

**Central East Local Health Integration Network  
Chair's Report  
June 16th, 2009**

**E-health:**

The development of an electronic health record and other digital-based strategies has been recognized in Central East as a very important enabler for building our vision of a transformed health system both locally and across the Province. Recently at our annual symposium we listened enthusiastically as Dr. Hudson outlined the early but ambitious goals of the new agency. Over the past couple of months our Board has also been updated by our e-health lead, Lewis Hooper, on progress and challenge here in Central East. So, I have watched in dismay as events involving E-health Ontario have unfolded in the last two weeks. It leaves me troubled that we risk not only months of delay at best but also that we place much of the momentum, credibility and support for the changes needed in jeopardy. The nay-sayers and cynics have been given an opening. Surely in Central East we must remain diligent and steadfastly behind the goals articulated by E-health Ontario even as they reorganize and press forward towards the creation of a fundamental platform in a modern health system.

**Board Evaluation Survey:**

By now, all of you have had the opportunity to complete the various components of the KPMG-generated evaluation survey. Many thanks for participating in the process. Quite a number of the questions, particularly in the Board governance section, raised matters of best practice that, as Ron Francis has pointed out, deserve further attention on our part. Indeed, Joseline Sikorski was advocating at our retreat that part of our work plan this year include an assessment of governance gaps and the resulting development of processes and policy to address them. So, it is my hope and expectation that we make good use of the evaluation report which I expect may be available to us fairly quickly, maybe by the end of the month.

**Our Board Work Plan:**

Our follow-up session with the tng facilitators has helped to focus our work plan for this year based on our retreat discussion and direction. We spoke of monitoring, measuring and ensuring accountability as well as of assuring organizational sustainability. We focused on building the Board to Board strategy, on improving internal Board communication, and on reviewing good governance practices. Brad and Linda will prepare a work plan outline that will provide a summary of initiatives and possible timelines. This should be available for circulation by the time of our Board meeting and ready for further use at our next educational session.

**The Skills Matrix:**

The Board will recall that the Effectiveness Review recommended that a standardized provincial skills matrix be developed. This has now been received and will become part of our nominations process. The actual skills listed are remarkably similar to the list that we had compiled. So much so that our present process to recruit a new Director should be acceptable to the Public Appointments Office. On the other hand, some questions arise with respect to the appointment process as it appears to limit the role of the Board in making recommendations to the Minister. I have raised this matter with other Chairs and with our legal counsel since it appears to contravene some of the wording in the Regulation. The Community Nominations Committee will be reviewing the Matrix and related documents.

**Hospital Planning in Durham Region:**

Recognizing the population growth in Durham region and the aging hospital infrastructure, notwithstanding important capital investments particularly at the Oshawa site of Lakeridge, a preliminary discussion was held recently with Roger Anderson and the Chair of the Health and Social Services Committee. The purpose of the meeting was to explore mutual interest in working together both with the region and with the municipal partners of Durham in addressing a plan for hospital expansion. The meeting was well received and it was agreed to put together a possible planning framework and to define next steps in the first instance with key staff at the Region's office.

**Change Management:**

Over the months I have become more concerned about change management. In part, this is a response to the Clinical Services Plan and the need to keep moving forward with the direction and recommendations contained in it. I would encourage everyone to re-read Chapter 5, the section on Change Management. As it states, each of the proposed recommendations will require a detailed change management plan. Moreover, the serious financial challenges faced by some of our Health Service Providers, particularly Lakeridge Health and Peterborough Regional Health Centre, may lead to decisions that will need to be carefully supported and communicated. The art or science, I am not sure which applies, of the discipline and process of managing change will be important. Perhaps we could benefit sooner than later from a dedicated session by someone with expertise in this field.

**Accountability Consensus Conference:**

A meeting was held on June 4<sup>th</sup> with leaders of the LHINs to discuss and reach a level of consensus on approaches to moving the health system transformation to the next level through the accountability agreement process. Dr. Raisa Deber, a professor at the Department of Health Policy, Management, and Evaluation at the University of Toronto, addressed a group of about forty pointing out that accountability can be exercised in many ways beyond the agreement mechanism. The ends relate to access, efficiency and care, and accountability is a means to these ends and a formal agreement is an accessory to the principle. There was considerable discussion and criticism of the current agreement, particularly a singular focus on specific procedures and recurrent refreshes with respect to funding.

The agreement was viewed as disconnected from our work on integration with no evident alignment with the basics of LHSIA. Questions were raised around how to make an AA more system-focussed and measurable. How can it be aligned to the IHSP? The outcome of the discussion will be used to provide guidance for the AA Development Team.

Respectfully submitted,

Foster Loucks, Chair