

B. Education Session

B.1 Welcome and Context Setting

The session was held using the OTN (Ontario Telemedicine Network). There was a presentation from all 14 LHINs via OTN and the speakers (Donna Segal, Jeffrey Simser, Anne Corbett and Bob Morton) attended from different locations.

Key Points of Discussion:

- Donna Segal, Board Chair of the Southeast (SE) LHIN and Chair of the Collaborative Governance Working Group, welcomed the LHIN boards to the session and thanked them for attending. Donna noted the idea behind the session is to create and maintain a health care system that is coordinated around the patient's needs, works effectively and remains sustainable. LHINs and health service providers (HSPs) play an important role in achieving that goal for patients and clients and integrations are essential to success.

B.2 Considerations for Board Collaboration in Integration

- **LHIN Perspective**

Key Points of Discussion:

- Jeffrey Simser, Legal Director for LHIN Legal Services Branch gave an overview of LHSIA as it relates to various options for integrations between HSPs, beyond a full merger.
- Jeffrey noted LHIN Legal Services can help staff define the LHIN's role is developing opportunities for HSPs to integrate.

- **Provider Perspective**

Key Points of Discussion:

- Anne Corbett, Partner with Borden Ladner Gervais LLP, gave an overview of the Local Health System Integration Act (LHSIA), specifically Section 24, and the Corporations Act.
- Anne summarized the types of integrations HSPs can transition under and the steps in a full integration. Anne also review a list of tips for integration including the following points:
 - Understand the value of a Memorandum of Understanding or letter of intent.
 - Recognize added burden on management and uncertainty to staff.
 - Clearly articulate reasons for pursuing the opportunity but keep an open mind.

B.3 Experience with Collaborative Governance: Two Examples

Key Points of Discussion:

- Bob Morton, Board Chair with North Simcoe Muskoka (NSM) LHIN, presented the NSM LHIN's experience with collaborative governance. Bob summarized the LHIN's approach to collaborative governance by taking the journey alongside HSP Boards and driving for quality between and within NSM LHIN HSPs.

- Bob noted that HSP boards have additional responsibilities to look at the agency's performance in the context of the broader health system and hold their CEO accountable for silo performance and system performance, creating an improved health system for patients and clients.
- In NSM LHIN's collaborative governance sessions, HSP boards are challenged to break away from traditional models (previously acute care centered, not primary care centered) which keeps everyone on the same page, with the same goal of working together to improve the health care system for patients.

B.4 Summary and Closing Remarks

Key Points of Discussion:

- Donna Segal thanked the speakers and LHINs for attending the session and requested the LHINs now discuss the questions provided and return a written summary to the Collaborative Governance Working Group by December 12, 2014.

B.5 Adjournment of Pan-LHIN Session

1. What is your most important takeaway about the opportunities of collaborative governance from the session today?

Key Points of Discussion:

- The HNHB LHIN Board agreed that the most important takeaway from the session was that there are many opportunities for HSPs to work together, long before a full integration is the answer – it doesn't have to be all or nothing. It was noted that much is already underway and there have been integration successes within the HNHB LHIN. One of the goals of any integration is to wrap services around the patient. It was agreed that most HSPs assume integration means full merger and dissolution; however, there are less drastic steps that may still yield positive results.

2. What new ideas or learnings could you consider or incorporate into efforts to further advance integration in your LHIN?

Key Points of Discussion:

- The HNHB LHIN Board discussed whether HSP Boards are getting the message regarding the varying types of integrations and whether they know the right questions to ask to identify the correct course of action with regard to integration actions. The Board agreed it is the LHIN's responsibility to formally educate HSP Boards on integrations and queried if board to board education sessions would be valuable. With HSP Board understanding and support, more successful integrations can take place, improving the health care system for patients.

3. Provincially, collaborative governance has been identified as a topic for collective work by the LHINs this year. What would you like this collective work to focus on?

Key Points of Discussion:

- o The HNHB LHIN Board would like collective work by the Collaborative Governance working group to focus on sharing successes and case studies with insight into how the integration was planned and completed and the difference it made to patients.

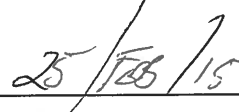
C. Adjournment

The Board of Directors – Education meeting be adjourned at 3:30 p.m.

CARRIED



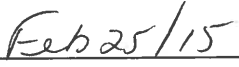
Michael P. Shea, Chair



Date



Donna Cripps, Corporate Secretary



Date