposed that the OH staff could come back to a future meeting to provide an update when there is more clarity on the future state for HCCSS and home care modernization.

David McLelland, Sacha Bye, Janice Stephenson and Dina Chantzis excused themselves at 2:13pm.

C. Patient Story

This month, the CEO highlighted a video prepared to celebrate the one year anniversary of the organization's Board endorsed People Strategy. The People Strategy continues to guide us in how we retain, recruit and train our staff; as well as promote the wellbeing of our workforce. The video showcases the milestones reached within our first year and connects the dots on how the 17 projects within the

People Strategy support our organization. Due to time constraints, the video was not shown and members were encouraged to review the video if they had not seen it already.

Action: Staff to establish a French version of the People Strategy video and share the video on the external HCCSS website. Stephan Plourde to provide an introduction to the video for the website.

D. Equity Moment

Shanti Gidwani shared an equity moment, reflecting upon themes from previous moments including geography, collaboration amongst providers as well as patient populations and demographics. In addition, this reflection focused on linkages in home care in British Columbia versus Ontario and the seeming fragmentation within this province.

While there is recognition of the importance of HCCSS in the health care system, there continues to be an opportunity to be more deliberate in giving home care more equitable attention in the province. The Board expressed their support to staff and the organization and willingness to help, where possible, to promote the importance of home care within the health care system. Staff is continuing to collaborate and engage with key health care leaders and organizations in an effort to raise awareness of home and community care within the health care sector.

E. Consent Agenda

E.1 Approval of Consent Agenda

The Board requested that Item E.7, Quarterly Strategic Initiatives Progress Report, be pulled for further discussion under F.2, Patient Services, Quality and Risk Committee update.

It was moved by Joe Parker / Michael Dibden

That the Consent Agenda of January 18, 2023 be adopted, as amended.

This motion was put to a vote and

CARRIED.

F. Reports from Committees

F.1 Finance, Audit and Information Committee

The Committee Chair provided a brief update regarding the draft Funding Equity Model, established in order to help establish a consistent approach for future funding allocations for HCCSS. It is recognized that there has not been a consistent definition for equity in health care, so HCCSS proposed service utilization per patient, wait list practices and population health as key elements incorporated into the model and analysis.

The Board cautioned staff on the language being used in the “red” areas of the model to ensure it is not misinterpreted. Staff acknowledged the feedback as well as the variation in the data and will be conducting further work to refine the model. The model will be brought back to a future meeting once refinements have been completed.

F.2 Patient Services, Quality and Risk Committee

The Committee Chair provided an overview of the discussions related to the development of the 2023/24 Annual Business Plan (ABP). There was significant engagement undertaken in developing the ABP, and the Board expressed appreciation for how the feedback was incorporated into the draft document. The Committee and Board asked that additional metrics at the initiative level be incorporated into the final ABP. Staff noted that once confirmation has been received on the direction and initiatives within the ABP, each initiative will identify the current status and the target HCCSS is trying to achieve. The initiative-level metrics will be aligned with the performance measures in the Board's balanced scorecard.

The next draft of the ABP will be shared with the Patient Services, Quality and Risk Committee in March and then to the Board for final approval for submission to the Ministry of Health.

Action: Board members to provide feedback on draft ABP to staff by January 24th.

Action: Staff to revise the draft ABP based upon Board member feedback and incorporate metrics for the strategic initiatives.

Strategic Initiatives Progress Report

The recent discussion at the Committee regarding the Quarterly Strategic Initiatives Progress Report was shared. The Committee is seeking further details in terms of metrics and what HCCSS would like to achieve for each one. While it is understood a project, such as nursing clinics, is on target, it would be beneficial for the Board to understand if there has been improvement and specific numbers, where available (e.g. how many more clinics were opened).

There was a discussion regarding reporting on provincial initiatives that are not led by HCCSS. The Board recommended the report indicate if HCCSS is the lead, or if they are in a supportive role. Where HCCSS is in a supportive role, there may not be metrics available.

Staff also shared that there have been some initiatives, such as the 5 Point Plan, that have seen some adjustments or new components added over the fiscal year. In those instances, metrics are new or are in the process of being developed.

Action: Staff to refine future Quarterly Strategic Initiative Reports to incorporate metrics, where available. Where staff are in a support role rather than the lead for an initiative, that will be noted.

Action: Staff to bring forward an update regarding efforts in response to the 5-point plan through the Patient Services, Quality and Risk Committee. The update will include an overview of metrics put in place to track progress against the plan.

Eugene Cawthray joined the meeting at 2:45pm.

G. New Business

G.1 Mandate Letter

The final mandate letter between the Minister of Health and Chair of the HCCSS Board was shared for awareness. It is expected the Minister will update priorities for HCCSS based on the anticipated future state direction for the organization by the spring of 2023.

G.2 CEO Report

The CEO provided a high-level overview of the January CEO Report. The Board inquired about the Caregiver Recognition Event that is in the early planning stages for early April and aimed to coincide with National Caregiver Day. The plan is to hold events across the province and incorporate Board members where feasible. Once launched, the goal will be to sustain the program, recognizing the success of previous events hosted by the former Community Care Access Centres (CCACs) and the Local Health Integration Networks (LHINs).

Action: CEO to share the presentation provided to Seniors for Social Action Ontario (SSAO) from November 2022.

H. Closed Session

It was moved by Joe Parker / Michael Dibden

That the Board of Directors to the 14 LHINs move to a closed session to discuss a matters of legal, personnel and public interest at 2:58pm.

This motion was put to a vote and

CARRIED.

I. Adjournment

After moving back to open session at 5:20pm, it was moved by Joe Parker /Michael Dibden

That the meeting be adjourned.

This motion was put to a vote and

CARRIED.

There being no further items, the HCCSS Board Meeting adjourned at 5:21pm.

Original signed by

Joe Parker, Board Chair

March 15, 2023

Date

Original signed by

Cynthia Martineau, Corporate Secretary

March 15, 2023

Date