



#### 1.4 Delegations to the Board

There were no delegations to the board for the meeting of December 8, 2014.

### 2.0 **Education Session**

#### **Better Health – Simcoe Muskoka District Health Unit and Community Health Centres**

R. Morton prefaced the education session by speaking to the NSM LHINs mission including “Better Health”, and the important partnership with Community Health Centres and Simcoe Muskoka District Health Unit.

Barrie Community Health Centre, CHIGAMIK, and South Georgian Bay Community Health Centre together presented a previously circulated slide deck.

The model of health and wellbeing was discussed and recognition was given for the fact that it speaks to needs that extend beyond health care to include elements of access, equity, social determinants of health, and facets of the Canadian Index of Wellbeing. CHCs align with the work of Care Connections Second Curve in that they address high needs populations, work with independent and interdependent professionals, and play a key role in Health Links. Each of the Executive Directors shared a patient story which highlighted the importance of partnerships amongst service providers. It was noted that there is unused capacity in each of the CHCs, and that clients are registered based on a complexity index. The intake process has flexibility and allows clients and staff to work together to determine the most suitable provider.

C. Gardner, Chief Medical Officer of Health, Simcoe Muskoka District Health Unit presented a previously circulated slide deck, sharing success stories and known challenges. Gardner noted that social and economic wellbeing largely determine our health, with physical environment, biological endowment, behaviour and political determinants being much smaller influences. Public health is focused on preventing disease and promoting health for populations as a whole. Involvement of the SMDHU within and outside of the health sector was discussed, including the partnerships with local municipalities with respect to legislation, funding, and the levers that exist. A handout describing the ways in which SMDHU has advocated for healthier communities was distributed. One area discussed was the work done in partnership with the County of Simcoe to address food charters. It is acknowledged that the health unit does not have direct control over some social determinants of health, however they strive to put a spot light on these issues. An example of this is involvement of nurse liaisons within schools whose role is to consult with parent and school councils to identify and address needs in the area. It was noted that more could be done with respect to active, safe transportation to school, pointing to the need for more collaboration in terms of identifying which schools should be closed, and where schools should be built. The role the built environment has on influencing health behaviours was mentioned, including the impact on physical activity, food production, transportation, and social spaces for people to gather.

R. Morton thanked the Community Health Centres and Simcoe Muskoka District Health Unit for their presentations, at which time the presenters left the Board of Directors meeting.

### 3.0 **By Consent**

**The below items were included in the consent agenda of the NSM LHIN Board Meeting of September 22, 2014.**

***Note: Italicized items were removed from the consent agenda for discussion.***

#### 3.1 Approval of Minutes – October 27, 2014\*



- Have had conversations with G. Donner regarding the need to redesign home and community care.
- November 23 – 24 – Ontario Association of Nonprofit Homes workshop on collaborative governance.
- November 25 – visited Tollendale Village in Barrie, a provider of senior services and housing. They offer a broad range of programs and services in response to the needs of the community.
- November 27 – Pan LHIN Collaborative Governance Education session and GBGH Board meeting attended by J. Tettmann and R. Morton.
- December 1 – NSM LHIN Board Advance
- December 3 – Met with three mayors in North Simcoe along with M. Redmond to discuss Penetanguishene hospital site and Hospice Huronia. Work will continue with leaders from the area.
- December 4 – Met with the Executive Director of the South Georgian Bay Community Health Centre to express appreciation for involvement with Governance Coordinating Council.
- December 5 – Attended Health Links 2.0 day-long webinar to gain an understanding of progress provincially.

#### **4.2 Report of the CEO October 27, 2014 – December 5, 2014**

J. Tettmann indicated that NSM LHIN does not have the funding letter for the Muskoka Health Hub Proposal, but plans are moving forward.

Regarding the Patient Advisory Council, T. Labaj indicated 8-9 people had applied for membership and that these individuals will be interviewed early in 2015. A meeting of the Advisory Council will be held by the end of March 2015. T. Labaj explained that the Communications and Community Engagement team would be looking at best practices in the new year.

Continuing to meet with persons with lived experience, J. Tettmann spoke to a recent engagement with a man with angina, arthritis, and obesity among other health concerns. The individual was very positive and spoke about the care he received, and how he lacked social support.

### **5.0 Committee Reports**

#### **5.1 Board Meeting Evaluation\***

- P. Preager explained the change in wording on the Board Meeting Evaluation. Question 11 no longer distinguishes between staff and Board members.

### **6.0 Business Arising**

There was no business arising for the meeting of December 8, 2014.

### **7.0 New Business**

#### **7.1 Care Connections Second Curve Final Report\***

N. Walker provided a high level overview of the report included in the Board package. It was noted that an evaluation on the structure of Care Connections occurred in December 2013.



#### **7.4 Mental Health and Addictions Funding\***

It was noted that the funding amount is targeted for this fiscal year, and annualized for 2015/16. It was recognized that the Mental Health and Addictions Council took a lead role in identifying funding priorities.

**Motion: M. Redmond**

**Seconded: R. Stevens**

**That the North Simcoe Muskoka LHIN Board of Directors approve the funding as identified in Table 2 for a total base funding of \$1,565,000.00 in 2014/15 and \$2,934,500.00 in 2015/16 as well as \$435,000 in one-time funding for 2014/15."**

... carried.

#### **7.5 MLPA Key Performance Indicators\***

Various indicators were discussed, including ALC, ER, MRI wait times, primary care and CCAC wait times for home care. Definitions for ALC days and how these are measured were shared. The Home First pilot at RVH produced a significant decrease in ALC designation. It was noted additional work needs to be done around support for patients with behaviour issues. NSM LHIN continues to examine trends with respect to home care and PSW care.

#### **7.6 Health Links 2.0 – Current Snapshot\***

It was noted that electronic coordinating tools will be expanded across the province and will keep track of the number new patients who are being seen who were previously going to the ER and that care plans for Health Links patients are being produced.

#### **3.9 Risk Report\***

It was noted that GBGH and MAHC are projecting a deficit position. It was commented that greater information should be included around impacts of service reductions (i.e. closing beds).

### **8.0 For Information**

#### **8.1 Health Achieve Presentation\***

NSM LHIN Board and Staff discussed a previously circulate presentation on HealthAchieve, OHA's annual conference.

### **9.0 Meeting Evaluation & Adjournment**

#### **9.1 Meeting Action Log/Wrap Up\***

Action log reviewed and amended.

**9.2 Meeting Adjournment**

**Motion: P. Preager**

**Seconded: P. Brown**

**That the NSM LHIN Board of Directors meeting, of December 8, 2014, be adjourned.  
...carried.**

**NEXT MEETING: Monday, January 26, 2015 (1:00 p.m. – 4:00 p.m.)**

*Original signed by*

*Original signed by*

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**Robert Morton, Board Chair**

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**Jill Tettmann, Chief Executive Officer**