

**Board of Directors' Meeting  
Minutes  
Wednesday June 24, 2009  
1:00 – 3:30 p.m.**

**South West LHIN Office, 201 Queens Avenue, Suite 700, London**

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**Present:** Norm Gamble, Chair  
Janet McEwen, Vice Chair  
Kerry Blagrove, Secretary  
Murray Bryant, Director  
Barrie Evans, Director  
Anne Lake, Director  
Linda Stevenson, Director  
Ferne Woolcott, Director

**Staff:** Michael Barrett, CEO  
Kelly Gillis, Senior Director, Planning, Integration & Community Engagement  
Mark Brintnell, Senior Director, Performance Contracts and Accountability (A)  
Sue Davey, Corporate Coordinator

**Regrets:** John VanBastelaar, Director

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**1.0 Call to Order – Welcome and Introductions**

The Chair called the meeting to order at 1:05 p.m. There was quorum. Staff and five members of the Huron Perth Healthcare Alliance were in attendance.

**2.0 Declaration of a Conflict of Interest**

There was no conflict of interest declared.

**3.0 Approval of Agenda**

The following item was added to the agenda:

- 8.1 – Closed Session - CEO Performance Review

MOVED BY: Linda Stevenson

SECONDED BY: Janet McEwen

THAT the meeting agenda be approved as amended.

**CARRIED**

**4.0 Approval of Minutes**

**4.1 May 27, 2009 – Board of Directors**

MOVED BY: Janet McEwen

SECONDED: Kerry Blagrove

THAT the minutes of the Board of Director's meeting held on May 27, 2009 be approved as circulated.

CARRIED

**4.2 June 10, 2009 – Board Committee**

MOVED BY: Ferne Woolcott

SECONDED BY: Anne Lake

THAT the minutes of the Board Committee meeting held on June 10, 2009 be approved as circulated.

CARRIED

**5.0 Presentation**

➤ **“Huron Perth Healthcare Alliance Vision 2013”**

Norm Gamble and Michael Barrett welcomed members of the Huron Perth Healthcare Alliance (HPHA) to the meeting today. Leslie Showers, Board Chair introduced Anne Campbell, Director of Corporate Planning and Ken Haworth, Vice-President of Operations/Chief Financial Officer, as well as Board members Bill Scott and Gord Rimmer. The South West LHIN Board received a presentation from the HPHA a few months ago about their proposed strategies in a Closed Session and the Board encouraged a presentation in an Open Session. The work the HPHA has done as a multi-site hospital alliance is encouraging and aligned to the work of LHIN.

“Vision 2013” was presented to the public at the Huron Perth Healthcare Alliance Annual General Meeting last Thursday. It was well received and reports in the local media have been positive. Anne Campbell shared the presentation with the Board, outlining the goals, key change principles, critical success factors for change, process to date, key platforms of future models, key messaging and plans for upcoming community engagement activity.

- The goal is to make decisions that will positively influence their ability to continue to provide the high level of hospital-based care people have come to expect.
- Hospitals are working hard to live with their means and need to look at all opportunities to provide high quality patient care within available resources.

- HPHA is committed to meeting the health care needs of residents living within their catchment area.
- The healthcare landscape is changing and the HPHA needs to look at what and how services are delivered among the four sites.
- Engagement of physicians is key and is being conducted using a systems approach to care.
- Creating an environment appealing for human resources recruitment and retention is important.
- Plans may require minor renovations but it is too early to identify possible costs.

Congratulations were extended to HPHA on their vision for the future and a systems approach to planning, particularly in the rural areas. The Alliance and the LHIN will be embarking on community engagement over the summer so it is important for the communications to be aligned to avoid confusion within communities.

## 6.0 Matters Referred from Board Committee

### 6.1 Refresh of Ministry-LHIN Accountability Agreement (2007/10)

Mark Brintnell provided an overview of updates to the Ministry-LHIN Accountability Agreement since the Board Committee meeting on June 10<sup>th</sup>. He noted that there was a discrepancy in the initiatives funding allocation in Table 2a on Page 18 and this has been identified to the Ministry who concurred, so this will be amended before final sign-off by the South West LHIN. After discussion about cancer surgery wait time with the London Regional Cancer Program and Cancer Care Ontario, agreement was made to set the target at 70 days which brings us closer to targets set by other LHINs.

MOVED BY: Kerry Blagrove

SECONDED BY: Anne Lake

THAT:

- (i) The Accountability Agreement between the Ministry and the South West LHIN effective as of April 1, 2007 be amended as set out in the draft amending agreement, a copy of which is appended to this resolution; and
- (ii) The Chair be authorized to execute the final version of the amending agreement on behalf of the South West LHIN provided that the content of the execution copy of the amending agreement is substantially similar to that of the copy appended to this resolution.

CARRIED

Concerns were raised about MRI and CT wait time targets. CT wait times have been trending downward over the past two years. Also, additional capacity through Goderich will be coming on stream later this fiscal year. MRI wait times are a provincial challenge and the LHINs MRI Task Team set the target presented in the MLAA and is confident the target is realistic. Wait times for diagnostic testing have increased because of an increase in physician orders and the need for the establishment of a provincial protocol or guidelines is recognized. With regards to quality and sustainability indicators, an agreement could not be reached provincially on the type of indicators to include.

## 6.2 South West LHIN Annual Business Plan (2009/10)

The South West LHIN Annual Business Plan for 2009/10 was included in the agenda package and Mark Brintnell noted some minor changes that do not affect the final plan.

MOVED BY: Janet McEwen  
SECONDED BY: Ferne Woolcott

THAT the South West Local Health Integration Network Board of Directors approves the South West LHIN 2009/10 Annual Business Plan.

CARRIED

## 6.3 Ontario Diabetes Strategy

Kelly Gillis provided highlights of the written report which is a follow-up to the information shared at the Board Committee meeting held on June 10<sup>th</sup>. She reported that the Chronic Disease Prevention and Management (CDPM) Steering Committee met on Monday to provide input to the report that includes recommendations for geographic areas targeted for expansion, the proposed full-time equivalent allocation and the focus and hosts for expanded resources. Considerations for identifying host agencies include building on existing or planned infrastructure, leveraging existing partnerships, alignment with the draft CDPM service delivery model and the opportunity to support primary care where gaps exist. Kelly shared that the potential host agencies were engaged by LHIN staff to gather further input and to ensure their support of the recommendation. Additional recommendations were included in the written report and will be shared with the Ministry of Health and Long-Term Care. Kelly acknowledged the hard work of Susan Warner with this project and the development of this report and she was present at the meeting to address any questions that the Board might have.

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There was some discussion and it was noted that diabetes programs are still managed provincially but may eventually be de-centralized to the LHINs. It was noted that a lot of money flows to this program and accountability is mixed given diabetes program funding comes from a combination of provincial resources and support from hospital base budgets. Support was expressed for the focus on outreach to ethnocultural populations such as Aboriginal and Mennonite populations.

Partnerships for Health continues to work with family practices and other community partners to improve diabetes management and care across the LHIN. Kelly suggested that it would be timely for the Board to receive an update on that project at a future Board Education Session

MOVED BY: Linda Stevenson  
 SECONDED BY: Kerry Blagrove

THAT the South West LHIN Board of Directors approve the following Diabetes Strategy service expansion recommendations and direct LHIN staff to forward these recommendations to the Ministry of Health and Long-Term Care.

Area	Expanded Resources*	Population and Focus	Host Institution and Name
North	2 FTEs (1 dyad)	<ul style="list-style-type: none"> <li>• Unattached patients</li> <li>• Aboriginal population</li> <li>• People with mental health issues</li> </ul>	Grey Bruce Health Services (GBHS Diabetes Program)
Central	1 FTE (.5 dyad)	<ul style="list-style-type: none"> <li>• Outreach to rural areas</li> <li>• Unattached patients</li> <li>• Underserved areas</li> </ul>	Huron Perth Hospital Partnership (HHPH Diabetes Program)
South	1 FTE Co-ordinator  8 FTEs (4 dyads)	<ul style="list-style-type: none"> <li>• Co-ordinate all aspects of service provision in the south</li> <li>• Enhance care in underserved areas of                             <ul style="list-style-type: none"> <li>- Oxford and Norfolk (2 FTEs)</li> <li>- Middlesex (1 FTE)</li> <li>- London (5 FTE)</li> </ul> </li> <li>• All dyads will focus on developing cultural competence in service provision to ethnocultural populations such as Aboriginal and Mennonite populations</li> </ul>	Tillsonburg District Memorial Hospital  - Tillsonburg District Memorial Hospital - Middlesex Hospital Alliance - St. Joseph's Health Care

\* The professional designation of expansion resources has not been identified across the board as this needs to be flexible to accommodate local health human resources needs and limitations. 1 of the FTEs allocated to the North should be a Nurse Practitioner to enable that program to serve unattached patients.

CARRIED

## 6.4 **Complex Continuing Care (CCC) and Rehabilitation Strategic Resources Final Report**

The Complex Continuing Care (CCC) and Rehabilitation Strategic Resources Final Report was presented by Jan Walker and Barry Monaghan, consultants for the project, by teleconference at the Board Committee meeting on June 10<sup>th</sup>. No changes have been made to the report since this time and feedback has been shared with the consultants.

MOVED BY: Ferne Woolcott  
SECONDED BY: Anne Lake

THAT The South West LHIN Board of Directors receive the South West LHIN Complex Continuing Care (CCC) and Rehabilitation Strategic Resources Final Report.

CARRIED

## 7.0 **Reports**

### 7.1 **Supportive Housing Unit Allocation 2009/10**

Linda Stevenson declared a conflict of interest for this agenda item because of her involvement with the St. Thomas Elgin Housing Board. She will abstain from voting for future decision making.

Kelly Gillis provided an overview of the written report included in the agenda package. Patricia Dwyer was present at the meeting today as well. In 2006, the Ministry of Health and Long-Term Care committed \$36 million for 1,000 units over 3 years for supportive housing and transitional housing for people with problematic substance use or concurrent disorders. Patricia Dwyer has been working with members of the South West Addictions and Mental Health Coalition (SWAMHC) to provide direction and input into the allocation of the 2009-10 housing units and case managers for the South West LHIN. The review process resulted in the unanimous decision from the SWAMHC that London was the area with the greatest need and Western Ontario Therapeutic Community Hostel (WOTCH) and Addiction

Services of Thames Valley (ADSTV) were chosen to move forward this year's allocation. It was noted that the funding for case managers will flow through the LHIN while the funding for the housing units will flow directly from the Ministry. Board members congratulated Patricia for her work with bringing this group together and reaching consensus.

MOVED BY: Janet McEwen  
SECONDED BY: Ferne Woolcott

THAT the South West LHIN Board of Directors approve the recommended allocation of 16 housing units to WOTCH and the allocation of funding for 2 full-time equivalent (FTE) case workers to Addiction Services of Thames Valley (ADSTV) for fiscal year 2009/10.

CARRIED

## 8.0 Other Business

- Norm received a formal letter from the Minister to confirm stabilization of base funding increases for 2009/10.
- The South West LHIN Public Sessions schedule for Board member participation may require some changes.
- Michael Barrett, Norm Gamble and Janet McEwen met with the Mayor for the City of London yesterday and outcomes were shared.

## 8.1 Closed Session – CEO Performance Review

MOVED BY: Barrie Evans  
SECONDED BY: Janet McEwen

THAT the members move into a closed session at 2:35 p.m. pursuant to the following exception set out in ss.9 (5) of the Local Health Systems Integration Act 2006 to discuss human resources matters.

CARRIED

MOVED BY: Murray Bryant  
SECONDED BY: Kerry Blagrove

THAT the Board move out of closed session at 2:38 p.m.

CARRIED

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MOVED BY: Barrie Evans  
SECONDED BY: Ferne Woolcott

THAT comments from the Board be communicated in writing to Michael Barrett,  
Chief Executive Officer on his six month appraisal.

CARRIED

**9.0 Date and Location of Next Meeting**

- Board of Director’s Meeting – July 22, 2009  
South West LHIN Office  
201 Queens Avenue, Suite 700, London

**10.0 Adjournment**

MOVED BY:  
Kerry Blaggrave to adjourn the meeting at 2:40 p.m.

CARRIED

**APPROVED:** \_\_\_\_\_  
**NORM GAMBLE, CHAIR**  
**SOUTH WEST LHIN**

**Date:** \_\_\_\_\_

\_\_\_\_\_  
**KERRY BLAGRAVE, SECRETARY**  
**SOUTH WEST LHIN**

**Date:** \_\_\_\_\_