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	BOARD APPROVED MINUTES BOARD OF DIRECTORS MEETING Wednesday, October 28, 2015 LVIV Hall & Pavilion 38 LVIV Blvd. Oshawa, ON L1H 3C3 9:00 AM – 4:00 PM
Directors Present:	Mr. Wayne Gladstone (Chair) Mr. David Sudbury (Vice-Chair) Mr. S. Gopikrishna (Member) Ms. Margaret Risk (Member) Ms. Amorell Saunders N'Daw (Member) Ms. Samantha Singh (Member)
Director Regrets:	Ms. Joanne Hough (Member)
Staff Present:	 Ms. Deborah Hammons (Chief Executive Officer) Mr. Stewart Sutley (Senior Director, System Finance and Performance Management) Mr. Brian Laundry (Senior Director, System Design and Integration) Mr. Marco Aguila (Director, Corporate Services, Controller) Ms. Sue Wojdylo (Senior Consultant, SFPM) Ms. Katie Cronin-Wood (Director, Communications and Community Engagement) Ms. Karen O'Brien (Public Affairs) Ms. Sheila Rogoski (Executive Coordinator) Ms. Barbara Millar (Governance Coordinator) Ms. Vinitha Navarathinam (Corporate Governance Administrative Assistant, Minutes Recorder)

Mr. Gladstone, 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. Gladstone called the meeting to order at 9:00 am and welcomed the members of the public to the Central East LHIN open Board meeting.



Network Réseau local d'intégration des services de santé

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. Gladstone declared the meeting duly constituted for the transaction of business.

2.1 CONSENT AGENDA

Prior to introducing the motion, Mr. Gladstone asked if there were any items on the consent agenda requiring further discussion. There were no items raised for discussion by members in attendance.

MOTION:

By Mr. Sudbury

Be it resolved, that the consent agenda of the October 28, 2015 meeting of the Central East LHIN Board of Directors be approved.

- Included are the following items for approval:
 - Board meeting agenda: October 28, 2015
 - o Board meeting minutes: September 23, 2015
 - Chair's Report to the Board

SECONDED: Ms. Singh

MOTION CARRIED

2.2 DECLARATION OF CONFLICTS OF INTEREST

Mr. Gladstone requested that those in attendance declare any conflicts of interest. There were no conflicts raised by members in attendance.

3.1 DURHAM REGIONAL HEALTH DEPARTMENT

Dr. Robert Kyle, Commissioner and Medical Officer of Health, introduced Ms. Mary-Anne Pietrusiak, Epidemiologist of Durham Regional Health Department, who provided an overview on the services offered by the organization.

Ms. Pietrusiak reported on the Health Neighbourhoods project and noted that the project has 62 indicators for 50 Health Neighbourhoods in the Durham Region to better understand patterns of health in the communities. The overall goal of the project is to support strong, safe and equitable neighbourhoods that improve the health and well-being of all residents across Durham Region. It was noted that a feature report on Building Health in Priority Neighbourhoods is being developed and will be presented to the Health and Social Services Committee in November and that new indicators will be released in January 2016.

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Members of the Board thanked Dr. Kyle and Ms. Pietrusiak for their presentation and Ms. Hammons noted that staff at the Central East LHIN will continue to engage the Durham Region Health Department on any collaboration opportunities.

4.1 DELEGATION TO THE BOARD: LAKERDIGE HEALTH – HOSPITAL INFORMATION SYSTEM

Mr. Gladstone welcomed Mr. Kevin Empey, President and Chief Executive Officer, Lakeridge Health and Dr. Bert Lauwers, President and Chief Executive Officer, Ross Memorial Hospital to present to the Board on the Clinical Information System Partnership. Mr. Empey and Dr. Lauwers reported that the hospital partnership, involving Lakeridge Health, Haliburton Highlands Health Services, Campbellford Memorial Hospital, Northumberland Hills Hospital and Ross Memorial Hospital is requesting the Central East LHIN Board remove the current hold on the procurement activities to allow direct engagement with the Ministry of Health and Long-Term Care (MOHLTC) Hospital Information System Advisory Panel.

Mr. Gladstone thanked Mr. Empey and Dr. Lauwers for their delegation and referred the request presented by the delegation to Central East LHIN staff for further analysis.

5.1 BUSINESS ARISING FROM LAST MEETING OF SEPTEMBER 23, 2015

Mr. Gladstone asked for any business arising from the last Board meeting on September 23, 2015. There were no items of business arising by members of the Board.

5.2 INTEGRATED HEALTH SERVICE PLAN (IHSP) #4 FINAL REPORT – LIVING HEALTHIER AT HOME

Mr. Brian Laundry, Senior Director, System Design and Integration, presented the final draft of the Central East LHIN 2016-19 Integrated Health Service Plan (IHSP). Mr. Laundry provided an overview of the following six Direct Care Priorities that have been included in the IHSP as elements critical to achieving the four Strategic Aims:

- Health Links & Primary Health Care;
- Patient and Family Caregivers;
- Home and Community Care;
- Supported Living Environments;
- Health Equity Diversity and Building Cultural Competency; and
- Child and Family.

It was noted that the contents of the IHSP is in alignment with the provincial priorities of the MOHLTC and focuses on the overarching goal of Living Healthier at Home – Advancing integrated systems of care to help Central East residents live healthier at home.

It was indicated that the IHSP finalized draft plan will be submitted to the MOHLTC by October 31, 2015, pending approval from the Central East LHIN Board and is expected to be launched on April 1, 2016.

MOTION: By Ms. Saunders N'Daw Be it resolved that the Central East LHIN Board of Directors approve the draft Integrated Health Service Plan 2016-2019 for submission to the Ministry of Health and Long-Term Care by October 30, 2015.

SECONDED: Mr. Gopikrishna

MOTION CARRIED

Ms. Hammons commended Mr. Laundry and his team for their collaborative efforts in putting together the final draft report of the IHSP.

5.3 NORTHUMBERLAND HILLS HOSPITAL – EXTERNAL OPERATIONAL REVIEW

Mr. Stewart Sutley, Senior Director, System Finance and Performance Management, provided an overview of the key findings, observations and recommendations contained in the Final Report of the External Operational Review of Northumberland Hills Hospital (NHH). It was reported that the Review Team conducted its review and concluded that while the hospital provided quality services, is efficient and has a high functioning Board, there are areas that could be further improved that should be included in a Hospital Improvement Plan (HIP) to ensure that the hospital can balance its budget and become financially sustainable. It was reported that the review did not recommend any change in the volume or types of services currently being provided at NHH. Mr. Sutley communicated that recommendations related to operational and clinical efficiency improvement initiatives, integration opportunities and revenue maximization initiatives were included in the report with the understanding that the Central East LHIN's support will be required in order to deliver on some of the longer-term recommendations.

Mr. Sutley indicated that the hospital has expressed its intention to pursue all the recommendations in the proposed HIP, including its integration opportunities; however, the Central East LHIN has not yet received a formal Hospital Board-approved HIP.

The Board proposed that a report back from NHH with the Hospital Board-approved HIP to come forward at the meeting in December. Mr. Jack Russell, Board Chair of NHH was present at the meeting and was acknowledged by members of the Board for the proactive response from the NHH Board and management.

MOTION: By Ms. Saunders N'Daw Whereas, Central East LHIN staff have provided an overview of the key findings, observations and recommendations contained in the Final Report of the External Operational Review of Northumberland Hills Hospital

(NHH), details of the proposed Hospital Improvement Plan (HIP), and a description of the Hospital's response to the Report;

Therefore, be it resolved that the Final Report of the External Operational Review of Northumberland Hills Hospital be received by the Central East LHIN Board.

And further, be it resolved that Northumberland Hills Hospital is directed to return to the LHIN Board in December with a Hospital Board-approved Hospital Improvement Plan, which is to include:

- a. mitigation strategies/initiatives and any other remedial actions, including those related specifically to operational and clinical efficiency improvements, service sustainability, integration, and the management in the short- and medium-term of changes in clinical volume, pricing, and funding due to Health System Funding Reform;
- b. a monitoring plan to track implementation;
- c. a communications and stakeholder engagement plan.

And further be it resolved, that Central East LHIN staff send the Report's findings and recommendations to the Ministry of Health and Long-Term Care.

And finally, be it resolved that, the Central East LHIN staff return to the Board in December with a report of the support the LHIN could provide to Northumberland Hills Hospital to facilitate its success in implementing its Hospital Board-approved Hospital Improvement Plan, once received.

SECONDED: Ms. Singh

MOTION CARRIED

5.4 SCAROBOROUGH DURHAM WEST ACUTE CARE SERVICES INTEGRATION PANEL UPDATE

Ms. Hammons informed the Board that an extension was granted to the Panel to complete the report being submitted to the Minister's Office and the LHIN by the end of October; however, the report has not yet been received from the Panel.

5.5 LOCAL PARTNERSHIP – PROPOSED 2015/16 REALLOCATION OF QUALITY-BASED PROCEDURES (QBP) FUNDING – UPDATE

Mr. Sutley provided an update on the proposed 2015-16 Quality-Based Procedures (QBPs) reallocation and noted that staff have been working with the Hospital and Community Care Access Centre Financial Leadership Group's (HCFLG) and the Vice President, Clinical Services/ Chief Nursing Executive Steering Committee (VP/CNE SC). Mr. Sutley reported on

the outcomes of HCFLG's update to the Central East LHIN Executive Committee (CEEC) which took place on October 23, 2015 and assured the Board that staff will continue to address the quality and financial aspects of QBP reallocations and report back to the Board in December.

6.1 REPORT OF THE AUDIT AND FINANCE COMMITTEE

Mr. Sudbury, Chair, Audit and Finance Committee, provided a report on the business of the Audit and Finance Committee meeting that took place on October 14, 2015. The Committee reviewed the Board budget, expenses and per diem claims from Q2. It was noted that the Q2 reports submitted to the Ministry of Health and Long-Term Care (MOHLTC) included the Operations Forecast and Transfer Payment Agency reports. The quarterly Declaration of Compliance report was tabled for review and approval by the Board for submission to the MOHLTC, with two exceptions related to LHINs insurance and the LHIN-Managed Quality-Based Procedures Volume Management. Revisions made to the Delegation of Authority Policy also came forward for approval.

MOTION: By Mr. Sudbury

Be it resolved that the Central East LHIN Board authorize the Chair, by resolution dated that 28th day of October, 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 September 30, 2015, with the noted exceptions to LHINs insurance and the LHIN-Managed Quality-Based Procedures Volume Management.

SECONDED: Ms. Singh

MOTION CARRIED

MOTION: By Mr. Sudbury Be it resolved that the Central East LHIN Board of Directors receives the recommendations from the Audit and Finance Committee and approves the amended Delegation of Authority Policy.

SECONDED: Ms. Gopikrishna

MOTION CARRIED

MOTION: By Mr. Sudbury 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 14, 2015.

SECONDED: Ms. Risk

MOTION CARRIED

6.2 LAKERIDGE HEALTH CAPITAL REQUEST – LINEAR ACCELERATORS COMPUTED TOMOGRAPHY SIMULATOR

Ms. Sue Wojdylo, Senior Consultant, SFPM, reported that the R.S. McLaughlin Durham Regional Cancer Center at Lakeridge Health is seeking the Board's endorsement to operate two replacement linear accelerators with Computed Tomography (CT) three dimensional imaging functionality and one replacement CT simulator at the Oshawa site.

MOTION: By Ms. Risk

Be it resolved that the Central East LHIN Board direct the Chief Executive Officer to communicate to the Ministry of Health and Long-Term Care its endorsement of the R.S. McLaughlin Durham Regional Cancer Centre's own-funds capital request to operate two replacement linear accelerators with Computed Tomography (CT) three dimensional (3D) imaging functionality and one replacement CT Simulator at the Oshawa Campus and designate all three units under the Healing Arts Radiation and Protection Act (HARPA).

SECONDED: Ms. Singh

MOTION CARRIED

6.3 THE SCABOROUGH HOSPITAL – ROUGE VALLEY HEALTH SYSTEM – INTEGRATION ACTIVITIES – PROGRESS UPDATE

Ms. Michele James, Vice President, Women and Children's Program and Clinical Support Services, Rouge Valley Health System (RVHS) presented an update on Facilitated Integration Planning activities between The Scarborough Hospital (TSH) and RVHS. Ms. Andrée Robichaud, President and Chief Executive Officer of RVHS, Mr. David Brazeau, Director, Public Affairs, Community Relations and Telecommunications at RVHS and Ms. Trixie Williams, Director, Women and Children, Diabetes and Chaplaincy at RVHS were acknowledged for their attendance at the meeting. Ms. James presented the short term integration opportunities identified in the 2013 Workbooks and noted that the following eight opportunities are completed, tracked in a standard project management structure and key deliverables have been defined including metrics to measure success:

- 1. Cardiac Pacemaker Integration;
- 2. Lab Shared Clinical Expertise;
- 3. Diagnostic Imaging Radiologists Expertise Integration;
- 4. Enhancing Access to TSH & RVHS Breast Diagnostic Assessment Units (DAUs) from the community;
- 5. Palliative Care;
- 6. Post Acute Care;
- 7. Emergency Department Connections through Information Technology; and
- 8. Maternal Child Youth Motion 1B.

It was indicated that both hospitals are involved in the implementation of the South Scarborough Health Link. Ms. James reported that RVHS and TSH are currently implementing a Pediatric Developmental Care service and a Pediatric Obesity Clinic and both hospitals are developing a business case for the care of medically complex children in partnership with Hospital for Sick Children and other health service providers in the Central East LHIN.

Members of the Board thanked Ms. James for the presentation on the progress made to date.

MOTION: By Mr. Sudbury Be it resolved that the Central East LHIN Board of Directors acknowledges receipt of The Scarborough Hospital – Rouge Valley Health System – Integration Activities progress update.

SECONDED: Ms. Singh

MOTION CARRIED

6.4 CEO REPORT – Q & A

Ms. Hammons presented the CEO report for review and questions and noted that funding recommendations for community investments will be coming forward to the Board in November.

MOTION: By Ms. Saunders N'Daw Be it resolved that the Central East LHIN Board of Directors receive the October 28, 2015 report of the Central East LHIN CEO for information.

SECONDED: Mr. Sudbury

MOTION CARRIED

7.0 MOVED INTO CLOSED SESSION

MOTION: By Ms. Risk

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 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, Brian Laundry, Stewart Sutley, Marco Aguila, Katie Cronin-Wood, Karen O'Brien, Ritva Gallant, Marilee Suter, Barbara Millar, and Vinitha Navarathinam join the Board in the closed session

SECONDED: Mr. Gopikrishna

MOTION CARRIED

12.1 REPORT ON CLOSED SESSION

Upon reconvening to the open session, Mr. Gladstone 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. Sudbury

Be it resolved that the Chair's report of the October 28, 2015 closed session be received and approved, and further that there will be follow up on the actions discussed.

SECONDED: Ms. Singh

MOTION CARRIED

12.2 MOTION OF TERMINATION

- MOTION: By Mr. Risk Be it resolved that the October 28, 2015 Central East LHIN Board meeting be adjourned.
- SECONDED: Mr. Gopikrishna

MOTION CARRIED

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The meeting was terminated at 4:00 PM

Wayne Gladstone Board Chair, Central East LHIN Deborah Hammons Chief Executive Officer, Board Secretary