APPROVED Minutes

Champlain LHIN Board

December 16, 2009 – 1:00 p.m.

Chimo Hotel
1199 Joseph Cyr Street, Ottawa, Ontario

Board members in attendance: Marie Fortier (Chair), Michael LeMay, Linda Assad-Butcher, Andrew Dickson, Robert Bourdeau

Regrets: Johanne Lacombe, Michael DeGagné Jo-Anne Poirier, Wilmer Matthews

Staff members in attendance: Robert Cushman, (CEO), Chantal LeClerc, Glenn Alexander, Suzanne Dionne, Karen Patzer, Jeremy Stevenson, Elaine Medline, Carole Ouellette, Sylvie Bleau (recorder)

Guests/Delegations:

Champlain Cardiovascular Disease Prevention Network:
Andrew Pipe, Medical Director, University of Ottawa Heart Institute
Sophia Papadakis, Special Projects Leader, University of Ottawa Heart Institute

Eastern Ontario Regional Laboratory Association (EORLA):
Gino Picciano, Chair, Board of EORLA
Nick Vlacholias, Treasurer, Board of EORLA

Regional Hip & Knee Replacement Program:
Dr. John Gordon, Orthopedic Surgeon, Physician Lead
Maureen Sly-Havey, RN MSN, Acting Project Manager

1. One Minute of Reflection / Silence
Welcome & Introductions

The meeting is called to order at 1:10 p.m. and M. Fortier welcomes guests and observers and one minute of reflection is observed.

2. Approval of Agenda:

M. Fortier reminds presenters of the new rules that should enable the Board to discuss and debate, as appropriate, issues listed on the agenda:

There being no objection, the agenda is accepted as revised.

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

CARRIED

3. Declaration of Conflict of Interest:

L. Assad Butcher declares a possible conflict of interest relating to The Ottawa Hospital.

4. Approval of Minutes (November 25, 2009)

There being no objection, the minutes of November 25, 2009 are accepted as presented.

MOVED: R. Bourdeau / SECONDED: A. Dickson
ALL IN FAVOUR

CARRIED

Business Arising

- Maternal Newborn integration decision has been posted and will remain on the Champlain LHIN website until Jan 8, 2010.

5. Generative Discussion

@ 2:15 PM

Time Allotted: 30min

R. Cushman introduces & welcomes representatives from the Champlain Cardiovascular Prevention Strategy. The spokespersons are: Dr. Andrew Pipe, Chair of the Network and Sophia Papadakis, Project Lead.

2:15 – 2:45

They present to the Board the cardiovascular disease prevention strategy, a five-year plan to make the residents of Champlain the most hear healthy and stroke-free in Canada (see slide deck on posted on website). The six priorities are briefly reviewed and two are presented in more details: The Ottawa Model for Smoking Cessation and the Champlain Sodium Reduction Campaign.

6. Consent Agenda

None.

7. Operational Issues and Directions

Public & In-Camera

7.1 Accountability Agreement Update

Time Allotted: 1:15 to 1: 30

S. Dionne presents an update regarding hospitals' scenarios/plans received as per deadline of December 15, 2009. Champlain LHIN staff will review and analyse all submissions and meet with hospital representatives over the next month. A presentation will be coming to the Board with recommendations in January 2010.

Fire alarm rang for

M. Fortier comments that Champlain LHIN will need a system approach in reviewing all health

approx 10-15 min.

service providers' proposals, including community resources services, long term care, etc. Also, we will need to consider the long term effects and the impact on the health system, as well as other implications. It is agreed that Champlain LHIN staff will also follow up with hospitals to determine if they have considered some regional approaches in developing their budget. The group is reminded that the MOHLTC has not provided guidance regarding budgetary submissions. It is expected that the MOHLTC options will be announced in the spring, hopefully by March 31, 2010.

7.2 Update on Champlain LHIN eScorecard

Time Allotted: 1:30 – 1:47

L. Grenier presents a progress report on the eScorecard (slide deck will be posted on website). This tool was developed in-house to respond to one of our main strategic objectives: To develop a Champlain LHN framework and scorecard to monitor the MLAA and the IHSP priorities. It will be a web-based application tool by which the Champlain LHIN staff will report to the Board on a quarterly basis the key progress and performance of the Champlain LHIN service providers (all sectors).

M. Fortier indicates it will be helpful and timely to deal with the newly established certificate of compliance to be issued and signed by the Board Chair and CEO effective next year.

7.3 Central Intake: Diagnostic Imaging – Facilitated Integration; Transfer to Kemptville Radiology Services

Time Allotted: 1:50 - 2::02

G. Alexander presents to the Board the Challenges in Radiology in Champlain (see slide deck posted on website) and the details of the decision relating to the facilitated integration between the Kemptville District Hospital and the Queensway Carleton Hospital. The facilitated integration and the chronological developments over the last nine months are explained. The Ottawa Hospital will continue to provide services to Kemptville until April 2010. The Board is also appraised on the Central Intake for MRI and CT.

MOTION:

That the Champlain LHIN Board agrees to issue the facilitated integration decision regarding the radiology services for Kemptville District Hospital.

MOVED: L. Assad-Butcher / SECONDED: A. Dickson
ALL IN FAVOUR

Carried.

Next Steps: R. Cushman will bring the facilitated integration to the Board only if needed, following the posting of the integration on the Champlain LHIN website.

7.4 Aging at Home

Time Allotted: 4:05- 4:30

Following an in-depth education session on the progress of the Aging at Home Strategy last week, J. Stevenson presents to the Board the options for the planning/funding strategy for Year 3 in the amount of $10M. The Board will be asked to decide what option to choose for Year 3 funding allocation. J. Stevenson presents and explains the advantages of an option to maximize funding supportive housing in Year 3.
Clarification is provided that current projects being funding, that are successful and that are meeting the MOHLTC criteria/priorities, will continue to receive funding for Year 3.

MOTION:

Whereas *the 2010-11 incremental funding from Aging at Home (AAH) needs to be aligned with the four Ministry or Health & Long Term Care ED/ALC priority groupings;*

Be it resolved THAT the Champlain LHIN Board of Directors approves the Champlain LHIN 2010-2011 Aging at Home strategy, to further develop supportive housing throughout Champlain and expand Aging at Home projects that show results and fit the MOHLTC priority groupings.

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

CARRIED

Next steps: A call for proposal will be sent and proposals received will be reviewed. Summary and recommendations on these latter will be provided to the Board later in 2010.

7.5 CCAC – Recovery Plan Update

Time Allotted: 2:03 – 2:10

R. Cushman and M. Fortier provide an update on the CCAC recovery plan and the arrangement with The Ottawa Hospital.
The arrangement, which was also endorsed by The CCAC Board, the Ottawa Hospital and Champlain LHIN Boards, will ensure the CCAC maintains exclusive responsibility for the delivery of its programs and services. M. Fortier explains that the LHIN facilitated the collaborative effort because it will benefit Champlain residents who depend on these important community-based health services. The arrangement began December 15, 2009.

CCAC appointed C. Love as the interim CEO of the CCAC. His main goal will be to implement the KMPG recommendations and implement a recovery plan. All agreed that a healthy CCAC is important to the success of our health system and also in view of our budgetary pressures on hospitals.

M. Fortier reports that she met with CCAC staff and Board prior to today's Board meeting along with C. Love. She also reports that the CCAC Board fully recognizes the organizational and financial challenges. They have reached out, in person, to all CCAC staff located throughout Champlain.

It is agreed that the motions adopted in-camera at the last meeting can now be made public, since all three Boards (Champlain LHIN, The Ottawa Hospital and CCAC) are in agreement and have taken steps towards the establishment of this solution to implement the CCAC recovery plan.

MOTION adopted in-camera on November 25, 2009 :
Whereas the Champlain LHIN Board has reviewed the Champlain CCAC recovery plan;
Whereas The Champlain LHIN Board has serious reservations about both the strategy and the CCAC's ability to implement a successful recovery;

Be it resolved that the Champlain LHIN Board recommends that the CCAC Board review the recovery plan, develop and oversee appropriate implementation strategies, and monitor

progress to reach a balanced budget, all the while minimizing the negative impact on other health service providers, as well as adverse effects on health of CCAC clients.

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

CARRIED

MOTION adopted in-camera at the meeting of November 25, 2009:
That the Champlain LHIN Board agrees with the tri-partite proposal and gives R. Cushman and M. Fortier the authority to finalise and sign a detailed agreement.

MOVED: M. LeMay / SECONDED: A. Dickson
ALL IN FAVOUR

CARRIED

M. Fortier reports that action on the later motion has not yet taken place. C. Love's first task is to develop a detailed agreement for approval by the three parties. This later will be shared with the Champlain LHIN Board once signed by R. Cushman and M. Fortier.

7.6 Regional Joint Assessment Clinic

@ 2:45 PM

Time Allotted: 2:45 – 3:15

Break for media availability from 3: 15 to 3:35

MA Bowes along with Dr. J. Gordon and M. Sly-Havey provide to the Board an update on the Regional Orthopaedic Program including: the protocol for treatment of hip fracture patients, the regional hip and knew replacement program and the foot and ankle program (slide decks posted on website).

The program, aiming to reduce wait times for the two procedures, will centralize and simplify the patient referral process for family physicians. The approach employs multi-disciplinary assessment teams located at four centres – Cornwall Community Hospital, Montfort Hospital, Queensway Carleton Hospital and The Ottawa Hospital. The program accommodates patient choice of a specific surgeon, or hospital, or first available surgeon as well as language. The new referral process begins January 4, 2010, with the program fully operational on January 11, 2010. Physicians in the community will receive an information kit explaining the new system.

7.7 The Old Forge Community Resource Centre & Pinecrest Queensway Community Health Centre – Voluntary Integration

Time Allotted: 2:10 – 2:15

K. Patzer provides details on this voluntary integration between the above-mentioned health service providers. Briefing note distributed prior to the meeting. Savings from the integration of back-office administration will be redirected to support the Old Forge's seniors' day program. The Board commended the two organizations for working together to share resources and improve care for clients in the Ottawa West Community of Care.

7.8 Eastern Ontario Regional Laboratory Association (EORLA)

Time Allotted: 3:40 – 4:05

G. Picciano presents to the group an update on the Eastern Ontario Regional Laboratory Association – involving 18 hospital laboratories. He touches on overall background information, rationale for funding model and pros & cons of funding model options, recommendations, next steps and

implementation mechanism.
N. Vlacholias addresses the funding models of EORLA. He explains that the model needs to be finalised and the funding options are presented to the Board. There are two interim options that have been approved by hospital CEOs and also by the EORLA Board. The pros and cons of these options are presented.

The LHIN Legal Counsel was approached and the process suggested by the latter is being followed for option 1 (Co-Management of laboratories with 'locked-in' budgets).

G. Picciano acknowledges R. Cushman's outstanding contribution to this integration.

MOTION:

THAT the Champlain LHIN Board endorses the recommendation funding model Option 1 (Co-Management of Laboratories with 'locked-in' budgets) for 2010-11 as presented today.

MOVED: L. Assad Butcher / SECONDED: A. Dickson
ALL IN FAVOUR

Carried.

8 Information & Committee Reports

No committee report.

9 Remarks

9.1 Chair's Report

No report this month. There will be a combined December-January report presented on January 27, 2010.

9.2 CEO's Report

No report this month. There will be a combined December-January report presented on January 27, 2010.

RECESS from: 4:30 – 4:37

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**
- ☑ **Personal or public interest**

- **To approve Confidential Minutes of November 25, 2009;**

- **To discuss recovery plan of CCAC; and**
- **To provide an brief update on the HAPS submission**

And further that the following individuals be permitted to attend for these items:

Robert Cushman
Chantale LeClerc
Suzanne Dionne
Elaine Medline
Louise Grenier
Sylvie Bleau

MOVED: R. Bourdeau / SECONDED: A. Dickson
ALL IN FAVOUR

CARRIED

ATTENDANCE UPDATE: L. Assad Butcher leaves the meeting at 4:50 p.m.

END OF THE CLOSED SESSION

MOTION:

THAT the Board concludes the in-camera session and move back in a public meeting.

MOVED: M. LeMay / SECONDED: A. Dickson
ALL IN FAVOUR

CARRIED

10. Conclusion

There being no objection the meeting concludes at 5:15 p.m.

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

CARRIED

Marie Fortier
Chair
Champlain Local Health Integration Network

Robert Cushman
CEO
Champlain Local Health Integration Network