BOARD APPROVED MINUTES BOARD OF DIRECTORS MEETING

Wednesday, March 28, 2018

11:00 am to 4:00 pm

Ajax/Pickering Room, Central East LHIN – Whitby Branch 920 Champlain Court, Whitby ON, L1N 6K9

Directors Present: Mr. Louis O'Brien (Chair)

Ms. Amorell Saunders N'Daw (Vice Chair)
Ms. Elaine Aimone (Member) (Teleconference)

Mr. Pat Connolly (Member) Mr. Glenn Rogers (Member) Ms. Debbie Doherty (Member) Ms. Bonnie St. George (Member)

Ms. Aileen Ashman (Member) (Teleconference)

Mr. Michael Nettleton (Member) Mr. David Barlow (Member) Mr. S. Gopikrishna (Member)

Guests: Mr. Chris Cull (Patient Story)

Dr. Lynne Noseworthy (Chief Medical Officer of Health)

Mr. Paul McGary (Director, Ontario Shores)

Dr. Rosanna Salvaterra (Chief Medical Officer of Health) Ms. Linda Davis (President and Chief Executive Officer,

Northumberland Hills Hospital)

Ms. Elizabeth Selby (Board Chair, Northumberland Hills

Hospital)

Staff Present: Ms. Deborah Hammons (Chief Executive Officer)

Mr. Stewart Sutley (Vice President, Health System Strategy,

Integration, Planning and Performance)
Dr. Barry Guppy (Vice President, Clinical)

Ms. Lisa Burden (Vice President, Home and Community

Care)

Ms. Katie Cronin-Wood (Director, Strategic Communications

and Stakeholder Engagement)

Ms. Karen O'Brien (Manager, Community Outreach and

Engagement)

Ms. Sueanne Balgobin (Governance Coordinator) Ms. Sheila Rogoski (Executive Coordinator)

Ms. Tünde Igli (Director, Finance and Risk Management) Mr. Paul Scobie (Director, Information Management and

Technology)



Mr. Louis O'Brien, Chair of the Central East Local Health Integration Network (the "Central East LHIN") Board of Directors, chaired the meeting.

1.1 MEETING CALLED TO ORDER

Mr. O'Brien called the meeting to order at 11:02 AM and welcomed the members of the public to the Central East LHIN open Board meeting.

Constitution of Meeting and Quorum

Notice of the meeting having been properly given to the public and to each Board member, and a quorum of Board members being present at the meeting, Mr. O'Brien declared the meeting duly constituted for the transaction of business.

1.2 PATIENT STORY

Ms. Katie Cronin-Wood (Director, Strategic Communications and Stakeholder Relations) introduced the Board to Mr. Chris Cull. Ms. Cronin-Wood highlighted the recent release of a report on Opioid related cases in Canada. Mr. Cull presented his lived experience with opioid addiction. Recommendations to the Board on the Opioid crisis included combining the human experience with strategies being developed and providing supportive tools to those dealing with addictions. The Board thanked Mr. Cull for his presentation.

2.1 CONSENT AGENDA

Prior to introducing the motion, Mr. O'Brien asked if there were any items on the consent agenda requiring further discussion. Agenda items removed from consent for discussion included Agenda item 6.1 – Central East LHIN Quality Improvement Plan Narrative 2018/19; Agenda item 6.15- Urgent Priority Funding and Agenda item 6.17- IT/IS Availability Report. The Board agreed that Committee Chairs will coordinate with the Governance Coordinator on agenda items to come forward as part of the consent agenda for Committee Reports and agenda items that will be discussed in open session going forward.

MOTION: By Mr. Gopikrishna

Be it resolved that the consent agenda of the March 28, 2018 meeting of the Central East LHIN Board of Directors be approved. Included are the following items for approval:

- Approval of the Agenda
- Approval of the Minutes Jan. 24

- · Chair's Report to the Board- Amended
- Quality Committee Report
- Peterborough Regional Health Centre Hybrid Operating Room Pre-Capital Submission
- Ontario Shores Center for Mental Health Sciences Early Works Project Stage 1 Submission
- Ministry LHIN Accountability Agreement Funding Submission

SECONDED: Mr. Connolly

MOTION CARRIED

2.2 DECLARATION OF CONFLICTS OF INTEREST

Mr. O'Brien requested that those in attendance declare any conflicts of interest. Mr. Barlow notified the Board that he will be rejoining the Board of the Healthcare Insurance Reciprocal of Canada (HIROC), which currently provides insurance coverage and risk management services to the Local Health Integration Network. This appointment, which is for a three-year term, will be effective as at HIROC's Annual General Meeting on April 30th. Mr. Barlow has confirmed that he will declare this conflict and recuse himself from any LHIN Board discussions respecting the insurance program, including claims or proceedings related to it.

4.1 HALIBURTON, KAWARTHA, PINE RIDGE DISTRICT PUBLIC HEALTH

Dr. Lynne Noseworthy presented to the Board on Haliburton, Kawartha, Pine Ridge District Public Health. Dr. Noseworthy reviewed multiple changes that the public health unit has undergone in the last few years. The new Ontario Public Health Standards were also highlighted. It was noted that these standards have created standardization for care. The presentation also included of the Haliburton, Kawartha, Pine Ridge District Public Health goal to strengthen connections with the LHIN by:

- Collaborating with the Central East LHIN in the development of the Opioid Strategy
- Membership at the Central East LHIN Health Equity Working Group
- Rapid Risk Factor Surveillance System (RRFSS) working with Health Unit leads and the Central East LHIN to create additional modules for collection of data of interest across all four health units

The Board thanked Dr. Noseworthy for her presentation and continuing collaboration with the Central East LHIN.

4.2 OPIOID STRATEGY PRESENTATION

Dr. Rosanna Salvaterra, Chief Medical Officer of Health at Peterborough Public Health and Mr. Paul McGary, Director at Ontario Shores presented to the Board on the Opioid Strategy and work to date. It was noted that the strategy was based on a collaborative, cooperative, comprehensive, evidence-based approach that included the four pillars of prevention, treatment, harm reduction and enforcement. The strategy included recommendation for continued work in all four pillars mentioned. Next steps for the strategy is an implementation plan for the strategy. The Board thanked Dr. Salvaterra and Mr. McGary for their work on the strategy and their presentation.

MOTION: By Mr. Nettleton

The Central East LHIN Opioid Strategy is based on prior LHIN and provincial efforts and investments, including the Central East LHIN Addictions Scan (2008/09), the Durham Emergency Department Avoidance Coalition (2009/10), the Hospital to Home Strategy (2011/12), the Addictions Supportive Housing Strategy (2012/13)/(2017/18), the Deloitte Report (2017), and the provincial Opioid Strategy (2017/18).

Be it resolved that the Central East LHIN Board of Directors acknowledges the strong foundation created through prior local and provincial efforts and investments, and thanks the members of the working group for their exceptional contributions in adding to this foundation by developing the Central East LHIN Opioid Strategy.

And be it further resolved that the Central East LHIN Board of Directors receive the Opioid Strategy and direct Central East LHIN staff to review its recommendations and provide the Board with an Action Plan for implementation by June 30, 2018.

SECONDED: By Ms. St. George

MOTION CARRIED

4.3 PETERBOROUGH PUBLIC HEALTH UPDATE

Dr. Salvaterra presented an update to the Board on Peterborough Public Health. Considerations for the implementation of the 2018 Strategic Plan were highlighted. Development of an implementation plan for new protocols/guidelines will include:

- Population Health Assessment and Surveillance;
- Health Equity;
- Relationship with Indigenous Communities, and

• Board of Health and Local Health Integration Network Engagement.

The Board members acknowledge the reconciliation work plan of Peterborough Public Health with First Nations communities. It was noted that engagement is taking place within the context of an anti-oppression framework with a commitment to learning and taking directions from communities. The Board thanked Dr. Salvaterra for her presentation.

5.1 BUSINESS ARISING FROM LAST MEETING OF FEBRUARY 28, 2018

Mr. O'Brien asked for any business arising from the last Board meeting on February 28, 2018.

There were no items of business arising raised by members of the Board.

6.1 CENTRAL EAST LHIN QUALITY IMPROVEMENT PLAN (QIP) NARRATIVE 2018/19

Ms. Amorell Saunders N'Daw, Chair of the Quality Committee, presented the Board with the Central East LHIN Quality Improvement Plan (QIP) Narrative for 2018/19 that was approved at the Quality Committee on March 14, 2018.

MOTION: By Mr. Nettleton

Be it resolved that the Central East LHIN Board of Directors approve the 2018/19 Quality Improvement Plan and Narratives and 2017/18 Progress Report.

SECONDED: Mr. Barlow

MOTION CARRIED

6.15 URGENT PRIORITY FUNDING

Mr. Stewart Sutley, Vice President of Health System Strategy, Integration, Planning and Performance, discussed funding for hospitals with the Board. It was noted that there has not been base funding identified for the Scarborough Rouge Hospital and there will be a report back to the Board at a future meeting.

MOTION: By St. George

Be it Resolved that the Central East Local Health Integration Network Board of Directors approve the 2018/19 Urgent Priorities Funding allocation.

Be it further Resolved that the Central East Local Health Integration Network Board of Directors delegate authority to the Central East LHIN Chief Executive Officer to approve additional 2018/19 Urgent Priorities Funding allocations, including allocations above \$1,000,000.

SECONDED: Mr. Connolly

MOTION CARRIED

6.17 IT/IS AVAILABILITY REPORT – UNPLANNED INTERRUPTIONS

Mr. Paul Scobie, Director, Information Management and Technology reviewed the availability report on unplanned interruptions with the Board. The escalation process for outages with Health Shared Services Ontario was highlighted for the Board's information.

6.2 NORTHUMBERLAND HILLS HOSPITAL – HOSPITAL IMPROVEMENT PLAN (HIP) QUARTERLY UPDATE.

Ms. Linda Davis, President and Chief Executive Officer of Northumberland Hills Hospital, presented their Hospital Improvement Plan to the Board. Hospital Improvement Plan achieved savings were highlighted. It was noted that utilization metrics will be completed in March and reported to the Board in May. The financial status of the hospitals including the structural deficit and additional services were discussed. It was noted that there was pre-budget increase in funding.

6.3 CEO HIGHLIGHTS

Ms. Deborah Hammons provided a report of the activities of the Central East LHIN over the past month. The Board reviewed the report and had no further questions.

6.4 2018-19 SERVICE ACCOUNTABILITY AGREEMENT (SAA) STRATEGY UPDATE

Mr. Sutley presented the board with an update and current status of the Hospitals Services Accountability Agreements signed to date and those that are currently outstanding for their information. These agreements continue to be signed throughout the month. It was noted that the Canadian Centre for Refugee and Immigrant Health Care has been designated a Health Service Provider and a multi-sector service accountability agreement has been developed for this organization.

6.5 MISSION, VISION AND VALUES STATEMENT

Ms. Hammons presented the new Mission, Vision and Values Statement to the Board. Staff of the Central East LHIN were consulted and involved in focus groups and a survey whereby values statements were reviewed and recommendations received. The Board reviewed the statements and provided suggestions on wording. Value Statements will be circulated to members of the Board for their suggested changes.

6.6 LHIN CHAIR COUNCIL'S RETREAT GENERATIVE DISCUSSION

Mr. O'Brien led the Board through a discussion relating to the LHIN Chair Council's Retreat that took place last month. The summary presentation of the meeting was highlighted and discussed. It was noted that a Quality Committee will be mandatory for all LHINS and there will be guidelines issued once revisions by the Ministry are completed. It was also noted that the Deputy Minister and Minister are invited to attend next April Chairs' meeting. Next steps include another retreat in a year and incorporating suggested agenda topics into future meeting agendas.

7.0 MOVED INTO CLOSED SESSION

MOTION: By Mr. Nettleton

Be it resolved that the Board of Directors move into closed session, pursuant to Section 9, subsection 5 of the Local Health System Integration Act (LHSIA) to:

 $\sqrt{}$ consider a matter that concerns personal or public interest

 $\sqrt{}$ consider a matter that would prejudice legal proceedings;

and

 $\sqrt{}$ consider a personnel matter.

and that the following Central East LHIN staff, Deborah Hammons, Stewart Sutley, Lisa Burden, Paul Scobie, Katie Cronin-Wood, Karen O'Brien, Sheila Rogoski and Sueanne Balgobin join the Board in the closed session.

SECONDED: Mr. Connolly

MOTION CARRIED

12.1 REPORT ON CLOSED SESSION

Mr. O'Brien reported that during the in-camera session the Board discussed details pertaining to personnel, consider a matter concerning personal or public interest and matters that could prejudice legal proceedings.

MOTION: By Mr. Nettleton

Be it resolved that the Chair's report of the March 28, 2018 closed session be received and approved, and further that there will be

follow up on the actions discussed.

SECONDED: By Ms. Doherty

MOTION CARRIED

12.3 PETERBOROUGH REGIONAL HEALTH CENTRE AND ROSS MEMORIAL HOSPITAL INTEGRATION

The Board discussed a partnership with the Peterborough Regional Health Centre and Ross Memorial Hospital in closed session and presented a motion for decision.

MOTION: By Mr. Rogers

Whereas, the Central East LHIN is aware that Peterborough Regional Health Centre (PRHC) and Ross Memorial Hospital (RMH) have a rich history of cooperation and collaboration in delivering care to the residents in their communities and across the LHIN's North East Cluster, and;

Whereas, the ongoing transformation of the health care system and its focus on Patients First compels the LHIN and health service providers to better identify and respond to current and future community needs and ensure that patients have access to the care they need, when and where they need it; and;

Whereas, the Central East LHIN and health service providers, pursuant to Section 24 of the Local Health System Integration Act, 2006 have a duty to actively seek out integration opportunities;

Therefore, in order to improve the patient access to high quality services, continue to support health system transformation and to make the best use of the public's investment, the Central East LHIN is directing PRHC and RMH to partner in a facilitated integration planning process to explore integration opportunities related to the delivery of:

- · Clinical and front-line services;
- · Back-office functions; and,
- · Leadership and/or governance,

With input from stakeholders, the hospitals will submit to the Central East LHIN, for its review, a directional plan in no more than 90 days outlining the process the organizations will undertake to explore any opportunities.

SECONDED: Ms. Doherty

MOTION CARRIED

12.2 MOTION OF TERMINATION

MOTION: By St. George

Be it resolved that the March 28, 2018 Central East LHIN Board

meeting be terminated.

SECONDED: Mr. Connolly

MOTION CARRIED

The meeting was terminated at 4:45 PM.

ORIGINAL SIGNED BY	ORIGINAL SIGNED BY
Louis O'Brien Chair, Central East LHIN	Deborah Hammons Chief Executive Officer, Board Secretary