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Approved Minutes – Board Meeting

January 25, 2017

Public Meeting Start time: 13:30 p.m.

Champlain LHIN Boardroom, 1900 City Park, Suite 500, Ottawa

Board Members in Attendance: Jean-Pierre Boisclair (Chair), Marie Biron (Vice-Chair), Randy Reid, Elaine Ashfield, Diane Hupé, Nick Busing, Wendy Nicklin, Guy Freedman

Regrets: Pierre Tessier

Staff Members in Attendance: Chantale LeClerc, Elaine Medline, Eric Partington, Joanne Yelle-Weatherall, Cal Martell

Guests Speakers:

Dr. Mark Ferland, Neuropsychologist, Robin Easey Centre

Dr. Robin Taylor, Associate Medical Officer of Health, Ottawa Public Health

1 Call to Order

12:45

The meeting was called to order at 12:45.

2 Conflict of Interest Declarations

There was no conflict of interested declared.

3 In-Camera Session

12:45-13:15

THAT members attending this meeting move into a Closed Session pursuant to the following exceptions of LHINS set out in s.9(5) of the Local Health Integration Act, 2006:

X ***Personal or public interest***

X ***Personnel matters***

To receive confidential information regarding the following items:

- 4.1 Approval of confidential minutes of December 13, 2016
- 4.2 Chair's Report
- 4.3 CEO's Report

AND further that the following individuals be permitted to attend for these items:

*Chantale LeClerc
Elaine Medline
Eric Partington
Cal Martell*

AND To receive confidential information from the CEO Performance Evaluation and Compensation Committee

AND further that the following individual be permitted to attend for this item:

Chantale LeClerc

**Moved: Wendy Nicklin / Seconded: Randy Reid
All in favour
Carried**

BREAK(15 minutes) and return to public session

4 Approval of Agenda

13:30

There being no objection, the agenda was approved as distributed.

**Moved: Wendy Nicklin / Seconded: Nick Busing
All in favour
Carried**

5 Welcome and Introduction / Chair's Report & In-Camera Report

The Board Chair welcomed Board Members and guests. Guests were reminded about the rules of engagement for the LHIN's public board meetings and the scheduled break providing members of the public a chance to engage with Board Directors and senior managers, as well as with each other. Participants were asked to introduce themselves.

Chair's Report:

The Chair's activity report was distributed to the Board. Most of the activities were related to preparedness for the transition through involvement on the provincial governance work

stream, as well as work with the Board of the Champlain LHIN. The Chair reported that work is well underway to prepare for transition day.

In-Camera Report:

The Chair reported that no decisions were made during the in-camera session held earlier, but confidential information was shared with the Board regarding personnel matters and the transition to the LHIN's new mandate.

6 CEO's Report and Quarterly Attestation (Third Quarter 2016-17)

Chantale LeClerc commented on a few activities included in her monthly report and answered questions:

- The LHIN has been working with the Champlain Community Care Access Centre, The Royal, Peter D. Clark long-term care home and the Ministry of Health and Long-Term Care to close-out Peter D. Clark's specialized unit for persons with challenging behaviours as a result of dementia. All patients from this unit were transitioned back to their original long-term care homes or to The Royal. The LHIN released a Request for Services to identify an alternative long-term care home to deliver this service in both English and French in our region. It is anticipated the new unit should be operational by the end of the fiscal year.
- The LHIN is continuing to work with the Primary Care Advisory Council to identify strategies to support primary care providers in providing care to people with mental health and addictions.
- New Regional Planning Table for Trans, Two Spirited, Intersexed and Gender Diverse Health Services: Clarification is provided regarding the terminology used to identify this population. This is a growing, often marginalized, population in our region whose health needs are not currently well met. The LHIN is participating in this work led by Centretown Community Health Centre and involving several other partners. The intent is to leverage expertise available in our region to determine how to improve the delivery of existing services to this population.
- Work is underway at the LHIN in partnership with public health units in Champlain to develop population health profiles for each of our sub-regions. The profiles will contain data on each sub-region's population and health services. The data will provide a common baseline of information and help to set priorities for each area.
- Over one thousand primary care physicians are now connected to the Eastern Ontario Clinical Document Repository/Hospital Report Manager infrastructure and are receiving documents from the participating hospitals directly into their Electronic Medical Records. This system was put in place several years ago through a partnership with eHealth Ontario while the provincial connectivity backbone, that is, the provincial clinical document repository is being built.

The LHIN CEO read her attestation of compliance for the third quarter. One change is made to Schedule A, modifying the statement under paragraph 2, noting the approval of the new *Patients First Act, 2016*.

MOTION:

That the Board of Directors approve the CEO's monthly report for the period of December 2, 2016 to January 13, 2017 as distributed; and the Quarterly Attestation for the third quarter (October 31, 2016 to December 1, 2017) as amended.

Moved: Wendy Nicklin / Seconded: Elaine Ashfield

All in favour

Carried

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Consent Agenda

There being no objection, the item listed under the consent agenda is approved as distributed:

- Minutes of December 14, 2016

Moved: Diane Hupé / Seconded: Randy Reid

All in favour

Carried

NEW BUSINESS

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Quarterly Performance Report (Second Quarter)

Brian Schnarch, Director of System and Performance Analysis at the LHIN, presented the report on health-system performance in the Champlain region for the second quarter. The Board Chair mentioned that this report has evolved over the past year or so. In this report, new elements were introduced. For the first time the report includes a forecast of health-system performance by projecting where indicators will likely stand at the end of the fourth quarter. Also, the report examines how health-system performance relates to patients' social and economic status ([see slide deck included in the meeting package](#)).

In summary a few points are noted:

1. Champlain, the most improved LHIN year-over-year, now stands in 4th place
2. Four indicators are near target, and four are away from target
 - Challenges identified are: (1) acute patients awaiting alternate care, (2) home care wait times, (3) time complex patients spend in emergency departments and (4) MRI wait times
3. Q4 Forecast: Some improvements will not be sustained, especially due to home care wait times
4. Material and social factors are important and noted:

- People in less well-off neighbourhoods make more avoidable hospital visits but quality of care appears comparable irrespective of economic advantage
- Lack of social support increases the likelihood of using hospital services when other services might be more appropriate.
- Further study of population factors will help to better target strategies. Sub-region of residence and language: foci of future reports

During the question period the following points are also noted:

- The Board is informed that representatives from the CCAC will be invited to present at a board meeting the pathways to improve wait times and address wait lists for services.
- Overall comments are very positive regarding the data presented in the report. LHIN staff will further review the data to better design and target health services based on population needs and will focus next on how health system performance may vary based on where people live (i.e. the sub-regions).
- A segment of the quarterly report addressing risks that have been identified under the Enterprise Risk Management (ERM) framework are reviewed, as well as the corresponding mitigation strategies ([see slide deck included in the meeting package](#)). Eric Partington, Senior Director of Health System Performance at the LHIN indicated that all ten risks identified are considered to be sufficiently mitigated at this time.

MOTION:

Be it resolved that the Board of Directors approve the Performance Report and the Risk Report for the second quarter of 2016-17 as presented.

Moved: Randy Reid / Seconded: Guy Freedman

All in favour

Carried

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Overview of Acquired Brain Injury Services in Champlain and Future Directions

Dr. Ferland, neuropsychologist at the Robin Easy Centre, and Kevin Barclay, Senior Integration Specialist at the Champlain LHIN, presented a report on Acquired Brain Injury Services, including community rehabilitative care and support services for persons with Acquired Brain Injury (ABI). It is noted that ABI is the leading cause of death and disability for individuals in Canada under the age of 35. The presentation provided a picture of the current state, recommendations for improvements on the short-term and long-term basis, details regarding initiatives presently in place, as well as next steps ([see slide deck included in the meeting package](#)).

During the question period the following points are noted:

- The joint programs between the Champlain and South East LHINs are working well across Eastern Ontario.
- There are other providers available to serve this population, but some services are private and available mainly for people who suffered a motor vehicle accident and received compensation.
- The services for people with ABI are reasonably distributed across Champlain. There is however some disparity of services when comparing Champlain with other LHINs.
- Availability of services for caregivers of persons with an ABI living at home is limited. Partnerships with service providers is essential in the development of respite care, support groups, day programs, etc.

MOTION:

Be it resolved that the Champlain Board of Directors receive the report “Integrated Community Based Rehabilitation Services for people with Acquired Brain Injury Champlain 2016: A Health Priority” and consider the recommendations of the report in its future work.

Moved: Nick Busing / Seconded: Randy Reid

All in favour

Carried

BREAK (10 minutes)

10 Overview of strategies to manage increased demand on health services in Champlain during the winter months

Cal Martell, Senior Director of Health System Integration at the LHIN and Dr. Robin Taylor, Associate Medical Officer of Health for Ottawa Public Health, presented an overview of the strategies implemented prior to the influenza season to manage the surge in demand on hospital and other health services due to influenza ([see slide deck included in the meeting package](#)).

In the fall 2016 the Champlain LHIN brought together a working group for the first time to develop a more proactive approach to mitigate pressures to the system due to influenza (including representatives from hospitals, CCAC, public health, long-term care, etc.). Also, after receiving provincial funding to address hospitals pressures, the LHIN asked hospitals to work collaboratively within the sub-regions to develop plans to use this funding to address the annual increase in demand due to influenza.

During the question period the following points are noted:

- The seasonal surge working group will review lessons learned from this season and will work to prepare for next influenza season. During the low influenza season Ottawa Public Health will also work with long-term care homes to prepare. The public health

outbreak teams will work with partners to increase immunization rates for staff and review protocols and best practices, such as cleaning, hand washing, etc.

- For this year's influenza season, the vaccination rate for our region is not available yet. It is noted however that vaccines distributed through Ottawa Public Health was approximately 250,000 doses (this does not include vaccines distributed through pharmacies). Based on data from previous years, the influenza immunization rate in the general population across Canada is approximately 30% to 40%. For residents of Champlain long-term care homes immunization rate is 90% to 100%. Approximately 40% of health care providers in the Champlain region are immunized for influenza.

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Patients First Update

The CEO and Board Chair provided a progress report on transition activities and the progress achieved since the adoption of the *Patients First Act, 2016*. Some points are noted:

- The Champlain LHIN Board expects to have a full complement of members in place (minimum of 10) by transition day.
- The LHIN Board is tracking/monitoring the top ten due diligence readiness criteria.
- In early January an external third-party vendor, procured by the Ministry of Health and Long-Term Care, visited the Champlain LHIN to review transition readiness, provide support to the LHIN and identify any concerns or risks to implementation.
- Bylaws, Memorandum of Understanding, Ministry-LHIN Accountability Agreement and mandate letter are all being reviewed and will be ready before the transition.
- All 17 provincial work streams are working through various elements of readiness that will be required by the 14 LHINs in order to transition to their new mandates.
- All local working groups addressing operational issues are working in full force.
- Training and education exchange is happening or is planned, and educational modules are being developed.
- The organizational structure has been approved by the Ministry. Recruitment strategies are in place and progressing to fill the management positions (Vice Presidents and Directors) as soon as possible.
- Regular communiqués are shared with staff at the CCAC and LHIN.
- Both Chantale LeClerc and Jean-Pierre Boisclair recognized the collaboration and relationship between the Champlain CCAC and LHIN. Staff and management teams from both organizations were commended for their professionalism, collaboration and openness. The strong working relationship between the CEOs and Board Chairs, as well as leadership teams of both organizations was also noted.
- The CEO and Board Chair both reported feeling confident that the Champlain LHIN will be ready for transition day.
- Clarification is provided that change management strategies will address the cultural shift of the organization at a later stage in the transition. Help will be provided to all LHINs from the provincial work stream addressing change

management and communications matters. Also, consultants will be available to help LHINs regarding any aspect of change management.

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Board Committee Stewardship Reports and Matters Arising Therefrom

1. **Governance Committee and Review/Approve Draft Terms of Reference of the Quality Committee**

The Governance Committee met on January 11 and a verbal report of the matters dealt with at the meeting was provided ([draft minutes will be included in the February meeting package](#)). The Committee reviewed the revised draft templates of LHIN Bylaws 1 and 2. Some minor changes were made by legal counsel to the existing bylaws in view of the new legislation. It is hoped that the final bylaws will be available to be shared with the Board in February. The Governance committee also reviewed: the common terms of reference for the Boards' committees; the Board charter; and the Governance Committee terms of reference. All three documents will be shared with the Board in February (with tracked changes). It is noted that input provided by members (submitted through committees' performance survey results) will be compiled. These suggestions include topics for next fiscal year's retreats, education sessions and presentations. This list will be circulated to all members for comments and additions and will be tabled for approval at the Board meeting in March.

In view of the LHIN's new responsibilities, one additional committee of the Board will be created: The Quality Committee. Terms of reference for this new committee were drafted and reviewed by Chairs of Board committees and by some additional Board Directors. It is noted that this document is a good starting point. Once the committee is activated, it will review and amend the terms of reference as needed.

MOTION:

The Governance Committee recommends that the Board approve the draft Terms of Reference of the Quality Committee as presented as a starting point.

Moved: Randy Reid/ Seconded: Wendy Nicklin

All in favour

Carried

2. **French Language Services**

Diane Hupé presented a report on behalf of Pierre Tessier, Chair of the Board's French Language Services Committee ([see minutes included in the meeting package](#)). The committee revised its terms of reference as they relate to the new legislation. The committee discussed the need to have a board-to-board discussion with Le Réseau des services de santé en français de l'est de l'Ontario and the Champlain LHIN to clarify each other's roles, to establish better collaboration and to also review the roles of the Comité de liaison. The committee reviewed a list and a map of identified and designated health service providers by sub-regions to help identify the gaps and help in planning and delivering health services in French. Three motions were tabled for approval regarding revised designation plans.

MOTION:

That the Board fully approve the revised designation plan for Maison Fraternité.

Moved: Diane Hupé / Seconded: Marie Biron

All in favour

Carried

That the Board fully approve the revised designation plan for l'Hôpital Montfort.

Moved: Diane Hupé / Seconded: Marie Biron

All in favour

Carried

That the Board fully approve the revised designation plan for Prescott Russell Community Services.

Moved: Diane Hupé / Seconded: Marie Biron

All in favour

Carried

3. CEO Performance Evaluation & Compensation

Guy Freedman provided a summary of the last committee meeting (confidential minutes will be distributed separately to Board Members). The group revised its terms of reference in view of the new legislation. It also approved a revised version of the survey questionnaire to be used by the Board for the evaluation of the performance of the CEO for fiscal year 2016-2017 (to be launched in February). In view of the new legislation, the committee also reviewed the CEO job description template provided by the Ministry. The final version will be shared with the Board at a later date.

4. Finance & Audit

The committee will be meeting on February 2 and had nothing further to report.

A change in procedure involving committees report to the Board is communicated. It is noted that when a committee meets a few days prior to a Board meeting, the committee Chair will provide a verbal report to the Board at the first available scheduled meeting of the Board. Previously, these committees reported to the Board only the following month. This change is effective immediately. Therefore documents will sometimes be distributed to the Board prior to the committee's meeting and will be marked "subject to committee approval". Draft minutes of these committee meetings will be shared after the committee Chair has reported to the Board.

No other business was tabled.

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Adjournment of Meeting

There being no objection the meeting adjourned at 16:48.

Moved by: Nick Busing

Jean-Pierre Boisclair
Chair, Board of Directors
Champlain Local Health Integration Network

Chantale LeClerc
CEO
Champlain Local Health Integration Network