

**CENTRAL LOCAL HEALTH INTEGRATION NETWORK
BOARD OF DIRECTORS**

October 25, 2016

2:00pm- 4:00pm

Central LHIN, 60 Renfrew, Markham, ON L3R 0E1

MINUTES OF MEETING

Board Members Present:

Mr. Warren Jestin, Chair
Ms. Brenda Urbanski, Board Member
Mr. Albert Liang, Vice Chair
Ms. Audrey Wubbenhorst, Board Member
Mr. David Lai Board Member
Mr. Stephen Quinlan, Board Member
Ms. Tanya Goldberg, Board Member
Dr. Uzo Anucha, Board Member

Staff Participants:

Ms. Kim Baker, Chief Executive Officer
Ms. Karin Dschankilic, Senior Director, Performance, Contracts and Allocations & Chief Financial Officer
Ms. Chantell Tunney, Interim Senior Director, Planning, Integration & Community Engagement
Ms. Laurie Rose, Corporate Governance and Board Relations
Ms. Rosemary MacGilchrist, Manager, Communications
Ms. Robin Gauzas, Executive Assistant, Recording Secretary

Guests:

Dr. Y. Raja Rampersaud, Inter-professional Spine Assessment and Education Clinics (ISAEC)

1.0 MEETING CALLED TO ORDER

The meeting was called to order at 2:05 pm

2.0 NOTICE/RECOGNITION OF A QUORUM

This meeting was formally constituted with Board members receiving adequate notice in accordance with By-Law No. 2. The notice, agenda and materials were distributed to the Board and were posted on the Central LHIN website.

Quorum of a Board comprising eight members is 5 directors. A quorum was present at the meeting.

In accordance with the By-law, participants and guest speakers were introduced. No public deputations were noted for the meeting.

3.0 APPROVAL OF AGENDA

“ON MOTION made by Ms. Brenda Urbanski and seconded by Mr. Stephen Quinlan, IT WAS RESOLVED THAT,”

“The Agenda be approved as circulated.”

**CARRIED
October 25-16-095**

3.1 PATIENT STORY

Mr. Jestin introduced Ms. MacGilchrist who shared a patient story about the frustration of a Francophone patient and family member when family doctors don't speak French, and the relief that they experienced when they are welcomed by a doctor who can speak with them in their native language, which resulted in the doctor gaining a better understanding of the Francophone patient's needs.

4.0 BOARD DEVELOPMENT AND EDUCATION

4.1 Inter-professional Spine Assessment and Education Clinics – Low Back Pain Care

Mr. Jestin welcomed Dr. Y. Raja Rampersaud, Clinical Lead, Inter-professional Spine Assessment (ISAEC), Ministry-Funded shared-care model for low back pain

Dr. Rampersaud presentation covered the following items:

- Up to 80% of people experience low back pain (LBP) at some point in time
- Building more timely, appropriate and transparent specialist referral pathway for patients is a priority across Ontario.
- The ISAEC shared-care model of care which helps patients receive rapid LBP assessment (less than two weeks on average), education and evidence-based self-management plans, as a program to help decrease prevalence of unmanageable/chronic LBP, unnecessary diagnostic imaging and unnecessary specialist referral.
- Evaluation results to-date of ISAEC of this pilot established in 2014 in Toronto, Thunder Bay and Hamilton

5.0 DECLARATION OF CONFLICT OF INTEREST

None at this time.

6.0 APPROVAL OF CONSENT AGENDA

“ON MOTION made by MR. Albert Liang and seconded by Mr. Stephen Quinlan, IT WAS RESOLVED THAT,”

“The Consent Agenda be approved and all resolutions contained therein be adopted as circulated.”

**CARRIED
October 25-16-096**

6.1.1 September 27, 2016

BE IT RESOLVED THAT:

“The minutes of September 27, 2016 are approved as circulated.”

CARRIED
October 25-16-097

6.2 OTHER ITEMS

6.2.1 2016/17 Compliance Declaration Third Quarter

BE IT RESOLVED THAT:

“The Central LHIN Board of Directors delegates the recommendation to approve the third quarter 2016-17 Compliance Declaration to the Audit Committee Chair.”

CARRIED
October 25-16-098

6.2.2 2016 Review of Whistleblower Policy

BE IT RESOLVED THAT:

“The Central LHIN Board of Directors approve the Whistleblower Policy – GP-003 (2016 review).”

CARRIED
October 25-16-098

6.3 REPORTS OF COMMITTEES

6.3.1 Audit Committee

6.3.1.1 2016/17 Quarter 2 CEO Compliance Declaration

BE IT RESOLVED THAT:

“The Central LHIN Board of Directors approve the CEO and Board Chair to execute and submit the Declaration of Compliance to the Ministry for the 2016/17 second quarter.”

CARRIED
October 25-16-099

6.3.1.2 2016/17 Appointment of Auditors

BE IT RESOLVED THAT:

“The Central LHIN Board of Directors appoints Deloitte for auditing services for the Central LHIN for fiscal year 2016/17 and authorizes the CEO to execute the Auditing Services Agreement.”

**CARRIED
October 25-16-100**

6.3.2 Governance & Community Nominations Committee Report

6.3.2.1 Appointment to Governance & Community Nominations Committee

BE IT RESOLVED THAT:

“The Central LHIN Board of Directors:

- 1. Approves the following Board Director be appointed to the following committee of the Board:**
 - Governance and Community Nominations Committee
Ms Tanya Goldberg**

**CARRIED
October 25-16-101**

7.0 CHAIR’S REPORT

Mr. Jestin provided the Board with an update on the following items:

- Congratulations to Ms Wubbenhorst on her reappointment to the Board
- Update on October 19 Governance Committee Meeting, during which the following items were discussed:
 - Draft proposal for the 2017 Board Meeting Schedule
 - Proposed update for upcoming Board Education topics
 - Draft Agenda for Board Development Day
 - Update on the Public Appointment Secretariat and Central LHIN Board recruiting process, noting that the Community Nominations Committee has been briefed and will be meeting again in the weeks ahead
 - Update on the Ministry’s proposal for Board core competencies to support Board recruiting including in the event that Bill 41 is passed
- Invitations for the Central LHIN HSP Chairs Governance Council meeting to take place in November have been issued

8.0 CEO REPORT – ITEMS FOR APPROVAL

8.1 Better Living Health and Community Services and Palliative Care Network for York Region Voluntary Integration

Ms. Tunney provided the Board with an update on Better Living Health and Community Services and Palliative Care Network for York Region Voluntary Integration.

A revised motion was tabled.

“ON MOTION by Mr. David Lai and seconded Ms. Tanya Goldberg, IT WAS RESOLVED THAT,”

“The Central LHIN Board of Directors:

- a) **Direct Central LHIN staff to facilitate the transfer of \$747,993 from Palliative Care Network for York Region to Better Living Health and Community Services effective April 1, 2017 to provide the hospice, palliative and related services currently provided by Palliative Care Network for York Region (“the Transferred Services”);**
- b) **Direct Central LHIN staff to amend the 2016/17 Multi-Sector Accountability Agreement between Central LHIN and Better Living Health and Community Services to reflect:**
 - i. **a pro-rated funding increase of \$186,998;**
 - ii. **the addition of the pro-rated Transferred Services;**
 - iii. **substantially the same performance obligations and standards in respect to the transferred services as were required of Palliative Care Network for York Region;**
 - iv. **an effective date for the amendments of January 01, 2017;**
 - v. **a requirement that Better Living Health and Community Services submit a report to the Central LHIN on June 30, 2017 , December 31, 2018 and December 31, 2019, regarding outcomes and status of the integration;**
 - vi. **the goals of improving efficiency and quality as a result of the integration.**
- c) **Direct Central LHIN staff to terminate the Multi-Sector Accountability Agreement between Central LHIN and Palliative Care Network for York Region, effective December 31, 2016 as amended. ”**

**CARRIED
October 25-16-102**

8.2 Mackenzie Health Hospital Service Accountability Agreement Performance Indicators North York General Hospital Pre-Capital Submission Part A: Life Safety Projects

Ms. Dschankilic provided the Board with an update on Mackenzie Health Hospital Service Accountability Agreement Performance Indicators.

“ON MOTION by Ms. Brenda Urbanski and seconded Dr. Uzo Anucha, IT WAS RESOLVED THAT,”

“The Central LHIN Board of Directors

- a) Approves the 2016/17 funding, volume and performance targets for Mackenzie Health, as follows, to be included in the 2016/17 Hospital Service Accountability Amending Agreement:**

	Mackenzie Health
Total Health System Funding	\$177,117,198
Total Acute Inpatient Weighted Cases	22,260
Day Surgery Weighted Cases	3,200
Complex Continuing Care Weighted Patient Days	36,948
Mental Health Weighted Patient Days	10,554
Inpatient Rehabilitation Weighted Cases	352
Emergency Visits Weighted Cases	4,830
Ambulatory Care Visits	216,880
Current Ratio	0.80
Year End Total Margin	0.00%
Percent of 2, 3 and 4 Cases Completed within Access Target for Hip Replacements	90%
Percent of 2, 3 and 4 Cases Completed within Access Target for Knee Replacements	90%
Percent of 2, 3 and 4 Cases Completed within Access Target for MRI Scans	55%
Percent of 2, 3 and 4 Cases Completed within Access Target for CT Scans	80%
90th Percentile Emergency Department Length of Stay for Complex Patients (hours)	12.00
90th Percentile Emergency Department Length of Stay for Minor/Uncomplicated Patients (hours)	3.80
Percentage of Alternate Level of Care (ALC) Days	14.0%
Alternate Level of Care (ALC) Rate	13.5%
Rate of Hospital-Acquired C. Difficile	0.28

- b) Approves the following local conditions to be included in the 2016/17 Hospital Service Accountability Amending Agreements for Mackenzie Health:**
- i.** The hospital will include ED Length of Stay for Complex patients in the 2017/18 Quality Improvement Plan (QIP), including a target and action plan.
 - ii.** The hospital will participate in LHIN-led hospital initiatives through either implementation, knowledge sharing or planning for strategies to improve ED and ALC performance.
- c) Delegates authority to the Central LHIN Chair and CEO to sign the 2016/17 Hospital Service Accountability Amending Agreement for Mackenzie Health.”**

CARRIED
October 25-16-103

8.3 2017-18 Community Accountability Planning Submission (CAPS) Review Process and Principles

Ms. Dschankilic provide the Board with an update on the 2017-18 Community Accountability Planning Submission (CAPS) Review Process and Principles.

“ON MOTION by Mr. Albert Liang and seconded Ms. Audrey Wubbenhorst, IT WAS RESOLVED THAT,”

“The Central LHIN Board of Directors:

- I. Approves the following criteria for completion of 2017-2018 Community Accountability Planning Submissions (CAPS):**
 - a. All Health Service Providers are required to complete the narrative component of the CAPS submission.**
 - b. For the Financial and Activity component of the CAPS:**
 - i. Health Service Providers are required to complete an updated 2017-2018 CAPS if they meet one of the following criteria:**
 - 1. Funding changes since April 1, 2016; or**
 - 2. Performance target changes since April 1, 2016; or**
 - 3. Has undergone or is in the process of an integration; or**
 - 4. Central LHIN annualized funding equal to or above \$2.5 million as of September 1, 2016.**
 - ii. For the Health Service Providers which do not meet any of the above criteria, they have the following options:**
 - 1. Submit the same financial and statistical information as the 2016-2017 CAPS in the financial and activity file; or**
 - 2. Update the 2017-2018 CAPS.**
- II. Approves the following principles to guide the review of 2017-2018 Community Accountability Planning Submissions:**
 - a. An Annual Balanced Budget as defined in the 2014-2017 M-SAA; and**
 - b. Central LHIN funded administrative expenses not to exceed 15% of Central LHIN funding; and**
 - c. No overall service reductions. Health service providers may propose shifts in services to better meet community demand for services and to align with provincial priorities.”**

CARRIED
October 25-16-104

8.4 2016-17 Base Funding for Central LHIN Hospitals

Ms. Dschankilic provide the Board with an update on the 2016-17 Base Funding for Central LHIN Hospitals.

“ON MOTION by Ms. Brenda Urbanski and seconded Mr. Stephen Quinlan, IT WAS RESOLVED THAT,”

“The Central LHIN Board of Directors:

- a) **Approves the disbursement of \$8,065,200 in 2016/17 base funding to Central LHIN hospitals as follows:**

Hospital	2016/17 Base Funding
Stevenson Memorial Hospital	\$ 1,410,800
North York General Hospital	\$ 1,341,000
Mackenzie Health	\$ 2,107,000
Southlake Regional Health Centre	\$ 1,093,100
Markham Stouffville Hospital	\$ 1,931,500
Humber River Hospital	\$ 181,800
Total	\$ 8,065,200

- b) **Delegates authority to the Central LHIN CEO to approve hospital-specific deliverables for this funding.”**

CARRIED
October 25-16-105

9.0 CEO REPORT – ITEMS FOR INFORMATION

Mackenzie Health

Ms. Baker advised that both she and Mr. Jestin attended Makenzie Health’s official ground-breaking ceremony for the future Mackenzie Vaughan Hospital.

Health Quality Transformation Session

Ms. Baker noted that she participated in the Health Quality Transformation conference on October 20, and she facilitated a session entitled “Patient Experience: Measuring What Matters”.

Ms. Baker also noted that Minister Hoskins presented 2016 Minister’s Medals Honouring Excellence to health care providers who went above and beyond to provide care for patients and families. Ms. Baker noted that there were 87 nominations from across the province this year – including 5 individual and 4 team nominations from Central LHIN. Ms. Baker advised that she

was on the Minister Medals Committee but of course had to exempt herself for judging any submissions from Central LHIN.

Ms. Baker extended congratulations to two health care professionals from Central LHIN who were named to the Minister's Medal Honour Roll in the Individual Champion Category – namely, Ms. Kathy Bitove, Chair, Corporate Patient & Family Advisory Council, Southlake Regional Health Centre and Ms. Jean West, Director, Mental Health, York Support Services Network.

Ms. Baker noted that also at the Health Quality Transformation conference a poster developed by Central LHIN staff member Ms. Karen Blackley, eHealth Program Manager, in partnership with OTN, the Central Community Care Access Centre and HSP LOFT received a Poster of Distinction Award. Ms. Baker noted that the poster highlights innovative use of Telehomecare in LOFT Bradford House – a facility that specializes in assisted living service for vulnerable, at-risk older adults and seniors living with mental health and addiction issues. Ms. Baker provided the Board with a hard copy of the poster.

Ms. Baker provided the Board with further update on the following items:

- 2016-17 Annual Business Plan was approved
- Patients First Act
- Legislation Overview
- Transition and Readiness Planning
- Sub Region Planning
- Highlights for Central LHIN in the Measuring Up 2016 Report, including having the second highest percentage of people (48.1%) aged 16 and older who were able to see their primary care provider, or another primary care provider in their office, on the same day or next day when they are sick. The highest was Central West LHIN at 53.3%.

Ms. Tunney provided the Board with an update on the following items:

- Health Links – Connection to Sub-Regions & Focus on Care
- Primary Care Update
- Regional Palliative Care Update

Mr. Jestin welcomed Ms. Andrea Gates who provided the Board with an update on the Central LHINs Long Term Care Capacity Plan. Ms Gates provided updates on:

- Context, background and guiding principles for the Long Term Care Capacity Plan
- Current number of seniors, and population growth impacts, on LTCH-like services
- Alternatives to Long-Term Care
- Costing models for current and alternative models of care, including cost avoidance measures
- The Central LHIN's plan to advance the LTC Capacity Plan

10.0 OTHER BUSINESS

None at this time.

11.0 FUTURE MEETINGS

Tuesday November 29, 2016

2:00pm-4:00pm

Central LHIN, 60 Renfrew Drive, Suite 360, Markham, ON L3R 0E1

12.0 MOTION MOVING INTO A CLOSED SESSION

“ON MOTION by Ms. Tanya Goldberg and seconded Mr. Albert Liang, IT WAS RESOLVED THAT,”

“The members attending this meeting move into a Closed Session pursuant to the following exceptions of LHINs set out in s.9(5) of the Local Health Systems Integration Act, 2006:”

- Personal or public interest**
- Public security**
- Security of the LHIN and its directors**
- Personal health information**
- Prejudice to legal proceedings**
- Safety**
- Personnel matters**
- Labour relations**
- Matters subject to solicitor client privilege**
- Matters prescribed by regulation**
- Deliberations on whether to move into a closed session**

and further that the following persons be permitted to attend:

Ms. Kim Baker

Ms. Karin Dschankilic

Ms. Chantell Tunney

Ms. Laurie Rose

Ms. Robin Gauzas

Ms. Rosemary MacGilchrist.”

**CARRIED
October 25-16-106**

13.0 CLOSED SESSION CALLED TO ORDER

The session was called to order at 4:25 pm.

14.0 APPROVAL OF AGENDA

“ON MOTION by Mr. Stephen Quinlan and seconded by Ms. Tanya Goldberg, IT WAS RESOLVED THAT,”

“The Agenda of the Closed Session of October 25, 2016 be approved as circulated.”

**CARRIED
October 25-16-107**

15.0 APPROVAL OF MINUTES

15.1 Review of Minutes of September 27, 2016

“ON MOTION by Mr. David Lai and seconded by Ms. Brenda Urbanski, IT WAS RESOLVED THAT,”

“The minutes of the Closed Session of September 27, 2016 be approved as distributed.”

**CARRIED
October 25-16-108**

16.0 Proposed Patients First Transition Planning Task Force

A motion was passed

**CARRIED
October 25-16-109**

17.0 MOTION MOVING OUT OF CLOSED MEETING

“ON MOTION by Mr. Albert Liang and seconded by Mr. Stephen Quinlan, IT WAS RESOLVED THAT,”

“The Closed Session is terminated (6:05 p.m.) and that closed session minutes are permitted to be shared with all Board members and permitted attendees.”

**CARRIED
October 25-16-110**

18.0 MOTION TO TERMINATE SESSION

“ON MOTION by Ms. Brenda Urbanski and seconded by Dr. Uzo Anucha, IT WAS RESOLVED THAT,”

“The session be terminated (6:19 p.m.).”

**CARRIED
October 25-16-111**

Warren Jestin, Chair

Robin Gauzas, Recording Secretary