

THE REGIONAL MUNICIPALITY OF PEEL

HEALTH SYSTEM INTEGRATION COMMITTEE

MINUTES

HSIC - 2/2019

The Region of Peel Health System Integration Committee met on October 17, 2019 at 1:03 p.m., in the Regional Council Chambers, 5th Floor, Regional Administrative Headquarters 10 Peel Centre Drive, Suite A, Brampton, ON.

Members Present: J. Downey; C. Fonseca; A. Groves; N. lannicca; C. Parrish;

P. Saito; P. Vicente

Members Absent: Nil

Advisory Members Present: B. Carr, President and CEO, William Osler Health System;

K. Farrow on behalf of M. DiEmanuele, President and CEO, Trillium Health Partners; S. McLeod, CEO, Central West

LHIN

Advisory Members Absent: S. Smith, CEO, Mississauga Halton LHIN

Also Present: K. Ferrari, Executive Director, Clinical Services, William

Osler Health System; N. Polsinelli, Interim Chief Administrative Officer; M. Schiller, Acting Commissioner of Corporate Services; S. VanOfwegen, Commissioner of Finance and Chief Financial Officer; S. Baird, Commissioner of Digital and Information Services; A. Farr, Acting Commissioner of Public Works; J. Sheehy, Commissioner of Human Services; P. O'Connor, Regional Solicitor; Dr. J. Hopkins, Medical Officer of Health; K. Lockyer, Regional Clerk and Director of Legal Services; H. West, Committee Clerk; A. Dhindsa, Legislative Assistant

S. MacGregor, Legislative Assistant

Chaired by Councillor Fonseca.

1. DECLARATIONS OF CONFLICTS OF INTEREST - Nil

^{*} See text for arrivals

See text for departures

2. APPROVAL OF AGENDA

RECOMMENDATION HSIC-5-2019:

That the agenda for the October 17, 2019 Health System Integration Committee meeting be amended to include a delegation providing status updates of local Ontario Health Teams, to be dealt with under Delegations – Item 3.1;

And further, that the agenda for the October 17, 2019 Health System Integration Committee meeting be approved, as amended.

Items 4.1 and 4.2 were dealt with.

4.1 Update on Health System Transformation and Regional Health Advocacy Priorities

Presentation by Brian Laundry, Director, Strategic Policy and Performance, Health Services and Donna Kern, Director, Senior Services Development, Health Services

Received

Brian Laundry, Director, Strategic Policy and Performance and Donna Kern, Director, Seniors Services Development, Health Services, provided an overview of recent developments in Ontario's health system transformation, including key implications for Regional health advocacy and the impact on the broader local health system. They also provided an update on the progress of local Ontario Health Teams (OHTs) and the Region of Peel's role within these developing teams.

Brian Laundry highlighted recent milestones with respect to health system transformation including the separation of Health and Long Term Care into separate ministries and the creation of the Associate Ministry for Mental Health and Addictions under the Ministry of Health; and, key announcements related to public health and paramedic services modernization and funding.

Donna Kern stated that there are three local and separate OHT applications in Peel which were supported by broad based groups of community partners including the William Osler Health System, Trillium Health Partners and the Headwaters Health Care Centre. The Region of Peel has remained engaged in the development of local OHTs, including supporting a full application of the Brampton, Bramalea, North Etobicoke, Malton and West Woodbridge (also referred to as the Brampton and area) OHT and as a member of both the Mississauga OHT and the Hills of Headwaters Collaborative OHT. Donna Kern reviewed local needs, system pressures and opportunities noting that the Region of Peel continues to advocate to and engage with the provincial government to address the capacity challenges of a growing aging population.

Brian Laundry stated that Region of Peel staff will continue to collaborate with community partners to support priorities, such as mental health, community safety and seniors services, while also playing an active role in the development of OHTs. Staff will continue to provide updates to Regional Council on any advocacy and consultation opportunities undertaken to inform and influence potential restructuring and funding changes related to public health and paramedic services.

In response to questions from Councillor Groves, Dr. Hopkins, Medical Officer of Health, stated that the provincial government is aware that diabetes is a unique health need in Peel. However, she noted that although the diabetes rate had doubled in past years, new cases are declining as a result of education efforts. Further, Dr. Hopkins advised that the majority of funds provided by the provincial government for mental health is for treatment and there are opportunities to advocate for funding for prevention.

Councillor Groves spoke of the opioid crisis which is also correlated to mental health issues and asked if the Region of Peel is working with schools and community centres on the opioid crisis. Dr. Hopkins replied that a report will be brought to Regional Council in December regarding an opioid strategy and that Region of Peel partners are addressing the issue with school boards and police. Councillor Groves suggested that Public Health staff reach out to Caledon DARE (Drug Awareness Resistance Education program).

Scott McLeod stated that continued advocacy is required for mental health and addictions funding noting that the funding for the Central West LHIN is \$63 per capita compared to the provincial average of \$102 for mental health and addictions, and that this discrepancy in funding exists across every sector of health care. The total funding for the Central West LHIN is \$973 per capita versus the \$1,974 provincial average.

In response to a question of clarification from Councillor Saito, Donna Kern stated that out of more than 150 OHT applications, 31 were invited to move forward with a full application process, including Brampton and area, Mississauga and Hills of the Headwaters Collaborative. Although the Province has not provided further detail, all three applications should be assessed separately based on patient data and patient flows. Cathy Granger, Acting Commissioner of Health Services, stated that staff will keep Regional Council updated as more information is provided from the Province.

4.2 Progress Update on Local Ontario Health Teams

Received

3. DELEGATIONS

3.1 Kim Delahunt, Interim President and Chief Executive Officer, Headwaters Health Care Centre, Hills of Headwater Collaborative Ontario Health Teams; Kiki Ferrari, Executive Vice President, William Osler Health System, Brampton and Area Ontario Health Team; Karli Farrow, Senior Vice President, Strategy, People and Corporate Affairs, Trillium Health Partners; and Dr. Mira Backo-Shannon, Vice President, Clinical, Health System Integration and Strategy, Mississauga Halton Local Health Integration Network, Mississauga Ontario Health Team, Providing Status Updates of Local Ontario Health Teams

Received

Kim Delahunt, Interim President and Chief Executive Officer, Headwaters Health Care Centre, stated that the Hills of Headwater Collaborative OHT encompasses areas of Dufferin, Bolton and northern Caledon and has a current population of 112,000 residents. She noted that the partners who assisted in creating and submitting the OHT application has a focus for integrating

care in three main areas including mental health and addictions, palliative and complex care for patients, as well as, expanding services for Caledon and bringing more services closer to home.

Kiki Ferrari, Executive Vice President, William Osler Health System, stated that Brampton, North Etobicoke, Malton and West Woodbridge OHT has a current population of 871,852 residents. She noted that the partners who assisted in creating and submitting the OHT application includes a year 1 plan that focuses on an integrated care hub. The hub will act as a central point for care coordination with a system navigation that offers telehealth components for care and next steps for primary care. Another focus will be to address diabetes and related illnesses.

Karli Farrow, Senior Vice President, Strategy, People and Corporate Affairs, Trillium Health Partners, stated that the Mississauga OHT has a current population of approximately 878,000 residents and that approximately 60 per cent of residents are from Mississauga while the remainder are residents from Brampton and other communities. Karli Farrow noted that the partners who assisted in creating and submitting the OHT application, which is based on clinical priorities, has a focus on the acute care sector, home and community care and primary care. The acute care pillar will focus on prevention in order to alleviate capacity in emergency rooms and hospitals.

Dr. Mira Backo-Shannon, Vice President, Clinical, Health System Integration and Strategy, Mississauga Halton Local Health Integration Network, summarized the hallmark features of the Mississauga OHT application which acknowledges multiculturalism in the area. The focus is to ensure a full continuum of clinical integration care while forming pathways for minor acute care and a palliative care approach for cancer patients and patients with life limiting illnesses, such as dementia.

Councillor Vicente departed at 1:50 pm, due to other municipal business. Councillor Groves departed at 1:55 pm, due to other municipal business.

In response to a question from Councillor Saito, Dr. Backo-Shannon stated that the future state of minor acute care would involve linking options such as medical virtual visits, urgent care clinics with access to a patient's doctor and referrals to other appointments as required. She noted that some of these options are currently available but need to be linked together and better integrated within the system in order to be more effective.

Councillor Downey spoke of the modernization of information technology systems and inquired who holds and manages patient information. Kiki Ferrari responded that cloud solutions offer a better way to store large amounts of information but that ultimately the information belongs to the patient. She stated that part of the implementation plan is to review where data is stored but she speculated that medical providers/organizations will store data to their own sites and technology systems will pick pieces of information/data to create a centralized system that will provide an integrated record. Kim Delahunt added that the intent of the digital platform is to provide seamless access to information by patients and providers in an integrated way.

4. REPORTS

4.1 Update on Health System Transformation and Regional Health Advocacy Priorities

Presentation by Brian Laundry, Director, Strategic Policy and Performance, Health Services and Donna Kern, Director, Senior Services Development, Health Services

This item was dealt with earlier in the meeting.

4.2 Progress Update on Local Ontario Health Teams

This item was dealt with earlier in the meeting.

- 5. **COMMUNICATIONS** Nil
- 6. IN CAMERA MATTERS Nil

7. OTHER BUSINESS

7.1 Dr. B. Carr, President and CEO, William Osler Health System, Resignation as an Advisory Member, Health System Integration Committee (Oral)

Received

Councillor Fonseca stated that Dr. B. Carr has accepted the position of CEO, Nova Scotia Health Authority in Halifax and she thanked Dr. Carr for his committment and support to the Health System Integration Committee.

8. **NEXT MEETING**

The next meeting of the Health System Integration Committee is scheduled for Thursday, February 20, 2020 at 9:30 a.m., Regional Administrative Headquarters, Council Chamber, 5th floor, 10 Peel Centre Drive, Suite A, Brampton, ON.

Please forward regrets to Helena West, Committee Clerk, (905) 791-7800, extension 4697 or at Helena.west@peelregion.ca.

10. ADJOURNMENT

The meeting adjourned at 2:25 p.m.