

MINUTES OF PROCEEDINGS

**NORTH EAST LOCAL HEALTH INTEGRATION NETWORK
BOARD OF DIRECTORS MEETING**

**Thursday, January 12, 2017
Teleconference / NE LHIN Sudbury Office
9:00 am**

PARTICIPANTS: Board of Directors : Rick Cooper Santina Marasco Denis Bérubé John Febbraro Toni Nanne-Little Dawn Madahbee NE LHIN Staff: Christine Leclair Cynthia Stables Kate Fyfe Tamara Shewciw Terry Tilleczek Marc Demers	GUESTS:	REGRETS: Louise Paquette
		SCRIBE: Micheline Beaudry
		PUBLIC:

AGENDA ITEM	DISCUSSION	ACTION	RESPONSIBLE
1.0 Call to order	Interim Chair, Rick Cooper, called the meeting to order at 9:05 a.m.		
2.0 Declaration of Conflict of Interest	No conflicts of interest declared.		
3.0 Approval of Agenda	Members reviewed the agenda. MOTION {2017-BD0001} <i>That the agenda for the Board of Directors meeting of Thursday, January 12, 2017 be approved as presented.</i> MOVED: John Febbraro SECONDED: Dawn Madahbee {CARRIED}		

<p>4.0 Approval of Consent Agenda</p>	<p>Members reviewed the consent agenda which included the following items:</p> <p>5.0 Board Attendance 6.0 Quarterly Media Tracker and Analysis 7.0 Attestation of Compliance 8.0 Approval of Minutes of Board meetings held on November 10th and December 14th, 2016.</p> <p>MOTION {2017-BD0002}</p> <p>RESOLVED THAT: <i>The consent agenda for the Board of Directors meeting of Thursday, January 12, 2017 be approved as presented including:</i></p> <ul style="list-style-type: none"> - Board Attendance - Quarterly Media Tracker and Analysis - Attestation of Compliance - Approval of minutes of board meetings held on November 10 and December 14, 2016. <p>MOVED: Toni Nanne-Little SECONDED: Santina Marasco</p> <p>{CARRIED}</p>		
REGULAR AGENDA:			
<p>9.0 Report from the Interim Chair</p> <p>Rick Cooper</p>	<p>Interim Chair, Rick Cooper, commented that with the NE LHIN's excellent leadership with CEO and senior team and board of governors, we will have an excellent transformation.</p> <p>Rick Cooper will be attending the LHIN Board Chair as well as the Joint CCAC/LHIN Board Chair meeting next week.</p>		
<p>10.0 Report from the Acting CEO</p> <p>Kate Fyfe</p>	<p>An update on Patients First was provided.</p> <p>16 Provincial Workstreams are all advancing their deliverables.</p> <p>Highlights include: LHIN Management Workstream – Organizational charts were submitted to the Ministry on December 23rd, 2016. The</p>		

	<p>LHINs have had opportunity to review with the Ministry looking at critical milestones and work efforts.</p> <p>Readiness and Capacity Workstream – Deloitte has been hired to do the readiness and capacity assessment. The NE LHIN is scheduled to have the first site visit on January 19th and 20th. There will likely be a follow up site visit with NE LHIN and CCAC. As for as the governance piece, by-law reviews as well as knowledge training that will help support Governance and LHIN Boards will be part of the readiness.</p> <p>Corporate Service Entity Workstream - On track to be established this month.</p> <p>Communication Management Workstream A new workstream has been established to support communication needs for the transition.</p> <p>Locally, we have 32 workgroups. Each work group has completed their individual work plan and established a critical path to complete the “must have” readiness requirements.</p> <p>A Town Hall session with CCAC staff was held December 19th. Joint Town Hall will be held later this month. Senior teams continue to meet regularly. There continues to be discussion on Sub-regions. Approval by the Ministry of the Sub-regions submission is expected shortly.</p>		
<p>Financial/ Performance Update</p> <p>Kate Fyfe & Marc Demers</p> <p>11.1 2016/17 Q2 Hospital Update</p>	<p>Q2 Hospital update was provided.</p> <p>NE LHIN is working with hospitals through the Q2 process and we are confident several of the projected deficits for this current year will be addressed and balance operations.</p> <p>Highest risk hospitals include:</p> <ul style="list-style-type: none"> • Englehart and District Hospital – current and ongoing risk, they have taken many 		

	<p>steps to balance operations, however are still unable to resolve this.</p> <ul style="list-style-type: none"> • Health Sciences North - current year risk, largely related to ALC pressure, NE LHIN is working very closely with this hospital to address the financial gap. • Temiskaming Hospital has advised the NE LHIN in writing of a \$550k deficit projection for this fiscal year, they have been instructed to follow-up with a plan to balance. • Sault Area Hospital - The hospital is exploring strategies to address patient flow. 		
<p>11.2 Hospital Working Funds Initiative 2016- 17 Q2 Report</p>	<p>An update on Hospital Working Funds was provided.</p> <p>NE LHIN will continue to monitor Timmins and District Hospital (TDH), North Bay Regional Health Centre (NBRHC), Health Sciences North (HSN) and Sault Area Hospital's (SAH) financial position. If the hospital is forecasting a shortfall in reaching their Hospital Working Funds Accountability Agreement performance targets, the hospital is required to provide an explanation and plan to correct any shortfall in performance. As well, the NE LHIN will continue ongoing discussion with Ministry regarding NBRHC WFI re-entry.</p> <p>Motion {2017-BD0003}</p> <p>RESOLVED THAT: <i>The Board of Directors receive and approve the Working Funds Reports for the following hospitals:</i></p> <ul style="list-style-type: none"> • <i>Health Sciences North;</i> • <i>Timmins and District Hospital;</i> • <i>Sault Area Hospital; and</i> • <i>North Bay Regional Health Centre</i> <p>MOVED: John Febraro SECONDED: Denis Bérubé</p> <p>{CARRIED}</p>		

<p>11.3 Operational Agency Risk Assessment Review</p>	<p>It was reported that the light-touch risk review did indicate a change with the passing of Bill 41 the NE LHIN added 3 more risks:</p> <ul style="list-style-type: none"> o Workforce stability and continuity o One time and additional costs o Governance Continuity <p>In the completion of the risk report, consideration is provided to the following elements:</p> <ul style="list-style-type: none"> • Assess risks for each specified corporate risk categories • Ensure proactive and strategic agency risk management • Establish risk oversight measurement and accountability • mechanism that provides due diligence over operations <p>The completed risk assessment was submitted on December 19, 2016 to the Risk Management Unit of the Accounting Policy and Financial Reporting Branch (APFRB).</p> <ul style="list-style-type: none"> • The NE LHIN continues to monitor and mitigate risks as outlined via the mitigation strategy for each risk identified. This Risk Assessment is used to keep a record of risks, key mitigations, and potential impacts. • This report is internally focused, the NE LHIN uses a separate risk report (in Q1, Q2, and Q3) to identify system level (Health Service Provider) related risks to the Ministry. 		
<p>11.4 LSAA Amending Agreement</p> <p>Marc Demers</p>	<p>The NE LHIN Board of Directors reviewed and discussed the proposed LSAA Amendment.</p> <ul style="list-style-type: none"> • The 2016-2019 LSAA includes a clause which reference the submission of a Q4 Performance Report to the LHIN. 	<p>Approved motion to be sent to LHIN Collaborative</p>	<p>Micheline Beaudry</p>

	<ul style="list-style-type: none"> • In 2016, a provincial decision was made to remove the requirement for the submission of a performance report to the LHIN. • The Performance Report reference was not removed from Section 6.2(c) when the current LSAA was established at April 1, 2016. <p>Motion {2017-BD0004}</p> <p>RESOLVED THAT: <i>The proposed LSAA Amending Agreement to be made as of April 1, 2017, amending certain Schedules and amending Section 6.2(c) of the 2016/19 LSAA, be approved as presented to the Board.</i></p> <p>MOVED: Santina Marasco SECONDED: Toni Nanne-Little {CARRIED}</p>		
<p>11.5 MSAA Amending Agreement</p> <p>Kate Fyfe</p>	<p>The NE LHIN Board of Directors reviewed and discussed the proposed Multi-Sector Service Accountability Agreement (MSAA) that needs to be extended for a one-year period covering 2017-2018.</p> <ul style="list-style-type: none"> • The current MSAA, covering the CCAC, CSS, CHC and CMH&A sectors, expires at March 31, 2016. • Typically a new MSAA would be negotiated covering the period from Apr 1, 2017 to Mar 31, 2020 • With the anticipated transition activities related to the Patients First Act it was decided that minimal changes should be made to existing service accountability agreements, for the time being. • In order to minimize changes to the service agreements the existing agreement will be extended for one year, for 2017/2018 	<p>Approved motion to be sent to LHIN Collaborative</p>	<p>Micheline Beaudry</p>

	<p>Motion {2017-BD0005}</p> <p>RESOLVED THAT: <i>The proposed MSAA Amending Agreement to be made as of April 1, 2017, and amending the 2014/17 MSAA by extending its term to March 31, 2018 and by continuing in effect the 2016/17 Schedules except to the extent that a Schedule or Schedules is replaced with one or more 2017/18 Schedules attached to the MSAA Amending Agreement, be approved as presented to the Board.</i></p> <p>MOVED: Dawn Madahbee SECONDED: Denis Bérubé</p> <p>{CARRIED}</p>		
<p>11.6 H-SAA Extension to March 31, 2018</p> <p>Marc Demers</p>	<p>The NE LHIN Board of Directors reviewed the proposed extension Hospital Sector Service Accountability Agreement (H-SAA).</p> <p>Due to legislative changes there is agreement among legal representatives from the Ontario Hospital Association (OHA) and LHIN to provide a one-year extension for 2017/18 to the H-SAA.</p> <p>Motion {2017-BD0006}</p> <p>RESOLVED THAT: <i>The proposed H-SAA Amending Agreement to be made as of April 1, 2017, and amending the 2008/17 H-SAA by extending its term to March 31, 2018 and by replacing the 2016/17 Schedules with 2017/18 Schedules, be approved as presented to the Board.</i></p> <p>MOVED: Toni Nanne-Little SECONDED: Santina Marasco {CARRIED}</p>	<p>Approved motion to be sent to LHIN Collaborative</p>	<p>Micheline Beaudry</p>
<p>11.7 MLAA Q2 Update</p> <p>Kate Fyfe</p>	<p>Status report on the NE LHIN performance of the MLAA indicators and Q2 2016/17 Stocktake was submitted to the MOHLTC on December 5th, 2016.</p>		

	<p>The Q2 2016/17 stocktake was presented to the Board at the November meeting at which time it was requested to have the provincial performance information as well. Given the shift to a single target level for each indicator and current performance levels, the NELHIN acknowledges that it would be very difficult to achieve the provincial expectations in the short term.</p> <p>The LHIN has identified which indicators are candidates for attaining the single target levels within the fiscal year and which will require a long term approach.</p> <p>For those indicators with a long term focus, the LHIN has suggested a graduated method for achieving the provincial levels and set associated annual performance goals that will be monitored and reported with the Stocktake results.</p> <p>These interim targets and hospital-specific targets are under negotiation with our hospitals.</p> <p>The LHIN has completed three MLAA Strategy documents including:</p> <ul style="list-style-type: none"> • Patient Flow: Addressing MLAA indicators 1, 2, 3, 10, 11, 14 • Emergency Department: Addressing MLAA indicators 4, 5 • Surgical and Diagnostic Access: Addressing MLAA indicators 6, 7, 8, 9 and • Monitoring indicators 1, 2,3 • Mental Health and Substance Abuse: Work in progress <p>Going forward the information provided will include provincial performance.</p>		
<p>11.8 MOH 3rd Quarter Report 2016-17</p>	<p>Report provided on the 3rd Quarter Report 2016-17 financial performance for the NE LHIN and the system risks were identified</p>		

	<p>with the corresponding management plan to mitigate.</p> <p>The quarterly submission to the Ministry is due at the end of each quarter and includes the following reports for Q3:</p> <ul style="list-style-type: none"> • Balance Sheet Forecast • Transfer Payment Sector Forecast • LHIN Operations Forecast • Risk Report <p>The Q2 report was submitted on December 30, 2016.</p> <ul style="list-style-type: none"> • Sector Forecast - Based on Q2 performance reviews and planned activities the allocation is projected to be fully invested by March 31, 2017. • Operation Forecast – expecting balanced year-end position. • Risk report was discussed on earlier agenda item. 		
<p>Review of Pre-Capital Submissions</p> <p>12.1 Kirkland and District Hospital – Renovation of Intensive Care Unit</p> <p>Marc Demers</p>	<p>The pre-capital submission from Kirkland and District Hospital for renovation and relocation of Intensive Care Unit was presented.</p> <p>Motion {2017-BD0007}</p> <p>RESOLVED THAT: <i>That the NE LHIN Board of Directors has reviewed the pre-capital submission for the renovation and relocation of Kirkland Lake and District Hospital’s Intensive Care Unit, and supports that the proposal be submitted to the Ministry of Health and Long Term Care for capital funding.</i></p> <p>MOVED: John Febbraro SECONDED: Dawn Madahbee {CARRIED}</p>	Letter of support be sent to Ministry of Health	Marc Demers
<p>12.2 Kirkland and District Hospital – Replacement of X-ray Machine</p>	<p>The pre-capital submission from Kirkland and District Hospital for replacement of X-ray machine was presented.</p> <p>Motion {2017-BD0008}</p>	Letter of support be sent to Ministry of Health	Marc Demers

<p>Marc Demers</p>	<p>RESOLVED THAT: <i>That the NE LHIN Board of Directors has reviewed the pre-capital submission for the replacement of Kirkland Lake and District Hospital's x-ray machine and x-ray room renovation, and supports that the proposal be submitted to the Ministry of Health and Long Term Care for capital funding.</i></p> <p>MOVED: Toni Nanne-Little SECONDED: Denis Bérubé {CARRIED}</p>		
<p>13.0 Move to Closed Session</p> <p>Rick Cooper</p>	<p>Motion {2017-BD0009}</p> <p>RESOLVED THAT: <i>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 Integration Act, 2006."</i></p> <p><input checked="" type="checkbox"/> <i>Labour relations</i></p> <p><i>BE IT FURTHER RESOLVED THAT; the following persons be permitted to attend: For the discussion regarding Matters prescribed by regulations:</i></p> <ul style="list-style-type: none"> • <i>Kate Fyfe</i> • <i>Terry Tilleczek</i> • <i>Micheline Beaudry</i> <p>MOVED: Santina Marasco SECONDED: John Febraro {CARRIED}</p>		
<p>18.0 Closed Session Report</p> <p>Rick Cooper</p>	<p>Motion {2017-BD0010}</p> <p>RESOLVED THAT: <i>The Board of Directors of the North East LHIN received the report of its Closed Session meeting of Thursday, January 12, 2017.</i></p> <p>MOVED: Toni Nanne-Little SECONDED: John Febraro {CARRIED}</p>		

<p>19.0 Next Meetings</p> <p>Rick Cooper</p>	<p>Schedule of upcoming meetings are as follows:</p> <ul style="list-style-type: none"> • February 22 (Audit & Governance) • February 28 (Board of Directors) – teleconference • April 25 (Board of Directors) – in person • May 16 (Audit & Governance) • June 13 (Board of Directors) – in person 		
<p>20.0 Adjournment of Board Meeting</p> <p>Rick Cooper</p>	<p>The meeting was adjourned at 11:12 a.m.</p> <p>Motion {2017-BD0011}</p> <p>RESOLVED THAT:</p> <p><i>The North East LHIN Board of Directors meeting of Thursday, January 12, 2017 be adjourned at 11:12 a.m.</i></p> <p>MOVED: John Febbraro SECONDED: Toni Nanne-Little {CARRIED}</p>		
<p>AGENDA DEVELOPMENT FOR NEXT MEETING</p>			

Approved on February 28, 2017



Rick Cooper
Interim Chair