

**Central East Local Health Integration Network
Chair's Report
May 19th, 2009**

The Board Retreat:

Our annual retreat, this year held in Cobourg, was very helpful in my view from a number of perspectives. Even after four years we are still developing our knowledge base not only of the dynamics and relationships within the health system but also of how we, as Directors of the LHIN, understand and think about the issues before us.

As usual the Retreat provided us the opportunity to reflect on our progress and accomplishments or lack thereof. Our focus on our strategic directions and health system priorities produced an important reaffirmation of their continuing validity. We agreed that we are still on track. This is important to our organization as we move into the review and refresh of the IHSP this summer and fall.

Very obvious to all of us is a commitment in improved means of measurement and analysis so that we can be more confident that investments, or integrations, will make a positive difference. A scorecard linked to the strategic directions and more specific related goals was discussed as a tool towards assessing Board performance too. Although not discussed in any detail the triple aim framework may be helpful in establishing metrics to measure and guide our progress.

Among other highlights the Board expressed the need to develop a work plan for itself. We also differentiated the IHSP from a LHIN strategic plan and agreed that the latter should be addressed and put in place. We also need to build our relationships with the Boards of the HSP through the Board-to-Board collaboratives. A delegation of authority policy was referenced. More 'generative' discussion should become a part of our business process. And, we should ensure that that we have good business structures in place.

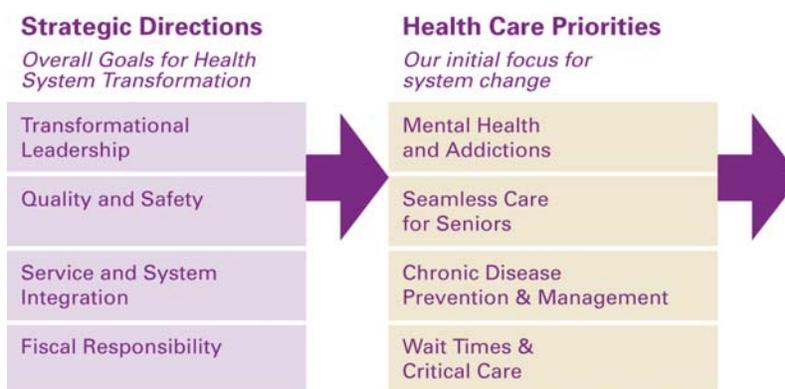
All in all, quite a productive twenty-four hours, ably facilitated by Brad and Linda. Thanks to all of you and to the senior staff for bringing your total energy and diligence to the exercise. The process of the café was very helpful but the dialogue ultimately depended on our own contribution and participation. More work follows!

Our Strategic Directions and Health Care Priorities:

Refreshing Our Strategic Direction

A key responsibility of the board in executing its strategic leadership responsibilities is to regularly review and where appropriate, refresh the organization’s strategic direction, priorities and plan.

At the Retreat the Board was reminded of the LHIN’s current Strategy Map; Strategic Directions and Health Care Priorities.



The Board reaffirmed the Directions but expects that wait times and critical care may be modified to include Emergency Care and ALC.

The Minister’s Visit to Durham Region:

The LHIN was pleased to welcome the Minister, David Caplan, to Durham Region on May 4th. Organized in conjunction with his Office he spoke to the Ajax-Pickering Board of Trade over lunch, opened the new MRI at Lakeridge Oshawa, met with the Family Health Team in Pickering, and toured the building site of the Ajax-Pickering campus of Rouge Valley Health System. Finally, we hosted a dinner for a small group of municipal leaders, MPPs, and health providers. The Minister was reminded of his commitment to meet with our Board at an early opportunity. The funding pressure faced by Lakeridge was also discussed at the meeting.

CASSA:

An organization known as CASSA (Council of Agencies Serving South Asians) had contacted me, and I met with the Executive Director, Neethan Shan last week. CASSA is an umbrella organization that supports and advocates on behalf of existing as well as emerging South Asian agencies, groups, and communities in order to address their diverse needs, including health care. He briefly explained the purpose and goals of CASSA in terms of their interagency coordination (over ninety agencies) and is reaching out to LHINs in the GTA at this time. What struck me in our conversation was how nicely this organization's goals around outreach, connections to media, etc. coincided with our LHIN work and, specifically, our project on Culture, Diversity and Equity. Our project coordinator will follow up with Mr. Shan.

Whitby Municipal Council meeting:

Municipal councils have been generally interested in our work with Clinical Service Planning and the concept of one acute care network. Some have had specific issue interests, such as the Haliburton County Council. Considerable interest has come from Durham Region, including Ajax Council and Whitby Municipal Council where we presented an overview of the CSP on May 11th. Whitby expressed concern about the delay in re-opening the Whitby site of Lakeridge. We acknowledged that we had hoped and expected an announcement of Ministry capital support by now, and reviewed our efforts towards this end including our recognition of how the displacement of patients at the Whitby site impacts the delivery of care and adds to the overall cost picture for Lakeridge. In general, municipal councils appeared to be supportive of the CSP.

Respectfully submitted,

Foster Loucks, Chair