

**Erie St. Clair Local Health Integration Network
(ESC LHIN)**

**Open Board Meeting
Minutes
Tuesday, November 29, 2016**

**ESC LHIN
180 Riverview Drive, Chatham, ON
Lake Erie Boardroom**

Present:

Martin Girash, Board Chair
Michael Hoare, Board Vice-Chair
Barb Bjarneson, Board Director
Joseph Bisnaire, Board Director
Lindsay Boyd, Board Director
Nora Bressette, Board Director

Staff:

Ralph Ganter, Acting CEO
Pete Crvenkovski, Director (PQ&KM)
Shannon Sasseville, Director (CPA&OD)
Alec Anderson, Director, Planning
Recorder:
Ruth Augi, Corporate Coordinator

1. Call to Order

The Open Board Meeting of the Erie St. Clair LHIN was called to order at 1:01 pm by Martin Girash, Board Chair. The Board expressed their thanks to staff for the luncheon arrangements today, especially the "seasonal" menu and decorations. The Board looks forward to an ongoing Board/staff pre-Board Meeting luncheon tradition.

2. Approval of Agenda

The agenda (*on file*) of the Open Board Meeting dated November 29, 2016 was reviewed and amended as follows:

- Item #09.2 Community Health Capital Program Stage 1 Application Endorsement
 - CMHA Lambton Kentwas moved to the In Camera Session Agenda

MOTION: *Moved by Lindsay Boyd and seconded by Joseph Bisnaire that the amended agenda of the Open Board Meeting dated November 29, 2016 be approved.*

Motion Passed

3. Declaration of Conflict of Interest

None declared.

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4. Open Mic
None

5. Presentations

5.1 Electroconvulsive Therapy (ECT)

5.1.1 *"A Review of the Significance of Electroconvulsive Therapy in Treatment of Psychiatric Illness"*

Board Chair, Martin Girash introduced Dr. Gregory Chandler, an Assistant Professor at University of Toronto and Director, Inpatient Psychiatry Mt. Sinai Health Systems, who provided a verbal presentation via a video conference connection. Dr. Chandler highlighted ECT as the most effective treatment for most forms of depression, however not without some side-effects. He noted that ECT is often not used due to stigma associated with its reputation and known side-effects. Usual treatment may take up to 6 months and has been reported to be effective in 70% of psychosis cases and very effective in the geriatric population while less effective in teens and people in their 20s. Most ECT treatments are 2 to 3 times per week with results evident within 2 weeks. It was suggested that any community planning to treat mental illness in the community should view ECT as a possible treatment and it is used more often than most people realize.

Dr, Chandler noted that some recognized barriers are:

- Physicians don't know that ECT treatment is available
- Physicians and patients often don't know how to access ECT treatments
- Wait times are often long
- The ongoing stigma to ECT and mental illness in general
- The attitude portrayed in society that ECT is a deterrent (a way to stop behaviour) as often presented in the movies

ECT should not be viewed as "a last line of treatment / therapy" but rather family physicians and the public should be educated about the benefits of ECT.

ECT treatments are short / brief treatments with a low level of anesthesia.

Side-Effects:

- Common
 - Muscle aches
 - Head aches
 - Nausea
 - Short term confusion (10 to 30 minutes after treatment)
 - Some cognitive / memory loss (short term / long term / working memory)
 - Within 6 months, all memory will be returned to normal
- It is always best to evaluate a patient's cognitive capability prior to treatment

Team:

- Psychiatrist / anesthetist / respiratory therapist / nurse

- Process / Access:
 - Patient must be referred by a family physician
 - All aspects of ECT treatment are covered by OHIP
 - Not considered an elective procedure
- Equipment:
 - Cost ~ \$20,000
 - Equipment size ~ desk size
 - Equipment may last up to 10 years
 - Some additional anesthetic equipment may be required

Board Chair, Martin Girash thanked Dr. Chandler for his fulsome presentation and information and availability to join the ESC LHIN Open Board Meeting via video link.

5.2 Canadian Mental Health Association, Windsor-Essex County Branch (CMHA WECB) and Hôtel-Dieu Grace Healthcare (HDGH)

5.2.1 “CMHA WECB – HDGH Collaboration in Review”

Board Chair, Martin Girash introduced Janice Kaffer, HDGH CEO & President and Claudia DenBoer, CMHA WECB CEO, noting that we no longer focus on merger – we now focus on integrated care.

Claudia Den Boer and Janice Kaffer spoke to a PowerPoint presentation (*on file*) which was displayed at the Board Meeting including a patient video, highlighting:

- Formal Memorandum of Understanding (MOU) signed July 2014
- Shared governance steering committee formed in January 2015
- CMHA / HDGH Collaborative Strategic Plan completed in August 2015
- Shared Purpose / Commitment:
 - “*Together, we are greater than alone – unlocking the potential to align resources and expertise to best support clients*”
- Evidence based client-centered care with a share-care model
- Common culture
- System & financial efficiencies
- Shared goal to be a centre of excellence for mental health & addictions
- Next Steps
 - Implementation of the Coordinated Access model between CMHA and HDGH (January 2017))
 - Implementation of an integrated Housing /Mental Health Support model between CMHA and Family Services Windsor/City of Windsor (November 2016)
 - Implementation of a new CMHA HR structure with senior support from HDGH (January 2017)
 - CMHA/HDGH Integrated Care Pathways developed for Dual Diagnosis, Concurrent Disorders, Counselling & Treatment (Spring 2017)
 - HDGH to host a further Community Roundtable discussion (Goal: agree to implement one shared system improvement initiative)

Noted barriers were challenges in housing re: cost and landlords not being receptive, however Claudia and Janice advised the Board that they learned that by understanding the patient experience, they understood what wasn't working.

Martin Girash, ESC LHIN Board Chair asked the CMHA WECB Board and HDGH Board to look at institutionalizing the collaborative work and principles developed to date - to document their important to ensure a vision / Board Policy was on record. Janice Kaffer advised that HDGH Board had already had that conversation with the HDGH CEO and that HDGH would welcome direction from the LHIN on how best to institute the collaborative work.

The LHIN Board suggested future Service Accountability Agreements (SAAs) contain direction for accountability of operationalized policies.

6. Consent Agenda

MOTION: Moved by Michael Hoare and seconded by Joseph Bisnaire that the ESC LHIN Board accepts as presented or approves when required, by a single Consent Motion, the following items:

- **#6.1 Approval – Board Minutes:**
 - **#6.1.1 ESC LHIN Open Board Meeting Minutes – October 24th, 2016**
Motion Passed

7. Health Service Provider Financial Review

Pete Crvenkovski spoke to the Health Service Provider Financial Review document (*on file*) which was distributed to the Board prior to the Board meeting noting:

- Continuing to stabilize WRH
- Continuing to track BWH
- Recognized pressures CKHA
- Current surplus HDGH
- Forecast deficit LDMH
- Quarterly reviews were recently completed

8. Strategic Discussion

8.1 Quality

8.1.1 Regional Quality Table

Ralph Ganter, Acting CEO introduced Dr. Martin Lees, Regional Clinical Quality & Primary Care Lead, who spoke to a PowerPoint presentation (*on file*) which was displayed at the Board Meeting, highlighting the Regional Quality Table was a shared collaborative effort with Health Quality Ontario (HQO). There is now 1 Regional Quality Table in each LHIN with the goal of relating quality to the Board. It is now important for the Board to recognize their role in quality ie: responsibility and accountability and engagement in the role of quality at all levels of patient care. It was suggested this could be achieved strategically via the Board monthly agenda as a standing item and also via a scorecard review. The Board was advised to always make an effort to use the lens of quality when discussion and evaluating all matters – make it a criteria for all staff to view policy / procedure / practice / programs from a quality perspective.

Dr. Martin Lees introduced Carol Moore, HQO Quality Specialist for the ESC LHIN and they both emphasized the significant role for Board quality via the Quality Council which could in turn collaborate with the Regional Quality Table. It is important for the Board to recognize that the Board cannot do all the quality oversight required and that the Quality Council can do the research and evaluation and report to the Board. An important focus of the Board will be to encourage HSPs to be mindful and engaged about quality within their own organizations.

9. New Business

9.1. Erie St. Clair LHIN – Indigenous Health Strategic Plan

Ralph Ganter, Acting CEO introduced Tanya Baniak, Indigenous Liaison Lead and Sarah May Garcia, Health System Design Lead who spoke to a Briefing Note and Strategic Directions document (*both on file*) which were distributed to the Board prior to the Board Meeting. Focus areas identified included:

- 1) health equity
- 2) chronic disease prevention and management;
- 3) access to care;
- 4) mental health and addiction services;
- 5) data and reporting.

Collectively these themes became the foundations of the three-year strategic directions/plan. In January 2016, the Indigenous Health Planning Committee (IHPC) reviewed these five focus areas and determined the following strategic directions:

1. Reduce Health Inequities for Indigenous people;
2. Improve Indigenous patient's access to health and prevention services;
3. Improve health system response to Indigenous chronic disease rates;
4. Expand the availability of mental health and addiction services for Indigenous people;
5. Enhance the quality and availability of reliable information and data for health planning.

It was noted that the strategic plan also aligns well with the four components of the 'Patients First' proposed objective:

1. More effective integration of services and greater equity;
2. Timely access to primary care, and seamless links between primary care and other services;
3. More consistent and accessible home and community care;
4. Stronger links between population and public health and other health services.

MOTION: *Moved by Lindsay Boyd and seconded by Barb Bjarneson that the Erie St. Clair LHIN Board approves the Erie St. Clair LHIN Indigenous Health Strategic Plan as recommended by staff.*

Motion Passed

10. Reports

10.1 Board Chair

Martin Girash, Board Chair spoke to a written report (*on file*) which was distributed to the Board prior to the Board Meeting, highlighting the importance of individuals in society and noting the solution to addressing individuals rather than always looking at systems may be better found in the “attitude” of health care professionals, organizations and community of health care providers to work together in providing services to patients and families. The Report also noted a good example of serving the individual by highlighting a recent article in The Southpoint Sun, the local paper for the Leamington area, noting the Windsor Essex Community Health Centre (WE CHC) announced a new program for its clients which includes migrant workers, immigrant populations, refugees, low and no income residents, indigenous populations, Low-German-speaking families and vulnerable individuals. While many organizations within our LHIN offer new and innovated programs, the story of Leamington and Area Obstetrics/Birthing Services provides a very good example of how a collection of health care providers came together to address needs within various cultural communities. As such it is a model that can be used to address individual needs and thus pre-empt the need for a “populist uprising”.

Board Member Barb Bjarneson updated that Board about her attendance at the recent ESC CCAC “Home Heros” event recognizing the invaluable work and support of caregivers.

MOTION: Moved by Joseph Bisnaire and seconded by Michael Hoare that the ESC LHIN Board receive the Board Chair Report as presented.

Motion Passed

10.2 Acting Chief Executive Officer

Ralph Ganter, Acting CEO spoke to a written Acting CEO Report (*on file*) which was distributed to the Board prior to the Board Meeting highlighting the evolution of the ESC palliative care network and joint health system design meeting with HPSs to assess, monitor and develop action plans for improving performance on MoHLTC targets. The Acting CEO acknowledged the dedicated work of LHIN staff to consolidate and coordinate the meetings; information and data – these efforts serve to build and strengthen relationships and alignments between and among HSPs and the LHIN.

MOTION: Moved by Lindsay Boyd and seconded by Joseph Bisnaire that the ESC LHIN Board receive the Acting CEO Report as presented.

Motion Passed

11. Action Items – Review Status & Update New Items

Ruth Augi, Corporate Coordinator reviewed the status of recorded Action Items.

12. Next Meetings

The Board discussed and confirmed the dates for the next ESC LHIN Open Board Meetings as follows:

- January 24, 2017 @ 1:00 pm – ESC LHIN
180 Riverview Drive, Chatham, ON
- February 28, 2017 @ 1:00 pm – ESC LHIN
180 Riverview Drive, Chatham, ON

13. Adjournment

13.1 Adjourn to In Camera Session

At 4:10 pm the ESC LHIN Board moved into an In Camera Session pursuant to LHIN Bylaws and section s.9(5) of the Local Health Systems Integration Act 2006 to discuss confidential matters re:

- Personal or public interest
- Matters prescribed by regulations
- Labour relations

MOTION: *Moved by Michael Hoare and seconded by Nora Bressette that the Board move to an In Camera Session of the Open Board Meeting.*

Motion Passed

13.2 Reconvened Open Board Meeting

At 7:08 pm the ESC LHIN Board moved out of the Camera Session and reconvened the Open Board Meeting.

MOTION: *Moved by Barb Bjarneson and seconded by Michael Hoare that the Board reconvene the Open Board Meeting of November 29, 2016.*

Motion Passed

AGENDA ITEM #13.3 (OPEN BOARD MEETING)

MOTION: *Moved by Barb Bjarneson and seconded by Joseph Bisnaire that the Erie St. Clair LHIN Board record the following In Camera Session Motion in the ESC LHIN Open Board Meeting Minutes of November 29, 2016.*

Motion Passed

14. Adjournment

At 7:10 pm the ESC LHIN Board adjourned the Open Board Meeting of November 29, 2016.

APPROVED:



**Martin Girash
Board Chair, Erie St. Clair LHIN**

DATE:

January 24.17