Approved Minutes

Champlain LHIN Board

December 17, 2008 – 3:00 p.m.

Champlain LHIN – Boardroom
204-1900 City Park Drive, Ottawa

Board members in attendance: Marie Fortier (Chair), Wilmer Matthews, Michael LeMay (Vice-Chair), Robert Bourdeau, Linda Assad-Butcher, Andrew Dickson, Jo-Anne Poirier

Regrets: Robert Cushman

Staff Members: Glenn Alexander (Acting CEO), Suzanne Dionne, C. LeClerc, B. Lamontagne, Sylvie Bleau (recorder).

Guests: Simon. Davidson, Michel. Bilodeau from CHEO, George Weber from ROHCG

The meeting is called to order at 3:00PM and one minute of silence is observed.

1. One Minute of Reflection / Silence
Welcome & Introductions

2. Approval of Agenda:

There being no changes submitted, the agenda is approved as distributed.

MOVED: JA. Poirier / SECONDED: A. Dickson
ALL IN FAVOUR

CARRIED

3. Declaration of Conflict of Interest:

L. Assad Butcher declares a possible conflict of interest for any decision to be taken regarding The Ottawa Hospital.

4. Approval of Minutes (November 26, 2008)

There being no objection, the minutes November 26, 2008 are accepted as amended.

MOVED: R. Bourdeau / SECONDED: L. Assad-Butcher

ALL IN FAVOUR

CARRIED

Business Arising

None.

5. Generative Discussion

No discussion scheduled for this meeting.

6. Consent Agenda

None.

MOTION TO MOVE IN CAMERA:

THAT 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:"

☑ Matters prescribed by regulation

- To discuss Hospital Annual Planning Submission and proposed recovery plans for CHEO

and further that the following Individuals be permitted to attend:

Glenn Alexander
Suzanne Dionne
Chantale LeClerc
Carole Ouellette
Elaine Medline
Sylvie Bleau

MOVED: JA Poirier / SECONDED: R. Bourdeau
ALL IN FAVOUR

CARRIED

7. Operational Issues and Directions

7.1 Hospital Annual Planning Submission

3:40-3:48 M. Fortier invites M. Bilodeau to hear the presentation. S. Dionne presents CHEO's recovery plan. The Board previously received a verbal presentation by CHEO on November 18, 2008, but at that time the proposal was not yet complete. The proposed reductions, presented today, meet the

obligations and expectations of the Champlain LHIN. Clarification is provided that the reduction in positions will be achieved through attrition and will not result in a reduction of service.

MOTION:

Whereas the CHEO has presented a balanced recovery plan; and
Whereas the recovery plan has no impact on clinical service volumes,

RESOLVED THAT The LHIN Board appreciates the work done by the hospital and accepts the plan as presented. As a result, the hospital's obligation under Schedule B, Section 9.3 of the H-SAA agreement is considered to be fulfilled.

MOVED: A. Dickson / SECONDED: JA Poirier
ALL IN FAVOUR

CARRIED

MOTION TO MOVE IN CAMERA:

THAT 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:"

☑ Matters prescribed by regulation

- To discuss Hospital Annual Planning Submission and proposed recovery plans; and
- To receive a verbal report regarding the CCAC budget status.

and further that the following Individuals be permitted to attend:

Glenn Alexander
Suzanne Dionne
Chantale LeClerc
Carole Ouellette
Elaine Medline
Sylvie Bleau

MOVED: M. LeMay / SECONDED: R. Bourdeau
ALL IN FAVOUR

CARRIED

7.2 Community Care Access Centre

4:28-4:40 Upon returning to an open meeting, S. Dionne explains to the group the main reasons for proposing a review of the CCAC at this time: The three main reasons are: Concerns regarding a considerable surplus for the second year in a row; concerns and common issues raised by clients/caregivers/the

public/ and health service providers; and finally to prepare and help the CCAC for the upcoming challenges they will be facing, following the Ministry's announcement regarding the revamping of CCACs.

This agency plays a very important role in the LHIN and is one of the largest, most important service providers. The LHIN feels it is providing services, but not at a level of quality that is expected of them. It will need to play a stronger role in view of the Ministry's recent announcement regarding the revamping of the CCAC across the province. This new strategy will increase their responsibilities. Areas of concerns have been identified as long wait list, inconsistence of access to services in rural area, increasing duplication of services with Community Support Services and area hospitals and general loss of confidence in the delivery of services.

This decision has been taken in discussion with the CCAC. They are open to this review and will collaborate in order to position themselves to assume new responsibilities in the future. The Champlain LHIN needs the CCAC to play a key role with our aging population. It is felt it to be better to undertake this kind of review at beginning of new strategy rather than later.

The Steering Committee guiding this review will require representation from the LHIN Board. M. Fortier asked Directors to consider their involvement in this committee and express their interest to her. An official request for Board participation will be sent at a later date.

MOTION:

> *THAT* Given the recent announcement by Minister Caplan related to quality and transparency in home care, the Board of Directors of the Champlain Local Health Integration Network (LHIN) supports a collaborative review of the Champlain Community Care Access Centre (CCAC) that will position the CCAC to assume a leadership role in the LHIN's integration agenda and will foster optimal delivery of community care.

MOVED: R Bourdeau / SECONDED: W. Matthews
ALL IN FAVOUR

CARRIED

7.3 Community Annual Planning Submission Update

4:45-4:55 S. Dionne provides a verbal update on the submissions received to date and the next steps to be taken. She explained that the LHIN is taking time upfront with agencies to help them learn the CAPS process to improve submissions next year. She reports that most of them are able to maintain their service volume with the same funding. In January, staff will complete the review and start to populate the Multi Sector Accountability Agreement (M-SAA). Negotiations with 115 agencies will then follow. The LHIN will provide group educational sessions for service providers regarding the M-SAA. For agencies experiencing greater challenges, individual meetings will be offered. M. Fortier stated that the M-SAA has not been finalised yet, there are still some changes to be made early in the year.

7.4 ROHCG & CHEO Partnership Agreement for a Single & Shared Leadership for Specialized Children/Youth Mental Health Services.

3:04-3:25 B. Lamontagne presents the proposed agreement between ROHCG and CHEO for a single and shared leadership for specialized psychiatric and mental health services for children and youth. Documents were previously distributed to Board. (No slide deck presented). An earlier presentation to the Board in the fall of 2007 by S. Davidson provided a progress report regarding the creation of a more integrated system for children, youth mental health services. Today, ROHCG and CHEO notified the Champlain LHIN that they have arrived at a consensus on a new partnership agreement. The Champlain LHIN staff believes that we should allow this proposed integration to go forward given its potential benefits. It promises to improve access, coordination and efficiency. It was indicated that there may be a risk of a one-time integration cost being incurred, but unlikely to occur given the mitigation step initiated. As per the regulations, the integration notice has been posted on the Champlain LHIN Web site for a period that will end later in January 2009.

S. Davidson was invited to make a brief presentation on how both agencies came about to improve the limited resources, share leadership, research, etc. Questions were asked and clarification was provided by S. Davidson and G. Weber and M. Bilodeau. Services provided will not be any different, but should improve in providing a seamless transition between children and adult services. This single leadership may also inspire other agencies.

M. Fortier consulted the Board and there is no disagreement with the proposed integration. The LHIN does not oppose this integration.

8 Information & Committee Reports

None.

9 Remarks

None.

10. Conclusion

There being no objection the meeting concludes at 5:00 PM

MOVED: L. Assad-Butcher / SECONDED: JA Poirier
ALL IN FAVOUR

CARRIED

Marie E. Fortier Board Chair Champlain Local Health Integration Network	Robert Cushman CEO Champlain Local Health Integration Network