

**CENTRAL WEST LHIN**  
**Mental Health and Addiction Services Core Action Group**

**Meeting Notes of**  
**Wednesday, January 6, 2010**  
**9:00 – 11:00 a.m.**  
**Office of the Central West LHIN**

**In attendance:**

Mohamed Badsha, Reconnect Mental Health Services  
Scott Brooker, Friends & Advocates Peel  
Doreen Caron-Turcic, on behalf of William Osler Health System  
Amandeep Kaur, Punjabi Community Health Services  
Michelle Kelly, Consumer Survivor Network  
Nora Kennedy, Family Transition Place  
Monty Laskin, Caledon Community Services  
Sandy Milakovic, Canadian Mental Health Association/Peel Branch, Co-chair  
Karen Parsons, Peel Addiction Assessment and Referral Centre  
Janice Peters, Supportive Housing in Peel  
Susan Smither, Centre for Addiction and Mental Health  
Eric Tripp-McKay, Peace Ranch  
David Colgan, Central West LHIN  
Suzanne Robinson, Central West LHIN (recorder)  
Pat Stoddart, Central West LHIN

**Regrets:**

Baldev Mutta, Punjabi Community Health Services  
Fred Wagner, Trellis Mental Health and Developmental Services  
Laurence Wolfson, William Osler Health System

**1. Agenda**

Approved with the addition of Items 4.5 Concurrent Disorders Network and 6.5 "Peel Manor".

**2. Previous Meeting notes – 7<sup>th</sup> October and 3<sup>rd</sup> December, 2009**

The group agreed that the notes of 7<sup>th</sup> October and 3<sup>rd</sup> December 2009 as revised reflected the meeting's discussions. It was clarified that the contact for the CAMH pamphlets is publications@camh.net.

Revisions to December notes: Karen's surname misspelled – apologies to Karen, add Peel to Friends & Advocate's name, note that Michelle sent regrets

Revisions to October notes: item #4 correct typographical error - "as IHSP2 is finalized"

*Suzanne Robinson to re-send the Community Care Information Management slides.*

**3. Presentations**

None scheduled.

#### 4. Project Updates

Sandy Milakovic presented the notion of mapping the projects underway to the Work Groups identified, as per the agenda. While initiating the Work Groups was put on hold in light of current projects, this simple exercise demonstrates that there is a healthy level of activity that align to them. The Group agreed to roll in the existing projects to a defined Work Group and advance the work and report in this context. Sandy Milakovic conveyed that OCAN also fits with the Access and Integration Work Group.

*Suzanne Robinson will continue to support, identify, and document project activity, mapping it to the defined Work Groups, ensuring that OCAN is recognized as above.*

*Sandy Milakovic will speak to Janice Peters and Eric Tripp-McKay about revising CRMS to include a drop-down for diversity.*

##### 4.1 OCAN

The partnership is proceeding with this Community Care Information Management (CCIM) initiative, targeted for wrap up at the end of March. George Ihnatowycz of SHIP is continuing as Coordinator through Phase 3. A presentation will be scheduled for the Group following discussions with the LHIN. Each Eric Tripp-McKay, Janice Peters, and Sandy Milakovic said it's been a positive experience with the learning incredible and the "train-the-trainer" model allowing for consistent training across three organizations. A shared trainer is indirectly helping to integrate services as familiarity amongst the three organizations increases and as such, shared practices evolve.

##### 4.2 Integrated Assessment Record

Also residing in the CCIM, this project is proceeding with significant attention being given to informed consent, confidentiality and privacy issues. The goal is better client service and through this, access to information about shared clients will be streamlined and available more timely. WOHS is the Health Information Network Provider (HINP) and participating agencies are all Health Information Custodians (HICs). In light of the increasing deployment of eHealth in the sectors, Pat Stoddart suggested that the LHIN's eHealth Coordinator attend these meetings.

*Sandy Milakovic to follow up with Jody Wellings, the LHIN's eHealth Coordinator about her attendance at meetings, either regularly or as the agenda warrants.*

*Suzanne Robinson to help facilitate Jody's involvement ensuring it is appropriate and respectful of her time.*

##### 4.3 Dufferin Connects

Eric Tripp-McKay reported that the Crisis Steering Committee is focused on how the 22 Memorandums of Understanding (MOU's) fit together and clients can be served. About the safe bed now available through Peace Ranch, he offered that it's been a good experience to date. The recently established Operations Committee just finalized its Terms of Reference and is ready to move forward. Negotiations continue between CMHA Grand River and Peel to re-align services and they are working through the LHIN's formal Transfer document. Sandy Milakovic reported that Human Resources are an important consideration as well as ensuring that the funding level is consistent with Peel Branch's operations. Janice Peters reported that SHIP has established 10 housing units and has a waiting list of 25 people.

All agreed that the Dufferin Study needs to remain a focus of planning for the Central West LHIN. The study can come forward to the Extended Core Action Group and should be considered in setting priorities for future H-SIPs. The same applies to Malton Connects. David Colgan added that similar studies would be of benefit for Brampton, Caledon, and Rexdale.

*Suzanne Robinson will ensure that the Dufferin Study and similar studies for the above named communities, are incorporated in to the planning for the Extended Core Action Group meeting.*

#### 4.4 Malton Connects

Mohamed Badsha reported that implementing this plan will be a greater challenge than in Dufferin given the lesser activity that there is on which to build. The United Way of Peel Region which is active in Malton and the Malton Community Health Centre satellite both provide a foundation for our work. Sandy commended the group for the Malton Study citing that both the United Way and the Fair Share Task Force for Peel are using the report.

#### 4.5 Concurrent Disorders Network

Mohamed Badsha's update included that the official launch of the Network was hosted in October and that the first wave of piloting the GAIN Short Screener (GAIN SS) is rolling out. The trainer has been identified and the electronic version of the tool as developed in another LHIN is being migrated to local providers' data management systems. He also highlighted that service delivery options have been reviewed e.g. groups and one-to-one services and they are very near to making a decision. Susan Smither added that CAMH recently piloted a youth-friendly version of GAIN SS and it is likely to be adopted in Central West. The GAIN SS will form part of the assessment toolkit available to providers.

Sandy Milakovic and Mohamed Badsha are presenting to the MH LHIN about this success story.

*Suzanne Robinson to include this item as part of Standing Reports.*

## 5. Standing Reports

### 5.1 Consumer/Survivor Network

Four regional meetings are scheduled for January with specific dates and locations available through Michelle Kelly. Michelle Kelly is hoping to recruit new regional representatives during these meetings as the existing individuals have served for some time. A website is under development and includes a feature where individuals can easily sign up as a member. There will also be a calendar for ready access to Network activities. Michelle Kelly reported that membership stands at 90 individuals.

### 5.2 Diversity

On Baldev Mutta's behalf, Amandeep Kaur cited that the committee is still awaiting new members with Mohamed Badsha confirming that existing participants are SHIP, Reconnect, WOHS, Punjabi Community Health Services, the CCAC, Headwaters, and the Bramalea Community Health Centre. A related matter, David Colgan commented that diversity and equity is an IHSP2 priority and that over the next three years HSPs should expect that health

equity plans will be required through MSAAs. David Colgan also informed the Group that the Central West submitted its interest in piloting the Health Equity Assessment Toolkit but do not yet know the status. Sandy Milakovic stated that the lack of participation is not indicative of interest but capacity to make a commitment to another monthly meeting

Further to Sandy Milakovic's comment, the Group diverted time to discuss their capacity to continue doing business the same way e.g. multiple, monthly, the demands of cross-LHIN work, and complying with other funder expectations. Sustainability is also an issue.

Considering a new structure and approach to the work is welcomed by the Group and Pat Stoddart and David Colgan confirmed that the LHIN will support providers in exploring options. Suzanne Robinson added that the nature of mental health and addiction services may put the work of these sectors on a different playing field and that maybe this should be considered in identifying a unique approach to the work. She added that the LHIN comparative information reveals that LHINs are doing their work differently, including not having a mental health and addictions group but integrating it across their efforts to address provincial priorities.

The LHIN is accountable for fulfilling the IHSP2. The IHSP2 references the Institute for Healthcare Improvement (IHI), the framework "Triple Aim, and a broad roadmap to the tasks in the next three years. David Colgan indicated that IHSP2 is the basis for the LHIN's work over the next three years, along with MOHLTC priorities, as they exist or arise, and for the Group to be cognizant of this as they determine how to move forward. (For an example on how the Triple Aim framework is being utilized the group was referred to the Central East LHIN's website.)

Sandy Milakovic also mentioned her introduction to LEAN, a process that is focused on value to the client. Sandy Milakovic spoke about its relevance to the discussion and its merits. Suzanne Robinson mentioned that LEAN was introduced at the LHIN's fall Project Management Forum so there is a level of awareness within the LHIN and amongst some providers.

*Sandy Milakovic to forward LEAN information to Suzanne Robinson for distribution to the Group.*

*Sandy Milakovic will ensure that this conversation is brought forward.*

## **6. Other Business**

### **6.1 Health System Improvement Pre-proposal (H-SIPs)**

Updated lists circulated summarizing submissions on file from 07-08 to 09-10 were agreed by the Group to be complete. Sandy Milakovic noted that in other LHINs there is a role for the Core Action Group equivalent committees to prioritize H-SIPs. David Colgan pointed out that the Core Action Group has reviewed the H-SIPs at previous meetings, but has not put them in any kind of priority listing. It was agreed that the Core Action Group will play a role in discussing, reviewing, and prioritizing H-SIPs based on the Group's established criteria and rules of engagement. Among the issues that need to be addressed: managing competing interests of providers, examination of existing services and structures in the context of health system planning, accommodating provincial policy decisions.

It was clarified that:

- there is a standardized process for submitting an H-SIP (can be found on the Central West LHIN website)

- on the LHIN's receipt of an H-SIP, decisions are made based on the LHINs' decision-making framework tool
- the Central West LHIN has an internal management process in place (in light of opportunities that exist through new staff, the process is under review)

Pat Sotddart also offered that growth funding to hospitals, aging at home, and urgent priorities are the current three streams of funding. Change must be considered in the context of no new funding so as such, transformational thinking is required.

*David Colgan will provide an update on the LHIN's review of its internal H-SIP management process.*

*Suzanne Robinson will ensure that the item H-SIP criteria is brought forward to the March meeting.*

*Mohamed Badsha is awaiting information from WOHS and will circulate an updated version of the Emergency Department Diversion H-SIP when it is complete.*

## 6.2 Planning for Allocation to Addictions Supportive Housing

Sandy Milakovic mentioned that other LHINs are ready to roll out the services on receipt of the funding and wanted to establish a similar state of readiness in the Central West LHIN.

David Colgan communicated that SHIP will be allocated the funding and anticipates that, as is usually the case, SHIP will partner with other providers to meet the needs of residents. This approach represents "business as usual" in the interest of leveraging the expertise at SHIP and eliminating the establishment of duplicate systems to manage the eight new supportive housing units. David updated the Group that the LHIN is awaiting further direction from the Ministry about the flow of funding.

## 6.3 Community Care Information Management (CCIM)

Representatives from the CCIM will be back to discuss the operational impact of Dynamics GP, the Finance solution being offered by the Ministry. They will also discuss the Human Resources solution, Quadrant. While the latter hasn't been presented, slides introducing this solution are included with the CCIM PowerPoint emailed in early December.

The desired outcome is that operational staff has sufficient information to understand what it means for providers to transition to these solutions. LHIN staff pointed out to the group that HSPs should be anticipating this issue not as whether they should make this transition but when and how they will make it. The next meeting with CCIM should address how it can best happen. The Group agreed that a successful meeting will result if attendees understand how the solutions will affect: staff time during the transition, ongoing efficiency, standardization of reporting across the sector, improved data quality, ability to comply with other funders, sustainability, and conditions for and the ability to create redundancy within the system.

*Suzanne Robinson will forward to the contact for CCIM the above list to ensure a productive meeting and reiterate the need for brevity when presenting the H.R. solution, Quadrant.*

## 6.4 Core Action Group (C.A.G.) Co-chair

David Colgan stated he believes this group is mature enough that it is no longer necessary that a LHIN Senior Director sit as a co-Chair to this group. As such, the position of co-chair is vacant and available for an agency representative.

Sandy Milakovic called for someone from the Group to consider taking on the position of co-chair. The Terms of Reference indicate that the co-chairs will be appointed by the LHIN and Sandy Milakovic asked that the matter of term of office be addressed as well. The Group will receive affirmed nominees' names through Suzanne Robinson and the appointment made at the next C.A.G. For future consideration is appointing a vice-chair rather than a co-chair and more clearly defining the role and expectations with succession planning in mind.

*All to submit the names of affirmed nominees to Suzanne Robinson who will provide the list to the Co-chair for presentation to the Group and appointment by the LHIN at the March meeting.*

#### 6.5 Peel Manor

Due to time constraints, this item could not be addressed.

## 7. Next Meeting

### 7.1 2010 Meeting Schedule

The proposed schedule was distributed by email prior to the meeting and in keeping with the practice of rotating the location of meetings. Sites still need to be confirmed.

*Suzanne Robinson will re-distribute the list with a deadline for response of offer to host and then issue the final schedule to all by email.*

### 7.2 Next Meeting

Wednesday, February 3, 2010

9:00 to 11:00 a.m., location as per the schedule (the Central West LHIN is not available)

The agenda is Community Care Information Management. It's recommended that senior finance and human resources staff attend.

*Doreen Caron-Turcic first to check, then Sandy Milakovic and Janice Peters re: availability of meeting space and Suzanne Robinson will follow up with each.*

### 7.3 Extended Core Action Group

This meeting is scheduled for April 7<sup>th</sup>.

The agenda is to include a presentation of the 10-year Strategy by John Van Damme, Sr. Policy Advisor, Mental Health & Addictions Strategy at the Ministry as well as a presentation on the Central West LHIN's IHSP2. Many items were raised during this meeting and they will be factored in to the planning, including the roles of the action groups. It is not currently scheduled for a full day but this may have to be considered.

*Suzanne Robinson to re-schedule the date with John Van Damme and continue to work with David Colgan and the co-chairs to finalize the agenda.*

## 8. Adjournment

The meeting was adjourned at 11:00 a.m.