

Lakeridge Health Corporation

- Lakeridge Health Corporation is required to balance its budget
- To achieve a balanced budget, LHC has initiated major operational changes to minimize service reductions.
- Where service changes are required, the hospital has submitted Voluntary Integration Proposals to the CE LHIN for its consideration.

- Notice of Mental Health and Addictions Voluntary Integration (October 2) to reduce services to “funded levels.”

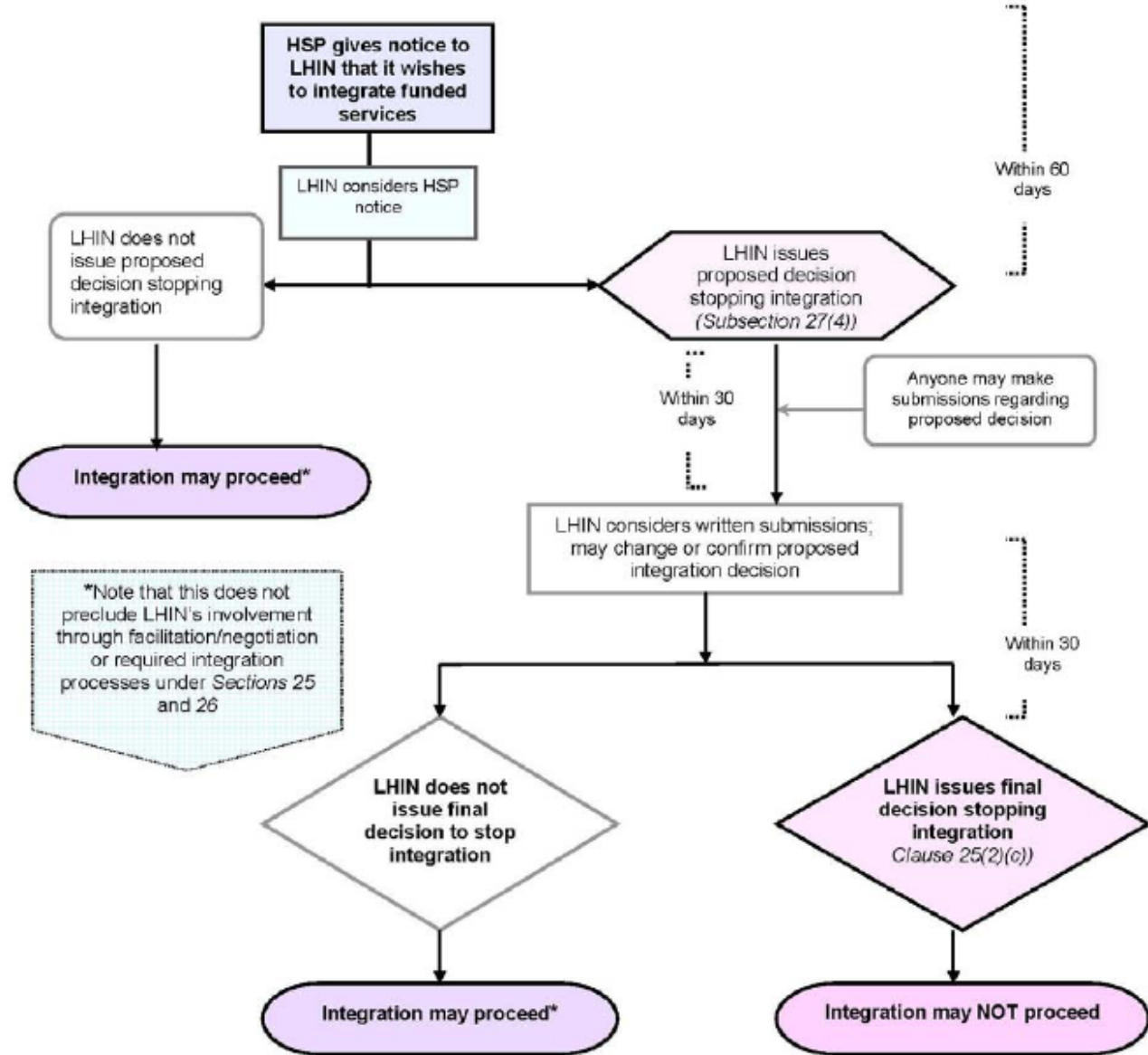
Legislative Context

- The Local Health Services Integration Act, 2006 (LHSIA) provides the legal framework for the LHINs.
- LHSIA (S.24) provides that each LHIN and each HSP shall separately and in conjunction with each other identify opportunities to integrate the services of the local health system to provide appropriate, co-ordinated, effective and efficient services.
- The LHSIA defines “integrate” to include:
 - Coordinating services/interactions between different persons and entities.
 - Partnering with others in providing services or conducting operations.
 - Transferring, merging or amalgamating services, operations, or entities.
 - Starting or ceasing to provide services.
 - Ceasing to operate, dissolving or winding-up operations.

Legislative Context

Integration Type	Description
Voluntary Integration <i>LHSIA S.24 & 27</i>	HSPs at their own initiative, plan to integrate services funded by the LHIN.
Facilitated and Negotiated Integration <i>LHSIA S.25</i>	The LHIN and/or HSPs explore appropriate integration strategies and the LHIN facilitates or negotiates integration with the HSPs.
Required Integration <i>LHSIA S.26</i>	The LHIN orders HSPs to integrate services.
Funding <i>LHSIA S.19</i>	The LHIN uses its funding authority to promote integration of services with/between HSPs.

Process for Voluntary Integration



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LHC Mental Health and Addictions Voluntary Integration

Program	Targeted Reductions
Child and Adolescent Services	\$600,000
Mental Health Crisis Services	\$520,000
Pinewood Addictions Services	\$600,000
Outpatient Community Treatment	\$1,000,000

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Affected Services

- **Children's Mental Health**
 - Ambulatory Care Hospital Program
 - Urgent Care Services
 - outpatient treatment services
- **Mental Health Crisis Services**
 - Crisis Intervention
- **Addictions Services (Outpatient and Pinewood Addictions)**
 - Destiny Manor
 - Community Clinical Management
 - Community Intense Case Management
 - Addictions Case Management
 - PC Mental Health Community Disorders
 - Early Intervention Psychosis
 - Upfront Justice Project
 - Crisis Walk-In
 - Community Treatment
 - Community Withdrawal Management
 - Addictions Assessment
 - Residential Withdrawal Management

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Considerations

- Voted Mental Health and Addictions funding is protected and cannot be reduced
- Some of these programs are protected and cannot be altered in attempts to manage services within the overall Vote funding
- Voted Mental Health and Addictions should not be supplemented by Hospital Vote Funding. This is the LHC case.
- Mental Health and Addictions is a priority of both the Central East LHIN and the Ministry of Health and Long-Term Care
- Integration Decisions must be consistent with the LHIN Integrated Health Service Plan.

Review of Voluntary Integration

- Compliance with CE LHIN requirements for Voluntary Integration
- Community Engagement / Awareness
- Summary of Proposed Changes and Impact Assessment
- Alignment to the Central East LHIN Strategic Directions
- Impact on Strategic Aims of 2010-2013 Integrated Health Service Plan
- Financial Service Impacts
- Decision Making Framework - Criteria

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Decision Making Framework

- **Alignment and Accountability**
- **Population Health**
 - Focus on Population Health
 - Equity
- **Patient Experience**
 - Access
 - Effective
 - Safe
 - Person Centred
 - Integrated
- **Value for Money**
 - Efficiency
 - Sustainability

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