

LHINC Council Meeting July 9, 2010 *Communiqué*

The LHIN Collaborative (LHINC) Council held its fifth meeting on July 9, 2010. This communiqué provides an overview of the key messages stemming from that meeting.

Project Status

All of LHINC's projects currently underway are on track according to their project charters. The one exception is a minor delay of about one month in the *Engagement of Primary Care Physicians* project due to the time required to set up the expert panel.

The following projects were discussed by LHINC Council:

Priority Setting/Decision Making Process:

Mimi Lowi-Young, CEO of the Central West LHIN and Chair of the Priority Setting/Decision Making Process Working Group, provided a status report to Council. This project is developing a common framework for priority setting that can inform decision making by the LHINs and that promotes a consistent and transparent approach. Key learnings include:

- All fourteen LHINs have priority setting/decision making frameworks: nine are using a framework developed by three LHINs in 2009 as the foundation for their process; while the other five are using other frameworks that have varying degrees of similarity.
- Key areas of variability include: terminology, definitions, level of community engagement in local process; and sharing of tools and frameworks with stakeholders and posting on their website.
- Next steps include:
 - Assess the potential use of priority setting/decision making frameworks as a tool for integration decisions.
 - Undertake a comparative analysis of the frameworks including their tools and definitions for the domains and criteria being used by the LHINs.
 - Develop recommendations for a common framework with guiding principles of consistency and transparency across the LHINs.

Transition Management: "Home-First" Approach:

This is a new project that is consistent with and supports the LHINs' integration priority to improve the transition of patients/clients across health sectors. The specific focus will be to support a shift to a "home-first" philosophy and approach across the LHINs. The project will identify leading practices that support a "home-first" approach to client/patient transitions and patient choice for

care at home; and promote their adoption across the LHINs. Council members were asked to provide nominees for a LHIN-led working group that will provide expert advice and input to the project.

Engagement of Public Health in LHIN Processes:

This is a new project that will focus on developing a leading practice model(s) for effective LHIN/Public Health engagement. The project will commence in September 2010. LHINC Council discussed the background and proposed project scope. The goal is to develop a LHIN/Public Health Engagement Strategy to be used in areas of shared focus and in the management of significant public health issues. A draft project charter has been developed and feedback is being sought from the LHIN CEOs and Public Health sector to ensure the appropriate alignment of project deliverables. The project charter will be circulated to LHINC Council members for approval and names from the health sectors will be sought to participate on a LHIN-led working group in August 2010.

Capacity Planning:

The Ministry of Health and Long-Term Care has established a Capacity Planning Advisory Panel to provide advice on the development of an approach to health services capacity planning, specifically regarding scope and phasing. As part of the information gathering phase, LHINC was asked to gather information on current capacity planning models that are being used by the LHINs by September 2010. LHINC Council indicated that LHINC Secretariat should contact each sector to identify the availability of any other capacity planning tools.

Other Discussion Items

LHINC Priority Setting and Decision Making Framework:

A draft framework was presented to LHINC Council that will guide the process for determining LHINC's project priorities for 2011/12. Under this process, Council members would engage their respective sector association(s) or LHINs to identify potential priorities. LHINC Secretariat will provide a template and guidelines that Council members can use to solicit feedback from their sector or LHINs by mid September 2010.

LHINC Evaluation Framework:

LHINC Council approved in principle a draft framework for evaluating LHINC. The framework uses a three-staged balanced scorecard approach to evaluate LHINC's projects, its performance and overall value to the healthcare system. Both the LHINC Secretariat and LHINC Council will be evaluated annually and at the end of the first three years. The next steps include further detailing the framework and evaluation objectives, and exploring options for identifying external capacity to conduct the evaluation.

The LHIN Collaborative (LHINC) is an advisory structure formed to work at a provincial level to strengthen relationships among health service providers (HSPs), their Associations and the LHINs collectively, and support system alignment. LHINC provides a system structure to engage HSPs on system-wide health issues. LHINC is led by a Council and supported by a Secretariat.