

**Hamilton Niagara Haldimand Brant  
Local Health Integration Network**

Minutes of the Meeting of the Audit Committee December 6, 2017

A meeting of the Audit Committee of the Board of Directors of the Hamilton Niagara Haldimand Brant (HNHB) Local Health Integration Network (LHIN) was held on December 6, 2017, at the Webster/Albion Falls meeting room, Hamilton Niagara Haldimand Brant Local Health Integration Network, 211 Pritchard Rd. Hamilton, Ontario, beginning at 12:00 p.m.

**PRESENT:**

Voting Members: Bill Thompson, Chair  
Madhuri Ramakrishnan, Member  
Dominic Ventresca, Member  
Saqib Cheema, Member

Non voting: Janine van den Heuvel, Board Chair  
Shelley Moneta, Member  
Suzanne Belanger-Fontaine, Member

**HNHB LHIN Staff**

in Attendance: Donna Cripps, Chief Executive Office  
Candice Neila, Corporate Coordinator, Recording Secretary  
Cindy Ward, VP, Resources Stewardship & CFO  
Derek Bodden, Director, Funding  
Rosalind Tarrant, VP, Health System Strategy & Integration  
Dr. Jennifer Everson, VP, Clinical  
Emily Christoffersen, VP, Commissioning, Performance & Accountability  
Linda Hunter, Director, Strategic Priorities  
Martina Rozsa, VP, Home & Community Care  
Chad DeBlock, Director, Finance

**A. Convening the Meeting**

**A.1 Call to Order**

A quorum was present.

**A.2 Approval of the Agenda**

MOVED: Saqib Cheema

SECOND: Dominic Ventresca

That the agenda of December 6, 2017, be adopted, as circulated.

**CARRIED**

**A.3 Declaration of Conflicts**

No conflicts were identified at this time.

**B. Minutes of the last meeting**

**B.1 Approval of the Minutes of October 25, 2017**

MOVED: Dominic Ventresca

SECOND: Saqib Cheema

That the minutes of October 25, 2017, be adopted, as circulated.

CARRIED

**C. Consent Agenda**

**C.1 Consent Agenda of December 6, 2017**

MOVED: Madhuri Ramakrishnan

SECOND: Dominic Ventresca

That the Audit Committee adopts the consent agenda of December 6, 2017 consisting of:

- i. Posting of Quarterly Expenses
- ii. Confirmation of Funding Received

CARRIED

**D. New/Other Business**

**D.1 HNHB LHIN Operations – Monthly Financial Update**

MOVED: Madhuri Ramakrishnan

SECOND: Saqib Cheema

That the Audit Committee recommends that the Board of Directors of the Hamilton Niagara Haldimand Brant Local Health Integration Network receive and file the September 30, 2017 financial update for LHIN operations.

CARRIED

**Key Points of Discussion:**

- VP, Resources Stewardship & CFO introduced Chad DeBlock as the new Director, Finance to the Committee.
- When we look at the net position, the 8% savings is included
- It was noted that the Patient Care Contracted out line will continue to rise, as the flu season hits. Finance will work closely with Home & Community Care (HCC) to ensure system flow and keep Alternate Level of Care (ALC) rate down.
- Personal Support Services (PSS) is showing the greatest pressure. Visiting nursing & shift nursing has gone up due to school being back in session. LHIN staff explained that the schools have a mandate to provide nursing support to those children who require it which increases this expense during the school year. There is a significant spend in the HNHB LHIN because of McMaster University Medical Centre (MUMC). This seasonality is forecasted.
- The salaries and wages line is still trending to a favourable variance.

- LHIN staff have included benefits percentage to salary in the briefing note, and will continue to report on this going forward.
- There is a reported efficiency in salary & benefits, at the request of the Ministry of Health & Long-Term Care (ministry) for administrative reduction. The savings comes from the Directors, VPs and CEO level in this LHIN.

## **D.2 Community Investment**

- The funding being presented to the Committee today is a continuation of the work that came to the Board in October.
- In response to the request for proposal, the LHIN received 11 proposals, from 13 initiatives that could provide programs in the four months remaining in fiscal 2017-18.
- The programs needed to be net new, did not require ongoing funding, or present an ongoing pressure, as well as had to align with the LHIN decision making framework.

### **D.2.i Increase Access to Addiction Services**

MOVED: Dominic Ventresca

SECOND: Madhuri Ramakrishnan

That the Audit Committee recommends that the Board of Directors of the Hamilton Niagara Haldimand Brant Local Health Integration Network approve up to \$322,432 in one-time funding in 2017-18 to the Health Service Providers listed in Appendix A to support increased access to Addiction Services.

**CARRIED**

#### **Key Points of Discussion:**

- The break-down of funding will be appended to the minutes of this meeting.
- LHIN staff advised the Committee that all Health Service Providers (HSPs) fitting the criteria for funding were invited to submit a proposal for consideration. Haldimand Norfolk was funded in October, and wrote to the LHIN to advise they are not able to provide further services within the criteria of funding.
- The funding is very specific, in that it must be used within the 4 months.
- As a LHIN, the needs of the population must be evaluated to ensure maximum benefit of this funding to support patients. This work is being carried out by the sub-region anchor tables, and is why the Value Stream Mapping (VSM) is so important. If the funding is not used, it will be returned to the Treasury Board.
- The proposals recommended focus on a harm reduction approach, increase access to addiction counselling, and evidence based training on addictions for health care workers.

#### **D.2.ii Expansion of ADAPT Services in Burlington**

MOVED: Saqib Cheema

SECOND: Madhuri Ramakrishnan

That the Audit Committee recommends that the Board of Directors of the Hamilton Niagara Haldimand Brant Local Health Integration Network approve up to \$63,333 base funding in 2017-18 annualized to \$190,000 in 2018-19 and up to \$10,000 one-time funding in 2017-18 to Joseph Brant Hospital to support the expansion of Halton Alcohol Drug and Gambling Assessment Prevention and Treatment Services in Burlington

**CARRIED**

Key Points of Discussion:

- In 2016-17 the Halton ADAPT program serviced 1000 people in Burlington, which is 30% of all ADAPT services.
- Burlington is currently reporting a wait time of 8 to 10 weeks from referral for core services. All programs are currently operating at capacity.
- The HNHB LHIN and Mississauga Halton LHIN work together. There is no geographic boundary between the 2 LHINs, the priority is to ensure people get the care they need when they need it. While the program is serviced by individuals throughout both LHINs, The funding for this specific initiative will go to Joseph Brant, which is within the HNHB LHIN.
- It was noted that ADAPT is not a HNHB LHIN HSP, and doesn't have a Service Accountability Agreement (SAA) with the LHIN. The funding will go to Joseph Brant, which does hold a SAA with the LHIN.

#### **D.2.iii Community Withdrawal Management in Shelters**

MOVED: Dominic Ventresca

SECOND: Madhuri Ramakrishnan

That the Audit Committee recommends that the Board of Directors of the Hamilton Niagara Haldimand Brant Local Health Integration Network approve:

- Up to \$130,476 in one-time funding to St. Joseph's Healthcare Hamilton including start-up costs in 2017-18 to support Community Withdrawal Management in Shelters for Women in Hamilton.

**CARRIED**

Key Points of Discussion:

- This funding will go to St. Joseph's Healthcare Hamilton.

- The purpose of this funding is to provide a program specific to women, to access Community Withdrawal Management services during the winter months from December 2017 to March 2018.
- This funding will expand services provided by Mission Services to continue counselling into the next day.
- Expanding the program to serve women will provide an alternative environment to safely sober, and avoid unnecessary trips to the Emergency Department (ED).
- This program has held the “out of the cold” program last year, without the addiction component. In April the sub-region table will review the program to see if the shelter model is meeting the needs of a community withdrawal program. This specific location is only available until March 31, 2018.

### **D.3 Health Links Funding**

MOVED: Dominic Ventresca

SECOND: Madhuri Ramakrishnan

The Audit Committee recommends that the Board of Directors of the Hamilton Niagara Haldimand Brant Local Health Integration Network approve up to \$2,098,971 in one-time funding for 2017-18; and up to \$1,839,301 in one-time funding for 2018-19 and 2019-20 to support the scale and spread of the Health Links model of care, as outlined in Appendix B.

CARRIED

#### **Key Points of Discussion:**

- The ministry has mandated each LHIN develop and implement a Health Links (HL) Scale and Spread strategy.
- March 31, 2020 is the date assigned by the ministry for the HL model of care to reach a mature state.
- LHIN staff noted that more than 88% of health links patients know who their healthcare team was, and felt listened to, and felt that their needs had been addressed.
- HL Action Tables will be established within each sub-region, and will be responsible for local implementation and deliverables.
- The model will take an integrated accountability approach between the LHIN and Health Links leading organizations with a cross sectoral approach. It is a collaborative approach which will allow everyone to work together.
- Health links is not a program, it is an approach to work cross sectorially to support patients outside a siloed approach.
- 2017-18 funding has been prorated based on business proposals submitted by lead organizations in past (that will come to an end in 18-19) for work that was already planned. 2018-19 and 19-20 will follow the new scale and spread approach.

- This model of care includes all aspects of care, including hospitals, home, primary care, etc.
- 12/14 LHINs will transition with CHRIS, and will be managed by HSSO.

**E. Meeting Adjournment**

MOVED: Saqib Cheema

SECOND: Madhuri Ramakrishnan

The Audit Committee Meeting adjourned at 1:35 p.m.

**CARRIED**

*Original signed by*

\_\_\_\_\_  
**Bill Thompson, Audit Committee Chair**

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

*Original signed by*

\_\_\_\_\_  
**Donna Cripps, Corporate Secretary**

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

**Appendix A**  
**D.2.i Increase Access to Addiction Services**

**HNHB LHIN Proposed Time-Limited Expansion of Addiction**

| <b>Health Service Provider</b>                                       | <b>Sub-Region</b> | <b>Program Name</b>                                                             | <b>Number of Individuals Served</b> | <b>One-Time Funding</b> |
|----------------------------------------------------------------------|-------------------|---------------------------------------------------------------------------------|-------------------------------------|-------------------------|
| City of Hamilton (ADGS)                                              | Hamilton          | Towards Recovery Clinic and the Ontario Addiction Treatment Centre              | 64                                  | \$14,158                |
| City of Hamilton (ADGS)                                              | Hamilton          | Improving Care for Persons with Repeated Visits to HHS ED                       | 48                                  | \$14,158                |
| Good Shepherd Non-Profit Homes                                       | Hamilton          | Mobile Opioid Response Specialists                                              | 100                                 | \$59,660                |
| Mission Services                                                     | Hamilton          | Walk-in Addiction Services                                                      | 400                                 | \$20,858                |
| St. Leonard's                                                        | Brant             | Increased Crisis Support                                                        | 140                                 | \$30,000                |
| St. Joseph's Healthcare Hamilton                                     | Hamilton          | Mobile Community Withdrawal Management                                          | 415                                 | \$135,520               |
| Hamilton Health Sciences – WLMH site Community Mental Health Program | LHIN-wide         | LHIN-wide Training for Substance Use Disorders for 70 health service providers. | NA                                  | \$48,078                |
| <b>Total One-Time</b>                                                |                   |                                                                                 | <b>1,167</b>                        | <b>\$322,432</b>        |

**Appendix B**  
***D.3 Health Links Funding***

**Health Links Funding Allocation 2017-18, 2018-19, 2019-20**

| <b>Health Service Provider</b>       | <b>Funding<br/>2017-18</b> | <b>Funding<br/>2018-19</b> | <b>Funding<br/>2019-20</b> |
|--------------------------------------|----------------------------|----------------------------|----------------------------|
| Brant Community Healthcare System    | \$289,334                  | \$250,000                  | \$250,000                  |
| Haldimand War Memorial Hospital      | \$205,334                  | \$250,000                  | \$250,000                  |
| Hamilton Health Sciences Corporation | \$1,359,969                | \$894,301                  | \$894,301                  |
| Niagara Health System                | \$202,667                  | \$320,000                  | \$320,000                  |
| Six Nations of the Grand River       | \$41,667                   | \$125,000                  | \$125,000                  |
| <b>Total</b>                         | <b>\$2,098,971</b>         | <b>\$1,839,301</b>         | <b>\$1,839,301</b>         |