

## LHINC Council Meeting June 4, 2010 Key Messages

The LHIN Collaborative (LHINC) Council held its fourth meeting on June 4, 2010. This communiqué provides an overview of the key messages stemming from that meeting.

### **Project Status**

- § A project tracking process has been developed that includes: status reports for each project (noting key milestones, activities and work group membership) and a project dashboard. These documents will be used to report on project status and identify potential project risks at future LHINC Council meetings.
- § All projects that are currently underway are proceeding according to their approved project charters. The following project updates were presented for discussion/decision by LHINC Council:
  - *Improve Access to and Coordination of Mental Health Services:* The results of a survey of current practices in the LHINs were reviewed and an update was provided on the first meeting of the Work Group that took place on May 19, 2010. The Work Group includes health service provider (HSP) and LHIN representation. As one of its next steps, the Work Group will begin to examine potential leading practices and models.
  - *CCACs' Enhanced Role:* The LHIN/CCAC Work Group had its first meeting on May 6, 2010 to discuss its mandate and work plan. Its primary goal is to define a vision and corresponding directional plan for an enhanced CCAC role within an integrated health system by January 2011. Next steps include developing and undertaking a survey of the LHINs and CCACs to determine current practices relating to an enhanced role for CCACs.
  - *M-SAA Evaluation:* The project charter on the evaluation of the 2009-11 M-SAA (Multi-Sectoral Accountability Agreement) process was discussed. The next step involves surveying affected HSPs (community support services, mental health and addictions services, community care access centres, and community health centres sectors) and LHINs on their experience with the Community Accountability Planning Submission (CAPS) process and M-SAA process. The findings will inform the 2011-13 CAPS and M-SAA processes. The survey will be undertaken in June 2010 and an analysis of the

commended findings will be compiled in July 2010.

- *Engagement of Primary Care Physicians:* The next step for this project is to obtain input from primary care physicians and other HSPs on leading practice models for engaging primary care physician in LHIN processes. Two groups will be established to achieve this. The first will be an expert panel that will include primary care physicians and LHIN representatives. It will identify preferred methods and practices. The second will be a focus group that will provide the perspectives of other HSPs and LHINs on the potential models and practices. LHINC Council members will be asked to provide nominees for these two groups.

### **Other Discussion Items:**

Other areas that were discussed include:

- § *Future Priorities for LHINC:* LHINC Council will initiate a process to identify additional project priorities that could be started during the latter part of 2010/11 and will develop a framework and process for identifying project priorities for 2011/12.
- § *Measuring LHINC's Value:* A framework will be developed to evaluate LHINC and its activities and measure their value to LHINs and HSPs.
- § *Presentation by Echo: Improving Women's Health in Ontario:* Pat Campbell, CEO of Echo provided an overview their mandate and key directions. She identified areas where Echo's mandate overlaps with LHINC's priorities, as well as opportunities for future interaction and engagement, particularly on the projects addressing mental health and addiction services and the development of indicators.

### **NEXT STEPS:**

- § For discussion at the next meeting on July 9, 2010
  - Project Updates:
    - § *Priority Setting/Decision Making project* - LHIN survey results.
    - § *Engagement of Public Health* – potential approach.
  - Additional projects that could be started during the latter part of 2010/11.
  - Priority setting framework and process for 2011/12.
  - Options for evaluating LHINC.

*The LHIN Collaborative (LHINC) is an advisory structure formed to work at a provincial level to strengthen relationships among health service providers (HSPs), their Associations and the LHINs collectively, and support system alignment. LHINC provides a system structure to engage HSPs on system-wide health issues. LHINC is led by a Council and supported by a Secretariat.*