

# Hamilton Board Committee

*Thursday, April 26, 2012*

*15:30 pm*

*Dofasco Boardroom – Juravinski  
Innovation Tower*

***Open Session***



St. Joseph's  
Healthcare  Hamilton

St. Joseph's  
Home  Care

**HAMILTON BOARD COMMITTEE (HBC)**

*April 26, 2012 – Juravinski Innovation Tower –1530 hours*

**OPEN SESSION**

	Page(s)	Time
1. PROTOCOL  1.1 Call to Order – Mr. B. Gould 1.2 Opening Prayer - Mrs. I. Schachler 1.3 Introduction of Guests 1.4 Declaration of Conflict of Interest		3:30-3:35
2. APPROVAL OF AGENDA – Mr. B. Gould		
3. ADDITIONS TO THE AGENDA – Mr. B. Gould		3:35-3:40
4. APPROVAL OF THE HAMILTON BOARD COMMITTEE MINUTES OF MARCH 29, 2012 (OPEN)  <u>Motions for Approval:</u>  <u>Hamilton Board Committee</u>  <b>4.1 That the minutes of the March 29, 2012 Hamilton Board Committee be approved</b>	1-3	
5. REPORTS  5.1 Chair's Report – Mr. B. Gould 5.2 President's Report – Dr. D. Higgins/Mr. S. Gadsby/Mrs. K. Ciavarella 5.3 President of the Medical Staff – Dr. T. Packer 5.4 St. Joseph's Healthcare Foundation and St. Joseph's Villa Foundation – Ms. S. Filice-Armenio/Ms. M. Ellis	4-10	3:40-3:45 3:45-3:50 3:50-3:55 3:55-4:00
6. OTHER BUSINESS		4:00-4:05
7. INFORMATION ITEMS		
8. MOTION TO MOVE INTO THE CLOSED SESSION		

**Note: Trustees who wish to have items moved from the Consent Agenda to the Closed/Open Agenda should contact the President's Office prior to the Board Meeting. Trustees also have an opportunity to make this request when the agenda is presented at the Board Meeting.**

Committee: Hamilton Board Committee – OPEN SESSION Date: March 29, 2012

Called to order at: 1530 hours Adjourned: 1610 hours

Location: Dofasco Boardroom – 2<sup>nd</sup> Floor Juravinski Innovation Tower

Present: Mr. B. Gould, Chair, Mr. C. Santoni, Mr. T. Thoma, Mr. J. LoPresti, Mr. R. Rocci, Mr. S. Monzavi, Dr. M. Guise, Ms. W. Doyle, Dr. T. Packer, Mrs. I. Schachler, Mr. P. Tice.

Regrets: Mrs. M. Taylor, Mrs. M. Dow, Dr. H. Fuller, Mr. T. Valeri, Dr. J. Kelton.

Resource Staff: Dr. D. Higgins, Mr. S. Gadsby, Ms. F. Ros, Ms. V. Dodds, Mrs. K. Ciavarella, Ms. M. Ellis, Ms. S. Filice-Armenio, Ms. J. Holol,

Guests: Ms. S. Hollis, Ms. D. Elder, Ms. J. Banks, Mr. L. Rengifo, Dr. R. McDonagh, Mr. R. Cercone, Mr. J. Woods.

NEXT MEETING April 26, 2012

Subject	Discussion
<b>1. PROTOCOL</b>	
<b>1.1 CALL TO ORDER</b>	The meeting was called to order at 1500 hours by B. Gould.
<b>1.2 OPENING PRAYER</b>	R. Rocci opened the meeting with a prayer.
<b>1.3 GUESTS</b>	All guests in attendance were introduced.
<b>1.4 DECLARATION OF CONFLICT OF INTEREST</b>	There was no declaration of conflict of interest.
<b>2. APPROVAL OF AGENDA</b>	It was MOVED by P. Tice, SECONDED by R. Rocci, VOTED AND CARRIED: <b>THAT THE HAMILTON BOARD COMMITTEE AGENDA BE APPROVED AS CIRCULATED</b>
<b>3. ADDITIONS TO THE AGENDA</b>	There were no additions to the open agenda.
<b>4. APPROVAL OF THE MINUTES</b>	It was MOVED by S. Monzavi, SECONDED by C. Santoni, VOTED AND CARRIED <b>THAT THE MINUTES OF THE HAMILTON BOARD COMMITTEE (OPEN) OF FEBRUARY 23, 2012 BE APPROVED</b>
<b>5. REPORTS</b>	
<b>5.1 Chair's Report</b>	B. Gould reported the following: <ul style="list-style-type: none"> <li>The Around the Bay Road Race was held on Sunday, March 25<sup>th</sup>. It was a huge success with over 12,000 people taking part in the 30K run and 5K walk/run events. R. Coolsaet from Hamilton won the 30K. Congratulations were extended to the St. Joseph's Healthcare Foundation on the overwhelming success of the race.</li> </ul>

**Subject**

**Discussion**

*5.2 President's Report*

- St. Joseph's Home Care held its Grand Opening on March 22 at the new office location at 1550 Upper James Street. The event was well attended by board members, clients, media and staff.

**D. Higgins – President – St. Joseph's Healthcare**

- Highlights of the 2012 Ontario Budget were overviewed and highlights of the OHA information session on the Ontario Budget were discussed.
- In response to a question, it was noted that the Province has already carried out case costing with respect to patient based funding. More details will be brought forward as they become available.
- The Wellness Program has launched a new calendar of events which has proven to be quite popular with staff.
- In response to a question, it was noted that SJHH has seen an increase in c-diff cases originating in the community.

**K. Ciavarella – President and CEO – St. Joseph's Home Care**

- St. Joseph's Home Care has received Accreditation with Commendation from Accreditation Canada.

**S. Gadsby – President. St. Joseph's Villa Dundas**

- It was noted that SJV is the HNHB LHIN Behavioural Supports Ontario lead. Through five community hubs mobile teams will receive referrals, assess LTC residents and provide support through demonstration and coaching to LTC home staff to safely manage residents with the goal of reducing transfer to hospital and creating a plan of care that is beneficial to all. The forty new staff members of this program are classified as employees of the Villa.
- It was noted that two residents are currently being treated for C-difficile. The Assess and Restore Unit had three admissions from hospital. In response to a question, It was noted that c-diff statistics are not tracked in the community.

*5.3 President of the Medical Staff*

The following was reported:

- It was noted that the Quarterly Medical Staff meeting was held on Tuesday March 27<sup>th</sup>. A presentation was given on hospital funding by representatives of the Ontario Medical Association.

*5.4 St. Joseph's Healthcare Foundation and St. Joseph's Villa Foundation*

**St. Joseph's Healthcare Foundation**

- \$260K was raised from the Around the Bay Road Race and pledges are continuing to come in. There were 15 corporate teams in the race. B. Gould was thanked for his tremendous support of the race and was the highest earning participant. The Foundation is working to increase awareness and participation for the event.
- The daVinci Surgical Robot was unveiled this past week. The event had wide media coverage.

**Subject****Discussion**St. Joseph's Villa Foundation

- It was noted that the 11<sup>th</sup> Annual St. Joseph's Villa Gala will be held on April 20<sup>th</sup> at Liuna Station.
- The SIM Gym will officially open on June 21<sup>st</sup>. Renovations are ongoing at this time.
- All HBC members will be receiving a letter from the SJV Foundation with respect to fundraising directed toward the Assess and Restore Unit. The Foundation is looking to raise \$1M for this worthy cause.
- SJV Foundation will be holding a car raffle for a 1976 Spitfire.
- The 9<sup>th</sup> Annual Neil McArthur Memorial Golf Tournament will be held at the Dundas Valley Golf and Curling Club on October 2<sup>nd</sup>.

**6. OTHER BUSINESS****6.1 Summary of HBC Closed Meeting Session**

- A summary of the January 26, 2012 HBC Closed Meeting Session was reviewed. The motions summary will be placed on the hospital website on a monthly basis.

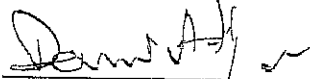
**7. INFORMATION ITEMS****8. MOTION TO MOVE INTO THE CLOSED SESSION**

There was no further business and the meeting adjourned at 1610 hours.

It was MOVED by J. LoPresti, SECONDED by R. Rocci, VOTED AND CARRIED

**THAT THE HBC MOVE INTO THE CLOSED SESSION OF THE MARCH 29, 2012 HBC**

Ben Gould, Chair



David Higgins, Secretary



Fadia Ros, Recorder

OPEN SESSION REPORT TO THE HAMILTON BOARD COMMITTEE – APRIL 2012

SECTION 1: HBC REPORTING

**1.0 Environmental Scan** (Legislative, Health Care Industry and Government Update)

**1.1 SJVD: *Non Arm's Length Declaration***

The Ministry of Health and Long Term Care request LTC Homes to declare an annual reporting of Non-Arm's Length Transaction for Goods and Services. This means a transaction where a licensee spends money to acquire the supply of direct care goods for or direct care services to a LTCH that is entered into between a licensee and an associate of the licensee. As the Villa obtains our phlebotomy services from St. Joseph's Home Care, we declared them as a non-arm's length association with supporting information.

**1.2 SJVD: *12 Beds***

The Villa has sent a letter to the Ministry of Health and Long Term Care with supporting documents for the transfer and abeyance of the SJHS' 12 long term care home beds. There has been an internal Planning Committee created to strategize and to move the project forward. The HBC Building and Planning Committee and HBC will be involved as the necessary approvals are needed.

**1.3 SJHC: *Home Care Procurement Update: (Excerpt from the CPAC communiqué)***

The Community Provider Associations Committee (CPAC) met April 2, 2012 to develop a plan for moving forward in the creation of new service contracts by October 2012 and to submit the plan to the Ministry for approval prior to sector-wide implementation.

CPAC received a clear message from both the Minister's staff and the MOHLTC that the health care system is not immune to the unprecedented challenges we are collectively facing and without a change in the way we currently deliver health care services, health costs will continue to rise. Now is the opportunity to demonstrate a clear increase in value for our health care investments. The government's Excellent Care for All Act and the Minister's Action Plan to Transform Health focus on improving the quality of health care for Ontarians and achieving value for funding investments.

The Ministry highlighted the importance of quality health care that focuses on the person. The home and community sector must be responsive and flexible to provide for the full range of client needs resulting in higher quality, improved outcomes and sustainability. The Ministry recognizes that this requires a fundamental shift in how home care services are organized, delivered and funded.

Over the past few years, the Integrated Client Care Project has provided an opportunity for new models of care delivery, that achieve the goals of the Action Plan, to be tested and reflect health system funding reform principles. The patient-based funding model is evidence-based with incentives to deliver the highest quality and achieve the most effective outcomes for clients. In order to fully meet the goals of the Action Plan, these efforts must be more fully integrated into how home and community care is delivered and funded.

The Ministry underscored the government's collective belief in the ability of the home and community care sector to support even more Ontarians to live independently and safely at home. The Ministry will partner with the home and community care sector to make improvements in the

delivery of quality client-centred home care, and support maximizing value for health care investments. The Ministry looks forward to receiving a proposed plan from the sector for moving forward in order to establish new service contracts by October 2012.

#### **1.4 SJHH: Clinical Informatics**

SJHH has been awarded as the host site of the September 2012 Ontario Nursing Informatics Group (Special Interest Group of the Registered Nurses Association of Ontario) Education Day. This rapidly developing field provides interface between clinical care delivery and information technology systems. This is a great opportunity to highlight successes and innovation by SJHH.

## **2.0 Mission, Vision and Values Update** (Strategic Planning, Quality, Patient Safety, Partnerships and Community Engagement, SJHS Mission Integration)

### **2.1 SJVD: Quality: Outbreaks**

The Villa's three outbreaks of C. Difficile, Norovirus and Respiratory, previously reported last month have been declared over by Public Health.

### **2.2 SJVD: Partnerships and Community Engagement: Assess and Restore**

There were ten additional surge Assess and Restore beds opened on March 7, 2012 expanding the unit to 61 beds for hospital patients. These beds will continue until September 30, 2012. Dr. Hugh Boyd, our new Medical Director as of April 1, 2012, has taken on the responsibility as attending physician.

### **2.3 SJVD: Partnerships and Community Engagement: St. Joseph's Villa Foundation**

The Villa submitted a request to the Villa Foundation for 2012-2013 guaranteeing that there will be an annual disbursement from the Foundation. The Foundation approved this request at their March 27<sup>th</sup> Board meeting.

### **2.4 SJVD: Partnerships and Community Engagement: St. Joseph's Estates Annual Meeting**

St. Joseph's Estates Annual Meeting is April 26, 2012 at 2:00 at the Dundas Baptist Church. The Estates Audited Statements are presented and approved at the meeting. There is a question period at the end of the meeting.

Some of the Estates' highlights for the past year:

- Implementing "smoke free" buildings
- Parking rehabilitation
- Sidewalk replacement
- Home Care now delivering frozen meals, housekeeping and foot care to some residents
- Centric Health (Therapy Services) providing "Balance" sessions and "Well Elderly" sessions

### **2.5 SJVD: Planning and Development: New Horizons**

The Villa was fortunate to receive \$9,500 for air conditioning in the Special Needs (Adult Day Program) program and \$12,000 to purchase Spin Bikes for the S.I.M Gym. David Sweet, MP called to provide the great news.

**2.6 SJVD: Planning and Development: W5**

CTV's W5 segment on "LTC Facilities may put Seniors at Risk" aired on March 31, 2012. The telecast can be viewed at [www.ctv.ca/CTVNEWS/WFive](http://www.ctv.ca/CTVNEWS/WFive). Our Provincial association (Ontario Association of Non-Profit Homes and Services for Seniors – OANHSS) along with the Villa have a Zero Abuse Policy. The show highlights the change in individuals who are moving into long term care homes as there are no alternatives for them.

**2.7 SJHC: Quality: Home Care Sector: Data Collection-Client Outcome Indicators – Working towards EFCAA**

On April 5, 2012, SJHC, as part of a working group representing home care service providers (SP), participated in its first teleconference with the Ontario Association of Community Care Access Centres (OACCAC) to discuss the SP Performance Indicators. It was clear that there is an expectation that reporting will need to be at the service provider level versus at the CCAC which is the current reporting structure. The group is considering the following three indicators: Time First Visits, New Incidence of Pressure Ulcers and Inadequate Management of Pain.

**2.8 SJHC: Partnerships and Community Engagement: Foot Care for the Community**

SJHC was able to support 100 foot care visits in the community using the Poor and Marginalized funding. Foot care nurses worked with Out of the Cold Hamilton, Rygiel Home, West 5<sup>th</sup> and the Neighborhood model program to identify people who were in need of care.

**2.9 SJHC: Partnerships and Community Engagement: Community Partnership 4 Independence**

Subcommittee from Hamilton Community Collaborative met on several occasions during March 2012. Members of this subcommittee are: Cheshire Homes, AbleLiving, Ontario March of Dimes, CityHousing Hamilton, CNIB and St. Joseph's Home Care.

*Purpose of Committee:*

1. To be ready in the event funding becomes available from Hamilton Niagara Haldimand Brant Local Health Integrated Network (HNHB LHIN) for Hamilton to develop assisted living programs.
2. To determine the geographical locations of neighbourhood hubs for assisted living for frail seniors programs throughout Hamilton. Seven neighbourhoods were identified including a neighbourhood around St. Joseph's Villa.
3. To determine which service provider will be the lead agency in each hub. St. Joseph's Home Care has been identified as the lead agency in two potential hubs.

*Program outline:*

- Each hub would provide service to 30 frail seniors
- The proposed budget for each hub would be \$390,000
- It was also determined that additional staffing of three Wellness Connectors that provide support services to all individuals in the hubs would be beneficial to clients. The Wellness Connectors would assess services needed to stay safely at home and ensure link with appropriate services.

*Next steps:*

- The HNHB LHIN have shown interest in the work already completed by this group
- The subcommittee has hired SHS Consulting to prepare a background document and proposal for this project



- The HNHB CCAC are involved with this group to identify the number of clients in each area to ensure that there is a critical mass of people in each hub
- There is a meeting of the subcommittee, the HNHB LHIN and HNHB CCAC on April 27<sup>th</sup>, 2012
- Each hub area is prepared, have available staff and will build on the knowledge and successes of the Supported@Home and Niagara programs

**2.10 SJHC: SJHS Mission Integration: SJHS Integrated Comprehensive Care Project (ICCP)**

Update

The purpose of the project is to demonstrate the implementation of 'Integrated Comprehensive Care' (ICC) and evaluate its impacts in terms of clinical outcomes, system concerns (quality, throughput, and efficiency) and patient concerns (accessibility and continuity of care) for three patient groups: Total Joint Replacement, Chronic Diseases (COPD, CHF, and Frail Elderly), and Thoracic Surgery.

The project will also demonstrate the benefits of integrated case management in a patient-centered model across the continuum of care through efficient care provided in the most appropriate setting. The ICC project aligns with the MOHLTC's priorities to reduce unnecessary Emergency Department (ED) visits and Alternate Level of Care (ALC) days and aligns with the SJHS strategic directive to "deliver an integrated high-quality care experience" through a vertically integrated care model.

The go-live and scheduled end dates for the three patient groups are as follows:

Patient Groups	Start Date	Scheduled End Date
Thoracics	Started March 19, 2012 (20 patients enrolled)	March 15, 2013
Hip / Knee	Started April 16, 2012 (clinical education and patient enrolment)	April 12, 2013
COPD, CHF	Scheduled Start date May 1 <sup>st</sup> , 2012 (on target)	April 26, 2013

Recruitment:

The three (3) Integrated Care Coordinators have been recruited with varying backgrounds; one Registered Nurse, a Physiotherapist (PT) by training currently with CCAC as a Case Manager and a Nurse Practitioner. Home Care field staff which include Registered Nurses (RNs), Registered Practical Nurses (RPNs), PTs, Occupational Therapists (OTs), and PSWs have been seconded from their current visiting roles to the project.

Early Project Successes:

**More efficient home visits**

- Critical patient information available electronically before discharge
- Care providers have electronic real-time access to documentation from all care providers in the home
- Real-time access to the Integrated Care Coordinator when an issue is identified

**Team Collaboration and Integration**

- Patient is registered and known to SJHC at the point of initial contact by the Integrated Care Coordinator: Home Care team is able to plan for discharge before the patient enters hospital
- One integrated care path for each clinical domain: one integrated continuous plan of care from the first day in hospital to discharge from home care

- Care plan for total hip and knee replacement: outcomes and progress to be measured and documented by the physiotherapist at each home visit; if patient doesn't meet milestones, ICC and surgeon receive the notice and can initiate a more aggressive care plan

#### **Patient Health Record**

- The evidence suggests that a shared, easily accessible patient health record is a key success factor for an integrated model of care
- The project leverages SJHC's information system, Procura, as the platform to establish the electronic health record
- Computer tablets are used by the care providers in the home to support real-time, secured access to the patient health record
- All calls and visits with the patient are electronically captured in real-time
- Costs associated with each activity and individual patient care plans are accurately captured
- Interactions between members of the care team are captured; this provides an additional measure of team integration
- Real-time access to critical patient documents for the Integrated Care Coordinators and Home Care Team

#### **2.11 SJHH: Research visit from Canadian Institutes for Health Research (CIHR)**

CIHR President Dr. Alain Beaudet and CIHR's Chief Scientific Officer and Vice-President, Research Dr. Jane Aubin have agreed to visit St. Joseph's Healthcare Hamilton this August. Plans are underway for a day of meetings, reception and opportunity to hear Drs. Beaudet and Aubin discuss the current state of play and future trends and opportunities for clinical research in the Canadian and international context. Dr. S. Collins has been informed and the intention is to invite city-wide McMaster University medical faculty to the event.

#### **2.12 SJHH: West 5<sup>th</sup> Campus Redevelopment**

Redevelopment of West 5<sup>th</sup> Campus is moving forward according to plan. The construction design phase has been completed. Focus will now be on operational readiness and transition planning over the next two years. The "Topping Off" Ceremony will take place in May. The construction progress of St. Joe's West 5th Campus can be viewed via the Construction Web Cam on <http://www.stjoes.ca/west5/page6051430.aspx>.

### **SECTION 2 – OPERATIONAL INFORMATION** (Changes to Clinical Programs and Services, Financial/Budget Status, Human Resources and Quality of Work Life)

#### **1.0 ST. JOSEPH'S HOME CARE**

##### **1.1 Labour Relations: SEIU Settlement**

SJHC and Service Employees International Union (SEIU), representing personal support workers (PSWs), home cleaners, and dietary aide employees, have reached a settlement that was ratified by staff on Monday, April 2<sup>nd</sup>. As a result of the ratified settlement, there will be no disruption in service.

##### **1.2 Changes to Clinical Programs and Services: Sandoz Canada Drug Shortages**

The following summarizes the updates that the Ministry of Health and Long-Term Care provided on the Health Stakeholder Teleconference on Thursday, April 5<sup>th</sup>, 2012.

- Inventory/Impact Assessment:
    - The ministry continues to receive notice of hospitals and community organizations with less than five or 14 days of supply.
  - Inventory Management
    - On April 4<sup>th</sup>, the ministry distributed the Drug Shortage Redistribution Plan to hospital CEOs, LHIN CEOs and the Drug Shortage Technical Advisory Group; this plan is meant to be a guidance document that can be used by providers and the LHINs. The ministry is looking into what will happen with organizational extraordinary expenses associated with this event.
  - Facilitation of Procurement
    - Drugs that are on the ministry's drugs of concern list, including Vitamin K, are being flagged by the ministry with federal, provincial and territorial partners to Sandoz.
- At this time, SJHC's clients have not been affected by the drug shortages.

## 2.0 ST. JOSEPH'S HEALTHCARE, HAMILTON

### 2.1 Changes to Clinical Programs and Services: Releasing Time To Care (RTC)

The Releasing Time To Care project focuses on improving unit processes and environments to help staff spend more time on patient care. The ultimate goal is to improve safety and efficiency. The project formally ended on March 31. Report to the Ministry of Health and Long Term Care is being collated. All participating units have benefited from this project and are eager to sustain their accomplishments and continue with other RTC modules. Sustainability models were discussed and are being reviewed.

### 2.2 Sandoz Critical Drug Shortage

Sandoz Canada, a key manufacturer of IV injectable drugs used primarily in hospitals, has significantly slowed production. This national issue is being addressed at the SJHH level with collaboration between the medical and administrative leadership. The Incident Management System (IMS) has been put in place immediately after the shortage was announced. The IMS and the Clinical Advisory Group regularly monitor inventory of drugs impacted by the supply disruption at Sandoz. In collaboration with Finance Department an inventory tracking spreadsheet was developed which forecasts how long current supply will last. Communication updates are provided regularly to all staff and physicians. The IMS and Clinical Advisory Group continue to monitor developments and communication from the LHIN, Ministry of Health and Long Term Care and Health Canada.

### 2.3 Infection Prevention and Control: Hand Hygiene

Patient engagement (Partners in Prevention) project pilot was completed in March on Alternate Level of Care and the Rehabilitation Units. Evaluation is currently underway. Very positive feedback received from patients during reviews of uptake on the units. Plans are under way to implement this project across the organization.

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## Hamilton Board Committee (HBC) – Summary of February 23, 2012 Closed Meeting Session

### Motions Summary

Recommending Subcommittee	Motion Summary
Governance Committee of the HBC	<p>It was approved that:</p> <ul style="list-style-type: none"> <li>• The following policies, Terms of Reference and Work plan be approved:               <ul style="list-style-type: none"> <li>○ HBC #6 – Open Board Policy</li> <li>○ HBC #5 – Committee Chair Position Description</li> <li>○ Resource and Audit Committee Terms of Reference (As Amended)</li> <li>○ Resource and Audit Committee Work plan</li> </ul> </li> <li>• That Mr. Carl Santoni be approved as Chair of the Nominating Committee for the 2011-2012 Board Year</li> <li>• That the following be approved:               <ul style="list-style-type: none"> <li>○ Hamilton Integrated Research Ethics Board (HIREB) Memorandum of Understanding/Partnership Agreement</li> <li>○ Hamilton Integrated Research Ethics Board (HIREB) in Health Sciences - HIREB Terms of Reference</li> <li>○ Hamilton Integrated Research Ethics Board (HIREB) in Health Sciences - HIREB Terms of Reference – Chair</li> <li>○ Hamilton Integrated Research Ethics Board (HIREB) in Health Sciences - HIREB Terms of Reference – Deputy Chair</li> </ul> </li> </ul>

### Presentations and Reports to the HBC - Summary

- A number of documents with respect to the strategic planning process were circulated to all HBC members.
- The HBC approved the Strategic Plan in principle; the complete Strategic Plan draft will be presented to the HBC in upcoming months.
- Dr. Agostino Bellissimo, Chief, Department of Emergency Medicine was the guest presenter from the Medical Advisory Committee. An informative presentation was provided on topic of laboratory test management in the Emergency Department.
- It was noted that the Ministry of Health and Long Term Care provided a webinar this past week on Health System Funding Reform. The key message was the goal of ensuring quality by mandating standardization, efficiency and specific modifications to the funding model. Further information will be provided as it becomes available. In the meantime, SJHH is assessing the risks and impact of this new funding model.