

**Toronto Central Local Health Integration Network (TC LHIN)
Board of Director's Meeting**

Wednesday November 29, 2017
4:00 p.m. to 7:00 p.m.
2nd Floor Boardroom, Toronto Central LHIN
425 Bloor Street East, Suite 201, Toronto

A G E N D A

TIME	ITEM	TOPIC	PRESENTER/ DISCUSSANT	PURPOSES/ OUTCOME REQUIRED		
				Information	Discussion	Decision
A. CONVENING THE MEETING						
4:00	1	Welcome and Call to Order	Vivek Goel			
4:01	2*	Guide to Open Meetings of the Toronto Central Local Health Integration Network 2.1 Guide to Open Meetings	Vivek Goel			
4:02	3	Approval of the Agenda	Vivek Goel			✓
4:03	4	Declaration of Conflicts	ALL			
4:04	5*	Approval of Minutes 5.1 Draft Minutes –September 27, 2017	Vivek Goel			✓
OPEN SESSION: EDUCATION						
4:05	6*	Community Support and Mental Health Services: LOFT Community Services 6.1 Briefing Note 6.2 Presentation	James Anok/ Terry McCullum/ Heather McDonald	✓		
OPEN SESSION: NEW BUSINESS						
4:20	7*	CEO Board Report 7.1 Briefing Note 7.2 CEO Board Report	Susan Fitzpatrick	✓		
4:30	8*	Corporate Snapshot 8.1 Briefing Note 8.2 Corporate Dashboard	Alvin Cheng	✓		
4:45	9*	Integration Plan 9.1 Briefing Note 9.2 Presentation	Tess Romain		✓	
5:00	10*	Digital Health Strategy Update 10.1 Briefing Note 10.2 Presentation	Alvin Cheng	✓		
5:15	11*	Long-term Care Capacity Plan 11.1 Briefing Note 11.2 Presentation	Chris Sulway/ Gayle Seddon		✓	

OPEN SESSION: COMMITTEE REPORTS						
5:30	12*	Finance and Audit Committee Report 12.1 Briefing Note 12.2 Q2 Financial Report	Felix Wu			✓
CONSENT AGENDA						
	13*	CEO and Chair Attestations 13.1 Q2 Attestations	Vivek Goel			✓
	14	Next Meeting Date: February 21, 2018	Vivek Goel			
ADJOURNMENT						

Legend

- * circulated with Agenda on Diligent Portal
- ** to be circulated at meeting
- *** to be circulated before meeting
- **** previously circulated

Distribution:

Vivek Goel, Board Chair
Carolyn Acker
Pamela Griffith-Jones
Christopher Hoffmann
Myra Libenson
Jason Madden
Yasmin Meralli
Dunbar Russel
Karen Sadlier-Brown
Felix Wu
Natasha Vandenhoven

OPEN BRIEFING NOTE
Toronto Central Local Health Integration Network (TC LHIN)
Board of Director's Meeting

Wednesday September 27, 2017
4:00 p.m. to 6:00 p.m.
Boardroom, Toronto Central LHIN
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1 – Welcome and Call to Order

3 – Approval Agenda

4 - Declaration of Conflicts

5 – Approval of Minutes

To be posted upon approval

6 – Loft Community Services Presentation

PURPOSE:

As part of the continuing education of the Board about services in the community, LOFT Community services (LOFT) was invited to provide a 20 minute presentation on the work of LOFT, its services and some of its key achievements in the recent past, especially as these relate to the strategic priorities of the TC LHIN.

BACKGROUND:

LOFT believes that health is in the community. LOFT's mission is to provide "unwavering support and hope" to people living with complex mental health, addictions, cognitive and physical health challenges. It does this through a range of community support and supportive housing programs serving youth, adults and seniors integrated within the total healthcare system.

The presentation will highlight how LOFT's work aligns with the TC LHIN Strategic Plan in terms of:

1. The integration of services (it merged the 416 Community Support for Women into LOFT),
2. Creating strategies for transitioning people (especially seniors) out of hospital ALC: (204 people transitioned out of ALC so far this fiscal year),
3. Being data and technology driven,
4. Investing in complex care provision (for all ages),
5. Being part of system leadership and
6. Championing supportive housing.

7- CEO Board Report

CEO Board Reports are intended to provide regular updates to the full Board of Directors' and the public regarding on-going matters within the Toronto Central LHIN.

This CEO Board Report discusses post transition and organizational updates pertaining to Q2 activity

8 – Corporate Snapshot

PURPOSE:

To provide a high-level introduction to the Toronto Central LHIN Corporate Snapshot. This overview will orient the Board to the data and reporting being used to manage the operational responsibilities of the LHIN. Detailed review of the data will be brought forward through the sub-committees (Finance and Audit, and Quality Committee of the Board).

BACKGROUND:

The Corporate Snapshot was developed to provide the LHIN Senior Management Team with a regular view of operational indicators to improve day-to-day management and decision making. The Corporate Snapshot incorporates key indicators from home and community care operations as well across the health system. The Snapshot is designed to provide the highlights and contextual information needed to better alert the management team to crucial issues and opportunities.

In contrast to the MLAA Scorecard and Performance Dashboard, which is retrospective and meant to guide accountability and performance on longer term health outcomes, the Corporate Snapshot is an operational management tool that enables near real-time monitoring of system operations. This would include tracking of: Emergency Department length of stay, Alternate Levels of Care (ALC), Hospital occupancy, opioids related indicators, Home and Community Care client volumes and cost, Client mix, Wait times for home and community care services, and Long Term Care Placement.

The Snapshot information can be used for the following:

- To flag areas of concern as well as emerging issues or risks that may lead to crises, for Senior Management team's awareness. This will help Senior Team to trigger mitigation reactions and mobilize hospitals and other stakeholders. Drill downs can be done on the identified risks to identify root causes.
- To monitor hospital responses to identified issues and be an objective tool the LHIN can use to mobilize resources and make funding decisions to help mitigate the issues.
- Information can also be shared with the Ministry as well as used to respond to stakeholder (e.g. media) inquiries.

This report is reflective and adaptive in order to continuously monitor what is most meaningful in support of LHIN operational decisions and activity.

DISCUSSION:

The discussion will outline the rationale and purpose of the Corporate Snapshot, the inputs that were incorporated in its development, and how it will be used going forward.

9 – Integration Plan

PURPOSE:

To provide the Board of Directors an overview of the LHIN's Integration Strategy for discussion.

BACKGROUND:

The Integration Strategy is a result of a number of activities that have outlined the importance of integration:

- On October 26, 2016, Toronto Central LHIN staff presented the "Implementing the Integration Program" which outlined a number of actions over a three year period. These actions were developed in partnership with our HSP partners and were

acknowledged as foundational steps for being able to achieve a more integrated system for patients/clients and communities. A great deal of progress has been achieved, including development and launch of an Integration Knowledge Centre.

- Beginning in Spring 2016, the LHIN launched a Local Collaborative in each of our 5 sub-regions which bring together all HSPs providing service within a sub-region. Throughout Spring 2016 to Winter 2017, the LHIN structured exercises that achieved:
 - The development of a Collaboration Agreement, outlining a shared vision, mission, and values within our sub-region planning approach.
 - The orientation to a population based planning approach. The introduction to understanding local needs was phased over 4 meetings and resulted in each sub-region identifying an initial area for quality improvement (health equity approach).
- On May 1, 2017, the Ministry of Health and Long-Term Care provided LHIN's with a Mandate Letter that outlined the LHINs' responsibility to develop Integrated Service Delivery Networks that "include primary care providers, inter-professional health care teams, hospitals, public health, mental health and addictions and home and community care to ensure a more seamless patient experience".
- The LHIN developed a Maturity Model for achieving Integrated Service Delivery Networks within each sub-region. This was presented to partners through a number of formats and venues throughout the Fall 2017 with a great deal of support.

DISCUSSION:

Throughout October and November 2017, the LHIN hosted Governance-to-Governance (G2G) sessions which were identified as part of our work plan in "Implementing the Integration Program". This feedback was incorporated the LHIN's development of an Integration Strategy to guide engagement, planning, and integration approvals aligned with the LHIN's expanded mandate outlined in the Patients First Act

The Integration Strategy considers each of these activities and aligns them within one comprehensive strategy:

1. Create Integrated Service Delivery Networks (to respond to local needs)
2. Support back-office integration (to build shared capacity)
3. Set standards for services (ensuring positive client/patient experiences and outcomes)
4. Harmonize funding for services (to create equitable funding and strengthen accountability)

10 – Digital Health Strategy Update

PURPOSE:

To provide an overview of the Toronto Central LHIN's Digital Health Strategy.

BACKGROUND:

Digital health planning has been a critical area of work in the Toronto Central LHIN. Over the past few years, substantial developments in regional implementation of ehealth, information management and technology, as well as the expanded role of the LHINs, provided an opportune time to renew the Digital Health Strategy.

The strategy reflects the key developments and evolution of digital health in the region, addresses new opportunities that have been presented and continues to focus on improving the health of residents and communities by leveraging information technology and tools to support seamless care and enhance patient experiences. Additionally, the strategy outlines the portfolio drivers and establishes the priorities in our new context. It takes into account both provincial and regional priorities, defines our view of success and outlines our approach to achieving our goals.

DISCUSSION:

The primary objective of the renewed strategy envisions a 'Connected Digital Health Ecosystem' that is economically viable and sustainable. This will ensure patients, providers and health system planners have access to tools for integrated patient care delivery and information that freely flows between all sectors of care.

The strategy provides context on the overall goals and overarching principles of the portfolio, provincial and local drivers, and the progression and key developments of digital health over time. The current state, as well as partnerships and multi-party accountability for delivery are also discussed.

Several catalyzing events set the stage for a renewed and coordinated plan around digital health, including the LHIN's strategic vision to support an integrated health system for their residents, the Minister's Mandate letter, provincial digital strategy and opportunities in digital health maturity in the region.

Four key priorities and approaches in achieving these goals were identified. Firstly, a Digital Health Advisory Council would need to be established, comprised of CIOs of health service providers, Ministry of Health and Long Term Care representation, physician representatives, patients and leading industry experts, to provide strategic guidance and advice. Secondly, partners would work collaboratively to refine the digital health plan and commit to a common vision in which collective technology is aligned. Thirdly, to deliver on the areas of focus and associated activities, a Centre of Excellence would be needed to enable closer integration between workflow and technology. Lastly, the final priority is to establish the Toronto Central LHIN as a leader and key influencer in digital health and highlight opportunities for digital excellence.

11- Long-term Care Capacity Plan

PURPOSE:

To provide a current state report on Long Term Care capacity planning within the Toronto Central LHIN and review the proposed mitigation plan to address this challenge.

BACKGROUND:

Long Term Care Bed Renewal Strategy

The Ministry of Health and Long Term Care (MOHLTC)'s Long Term Care (LTC) Bed Renewal Strategy was announced in 2007 and required all LTC homes that do not meet the Ministry design standards, to redevelop by 2025. In Toronto Central LHIN, 20 of the 36 long term care homes currently operating are identified as needing to be rebuilt or renovated to new standards.

With the results from the Ministry LTC Homes Redevelopment Survey, Toronto Central LHIN engaged the 20 long term care home operators to understand their redevelopment plans. The engagement concluded that six operators (519 beds) have challenges with redevelopment which could be resolved, and eight operators (1,270 beds) do not currently have solutions for redevelopment within Toronto Central LHIN or the City of Toronto

It is noted that the approval of license sale or transfer, and any redevelopment plans for long-term care homes falls under the purview of the Minister of Health and Long-Term Care and requires their approval.

Current Demand for LTC Beds within the Toronto Central LHIN

As of Nov 10, 2017, there are 5,225 people on the TC LHIN LTC Home waiting list.

- 20% of waitlisted clients are Toronto Central LHIN residents living in the community (including retirement homes)
- 41% of waitlisted clients are outside the Toronto Central LHIN
- 28% of waitlisted clients are waiting for culturally specific homes
- 1.5% of waitlisted clients are waiting for crisis placement

DISCUSSION:

Based on discussions with LTC operators, City of Toronto, MOHLTC, internal care teams, and system partners the Toronto Central LHIN has developed a multi-pronged mitigation plan to address these capacity pressures.

The first strategy is focused on maintaining and increasing current LTC bed capacity by leveraging existing land assets in the system to build new beds. Early estimates indicate that this approach could significantly mitigate the situation with the eight LTC operators who do not have viable redevelopment options within Toronto.

As well, the LHIN will continue to build partnerships in order to find solutions for capacity. This includes facilitating discussions with the City of Toronto and MOHLTC to explore zoning and design variances, and non-traditional partners like Toronto School Boards and Retirement Homes to identify potential space whether surplus lands or designated floors in existing homes.

The second strategy is focused on mitigating the need for LTC beds in the future. This includes identifying where current LTC demand can be met through investments in other suitable places of care. By better understanding and stratifying the population of clients waiting for LTC, there is an opportunity to support these clients in different settings. The strategy focuses on leveraging the work of the City of Toronto and TC LHIN partnership to map vulnerable seniors across the City, exploring innovative models of service delivery including culturally specific, and improving system flow through targeted investments in community and LTC.

The multifaceted approach of addressing a long-term care capacity challenge in the City aligns with and supports the aims of the broader Planning & Integration Strategy to deliver integrated health networks focused on client needs.

Expected Outcomes of these Strategies/Mitigation Plan

- Wait lists and system flow are more effectively managed, allowing people in crisis to access services more easily
- Long-Term Care Homes become more specialized to address more complex needs
- Service providers are better integrated to provide supports to seniors in the community

NEXT STEPS:

- Meeting with MOHLTC to review proposed strategy and align implementation of Ontario's Action Plan for Seniors
- Facilitated discussions with LTC Operators to explore alternate options outlined in capacity strategy
- Engage City of Toronto through System Partnership Table
- Finalize Seniors Vulnerability Mapping and convene partners to facilitate discussion for integrated service delivery within neighbourhoods/sub-regions

12- Finance and Audit Committee Report

MOTION:

Appointment of auditors for fiscal year 2017-18 - That the TC LHIN Board of Directors approve the appointment of Deloitte for the audit of fiscal year ending March 31, 2018.

PURPOSE:

Committee Reports are intended to provide regular updates to the full Board of Directors' regarding on-going matters within the oversight and/or work plan of the Board's sub-committees.

This report provides a summary of information items discussed at the November 23, 2017 Finance and Audit Committee Meeting.

DISCUSSION:

HSP Operation Transfer Payment Funding Results - The transfer payment to HSP operations for fiscal year 2017-18 is expected to be \$4.77B, which is \$139M more than planned, as a result of new Ministry initiatives announced since the beginning of the fiscal year. The year-to-date transfer payment as of 2nd Quarter (ended on Sept 30th, 2017) was \$2.4B.

Latest Estimate of Expenditures for 2017/18 – Estimated Total Expenses for 2017/18 is \$276.9M, consisting of \$23M Admin Expense and \$253.9M Home Care Expense. General and Admin Expense is 8% lower than prior year's - TC LHIN is expecting to surpass its target savings goal in Admin Expense for fiscal year 2017/18. Home Care Expense is 4% higher than prior year's due to significant client growth, higher utilization, and higher length of stay and high proportion of complex clients. However with one-time funding of \$7.8M from the Ministry and savings of \$4.3M from Right Place of Care Strategy, TC LHIN expects to balance the budget at year end. The plan to address the Home Care pressures will be discussed in the closed session.

Q2 2017-18 Discretionary Funding Allocation - In the second quarter, TC LHIN allocated \$11.8M.

Toronto Central LHIN's Agency Risk Assessment Report – TC LHIN reported risk assessment on Long Term Care Home Capacity, Impact of Population Growth, MLAA Performance and Home Care Financials.

MLAA Report - Based on the August 2017 data release, Toronto Central LHIN is meeting 5 of the 14 MLAA indicators (CCAC PSW Visits, CCAC Nursing Visits, Hip replacement Wait Time, Knee replacement Wait Time and ALC Rate).

Finance and Audit Committee 2017-18 Work plan – the Finance and Audit Committee reviewed its current fiscal year work plan.

Finance and Audit Committee received Board per Diems and Expense Claims and contract listing reports

LHIN Full Entity Reporting – TC LHIN updated the Finance and Audit Committee on the LHIN new integrated entity reporting as a result of the merger.

13 - Next Board Meeting

The next regularly scheduled Board of Directors meeting will be held on **February 21, 2017**, from 4:00 -6:00 p.m. in the Toronto Central LHIN Boardroom.