

South East Local Health Integration Network

Board of Directors Meeting No. 157

Monday May 28, 2018

Cardinal Room
South East LHIN Offices
71 Adam Street
Belleville, Ontario

MINUTES

Present: Hersh Sehdev (Chair); Brian Smith (Vice Chair); Annette Bergeron; Jo-Anne Brady; Lois Burrows; Jack Butt; Steve Gauthier**; Jean Lord; Maribeth Madgett; Linda Murray; Marsha Stephen; David Vigar; (quorum); and Paul Huras (CEO).

Recorder: Jacqui Prospero

Regrets:

Resources: Sherry Kennedy (VP, Operations); Joanne Billing (VP, Home and Community Care); Amber Gooding (Communications Coordinator); Cynthia Martineau (VP, Strategy, Planning and Integration); Deb Golden (Director, Strategy, Planning and Integration); Paula Heinemann (VP, Human Resources and Organizational Development); Dr. David Zelt (VP, Clinical); Gary Braidia (Project Management Officer); and Janine DeVries (Board Coordinator).

****PHONE**

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

The Chair welcomed board members, guests and members of the public to the meeting and called for order at 9:32 am.

2. Selection of Timer and Observer:

Timer – B. Smith

Observer – B. Smith

3. Conflict of Interest Declaration

All members confirmed no conflicts.

4. Consent Agenda:

- a. Chairs Declaration
- b. Chairs Report
- c. Committee Minutes
- d. Older Adult Strategy – Common Basket of Services Update
- e. Annual Report Working Timelines

That the Consent Agenda items be approved as circulated.

Moved by: J. Butt
Seconded by: M. Madgett
Carried – 2018-157-01

5. **Approval of the Agenda**
That the Board Agenda be approved as circulated.

Moved by: M. Stephen
Seconded by: J. Butt
Carried – 2018-157-02

6. **Approval of Minutes**
Approval of Minutes March 26, 2018 Board Meeting #156 (attached)
That the Minutes of Monday March 26, 2018 Board Meeting #156 be approved as amended to reflect H. Sehdev Chaired the meeting; along with minor typos.

Moved by: B. Smith
Seconded by: D. Vigar
Carried – 2018-157-03

7. **Generative Discussion:**

a. **Regional Systems of Integrated Care – 9:35 am**

- P. Huras provided an overview of the briefing material for the members' consideration which included information on our mission, vision, values; better system, better care; system enablers; organizational improvements; expected improvements; steps to better system, better care; way forward – a consideration for organized regional health systems in Canada; looking forward and questions to drive discussion.
- His main point was that the SE LHIN can achieve a Better System and as a result of Better Care by integrating the high quality health services providers we have throughout the SE to achieve Regional Systems of Integrated Care. The summary charts indicated the specific projects and initiatives to achieve this level of integration. Such integration could in fact create a world best system of care.
- Board members and senior staff provided the following information based on questions and comments:
 - Integration is part of the LHINs name; providing better care through the horizontal or vertical levels of integration is part of what we as an entity do; we have the responsibility and authority to drive integration within our region; the collaboration and relationship building with our HSP partners have been key to the successes we have achieved; the medical health sciences centre in our region provides us with an opportunity to partner in the area of innovation;
 - Primary care is the foundation for vertical integration at the subRegion / Care Community level in our region
 - Primary Care is likely to become a funded health services provider shortly including: Family Health Teams (FHT) and Nurse Practitioner Led Clinics (NPLC) as they became HSPs through the Patients First Act;
 - Fragmentation is costly to the system and clients; we need our champions to help drive changes toward integrating services.
 - There is also the further consideration that the LHIN itself is now a Health Service Provider (HSP) that provides home and community care; what are the potential implications as a planning entity around future integrations.
 - There is a clear need to continue with integration within our regional system; however historically there has been more plans than implementation; there may be a need to now balance our influence via collaboration with our ability to utilize legislation to drive the changes;
 - System leadership for governance could be an enabler to regional integration; the potential to involve the champions in our region via the Advanced Leadership Training; encouraging agencies and their staff to see integration and collaboration with partner HSPs as a way to improve client care is another avenue the LHIN must continue to pursue.

- It was agreed that the Board would schedule another generative discussion on regional systems of integrated care by focusing the discussion on next steps.

8. Strategic Discussion:

a. Process for Development of Integrated Health Services Plan (IHSP5) – 10:33 AM

- P. Huras provided an overview of the briefing material for the members' consideration which included a purpose; executive summary; associated risks; potential timelines.
- Board members and senior staff provided the following information based on questions and comments:
 - The IHSP is not just a LHIN document, however it is one that our HSPs consult regularly to ensure that their plans are aligned with the direction for the region; regularly consulting with the LHIN to ensure that they align their strategic planning with our own;
 - Our community engagement activities have been curbed based on the pending election (dropping of the writ on May 08, 2018); involving the Collaborative Governance Forums would provide for another opportunity for engagement in what is a highly operational plan, however timing may be an issue;
 - Intentional integration has always been a solid theme in each of our IHSPs; our mandate letter from a new government could affect the LHINs direction, including the IHSP and Annual Business Plan, etc.
 - Analysis of the qualitative data can be a challenge to ensure that we can benefit most from it; much of the information received to date is very detailed and with full commentary; ensuring a client patient focus and perspective is captured in the document; highlighting a story / case at the beginning;
 - Collaborative governance is a small portion of the plan; however the staff is hopeful that incorporating this more thoroughly would be important going forward;

9. Fiduciary & Oversight Discussion: 10:48m

a. Kingston Health Sciences Centre (KHSC) – Capital Endorsement – Phase 2 – 10:48 am

- P. Huras provided an overview of the briefing note for members which included a purpose; executive summary; associated risks and a recommendation for members' consideration.
- Senior staff provided the following information based on questions and comments:
 - Endorsement by the LHIN with proviso's are standard practice in order to encourage and direct the HSP to ensure they can continue to provide high quality health care with the financial resources currently available;
 - A brief review of the capital approvals process provided clarification for newer members of the board including the MOHLTC – Capital Branch, HSP and LHIN roles;

That the South East LHIN Board of Directors endorse the Stage 2 Functional Program from Kingston Health Sciences Centre (KHSC) for the Kingston General Hospital (KGH) Site Phase 2 Redevelopment Project with the proviso that:

1. **The hospital will absorb any increase to operating costs as a result of the redevelopment and will not request additional operating funding from the LHIN or Ministry; and,**
2. **There will not be negative implications to patient care as a result of the redevelopment.**

Moved by: D. Vigar
Seconded by: L. Burrows
Carried – 2018-157-04

b. CEO Discussion Report – 10:58 am

- P. Huras provided an overview of the report which included:
 - a) **Health Care Tomorrow**
 - i. Hospital Project – No questions or concerns at this time.
 - ii. Enabling Technologies Update – No questions or concerns at this time.
 - b) **Home and Community Care Update** – No questions or concerns at this time.

- c) **Mohawks Bay of Quinte – Community Engagement** – No questions or concerns at this time.
- d) **Care Coordination in Primary Health Care Process Update** – No questions or concerns at this time.
- e) **Q4 Capital Delegated Decisions Summary** – No questions or concerns at this time.

That the CEO Discussion Report be received.

Moved by: J. Lord
Seconded by: J. Butt
Carried – 2018-157-05

RECESS – 11:00 am – 11:20 am

(D. Goulden and G. Braida departed; S. Goetz joined)

c. Chair’s Update – 11:20 am

- H. Sehdev noted for members that in the past several months she has taken time to meet with board members separately in order to begin building a business relationship and to better understand their desires for membership on board committees, community engagement interests, etc.
- The MOHLTC / LHIN Accountability Agreement (MLAA) has not yet been finalized due to the need to better clarify the metrics in the agreement which will likely come in the fall of this year; concept of collaborative governance at other LHINs is no “bolder” in other LHINs, noting no deliberate steps towards integration are being taken at that level at this time;
 - i. Revised Committee membership and Structure:
 - H. Sehdev provided a handout to members which included a revised committee membership that will take effect July 01, 2018; including a summary of board members current terms as members of the LHIN board of directors.
 - The Chair is Ex-officio on all committees; including voting privileges.
 - The Chair will continue to review board committee assignments each year;

d. Community Engagement – Board Member Updates – 11:30 am

- M. Madgett noted for members that the Central Governance Forum held their event on May 26, 2018 with good diverse attendance with speakers focusing on governance development, growth and training;
- J. Lord noted that last Thursday, he attended the Annual General Meeting of Le Réseau des Services de Santé en Français de l’est de l’Ontario, simply known as: Le Réseau. Of note they are subsidized at about two thirds by the Champlain and our LHIN. They can give advice to our LHIN in order to identify HSPs which will have to offer services in French. The Designation is granted by the Order in Council.
- It was a three part meeting:
 - a) The first part was to discuss membership, and how to better connect with current members (corporate and individuals), and identify concrete measures to increase membership and enhance the value of being a member.
 - b) The second portion was the AGM. They have a complete Board with Directors coming from all regions, including corporate members,
 - c) Then a presentation by François Boileau, the Ontario Commissioner of French Language Services. J. Lord drew two conclusions from his presentation which should help our Board to look ahead: First, the publication, last November by the Ministry, of The Guide to Requirements and Obligations relating to French Language Health Services. (http://www.health.gov.on.ca/en/public/programs/flhs/docs/Guide_to_FLHS_FINAL.pdf). It describes the LHIN’s role and responsibilities and will be useful to our task force on equity. The second conclusion is that, other than for the Ministry, the agency designation process

is currently undertaken on a voluntary basis. Many years ago, our LHIN identified HSPs to deliver on FLS. Le Réseau is working collaboratively with all those to achieve and to obtain their designation. As you are aware, so far none of the HSPs identified have reached it.

e. Finance, Audit, Risk and Resource (FARR) Committee – 11:35 am

i. Report

- A. Bergeron provided an overview of the briefing note for members which included a summary from recent meetings including appendices.

ii. Board Budget Allocation

- A. Bergeron provided an overview of the briefing note for members which included an executive summary; associated risks; appendices and a recommendation for consideration.
- Board Members and Senior staff provided the following information based on questions and comments:
 - There is a slight increase in the boards governance budget; the unallocated funds could provide the impression of a “slush” fund providing the wrong impression; there is likely the need for the board to have a “contingency” fund in order to manage some of the board governance requirements as the year moves on (i.e.: further education, use of a consultant, etc.);

That the Board of the South East LHIN approved the revised board budget allocation as adjusted to place the \$15 K into the “other meeting expenses” category.

**Moved by: A. Bergeron
Seconded by: J. Butt
Carried – 2018-157-06**

iii. Interim Risk Management Plan

- A. Bergeron provided an overview of the briefing note for members which included an executive summary; associated risks and appropriate appendices.
- Board Members and Senior staff provided the following information based on questions and comments:
 - Currently the PAN LHINs do not have an ERM (Enterprise Risk Management) system; the LHIN is developing an interim risk report pending finalization of the new ERM. The first interim risk report will be provided to the Board at its meeting in September 2018;
 - The Agency Risk Assessment (ARAR) report is totally HSP focused; with nothing specifically devoted to the LHINs themselves, hence the need for an interim report.
 - Staff will continue to work with their colleagues across the province on the systems that are currently being utilized across the province with the goal of educating the governor on possible options in the future.

f. Governance / Nominating Committee – 11:47 am

i. Report

- B. Smith provided an overview of the briefing note for members which included a summary from recent meetings including appendices.

ii. Community Engagement – Revisions to Policy 3.7

- B. Smith provided an overview of the briefing note for members which included a purpose; executive summary; associated risks; appendices and a recommendation for the boards' consideration.

- Board Members and Senior staff provided the following information based on questions and comments:
 - Committee meetings are not part of community engagement work; committees will continue to follow the Bylaws of the LHIN Board (i.e.: committee chairs are able to have meetings at the call of the Chair of the Committee) in order to address items that are required in between regularly scheduled meetings.
 - Per diems for board members are being reviewed.

g. Quality Committee – 11:57 am

i. Report

- L. Burrows provided an overview of the briefing note for members which included a summary from recent meetings including appendices.

ii. Quality Framework

- L. Burrows provided an overview of the briefing note for members which included a purpose; executive summary; associated risks; appendices and recommendation for the boards' consideration.

That the South East LHIN Board of Directors accept the recommendation from the Quality Committee to approve the Quality Framework.

**Moved by: L. Burrows
Seconded by: M. Madgett
Carried – 2018-157-07**

LUNCH BREAK – 12:05 pm – 12:45 pm

That the board consider matters of public interest regarding Consent Items (Board Correspondence & In Camera Committee Minutes); Report of the Investigator – Addictions, Mental health Services – Kingston, Frontenac, Lennox and Addington (AMHS – KFLA); Approval of In Camera Session Minutes (Board); Finance, Audit, Risk and Resource (FARR) Committee Report; Quality Committee Report; Collective Bargaining Update and Chairs Update (Receipt of Board Retreat Report) pursuant to Section 9 (5) of the Local Health Systems Integration Act 2006.

**Moved by: A. Bergeron
Seconded by: J. Lord
Carried – 2018-157-08**

10. In-Camera Session – 12:45 pm

That the Chair rise and provide a verbal report from the In Camera Session regarding the Consent Items (Board Correspondence & In Camera Committee Minutes); Report of the Investigator – Addictions, Mental health Services – Kingston, Frontenac, Lennox and Addington (AMHS – KFLA); Approval of In Camera Session Minutes (Board); Finance, Audit, Risk and Resource (FARR) Committee Report; Quality Committee Report; Collective Bargaining Update and Chairs Update (Receipt of Board Retreat Report) pursuant to Section 9 (5) of the Local Health Systems Integration Act 2006.

**Moved by: M. Stephen
Seconded by: S. Gauthier
Carried – 2018-157-14**

11. Date, time and location of next meeting:

Monday June 25, 2018 – 9:30 am – South East LHIN Offices – South Site (Dundas Street)

Future meetings:

Monday September 24, 2018 – 9:30 am – South East LHIN Offices – Belleville North Site

Monday December 17, 2018 – 9:30 am – South East LHIN Offices – Belleville North Site

Monday March 25, 2018 – 9:30 am – South East LHIN Offices – Belleville North Site

12. Timer & Observer:

Timer / Observer / Observer – ending a small portion early.

13. Adjournment

That the meeting be adjourned at 2:35 pm.

Moved by: S. Gauthier



Chair:

Hersh Sehdev

Secretary:



Paul Huras