

**NORTH EAST LOCAL HEALTH INTEGRATION NETWORK
BOARD OF DIRECTORS
9:30 a.m.**

Administration Board Room, North Bay Regional Health Centre

MINUTES OF PROCEEDINGS

Monday, February 28, 2011

CALL TO ORDER

Interim Chair Peter Vaudry called the meeting to order at 9:35 a.m.

ROLL CALL

Members in Attendance: Peter Vaudry, Interim Chair of NE LHIN
Leah Welk, Director from the Parry Sound Planning Area
Dr. Colin Germond, Director from the Sudbury Planning Area
Randy Kapashesit, Director from the James Bay/Hudson Bay Planning Area
Danielle Belanger-Corbin, Director from the Temiskaming Planning Area
Dr. Ian Cowan, Director from the Nipissing Planning Area
Wally Wiwchar, Director from the Cochrane Planning Area

By Teleconference: Jib Turner, Director from the Manitoulin Planning Area

Staff: Louise Paquette, Chief Executive Officer
Martha Auchinleck, Senior Director
Terry Tilleczek, Senior Director
Monique Mechefske, Senior Director
Tamara Shewciw, Chief Information Officer
Cynthia Stables, Director, Communications and Community Engagement
Mathieu Beausoleil, Corporate Coordinator
Lara Bradley, Board Liaison

Audience: Kristine Lynham, Nipissing University Nursing student; Cory Moore, Nipissing Nursing student; Jan Sottys, Nipissing Nursing student; Mariam Opoka, Nipissing Nursing student; Gary Jodouin, NBGH Board member; Phil Geden, NBGH Chair; Sheila Parish, NBGH Board member; Hugette Leacy, NBGH Board member; Bob Cunningham, NBGH staff; Mary Tasz NEMHC Chair; and three others who did not fill out the sign-in sheet.

WELCOME AND INTRODUCTION

Peter welcomed Board members, staff and guests to the NE LHIN Board Meeting.

DECLARATION OF CONFLICT OF INTEREST

No conflicts of interest were declared or identified.

AGENDA

{Motion 2010-BD087}

Moved by Danielle Belanger-Corbin, seconded by Ian Cowan

*The agenda for the Board of Directors meeting of Monday, February 28, 2011, be approved as presented.
(Carried)*

MINUTES OF LAST MEETING

{Motion 2010-BD088}

Moved by Leah Welk, seconded by Ian Cowan

The Minutes of Proceedings for the Board of Directors meeting of January 12, 2011, be approved as presented.

(Carried)

BUSINESS ARISING FROM PREVIOUS MEETING

None.

BOARD CHAIRS' and DIRECTORS' REPORT: PETER VAUDRY

A brief discussion ensued regarding the Directors' engagements. Cynthia said she would speak to specifics on new guidelines during her report.

AUDIT COMMITTEE REPORT: Danielle Belanger-Corbin

The committee went over the budget summary and reported to the Board that the LHIN's budget is balanced.

Regarding the upcoming audit by Deloitte and Touche, an appendix has been added to the agreement.

{Motion 2010-BD089}

Moved by Leah Welk, seconded by Ian Cowan

Be it resolved that the Board receive the report and the Budget Summary of the Audit Committee from its meeting of Monday, February 28, 2011, as well as the modification to Appendix E of Deloitte and Touche's Audit Plan.

(Carried)

GOVERNANCE COMMITTEE REPORT: Randy Kapashesit

The committee, along with Board Directors Wally and Colin, met in Sudbury on February 10, for a day long discussion on a variety of topics including Board Directors titles, the Board Retreat, the changing environment, as well as, the role of the NE LHIN Board. Directors discussed how the LHIN has grown from its start-up stage to a more sophisticated organization, requiring perhaps a different approach to governance by the Board. A discussion revolved around how to transition into an effective and engaged, but less operational Board.

{Motion 2010-BD090}

Moved by Jib Turner, seconded by Wally Wiwchar

Be it resolved that the Board receive the report of the Governance Committee Report from its meeting of February 10, 2011.

(Carried)

REPORTS FROM THE CHIEF EXECUTIVE OFFICER AND SENIOR MANAGEMENT:**Patient Improvement Process: Louise Paquette**

PriceWater House was engaged by the Ministry of Health and Long-term Care to review the Alternate Level of Care (ALC) challenges in four LHINs and to make recommendations on how to improve the flow of ALC patients. The NE LHIN was selected primarily based on our high ALC numbers. ALC continues to be the NE LHIN's top priority. Data has been collected, analyzed, and key findings are being validated. Louise will report back on this process.

ALC Update: Terry Tilleczek

While we are still number one in the province for high rates of ALC patients, several of our measures, from Integrated Discharge Planning implemented at the HUB hospitals to the Geriatric Emergency Department Nurses to the Rehab beds, designed to get mainly the frail elderly mobile again after an acute illness, are starting to have a positive effect. Currently the NE LHIN is drilling down to find out what is keeping the "long-stay" ALC patients, those who have been in hospital longer than a year, from finding a more appropriate place of care. We're assessing each one, patient by patient, to determine what are the barriers and who is a candidate to transition out of hospital and safely into another setting within the community.

When it comes to the Home First ALC patients, those who have returned home thanks to increased services provided in partnership with the NE CCAC, we are also examining the statistics of how many people have ended up back in hospital. So far we're seeing a good proportion remain at home. Jib encouraged Terry to continue to see that resources and services get to the frail elderly, who make the majority of the ALC patients.

Health Professional Advisory Committee Minutes and Update: Monique Mechefske

The majority of the vacancies are now filled on the committee, however, one more member has resigned. There is an expectation that this vacancy will be quickly filled thanks to the influx of resumes for the earlier ones. Hospices were the focus of the last meeting with a presentation by Leo Therrien, of the Sudbury Hospice. Ian commented on the tremendous amount of fundraising which must be done within a community to maintain a hospice. Currently the funding formula only allows the LHIN to fund nursing services (through the CCAC). All other aspects of operations, such as food and utilities, must be paid for through fund raising.

Local Aboriginal Health Committee Minutes and Update: Monique Mechefske

The committee is proceeding with the recommendations of the Mental Health and Addictions Framework, and is still in the process of validating the environmental scan. More work needs to be done before bringing the scan to the Board.

Community Engagement Guidelines: Cynthia Stables

These guidelines have been adopted by all the LHINs and are now posted on our website. Also released at the same time, and on our website, is a Physician Resource Guide and Tool Kit.

The objective with the guidelines is to provide consistency across the province, as well as, to track and evaluate community engagements. A 2011-2012 Community Engagement plan must be posted to our website by the end of April. All LHINs will be doing the same. Every three years our LHIN will be evaluated by an external committee on how well we have followed the guidelines and undertaken community engagements.

Danielle asked that more room be added in the "outcome" section of the forms which directors fill out concerning their Community Engagements and also if there was a way to include more than one Director on a form. Staff later completed this task.

FLS DESIGNATION FOR SUDBURY REGIONAL HOSPITAL: MONIQUE MECHEFSKE

Staff recommended that the Board approve the Sudbury Regional Hospital's application for FLS designation.

Peter noted that after much work, this designation has come to a successful conclusion.

{Motion 2010-BD091}

Moved by Danielle Belanger Corbin, seconded by Leah Welk

Be it resolved that the North East LHIN Board supports Hopital regional de Sudbury Regional Hospital for total designation of French language health services under the French Language Services Act, and recommends its approval to the Office of French Language Health Services of the Ontario Ministry of Health and Long Term Care on Monday, February 28, 2011.

(Carried)

FLS ENTITY ACCOUNTABILITY AGREEMENT: MONIQUE MECHEFSKE

All LHINS must enter into an agreement with their Entity. A deadline has been set of March 11, 2011 to get this agreement successfully signed. The French Language Health Planning Entity will enter into an agreement with both the NE LHIN and the NW LHIN, however, the NE LHIN will be the lead in working with the Entity. It will help the LHIN with French language community engagements, identify service gaps and help us focus on strategies to better deliver health services to meet the needs of Franco-Ontarians in our region. Monique plans to travel within the coming week to Kapuskasing to meet with the Co-Chairs. Danielle commended the work of the LHIN in forging this new partnership. This is a wonderful step in the right direction, she said.

{Motion 2010-BD092}

Moved by Danielle Belanger Corbin, seconded by Leah Welk

Be it resolved that the North East LHIN Board approves the funding and Accountability Agreement template to be used to enter into an agreement with the French Language Health Planning Entity – Reseaux du mieux etre francophone du Nord de l'Ontario on Monday, February 28, 2011.

(Carried)

NORTH BAY GENERAL HOSPITAL AND NORTHEAST MENTAL HEALTH CENTRE VOLUNTARY INTEGRATION: Monique Mechesfke

Peter asked whether community engagement was conducted by both health service providers throughout the North East. Monique reported that the NE LHIN had requested and received an official report on Community Engagement conducted by the hospital and NEMHC. Community engagement was carried out throughout the region and the number of participants were included in the report.

Colin had a question regarding the amount of funding each provider currently receives. The answer to this question, was reported back to the Board, after the meeting.

Another director asked about the wording of the motion, before the Board. It was explained that the legal language concerning a voluntary integration requires the Board not to "issue a decision" if they approve of the integration.

Wally congratulated the two health service providers and their boards for undertaking this voluntary cost-saving and patient-focussed integration, adding that he appreciates the effort that has gone into this merger.

{Motion 2010-BD093}

Moved by Leah Welk, seconded by Randy Kapashesit

Be it resolved that the decision of the North East LHIN, pursuant to subsection 27 of the Local Health System Integration Act, 2006 (LHSIA), is to not issue a decision on the proposed Voluntary Integration of the North Bay General Hospital and the Northeast Mental Health Centre.

(Carried)

INTEGRATION OF TRAUMA REHAB PROGRAM FROM SAULT AREA HOSPITAL TO ONTARIO MARCH OF DIMES: MARTHA AUCHINLECK

This voluntary integration recognized that there is a duplication of services that would be better coordinated by one provider, The March of Dimes. This is another positive integration for the North East LHIN and people in need of the services provided. A brief discussion ensued by Directors.

{Motion 2010-BD094}

Moved by Wally Wiwchar, seconded by Randy Kapashesit

Be it resolved that the decision of the North East LHIN, pursuant to subsection 27 of the Local Health System Integration Act, 2006 (LHSIA), is to not issue a decision on the proposed Voluntary Integration of the Sault Area's Hospital's Trauma Rehab Program to the Ontario March of Dimes.

(Carried)

M-SAA TEMPLATE: LOUISE PAQUETTE

A M-SAA kickoff event was held with our Health Service Providers (HSPs) on Feb. 3, through teleconference. The first M-SAAs were established for a two-year period, from 2009-10 to 2010-11. This second time around, we are entering into a three-year term which will begin on April 1, 2011 and finish in March of 2014. All LHINs across the province are working with this time frame.

In the absence of definitive funding planning targets, our HSPs are faced with the difficult task of completing their CAPS based on a planning assumption of 0% base adjustment for the first two years of the agreement. The third year will be marked as "to be determined" until further information on planning targets is provided by the Ministry.

In order to maximize resources, we encouraged our HSPs to look for innovative strategies for integration opportunities across the continuum of care. As such, we are including in this M-SAA, a NE LHIN specific requirement for providers to commit to engage in a district discussion that identifies integration opportunities that can be implemented in the short term (2011-12) and the long-term (within the next 3 years)

We will continue to monitor the reporting on this addition during this new MSAA period and we will implement a process to identify those providers who are noncompliant.

{Motion 2010-BD095}

Moved by Ian Cowan, seconded by Leah Welk

Be it resolved that the North East LHIN Board receive and approve the annual M-SSA template as presented on February 28, 2011.

(Carried)

DECISION MAKING FRAMEWORK POLICY: LOUISE PAQUETTE

Our LHIN has had a decision making framework since Nov. 2009. It articulated our values of listening, integrity, being proactive, seeking health and wellness equity for all, and serving our entire geographic region. All decisions were also subjected to our criteria.

Since there was variability across the system by each LHIN when it came to their Decision Making Framework, this Pan LHIN Framework and Toolkit (page 181) was developed by the LHIN Collaborative in the fall of last year to help inform priority setting and decision making throughout the province. Input was sought from the LHINs as well as the practices and experience of Regional Health Care Authorities in other Canadian Provinces.

Many of the same criteria and values in this newly developed framework such as equity, quality, and efficiency continue. Its main guiding principles are that of relevance, revision, consistency, transparency, publicity, empowerment, refinement, and enforcement. Because it is also a toolkit, it goes into great detail and depth, embracing what is called the Gibson Mitton Framework which also pulls in the ideas of the Triple Aim Approach and the Ontario Health Quality Council Attributes used by some LHINs.

This framework/toolkit has been sent to all LHIN Boards. At present, an external launch is anticipated to happen sometime in March.

Randy Kapashesit asked whether this framework also fits into the UN Rights of Indigenous People (Sept., 2007), article 19, regarding the need for informed consent when decisions are made. Monique will look into whether this clause will work with this new decision making policy.

{Motion 2010-BD096}

Moved by Wally Wiwchar, seconded by Randy Kapashesit

Be it resolved that the North East LHIN Board receive and approve the Decision Making Framework as presented on February 28, 2011.

(Carried)

ANNUAL BUSINESS PLAN DRAFT: MARTHA AUCHINLECK

In drafting the plan, staff worked from a 0% budget increase assumption. We won't know until the provincial budget is presented if any increase in funds will be coming. A brief discussion ensued on the process and when it will move from draft to a final, approved version by the Ministry. Jib asked if Directors could contribute to the plan. There is still time to make alterations, since it remains in a draft form until end of March. The Board was directed to send any questions to Lara.

{Motion 2010-BD097}

Moved by Leah Welk, and seconded by Ian Cowan

Be it resolved that the North East LHIN Board receive and approve the draft of the Annual Business Plan 2011/2012 as presented on February 28, 2011.

(Carried)

SUMMARY OF IN-YEAR REALLOCATIONS: Martha Auchinleck

The staff is continuing to review the specific Aboriginal projects of which \$226,000 has been earmarked in the reallocations. The specific providers and their proposed projects are still being assessed. Louise promised to report back when this process is completed.

Directors asked questions regarding other Health Service Providers on the list including Sudbury Regional Hospital's Memorial Site. Money has been reallocated to help with patient care given that they will need to wait longer in hospital due to the delay in the opening of St. Gabriel's long-term care home.

{Motion 2010-BD098}

Moved by Ian Cowan, seconded by Leah Welk

Be it resolved that the North East LHIN Board receive and approve the Summary of In-Year Reallocations as presented on February 28, 2011.

(Carried)

NEW BUSINESS

All members are welcome to attend an all-day session of the Governance Committee on Feb. 10, 2011.

QUESTIONS FROM PUBLIC

None

NEXT MEETING:

April 7, by teleconference.

ADJOURNMENT OF THE BOARD MEETING

{Motion 2010-BD099}

Moved by Randy Kapashesit, seconded by Leah Welk

Be it resolved that the Regular Board of Directors meeting of Monday, February 28 2011. be adjourned at 10:58 a.m.

(Carried)

Peter Vaudry
Interim Board Chair