

**Local Health Integration Network/Health
Service Provider Governance Resource and
Toolkit for Voluntary Integration
Initiatives:
An Overview**

**To view the full Resource and Toolkit on-line, please go to:
www.centraalhinc.on.ca/page.aspx?id=3860**

INTRODUCTION: WHAT IS THE TOOLKIT?

THE TOOLKIT PROVIDES:

- **A description of LHIN expectations for voluntary integration proposals**
- **Support to health service provider Boards in:**
 - **understanding their roles and responsibilities**
 - **providing leadership to their organizations**
 - **developing strategies to work with one another and with LHIN Boards on voluntary integration initiatives**
- **Tools for health service provider boards in developing voluntary integration proposals**

INTRODUCTION: WHY THIS TOOLKIT WAS DEVELOPED

Legislation outlines requirements and options for integration of the system including:

- LHIN-directed integrations
- LHIN-facilitated integrations
- Integration by funding
- Voluntary integration proposals

PLUS

Early reaction from health service provider board representatives:

- What does the LHIN expect of HSP Boards for voluntary integration proposals?
- Are there governance-level tools the LHIN can provide to help develop integration proposals?

= THE NEED FOR THIS TOOLKIT

INTRODUCTION: THE TOOLKIT'S DEVELOPERS

PROJECT STEERING COMMITTEE:

- **Board Chairs/Vice Chairs of the Central, Central East, Central West, Erie-St. Clair and South East LHINs**
- **Chair and three health service provider Board representatives of the Ontario Health Providers Alliance**
- **Board member of the Ontario Association of Community Care Access Centres**
- **representative of the LHIN Liaison Branch, Ministry of Health and Long-Term Care**

ASSISTED BY A CONSULTING TEAM:

- **Maureen Quigley (Maureen Quigley and Associates)**
- **Graham Scott (Graham Scott Strategies Inc.)**
- **Lydia Wakulowsky (Health Law Group, McMillan LLP)**

INTRODUCTION: THE CONTENTS OF THE TOOLKIT

Part 1:

Relationship between LHIN and health service provider Boards in voluntary integration

- Generated by the five participating LHINs, based on existing examples and practices -- so far

Part 2:

Health service provider Board leadership, supports & tools

- Generated by the project consulting team to answer two questions:
 1. What is a health service provider board's accountability for voluntary integration initiatives?
 2. When should a health service provider board get involved in a voluntary integration initiative?

CONTENTS OF PART 1 OF THE TOOLKIT

Relationship between LHIN and health service provider Boards in voluntary integration:

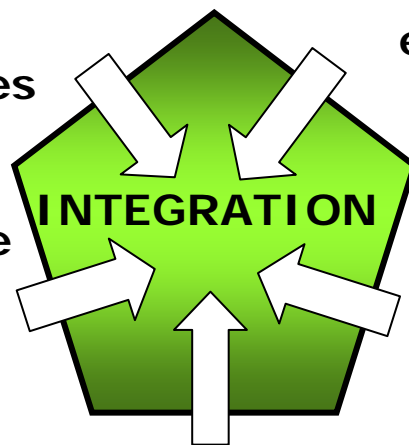
- **Section 1: the Act's requirements for health service providers re: voluntary integration**
- **Section 2: LHIN & health service provider Board oversight of planning, development, approval, implementation & follow-up assessment of voluntary integration**
- **Section 3: examples of LHIN decision-making processes & evaluation criteria for voluntary integration initiatives**
- **Section 4: examples of LHIN expectations concerning community engagement**
- **Section 5: examples of LHIN/health service provider governance relationships.**

PART 1: "INTEGRATE" AND "INTEGRATION" AS DEFINED IN THE *LOCAL HEALTH SYSTEM INTEGRATION ACT, 2006*

1. to co-ordinate services and interactions between different persons and entities

2. to partner with another person or entity in providing or operating services

5. to cease to operate or to dissolve or wind up the operation of a person or entity

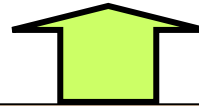


3. to transfer, merge or amalgamate services, operations, persons or entities

4. to start or cease providing services

PART 1: ROUTES TO INTEGRATION

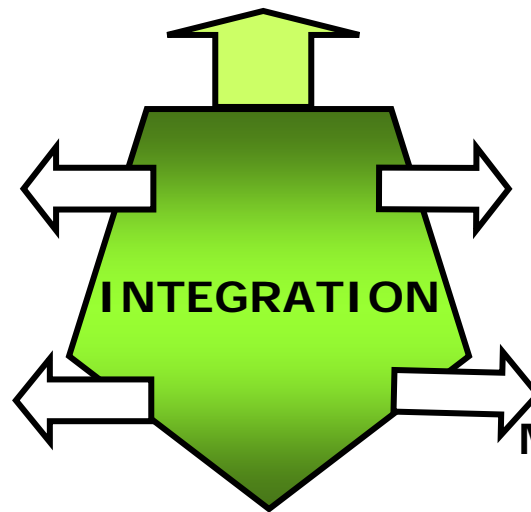
THIS IS THE FORM OF INTEGRATION ADDRESSED BY THE TOOLKIT.



be self initiated by a health service provider under sections 24 and 27 of the Act (“voluntary integration initiatives”)

be facilitated and negotiated by a LHIN under section 25 of the Act

be required by a LHIN under section 26 of the Act



result from changes in funding under section 19 of the Act

be ordered by the Minister under section 28 of the Act

PART 1: EXPECTATIONS OF LHIN BOARDS IN VOLUNTARY INTEGRATION INITIATIVES

- **produce/disseminate an integrated health service plan (IHSP) in broad consultation with the community**
- **enable and leverage integration through LHIN planning, coordinating and funding roles**
- **ensure the LHIN focuses on productive effective integration initiatives (as opposed to creating administrative barriers)**
- **ensure voluntary integration initiatives are implemented, monitored and refined to achieve benefits and outcomes**
- **amend LHIN-health service provider service accountability agreements to reflect voluntary integration initiatives and responsibilities**
- **develop/disseminate a policy to indicate consequences of non-participation or lack of implementation of voluntary integration initiatives (e.g., funding reallocations).**

PART 1: EXPECTATIONS OF HEALTH SERVICE PROVIDER BOARDS IN VOLUNTARY INTEGRATION INITIATIVES

- **ensure proposed voluntary integration initiatives are approved by the Board and submitted to the LHIN**
- **ensure consultation in collaboration with the LHIN and the community for voluntary integration initiatives**
- **ensure that staff develop proposals for voluntary integration initiatives consistent with the IHSP and with LHIN processes**
- **join with the LHIN to amend the service accountability agreement to reflect voluntary integration initiatives**
- **monitor, evaluate and amend voluntary integration initiatives as required to achieve proposed benefits and outcomes.**

PART 1: GOVERNANCE OVERSIGHT QUESTIONS A BOARD SHOULD ASK ITS MANAGEMENT LEADERSHIP ON A REGULAR BASIS

- 1. Are there proposed changes to our programs and services that would constitute integration under the Act?**
- 2. What programs, services or actions have been selected for implementation of the integrated health service plan in collaboration with our partners (including the LHIN, other health service providers and other persons and entities) and the community we serve?**
- 3. What results have been achieved to meet our responsibilities for integration as described in the Act and our service accountability agreement with the LHIN?**

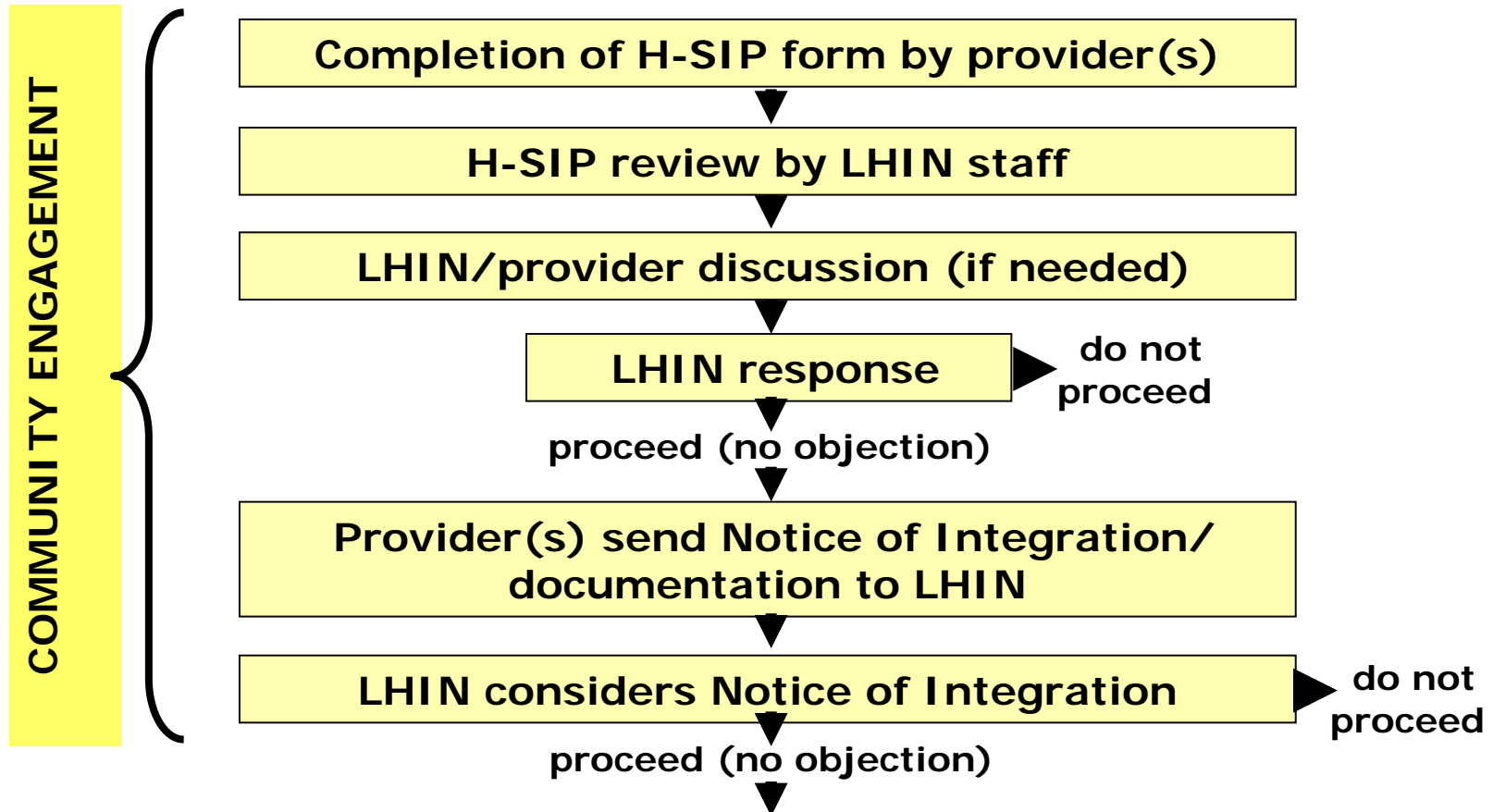
PART 1: H-SIP: A COMMON TOOL

In 2007, LHIN CEOs developed a common tool, the Health Service Improvement Pre-proposal (“H-SIP”) for identification of health service improvement initiatives (including integration) by health service providers.

The H-SIP helps determine the extent to which a proposed integration includes or results in:

- 1. improved access and quality of care**
- 2. coordinated healthcare**
- 3. improved navigation through the care continuum**
- 4. effective and efficient service delivery**
- 5. alignment with the integrated health service plan**
- 6. a consideration of the public interest.**

PART 1: GETTING STARTED ON VOLUNTARY INTEGRATION



**INTEGRATION IS PLANNED AND IMPLEMENTED AS PER THE ACT
(e.g., via service accountability agreements or integration decisions)**

PART 1: TWO CONTEXTS FOR COMMUNITY ENGAGEMENT



Section 16(1) of the Act states that "a local health integration network shall engage the community of diverse persons and entities involved with the local health system about that system on an ongoing basis, including about the integrated health services plan and while setting priorities."

Section 16(6) of the Act requires health service providers to "engage the community of diverse persons and entities in the area where it provides health services when developing plans and setting priorities for the delivery of health services."

PART 1: SOME ADVICE ON COMMUNITY ENGAGEMENT

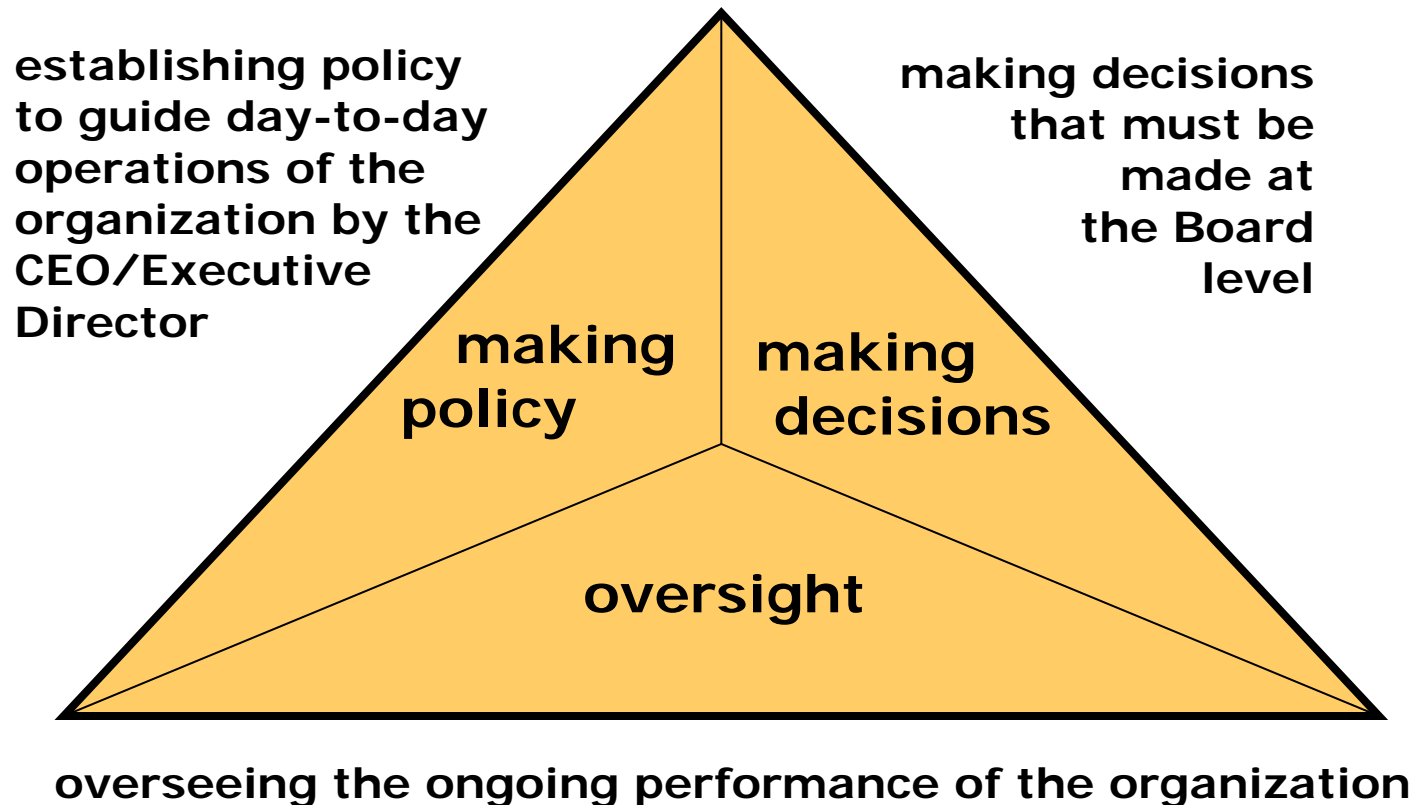
- Each LHIN has its own framework for community engagement. Please consult with your LHIN when planning your own community engagement activities.
- Some LHINs require evidence of community engagement when a provider submits an H-SIP and when it submits a Notice of Integration – so please engage your community:
 - *early*
 - *consistently*
 - *thoroughly.*

CONTENTS OF PART 2 OF THE TOOLKIT

Health Service Provider Board Leadership

- **Section 1: health service provider board accountability for voluntary integration initiatives**
- **Section 2: health service provider board involvement in a voluntary integration initiative**
- **Section 3: key success factors for board collaboration in voluntary integration initiatives**
- **Section 4: possible integration mechanisms**
- **Section 5: sample partnering agreement between health service providers on voluntary integration initiatives**
- **Section 6: measuring the success of a voluntary integration initiative**

PART 2: A HEALTH SERVICE PROVIDER BOARD HAS THREE ESSENTIAL ROLES



PART 2: CHECKLISTS, TIP LISTS AND TOOLS

1. Sample board policy to support voluntary integration (p.33)
2. Checklist for board accountability for voluntary integration (p. 34)
3. Checklist for board review of strategic plan alignment with LHIN IHSP and potential integration opportunities (p.35)
4. Factors that could influence board-to-board involvement (p. 40)
5. Checklist for board review of a voluntary integration initiative (p. 43)
6. Sample terms of reference for a Joint Board Task Force (p. 44)
7. Seven challenges to successful integration (p. 45)
8. Nine success factors for board collaboration (p.49)
9. Tips for facilitating successful meetings (p. 50)
10. Sample guidelines for working together on a joint task force (p. 51)
11. Sample partnering agreement (pp. 57-62)
12. Questions to ask when developing a voluntary integration initiative, to ensure a performance measurement plan (p. 64)

PART 2: A FIRST STEP IN IDENTIFYING INTEGRATION OPPORTUNITIES

Under the Act, each health service provider must identify opportunities for integration. As a first step, each Board should establish a Board policy* that:

- outlines the Board's commitment to working with the LHIN, other health service providers and the community to integrate services**
- defines the Board's role in policy-making, decision-making and oversight of voluntary integration initiatives**
- identifies the extent of authority for voluntary integration initiatives delegated to the CEO/ Executive Director.**

*** A sample board policy is found on page 33 of the Toolkit**

PART 2: WHO GETS INVOLVED?

Most voluntary integration initiatives will be identified, developed and implemented at the operational level, involving:

- **management teams**
- **direct service providers**
- **planning staff.**

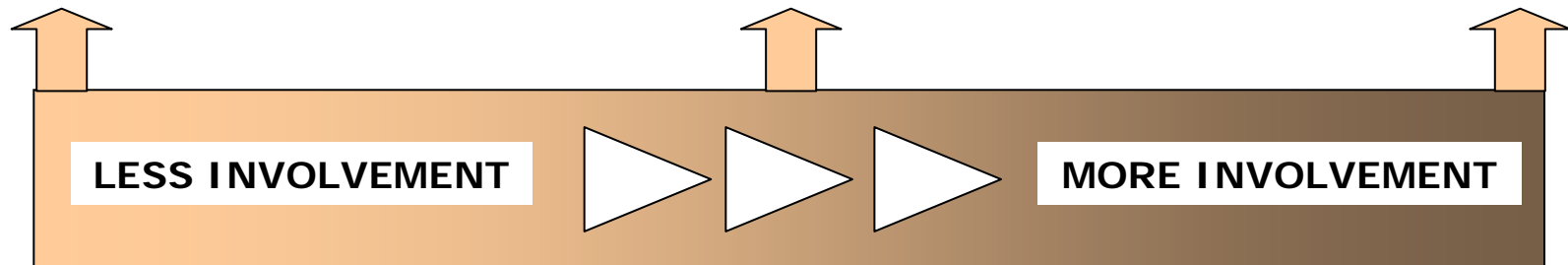
But some initiatives require collaboration and direct interaction between participating providers at the Board level, supported by their operational teams.

PART 2: A CONTINUUM OF BOARD INVOLVEMENT IN VOLUNTARY INTEGRATION INITIATIVES

Voluntary initiatives initiated by management should be approved by participating Boards before submission of a Notice of Integration to the LHIN.

Boards should be fully involved in voluntary integration initiatives that affect the organization's basic mission.

Board to Board involvement in identifying, developing & implementing an initiative is appropriate when integration is complex, difficult or significant.



PART 2: THE SHARED RESPONSIBILITY OF BOARDS

Health service provider Boards share a responsibility for satisfying themselves of the feasibility and appropriateness of the proposed integration.

Each Board's decision to approve the integration, and the oversight of its implementation, requires due diligence.

Challenges must be identified and plans put in place to address the challenges.

In approving a voluntary integration initiative, Boards should be sure that challenges are addressed in the integration plan.

PART 2: POSSIBLE INTEGRATION MECHANISMS: A LEGAL AND RISK MANAGEMENT CONTEXT

Each mechanism involves legal and risk management considerations and processes that should be discussed with your legal counsel and other appropriate advisors.

Reference must be made to human resources issues such as obligations, restrictions and notice requirements arising from collective agreements and legislation such as the *Labour Relations Act*.

PART 2: THE RANGE OF POSSIBLE INTEGRATION MECHANISMS

- **Coordinating Services and Interactions**
- **Partnering with Others to Provide Services**
 - *Advisory Committee Model*
 - *Joint Venture/Partnering Model*
 - *Shared Services Corporate Governance Model*
- **Transfer, Merger or Amalgamation of Services, Operations or Entities**
- **Starting or Ceasing to Provide a Service**
- **Cease to Operate**

PART 2: MEASURING SUCCESS: GOALS AND INDICATORS

A successful voluntary integration initiative:

- must be guided by key success factors for collaboration
- must be monitored to ensure its goals are met and that adjustments are made when goals are not fully realized.

Goals form the basis for the development of key performance indicators.

Key performance indicators are monitored on completion of the integration.

OTHER AVAILABLE RESOURCES

Starting on page 67, the Toolkit provides extensive additional resources and material.

As well, appendices to the toolkit, accessible at <http://www.centralhin.on.ca/page.aspx?id=4204>, provide valuable resources.