# REGULAR MINUTES OF THE BOARD OF DIRECTORS' MEETING OF THE CENTRAL WEST LOCAL HEALTH INTEGRATION NETWORK

# HELD WEDNESDAY, DECEMBER 17, 2014 AT 5:00 P.M. Central West LHIN Office, 8 Nelson Street West, Suite 300 Brampton, Ontario

## Board Members Present:

Maria Britto (Board Chair), John McDermid (Vice Chair), Lorraine Gandolfo (Member), Ken Topping (Member), Suzan Hall (Member), Gerry Merkley (Member), Pardeep Singh Nagra (Member), Winston Isaac (Member)

## Staff Members Present:

Scott McLeod (CEO), Brock Hovey, David Colgan, Michele Williams, Tom Miller, Elizabeth Salvaterra, Mark Edmonds

## Guests:

Laurie Reiser, Principal Consultant, Advanis Donna Leavens-Van West, Executive Director, Central West Palliative Care Network

Before the meeting was called to order, Board Members watched a short video which was produced by the Central West Palliative Care Network. Scott noted that this will be a regular item at the beginning of each Board Meeting, and is intended to provide information on topics of interest and relevance.

#### 1.0 Call to Order

Maria Britto, Board Chair, called the regular meeting to order at 5:10 p.m.

#### 1.1 Approval of Regular Agenda

There was some re-ordering of items in order to accommodate presentations from guests and staff at the beginning of the meeting, however, no changes were made to the content of the Regular Agenda as distributed.

MOVED by Suzan Hall and SECONDED by Ken Topping, that the Regular Agenda, as circulated, be approved.

CARRIED

#### **1.2 Conflict of Interest**

Maria reminded Board Members of the need to declare any Conflicts of Interest with respect to items appearing on the Regular Agenda. No conflicts were declared.

#### 2.0 Consent Agenda

Scott advised that all action items as noted in the Board Minutes of Wednesday, November 26, 2014 are either completed or underway. There were no requests for changes to any of the materials contained within the Consent Agenda as circulated.

MOVED by Gerry Merkley and SECONDED by Pardeep Singh Nagra, that the Consent Agenda, as circulated, be approved.

CARRIED

#### 3.0 Report of the Board Chair and Chief Executive Officer

#### 3.1 Report of the Board Chair

Maria Britto reviewed her written report for Board Members' information.

#### **3.2 Report of the Chief Executive Officer**

Scott provided a brief overview of his monthly report and noted that Elizabeth Salvaterra, Director of ER/ALC & Decision Support, is the profiled staff member this month.

Other items not reported in his report include the following:

#### Health Audit Services Team (HAST) Audit

The LHIN Senior Team met with members of the Audit Team to review the LHIN's management response to the initial recommendations. Both teams will make some minor changes to the Management Response as agreed-upon at the meeting and the finalized report will be submitted to the Deputy Minister for review.

#### Etobicoke General Hospital - Stage 3 Block Schematic

The Stage 3 Block Schematic, Project Specific Output Specification (PSOS) Submission and Cost Sharing Agreement was submitted to the MOHLTC on December 15, 2014. This represents another significant milestone in the redevelopment plans for Etobicoke General.

#### **Board/MPP Meeting**

A good meeting was held on December 12, 2014 with the local MPPs and members of the Central West LHIN Board of Directors. MPPs Harinder Malhi, Yvan Baker and Vic Dhillon were in attendance.

MPPs were provided with an update on Central West LHIN activities and emerging priorities and a productive discussion was held on a number of specific areas and flagged for follow-up including:

- Concerns about inaccurate reports of service cutbacks through the CCAC
- Cultural competency as well as level setting expectations in the community
- Follow-up from AMMA to occur regarding midwifery and credentialing at William Osler
- Update on Central West LHIN Board appointment process and approach

#### 4.0 Board Education/Generative Dialogue

#### Palliative Care/End of Life Strategy

Mark Edmonds, Director of Health Service Integration and the LHIN staff lead for the Palliative Care file, along with Donna Leavens-Van West, Director of the Central West Palliative Care Network, presented an overview of the Palliative Care/End of Life Strategy in the Central West LHIN. Also discussed, were the eleven (11) specific recommendations on Palliative Care/End of Life Strategy that had been received as a result of the 2014 audit that was conducted on Palliative Care/End of Life care services by the Office of the Auditor General of Ontario. The Central West LHIN was one of three LHINs who had been selected to participate in the audit.

It was also noted that End of Life care was mentioned in the Minister's Mandate letter that includes overseeing the development of a comprehensive provincial End of Life strategy and the expansion of the hospice program by 20 new hospices.

A generative dialogue followed regarding current and future needs for Palliative Care/End of Life care services, including the need for additional capacity in hospice care in the Central West LHIN. It was noted that funding of community-based hospice programs is unique in that a significant portion of the operating funds come from fundraising efforts. In addition, funding the ten (10) residential beds at Bethell House are allocated by the LHIN through the Central West CCAC according to government policy.

Next Steps for the Central West LHIN in respect to the Auditor General's recommendations, is for the LHIN to articulate action items in the 2015/2016 Annual Business Plan and work with providers to lead the identification of local deliverables for the IHSP-4. The LHIN will also collect, analyze and report on the data and indicators agreed upon, and continue to provide high quality, comprehensive Palliative Care services collaboratively to continuously improve services. Alignment of Palliative Care with Health Links, the Community Capacity, the Central West Seniors Strategy and the 'Pledge' will be important to ensure a coordinated approach going forward.

#### 5.0 Strategy Dialogue

#### 5.1 Home & Community Care Reform

David Colgan advised that the Minister of Health and Long Term Care had appointed a Home and Community Care Panel with a broad mandate to develop recommendations for improving the home and community care sector. As part of its community engagement plan, the Panel reached out to the LHINs asking for their assistance to obtain local feedback and input from patients/clients, and/or family members who had received or used home and community care services during the past year.

David introduced Laurie Reiser from Advanis, a social research firm we had recently engaged to conduct a public survey with respect to home health care experiences with residents from across the Central West LHIN. Laurie advised that a total of 123 randomly-selected participants had completed a telephone survey between November 24<sup>th</sup> – November 30<sup>th</sup>, 2014. These interviews provided a representative sample solicited within the LHIN residential area. In addition, the Central West LHIN had designed and hosted in-house, a bilingual on-line component to this survey, of which a total of 74 surveys had been completed between November 24<sup>th</sup> – December 4<sup>th</sup>, 2014. Community partners, including HSPS and Reflet Salveo, were also asked to support the survey by promoting it with clients/patients and their families during visits and/or program delivery.

It was agreed that while generally positive, overall results of the public survey suggests that there are significant opportunities for improvement to home and community care for both patients and caregivers. Board Members were reminded that Joe McReynolds, a member of the Donner Panel, would be attending the January Board Meeting to provide an update on the work of the Panel and have discussions related to the emerging recommendations.

#### 5.2 Overview of Central West LHIN Risk Registry

Brock provided an overview of the 2014-2015 Third Quarter (Q3) Enterprise Risk Management (ERM) Report which included an overview of risk management worksheets for the top 6 risks, as well as risk management worksheets for risks being reported to the MOHLTC as part of the 2014-2015 Third Quarter (Q3) Report (which include Risks ID #3, Risk ID #14, Risk ID #79, and Risk ID # 80).

Also included was a summary of all Central West LHIN risks, as previously requested by the Board. Board Members thanks staff for the comprehensive list and requested that this type of summary of all risks be provided to the Board on an annual basis.

# MOVED by Winston Isaac and SECONDED by Ken Topping, that the Central West LHIN Board of Directors approve the 2014-2015 Third Quarter (Q3) Enterprise Risk Management (ERM) Report as circulated.

CARRIED

#### 5.3 2014/2015 Third Quarter (Q3) Balanced Scorecard

Elizabeth Salvaterra provided an overview of the Fall Cycle of the 2014-2-15 Balanced Scorecard including an update on Indicators requiring investigation this cycle as follows:

Indicator # 9 – Repeat unscheduled emergency visits within 30 days for substance abuse conditions
Indicator # 11 – Avoidable admissions
Indicator # 12 – Proportion of Falls indicators achieving target (hospitalizations for Falls among LTC residents)
Indicator # 15 – Proportion of Wait Time indicators achieving target

After a brief discussion and review of the material, two corrections were noted on the Dashboard 'Drill down' sheets. On page 4 under 'Percent of Priority IV Knee Replacement Surgeries completed within 182 days', the figure shown as 16% is incorrect and should be noted as 39%. On page 5 under 'Percent of Priority IV MRI Scans completed within 28 days', the figure shown as 18% is incorrect, and should be noted as 16%.

#### 5.4 2015-2016 Annual Business Plan

David provided an update on the requirements and timelines associated with the 2014-2015 Annual Business Plan (ABP), noting that the ABP is a key component of the Ministry/LHIN accountability framework. The 2015-2016 ABP is meant to focus on the third year of the LHIN's Integrated Health Services Plan (IHSP) 2013/2014 to 2015/2016 and is meant to operationalize the IHSP by providing overall goals and objectives for 2015-2016.

David noted that a draft of the 2015/2016 ABP is to be submitted to the MOHLTC by February 28, 2015 and will, therefore, be brought to the Board for review at the January 28, 2015 Board Meeting. At that meeting, Board Members will be asked to review the preliminary draft and provide comments or questions to staff through the CEO for incorporation into a final draft, which will be presented for approval at the February 25, 2015 Board Meeting. Approximately eight (8) weeks after that, the Ministry will provide feedback to the LHIN and additional information will be incorporated as a result of the provincial budget announcement in May.

A final Board-approved copy is required to be submitted to the MOHLTC by June 30, 2015 and the report will come back to the June 2015 Board Meeting for final approval.

#### 5.5 2014/2015 Base Funding to the Community Sector – Allocation of Balance

David reviewed the summary of base funding to the community to date, noting that \$1,633,600 funding allocation for community support services was presented at the November 26, 2014 Board of Directors' meeting. He also provided an overview of the proposal for the Board's consideration for the allocation of the balance of \$315,894 still unallocated. Scott advised that in January, Board Members will get a detailed summary of all funding that has flowed to various health service providers for the past year, but at a very high-level, the funding amounts by sector/initiative are as follows:

Personal Support Services	\$2.7 million
Mental Health & Addictions	\$3.7 million
CCAC	\$3.4 million
Community Funding	\$1.6 million
Pay 4 Results	\$5.1 million
Health System Funding Reform	\$4.7 million

#### 5.6 2014/2015 Base Funding to the Community Sector – Mental Health & Addictions

David advised that at the September 2014 Board of Directors' Meeting, the Board had approved annualized funding of \$2,591,865 (\$2.6 million) to improve access to community-based Mental Health Services. At the October Board of Directors' meeting, the Board approved the CEO to proceed with planning for an additional annualized amount of \$1.1 million for Mental Health & Addictions, subject to receiving funding approval from the MOHLTC. The following is a breakdown of the final allocations:

CMHA-Peel	Case Management – Mental Health/	
	Community Treatment/Substance Abuse	\$365,000
Friends & Advocates Peel	Social Rehabilitation and Recreation	\$ 113,000
William Osler Health System	Increase Mental Health Case Management	\$ <u>22,000</u>
	TOTAL	\$ 500,000

#### 6.0 Fiduciary Dialogue

#### 6.1 Verbal Update from Governance Committee Meeting – Wednesday, December 10, 2014

Lorraine Gandolfo provided an update on discussions that took place at the Governance Committee meeting held Wednesday, December 10, 2014 and noted that Committee Members had reviewed two items requiring Board approval. The first item is a new Board Policy & Application Form for Board Delegations. She noted that a revised version was sent to Board Members after the Board mailing. A hard copy of the revised document was also distributed to Members at the meeting.

John thanked staff for their work in pulling the document together, noting that he was the one who had originally asked for a review of the Board Delegation forms and process. A couple of other minor grammatical suggestions were made which will be incorporated into the final document.

# MOVED by Lorraine Gandolfo and SECONDED by John McDermid that the Board of Directors approves the new Board Policy and Application Form for Board Delegations, as amended.

#### CARRIED

Lorraine noted that the second item requiring Board approval is a recommendation that the Governance Committee provide the oversight to the development of the LHIN's fourth Integration Health Services Plan (IHSP-4) and to direct staff to proceed with a Request for Services (RFS) to support the development of the IHSP-4. A brief discussion followed.

MOVED by Lorraine Gandolfo and SECONDED by Suzan Hall, that the Board of Directors confirms that the Governance Committee of the Board assumes oversight for the development of the LHIN's fourth Integration Health Services Plan (IHSP-4), and further, that the Central West LHIN Board of Directors directs staff to proceed with a Request for Services to support the development of IHSP-4.

#### CARRIED

#### 7.0 In-Camera Session

MOVED by Gerry Merkley and SECONDED by Suzan Hall, that at 8:10 p.m., the Central West LHIN Board of Directors consider Matters of Public Interest in a Closed Session as set out by the Local Health Integration Act, 2006, s.9(5)(a), and further, that Scott McLeod, Brock Hovey, David Colgan and Michele Williams be invited to stay for this portion of the meeting.

#### CARRIED

MOVED by Ken Topping and SECONDED by Pardeep Singh Nagra, that at 9:15 p.m., the Central West LHIN Board of Directors' meeting be moved Out-of-Camera and back into the Regular Session.

CARRIED

Minutes of Central West LHIN Board of Directors' Meeting held Wed., December 17, 2014 Page 7 of 8

#### 8.0 Adjournment of Meeting

MOVED by Lorraine Gandolfo and SECONDED by Winston Isaac, that there being no further business for discussion, that the Central West LHIN Board of Directors' meeting of Wednesday, December 17, 2014 be adjourned at 9:15 p.m.

CARRIED

Maria Britto, Board Chair

Scott McLeod, Board Secretary

Minutes of Central West LHIN Board of Directors' Meeting held Wed., December 17, 2014 Page 8 of 8