

**BOARD APPROVED MINUTES
BOARD OF DIRECTORS MEETING**

Wednesday, October 25, 2017

9:00 am to 2:15 pm

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

- Directors Present:** Mr. Louis O'Brien (Chair)
Ms. Amorell Saunders N'Daw (Vice Chair)
Ms. Bonnie St. George (Member)
Mr. David Barlow (Member)
Ms. Debbie Doherty (Member)
Ms. Elaine Aimone (Member)
Mr. Glenn Rogers (Member)
Mr. Michael Nettleton (Member)
Mr. Patrick Connolly (Member)
Mr. S. Gopikrishna (Member)
- Regrets:** Ms. Aileen Ashman (Member)
- Guests:** Ms. Kelly Kay (Executive Director, Seniors Care Network)
- Staff Present:** Ms. Deborah Hammons (Chief Executive Officer)
Ms. Lisa Burden (Vice President, Home and Community Care)
Dr. Barry Guppy (Vice President, Clinical)
Mr. Marco Aguila (Vice President, Human Resources and Organizational Development)
Ms. Shelley Dagorne (Vice President, Finance and Corporate Services)
Ms. Katie Cronin-Wood (Director, Strategic Communications and Stakeholder Relations)
Ms. Farrah Hirji (Director, Health System Strategy, Integration, Planning and Performance)
Ms. Karen O'Brien (Manager, Community Engagement and Outreach)
Ms. Tunde Igli (Director, Finance and Risk Management)
Ms. Marilee Suter (Director, Decision Support, Health System Strategy, Integration, Planning and Performance)
Ms. Jeanne Thomas (Director, Health System Strategy, Integration, Planning and Performance)

Ms. Michelle Nurse (Director, Contract Management, Performance and Accountability, Health System Strategy, Integration, Planning and Performance)
Ms. Jennifer Persaud (Governance Coordinator)
Ms. Alison Pickles (Corporate Governance Administrative Assistant, Minutes Recorder)

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 9:00am 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) informed the Board that as of next month the Patient stories will be presented by the Patient Family Advisory Committee. Ms. Cronin-Wood made reference to the Central East LHIN website's page on LHIN Sub-Region Profiles and highlighted the listing of patient stories.

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.

MOTION: By Mr. Gopikrishna
Be it resolved that the consent agenda of the October 25, 2017 meeting of the Central East LHIN Board of Directors be approved.

- Included are the following items for approval:
 - Board meeting agenda: October 25, 2017
 - Board meeting minutes: September 27, 2017
 - Chair's Report to the Board

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. There were no conflicts raised by members in attendance.

5.1 BUSINESS ARISING FROM LAST MEETING OF SEPTEMBER 27, 2017

Mr. O'Brien asked for any business arising from the last Board meeting on September 27, 2017.

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

6.1 STRATEGIC AIM UPDATE

Ms. Jeanne Thomas, Director, Health System Strategy, Integration, Planning and Performance, provided an update on the Integrated Health Service Plan (IHSP) Strategic Aim: Palliative Care. The Central East LHIN is on track to have palliative patients spend 15,000 less days in hospital by the end of IHSP 3 and have 17% more palliative patients discharged home with support by 2019. The next steps for the IHSP strategic Palliative Care aim are:

1. Implementation of the OPCN 3-Year Action Plan, specifically regionally-led (Central East LHIN / Central East Regional Palliative Care Steering Committee) actions/strategies
2. Implementation of Central East Regional Palliative Care Strategy in alignment with OPCN 3-Year Action Plan and Central East LHIN Strategic Aim
3. Planning palliative care services at a sub-region level
4. Continue to facilitate the development of 53 residential hospice beds in Central East LHIN
5. Continue development of MAID Regional Plan
6. Home and Community Care:
 - a) To foster the Central East Home and Community Care palliative care community
 - b) Development of education plan to ensure that the preferred location of death is correctly documented to support organizational metrics
 - c) Continuous monitoring of emergency diversion reports and following the ED Diversion protocol to support palliative patients better and avoid unnecessary emergency department visits in the last 30 days of life

Ms. Farrah Hirji, Director, Health System Strategy, Integration, Planning and Performance, provided an update on the IHSP Strategic Seniors Aim. Staff are using the data on seniors from 2016/17 to predict the data for 2017/18 and 2018/19. Seniors exercise classes are in all seven (7) sub-regions and Central east LHIN staff plan to follow-up on the opportunity to increase enrollment in these classes. Ms. Kelly Kay, Executive Director of The Seniors Care Network, identified a goal to increase access to coordinated care for seniors. The next steps for the IHSP Strategic seniors aim are as follow:

1. Continue to implement Seniors Strategic Aim initiatives as outlined in the 2016-19 Integrated Health Service Plan and 2017/18 Annual Business Plan.
2. Continue to collaborate with the Seniors Care Network, Seniors' Physician Lead, along with key stakeholders and partners, to design, implement and evaluate programs that strengthen integrative health services and their delivery for frail seniors.
3. Better understand frail senior populations at a sub-region level and opportunities to meet their health needs to support them living at home.
4. Integrate seniors health within sub-region planning.
5. Spread programming and address any gaps at the sub-region level.

6.2 CAPITAL PROJECTS SUMMARY

Ms. Tunde Igli, Director, Finance and Risk Management, reviewed the Capital Projects Summary and highlighted the following:

- The Minister of Health and Long-Term Care announced that a grant has been provided to help Scarborough and Rouge Hospital construct a new dialysis unit (Bridletown)
- Approval was granted to the Barbara Black Centre for Youth (BBCYR) for the development of a Pickering Satellite.
- The MOHLTC provided support for residential hospice projects moving forward for Oak Ridges Hospice, Durham Hospice and Victorian Order of Nurses.

6.3 SCARBOROUGH AND ROUGE HOSPITAL'S CENTENARY SITE ADDITIONAL DIALYSIS CAPACITY PRE-CAPITAL SUBMISSION

Ms. Igli walked members of the Board through a pre- capital submission to add 27 dialysis stations to the Centenary site, requesting the Board's endorsement. The estimated cost for the additional dialysis stations is \$1.09 million for the first 9 stations and \$4.106 million for the additional 18 stations.

MOTION: By Ms. St George
Be it resolved that the Central East Local Health Integration Network Board of Directors endorses the program and service elements (Part A) of the Additional Dialysis Capacity Pre-Capital Submission from the

Scarborough and Rouge Hospital.

Be it further resolved that the Central East Local Health Integration Network Board of Directors instructs the Scarborough and Rouge Hospital to submit Part A and Part B of the Pre-Capital submission to the Ministry of Health and Long-Term Care for review.

SECONDED: Mr. Barlow

MOTION CARRIED

6.4 SCARBOROUGH AND ROUGE HOSPITAL'S GENERAL SITE HEMODIALYSIS ISOLATION UNIT RENOVATION PRE-CAPITAL SUBMISSION

Ms. Igli provided a summary of the pre-capital submission for the Hemodialysis Isolation Unit Renovation at the Scarborough and Rouge Hospital's General site, to create six (6) hemodialysis stations in isolation units and six (6) non-isolated stations.

MOTION: By Mr. Barlow

Be it resolved that the Central East Local Health Integration Network Board of Directors endorses the program and service elements (Part A) of the General Site Hemodialysis Isolation Unit Renovation Pre-Capital Submission from the Scarborough and Rouge Hospital based on the advice of the Ontario Renal Network that it reflect six non-isolated and six isolated hemodialysis stations.

Be it further resolved that the Central East Local Health Integration Network Board of Directors instructs the Scarborough and Rouge Hospital to submit Part A and Part B of the revised Pre-Capital submission to the Ministry of Health and Long-Term Care for review.

SECONDED: Ms. Doherty

MOTION CARRIED

6.5 ALTERNATE LEVEL OF CARE – GENERATIVE DISCUSSION

Ms. Deborah Hammons, Chief Executive Officer, provided an overview to the Board on the current status of Central East LHIN Alternate Level of Care (ALC) performance and provided an update on Central East LHIN initiatives and investments to better manage ALC pressures. Additional transitional care approaches to improving ALC performance were highlighted for the Board.

Ms. Doherty, Board member, facilitated a generative discussion amongst the Board members asking the following questions:

- 1) Are there any questions the Board members want to ask about the presentation and data presented?
- 2) Central East LHIN continues to be challenged by our ALC Indicators, the MOH recognizes the challenge and is providing additional short term funding to improve patient flow: 108 surge beds/spaces, a 20-bed Transitional Behavioural Rehabilitation Unit at Ontario Shores, are there other solutions that our LHIN should be exploring to improve our ALC days/rate within the funds that we have available?
- 3) Is there any other information/data the Board wishes to have provided at a subsequent meeting to help inform our discussion?

It was noted that an overview of the ALC Strategic Report – Optimus SBR will be brought to the Board at a future meeting. Members requested a follow-up presentation from Peterborough Regional Health Centre to discuss their Transitional Care Program in addition to having Dr. Jennifer Ingram, Seniors Physicians Lead, Central East LHIN attend a future Board meeting to discuss ALC in the seniors population.

6.6 UPDATE TO IMPLEMENTATION COMPLIANCE WITH RECOMMENDATIONS OF THE OFFICE OF THE AUDITOR GENERAL OF ONTARIO'S REVIEW OF LHINS

Ms. Michelle Nurse, Director, Contract Management, Performance and Accountability, Health System Strategy, Integration, Planning and Performance, provided an overview of the OAGO Recommendations Implementation Central East LHIN Self-Assessment Tool. LHIN staff have continued to use OAGA to track compliance progress. Staff have capitalized on the new tools and technology available post transition and continue to implement the recommendations.

6.7 REPORT OF THE AUDIT AND FINANCE COMMITTEE

Mr. Connolly, Chair of the Audit and Finance Committee, provided a report from the Audit and Finance Committee's meeting which took place on October 11, 2017. The business of the Committee included an overview presentation from Ontario Shores Centre for Mental Health Sciences on their Master Plan. The Committee also recommended the Board's endorsement for Community Care City of Kawartha Lakes' Hub Model of Care Capital project. The Finance and Audit committee reviewed the Quarterly Declaration of Compliance and Committee work plan and tabled both documents for the Board's approval.

MOTION: By Mr. Connolly
Be it resolved that the Central East Local Health Integration Network (LHIN) Board of Directors endorse the Community Health HUB Model of Care capital project recommended by the Audit and Finance Committee as proposed by Community Care City of Kawartha Lakes.

Further, be it resolved that the Central East Board of Directors delegate authority to the Central East LHIN Chief Executive Officer to forward the Application Form from Community Care City of Kawartha Lakes to the Ministry of Health and Long-Term Care for review with a letter of endorsement.

SECONDED: Mr. Gopikrishna

MOTION CARRIED

MOTION: By Mr. Connolly
As recommended by the Audit and Finance Committee, be it resolved that the Central East LHIN Board authorize the Chair, by resolution dated the 25th day of October 2017, to declare to the Minister of Health and Long-Term Care that to the best of the Board's knowledge and belief, upon due enquiry of the Chief Executive Officer and other appropriate LHIN officers and personnel, the Central East LHIN:

1. fulfilled its obligations under the Memorandum of Understanding dated April 1, 2007, the Ministry LHIN Performance Agreement and applicable law; and
2. without limiting the generality of the foregoing, complied with the provisions of the government directives applicable to it, including the Transfer Payment Accountability Directive, Procurement Directives and the Travel, Meal & Hospitality Expenses Directive. during the Applicable Period of July 1 through to and including September 30, 2017, with the noted exceptions to LHINs Insurance and the LHIN-Managed Quality-Based Procedures Volume Management.

SECONDED: Ms. Doherty

MOTION CARRIED

MOTION: By Mr. Connolly
Be it resolved that the Central East LHIN Board approve the Work Plan of the Audit and Finance Committee.

SECONDED: Mr. Barlow

MOTION CARRIED

MOTION: By Mr. Connolly
Be it resolved that the Central East LHIN Board of Directors receive the Chair's report of the Audit and Finance Committee meeting from October 11, 2017.

SECONDED: Mr. Rogers

MOTION CARRIED

6.8 CEO HIGHLIGHTS

Ms. Hammons reported the following highlights from her Report:

- The Central East LHIN will be working with staff on updating the Code of Conduct and a focus group will be formed to look at how culture is reflected.
- The LHIN will begin work on the Central East LHIN Opioid strategy led by Lakeridge Health.
- The launch of the surge flu table led by the Central East LHIN is underway with all health service providers represented.
- Central bargaining for OPSEU has begun.
- Lakeridge Health Port Perry will not be prepared to open until late spring or early summer 2018.

7.0 MOVED INTO CLOSED SESSION

MOTION: By Doherty
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:

- √ consider a matter that concerns personal or public interest
- √ consider a matter that would prejudice legal proceedings;
- and
- √ consider a personnel matter.

and that the following Central East LHIN staff, Deborah Hammons, Tünde Igli, Lisa Burden, Shelley Dagherne, Katie Cronin-Wood, Karen O'Brien, Marco Aguila, Jennifer Persaud and Alison Pickles join the Board in the closed session.

SECONDED: Mr. Connolly

MOTION CARRIED

12.1 REPORT ON CLOSED SESSION

Upon reconvening to the open 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 Ms. St. George
Be it resolved that the Chair's report of the October 25, 2017 closed session be received and approved, and further that there will be follow up on the actions discussed.

SECONDED: Mr. Gopikrishna

MOTION CARRIED

12.2 MOTION OF TERMINATION

MOTION: By Mr. Nettleton
Be it resolved that the October 25, 2017 Central East LHIN Board meeting be terminated.

SECONDED: Mr. Barlow

MOTION CARRIED

The meeting was terminated at 4:20PM

___ **ORIGINAL SIGNED BY** ___
Louis O'Brien
Chair, Central East LHIN

___ **ORIGINAL SIGNED BY** ___
Deborah Hammons
Chief Executive Officer,
Board Secretary