

Ontario Health Coalition

LHINs

Subject: **LHIN Planners Forum**

This is a quick write up of meeting with the ministry. All answers provided by Gail Paeche.

Information from LHIN's Planners Meeting, January 12 and 13, Toronto

E- Room- an e-room is being set up for the planners from each LHIN to share info and write the report templates on as well as post research materials. The Ministry is registering the users and will be supplying them with a personal password to access this service. The Ministry will be the administrators of this service and have full access to anything information stored there.

Thursdays discussion groups dealt with recommendations for "How to Inform the Public of the LHIN's":

Group #1 -not to go public yet.

Group # 2 start giving info out to public.

Group #3- engage and educate physicians about the LHIN's and have them inform the public.

Group #4-Information from the Ministry should be given to the media.

Gail Peach's summaries:

Information will be given to CEO's and their Boards as each phase of the plan is created".

An ADM of Human Resources will be hired for the Province.

The LHIN's are not providers or purchasers of services.

Q&A

1. Are the LHIN Board members to be volunteers?

Yes, they will receive a per diem.

2. Will there be legislation to enable the LHIN's?

Yes, the government will proceed with legislation.

3. How can we have integration without including rehab services?

Those services will proceed as they currently are.

4. Will the LHIN's be a purchase provider?

The LHIN's will give funds to the organisations, the organisations will purchase the service such as CCAC is doing .

5. What is the accountability for the funds?

The LHIN will hold accountability agreements with each stakeholder.

6. What is the future role of the planners?

The role of the planners ends with the filing of their reports.

7. How will the LHIN's inform the public?

That strategy has not been developed yet.

8. Is hospital and Long Term Care funding in the LHIN's budget?

Yes, the budget will cover all providers. Special program monies may be held by the ministry.

9. Will provincial networks continue such as stroke, rehab, childrens groups?

That discussion is to take place next week>

10. What is the role of the existing MOH?

The ministry is reorganising and the role will become a stewardship role. The ministry is working on that now.

11. How will CCAC's and District Health Councils be integrated in the LHIN's?

Decisions on that will be announced by the government.

12. How will the Public Health Offices fit in?

The report is being written. It will not be available for 1 year. It will then be decided on by the government.

13. Where will the District Health Councils be after LHIN's?

Again, no decision has been made yet.

14. What was the rationale to link funding to the LHIN's?

It was to put the money into an entity that will be working with the communities.

15. How will funding be provided for provincial programs?

No answer yet.

16. How will funding flow from LHIN's to providers?

The provider will negotiate that with the LHIN but the LHIN will have full responsibility for the decision.

17. What is the ministry's definition of Local and Community?

Health care is "local". CCAC's will be local, not working in a long distance scenario. Communities will remain where they are and services will be in the communities.

18. When will the LHIN's be taking over the funding?

The LHIN's will have that responsibility by 06/07.

19. What will happen if a person seeks health service from another LHIN than the one they reside in?

LHIN's will not restrict the movement of consumers.

20. Will the CEO's of the LHIN's be chosen from those residing in the LHIN?

The CEO's must reside or move into the LHIN they are working in.

21. When will the criteria for the LHIN CEO's be released?

We will use a process similar to the one used for the District Health Councils.