South East Local Health Integration Network

Board of Directors Meeting No. 118

Monday May 26, 2014

Cardinal Room
South East Local Health Integration Network
71 Adam Street
Belleville, Ontario

MINUTES

Present: Donna Segal (Chair); Andreas von Cramon (Vice Chair) – (arrival on phone – 9:39 am – departure

10:50 am); Lois Burrows; Janet Cosier; Dave Sansom (via phone) (quorum); and Paul Huras (CEO)

Recorder: Jacqui Prospero **Regrets:** Arthur Ronald;

Guests: Sherry Kennedy (COO); Pat Reynolds (Board Coordinator); Caitlin denBoer (Communications Lead); Paula Heinemann (Director Corporate Services); and Jennifer Payton (Planning and Integration Consultant).

1. Call to Order, Chair's Remarks and welcome of guests.

The Chair welcomed guests and members to the meeting at 9:37 am.

- 2. Selection of Timer and Observer:
 - a. Timer = L. Burrows
 - b. Observer = J. Cosier

3. Conflict of Interest Declaration

All members confirmed no conflicts.

- 4. Consent Agenda:
 - a. Monthly CEO Reports
 - b. Board Correspondence
 - c. Chairs Declaration
 - d. Chairs Report
 - e. Committee Summaries

That the Consent Agenda be accepted as circulated.

Moved by: L. Burrows Seconded by: J. Cosier Carried – 2014-118-01

5. Approval of the Agenda

That the Agenda be approved as amended.

Moved by: L. Burrows Seconded by: J. Cosier Carried – 2014-118-02

6. Approval of Minutes

a. Minutes of Monday April 28, 2014 Special Board Meeting #117 (attached)

That the Minutes of Monday April 28, 2014 Special Board Meeting #117 be approved as amended.

Moved by: L. Burrows Seconded by: D. Sansom Carried – 2014-118-03

7. Business Arising:

- a. Collaborative Governance Community Engagement (CGCE) Workshops Update 9:43 am
- D. Sansom reviewed the documentation provided to members that included a briefing note
 with a background and workshop concept; theme / purpose for the 2014 workshops; dates /
 times / locations; key participant availability; invitees; workshop communication plan and a
 recommendation for consideration.
- Board Members and Senior staff discussed the following information based on questions and comments: the main purpose of the sessions are to focus on encouraging collaboration amongst the health service providers within the sub regions of the communities by orienting them to what's new at a sub-regional and regional level from a statistics perspective, providing networking opportunities to better develop integration opportunities among organizations; the main focus is not Health Links, however the geography of the Health Links are the foundation for the identified sub-regions and the collaboration of the Health Links' providers are likely to be referenced during the event; there was expressed concern about the balance of Health Links attendees in each session in order to not overwhelm others in attendance, however they will be encouraged to attend a local session; and the format of the working group discussions will need to further develop a feedback / lessons / examples section that would be shared more broadly amongst the regions and other sessions.
- b. Board Planning Session Summary 10:06 am
- D. Segal highlighted the document that was provided to members that included an introduction; context; reflections and advice of the health service providers (HSP) leaders; what had the HSPs hoped for / experienced to date arising from LHIN initiatives in collaborative governance; what do the HSPs expect of the LHIN? How would the HSPs like to see the relationship develop?; What do HSP Boards expect of themselves?; the context for determining the role of the board, staff and individual directors in collaborative governance and community engagement; the role of the LHIN board in collaborating with HSP boards to advance integration in the SE LHIN; conclusion and next steps; and Maureen Quigley's Follow-up reflections and recommendations.
- Board Members and Senior staff discussed the following information based on questions and comments: members expressed the need to clarify and follow-up on M. Quigley's report of the proceedings; how the SE LHIN views integration is more about "system building" that continues to improve high quality health care; the perception by the HSPs of what the meaning of integration means in the SE LHIN region (i.e.: not mergers, but system building will continue to require clarification); a system of care is what the LHIN is working towards and integration is one of the mechanisms that allows us to achieve this; and members were encouraged to review the next steps and recommendations from M. Quigley within the context they are presented, and prepare to discuss the report in more depth at a follow on members meeting to be scheduled for before the next Board session.

- c. Addictions and Mental Health (AMH) Redesign 10:50 am
- P. Huras provided a brief update to the members on current status of ongoing work.
- S. Kennedy provided a handout to the members that included a briefing note with attached presentation which included a refresh on the AMH redesign; overview of the future state planning process; summary report on project status and future state planning team updates.
- Senior staff provided the following information based on questions and comments: members
 discussed the finer details of services that are provided by some HSPs and their ability to
 provide structured and supported peer support; and the LHIN would hold the accountability
 agreement with HSPs.

RECESS – 11:25 am – 11:44 am (time recorder returned)

More focus was spent on reporting on the discussion of the governance team. They did not want to move towards option #3 as they prefer each sub-regional entity to have an agreement with the LHIN rather than one overarching body; the ability for organizations to partner and plan together helps the members to understand and support the changes taking place; each sub-regional partnership entity will have an accountability agreement with the LHIN; .members noted the availability for member organizations to participate has been and continues to be broad; although some member organizations are not on the governance group, they have representation on other committees; implications coming out of the Health Human Resources (HHR) committee will come to the board through part of the scope review, which will require a few of the committees to move farther along in their work in order to better inform potential decision; those working in the system today will continue to work in the new system / changed environment, although what services will be required of them will be determined prior to any organizational structure adjustments; resource implications and the timing around those changes will require more discussion in the in-camera session due to the nature of the discussion; at this current time the leadership of the LHIN, with input from the committees, believe that a decision for the LHIN board may be moved out to August in order to ensure that the right information and structure can be provided for consideration.

LUNCH- 12:35 pm - 1:05 pm

- d. Hospital Services Accountability Agreements (H-SAA) Extension -
- P. Huras reviewed the briefing note provided that included a background summary; overview and status of SE LHIN 2014-15 H-SAA process; 2014-15 Performance targets to support achievement of LHIN MLPA performance targets; schedule (LHIN specific indicators and targets) "Local performance obligations"; key H-SAA dates 2014-15 and a recommendation.

That the Board of the SE LHIN approves the following:

- 1. The proposed Temporary H-SAA Amending Agreement template effective as of the 1st of July, 2014, and amending the 2008-14 H-SAA by extending its term to March 31, 2015, be approved as presented to the Board and;
- 2. to authorize the SE LHIN Board Chair and Chief Executive Officer of the Corporation to execute the H-SAA Extensions for each Hospital in the SE LHIN.

Moved by: L. Burrows Seconded by: J. Cosier Carried – 2014-118-06

- e. Revised Performance Reporting to Board 1:08 pm
- P. Huras reviewed the briefing note provided to members that included background summary and recommendation for consideration.

That the Board of the SE LHIN approve the revision from the current monthly reporting of Performance Improvement Plans (PIP) progress to quarterly reporting, with the proviso that, on an exception basis, any material and unexpected developments will be provided to the Board between the quarterly reports.

Moved by: J. Cosier Seconded by: L. Burrows Carried – 2014-118-07

- f. Governance Committee Recommendation Accreditation 1:10 pm
- L. Burrows addressed this item on behalf of Andreas von Cramon and noted for members that a fulsome discussion was had at the last meeting, but a request to bring this item back for consideration with a broader group was requested.

That the Board of Directors approves the recommendation from the Governance Committee that the SE LHIN not enter into a further contract for accreditation through Accreditation Canada.

Motioned: L. Burrows Seconded: D. Sansom Carried – 2014-118-08

- g. Chairs Update 1:15 pm
- D. Segal noted for members a brief summary of the event she attended a month ago in Toronto via the Ontario Hospital Association (OHA) at the Governance Centre of Excellence -Effective Governance Collaboration to Advance Integration.
- h. CEO Discussion Report 1:22 pm
- P. Huras reviewed the report provided to members at the meeting that included an update on Clinical Services Roadmap; Health Links Update; and Q4 Working Funds Update.
- Senior staff provided the following information to the board members based on their questions and comments as it related to:
 - a) <u>Clinical Services Roadmap Dashboard Update</u> no comments or questions at this time.
 - b) <u>Health Links Update</u> each health link will provide an update to the Primary Health Care Council this evening at their regular meeting in Kingston; more communications and common messaging is in development / revision.
 - c) Q4 Working Funds Update no comments or questions at this time.
 - d) Community Support Services some indication that CSS agencies may be misinterpreting the LHIN staff's framework in considering proposals for the reallocation of unspent 2014/15 funding as signalling the onset of a Community Support Services integration project as called for in the IHSP3. It was clarified that this is not the LHIN's intent. Rather, the initiation of its CS Systems integration effort is likely to be delayed to allow for greater progress on current integration efforts underway.

That the CEO Discussion Report be accepted as circulated.

Moved by: J. Cosier Seconded by: L. Burrows Carried – 2014-118-09

- i. **ADDITION** Conflict of Interest Rules 10:20 am
- D. Segal summarized the information that was provided to members and why the LHIN had been waiting to discuss this item again. The documentation provided included a background summary; Part I - Rules for directors and employees of a LHIN; Part II - Rules for former directors and employees of a LHIN; Part III Political Activity restrictions; and Appendix to LHIN Conflict of Interest Rules.
- Board Members Senior staff discussed the following information based on questions and comments: the reality of Part II section 16 2 still provides for restrictions on future employment opportunities that are quite restrictive if applied; previous minutes suggest that our Board understood the section to be a very extensive, or perhaps complete, restriction on employment with a health service provider within the LHIN's local area for twelve months after the employee or director leaves their position with the LHIN.
- As a reminder from previous discussions this section is not very restrictive at all. Because of the way in which the provision is drafted, people often do not realize that Section 16(2) must be read along with Section 16(1), such that all of the elements listed in Section 16(1) must be present before the restriction in Section 16(2) applies. That is, the former employee or former director must have had "substantial involvement" with the organization that they would like to work for and must have had access to "confidential information that, if it were to be disclosed to the [organization they would like to work for], could result in harm to the LHIN or the Crown or could give the [organization that they would like to work for] an unfair advantage in relation to one or more third parties". Some LHIN CEOs and Chairs have observed that LHINs operate in such an open and transparent manner that they have very little confidential information that could come into play to trigger even the possibility of a restriction being applicable, let alone confidential information that could cause harm or give an unfair advantage.

That the South East LHIN Board of Directors approves the LHIN Conflict of Interest Rule in principle, for submission to the Conflict of Interest Commissioner for approval and posting pursuant to Section 59 of the Public Service of Ontario Act, 2006. The Board seeks further documentation from LHIN Legal to be used as reference in interpreting the intent of Section 16.

Moved by: J. Cosier Seconded by: L. Burrows Carried – 2014-118-04

- j. **ADDITION** Rideau Tay Collaborative Governance 10:36 am
- D. Segal noted that J. Cosier and herself were invited to attend a joint collaborative session (every 6 months) to discuss collaborative issues in their region; the Chair is likely not the right person to attend this type of event, however it was encouraged that a board member attend as a representative; any member attendance would not constitute acceptance of any determined items, but could be brought back to the broader board for discussion if required.
- Board Members Senior staff discussed the following information based on questions and comments: one of the concerns is around conflict of interest and the ability for a board member to participate while not providing a seal of approval of the LHIN; setting a precedent is of concern due to the limited membership on our board and the ability to attend "networks" who request our input; there will also be an increase in the costs to the LHIN as it affects the financial status of the governance budget (i.e.: increase in per diems); and members agreed that J. Cosier will attend the suggested meeting and return to the board in June with an update.

That the board consider matters of public interest regarding Approval of In Camera Session Minutes; Approval of In Camera Session Minutes from CEO Evaluation and Compensation Committee (three sets); Sustainability RfP Update; Pre-Election Messaging; Organizations Under Performance Improvement Plans (PIP); Behavioural Support Office (BSO) Update; Finance / Audit Committee – Financial Statements and Auditors Report; Annual Report; AMH Redesign Future State Planning – Update on Risks and 2014-15 CEO Goals / Objectives pursuant to ss 9(5) of the Local Health Systems Integration Act 2006 s.9 (5).

Moved by: L. Burrows Seconded by: J. Cosier Carried – 2014-118-05

8. In Camera Session: - 1:37 pm

That the Chair rise and provide a verbal report from Approval of In Camera Session Minutes; Approval of In Camera Session Minutes from CEO Evaluation and Compensation Committee (three sets); Sustainability RfP Update; Pre-Election Messaging; Organizations Under Performance Improvement Plans (PIP); Behavioural Support Office (BSO) Update; Finance / Audit Committee – Financial Statements and Auditors Report; Annual Report; AMH Redesign Future State Planning – Update on Risks and 2014-15 CEO Goals / Objectives.

Moved by: J. Cosier Seconded by: L. Burrows Carried – 2014-118-16

- 9. Timer INPUT REQUIRED FROM CHAIR
 Observer INPUT REQUIRED FROM CHAIR
- Date, time and location of next meeting:
 Monday June 23, 2014 SE LHIN Offices

Future meetings:

Monday August 25, 2014 – SE LHIN Offices Monday September 29, 2014 – SE LHIN Offices Monday October 27, 2014 – SE LHIN Offices Monday December 15, 2014 – SE LHIN Offices

11. Adjournment

That the meeting be adjourned at ?????pm (Chair to confirm)

Motioned: L. Burrows

Noted departures:

Meeting Chair:

Donna Segal

Secretary: / MW/ / WWW Paul Huras