



Integration Decisions

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Integration

Improving the health care experience by creating a seamless system of care



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Differentiating the term “Integration”

- Integration as a **GOAL** for the health care system
- Integration **DECISIONS** as a **LEGISLATED MEANS** to achieve integration as a goal
- Integration does not always require Integration Decisions

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“Integration” as defined through Legislation

Local Health System Integration Act

- 2(1) “integration” includes
 - to co-ordinate services and interactions between different persons and entities;
 - to partner with another person or entity in providing services or in operating

 - to transfer, merge or amalgamate services, operations, persons or entities
 - to start or cease providing services
 - to cease to operate or to dissolve or wind up the operations of a person or entity.

Decisions
may not
be required

Decisions
required

Integration

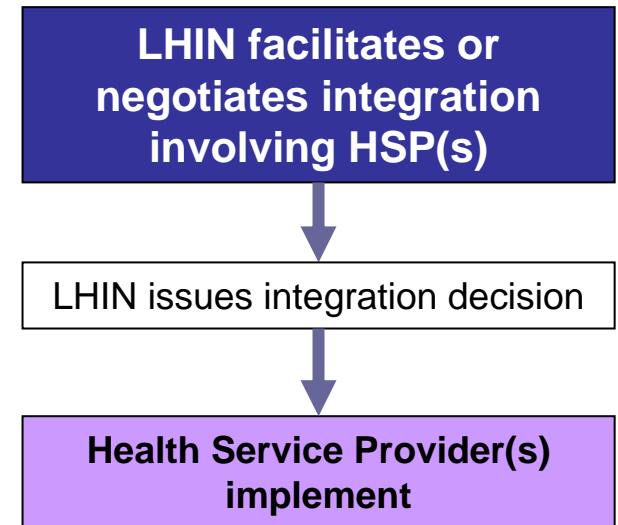
- **Integration resulting from changes in funding**
 - under section 19 of the Act
- **Voluntary Integration Initiatives**
 - self initiated by a health service provider under sections 24 and 27 of the Act
- **Facilitated and Negotiated Integration Decisions**
 - facilitated and negotiated by a LHIN under section 25 of the Act
- **Required Integration**
 - required by a LHIN under section 26 of the Act

Facilitated or Negotiated Integration Decisions

Section 25(2)(a)

Presupposes prior negotiation with Ministry of Health and/or engagement of health service providers, other entities and LHIN planning partners.

There is no requirement of the LHIN or HSP provider to conduct a community engagement process



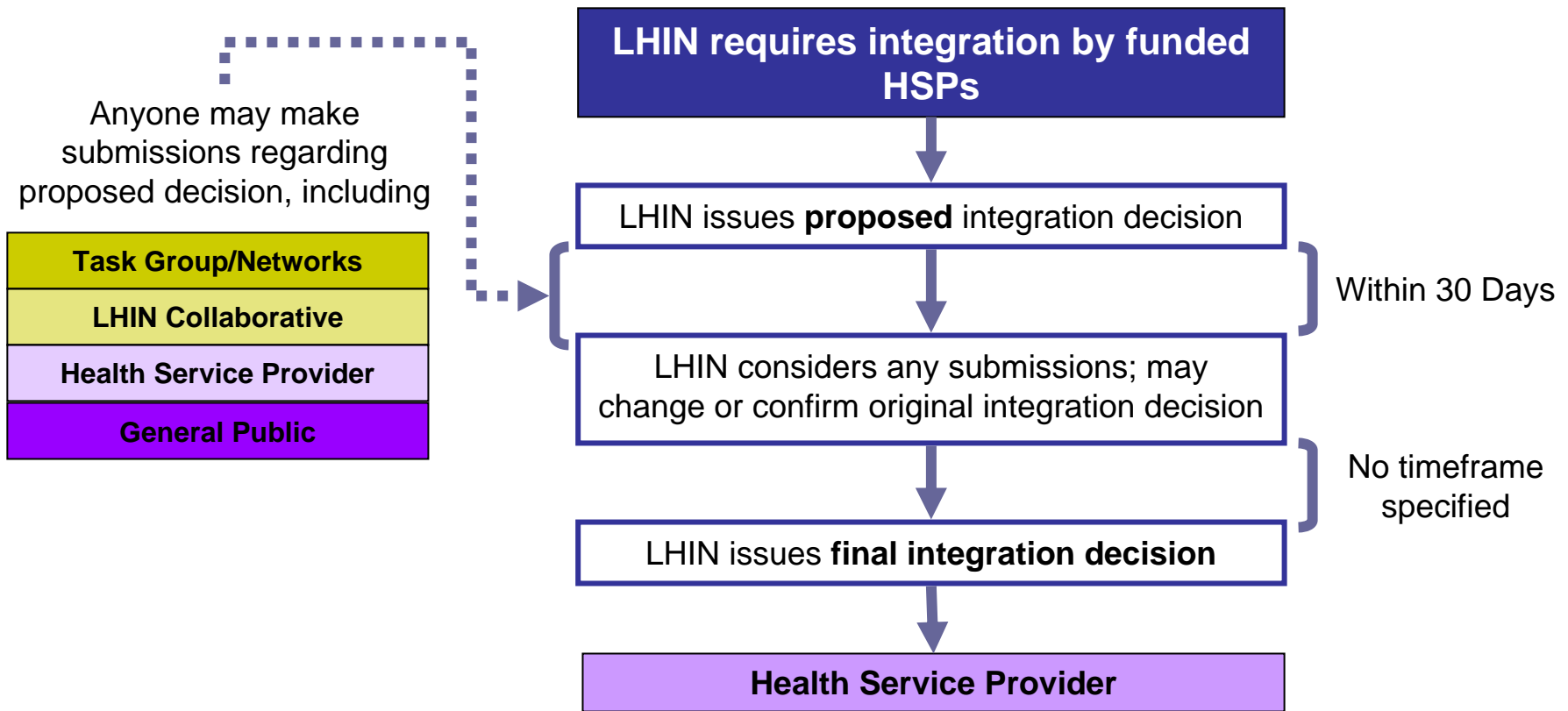
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Required Integration Decisions

- 25 (2)(b) A local health integration network shall issue an integration decision when the network requires a health service provider to proceed with an integration under s. 26

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Required Integration Decisions under 25(2)(b)



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Notice of Voluntary Integration

- If a health service provider wishes to integrate its services with those of another person or entity and if the proposed integration relates to **services that the LHIN funds** (in whole or in part), the health service provider must first give notice of the proposed integration to the LHIN (“Notice of Integration”).
- If the proposed integration relates to services that are **not funded** by the LHIN, then no such notice is required and the health service provider may proceed with the integration.

Stopping or Altering Voluntary Integration

- A LHIN can prevent the integration or a part of it from proceeding if it has concerns about it.
- In doing so, the LHIN would follow this process:
 - The LHIN would, within 60 days of receiving the Notice of Integration, provide the health service provider with a notice that it proposes to issue a decision (“**Section 27 Decision**”) ordering the health service provider not to proceed with the integration or a part of it.
 - The LHIN would provide the health service provider with a copy of the proposed Section 27 Decision and would make a copy of it available to the public.
 - When the LHIN issues a proposed Section 27 Decision, a health service provider or any other person may make written submissions about it within 30 days of the LHIN making it available to the public. This provides an opportunity for any interested party to provide input to the LHIN.
- The LHIN may set conditions on the integration; that is, order the health service provider not to proceed with the integration (or a part of it) unless certain conditions are met.
- If the LHIN issues a Section 27 Decision ordering a health service provider not to proceed with a part of the proposed integration or if the LHIN sets conditions on the integration, the health service provider may choose not to proceed with any part of the proposed integration.¹²

Proceeding or Not Proceeding with Voluntary Integration

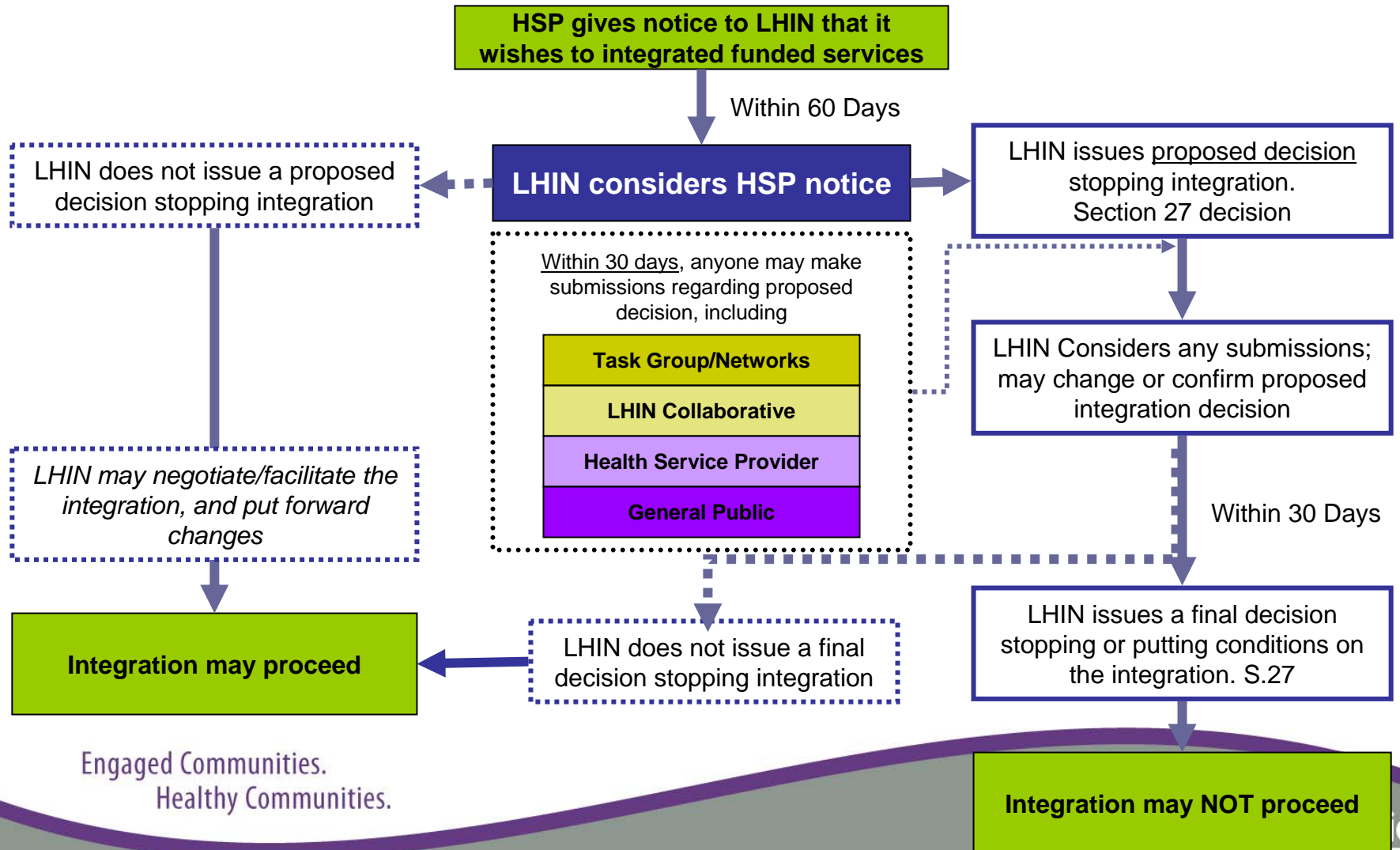
- If the LHIN does not provide the health service provider with a notice that it intends to issue a Section 27 Decision, the health service provider must wait until 60 days have passed since the health service provider gave the Notice of Integration to the LHIN before proceeding with the integration.
- If the LHIN does provide the health service provider with a notice that it intends to issue a Section 27 Decision, the health service provider must then wait until 60 days have passed since the LHIN gave that notice.
- If the LHIN issues a Section 27 Decision, then the health service provider must not proceed with the integration and must comply with the Section 27 Decision.

Stopping a Voluntary Integration

- A LHIN's decision not to stop a proposed integration concerning LHIN-funded services does not prevent the LHIN from facilitating or negotiating the integration nor does it prevent the LHIN from issuing a decision requiring the parties to undertake certain integration activities in relation to the proposed integration.

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Example: Integration Decisions that Stop Voluntary Integrations



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Supporting Voluntary Integration Planning

- Health System Investment Pre-Proposal (HSIP)
 - HSIP do not constitute formal notice
- 1% Challenge
- CE LHIN Project Management Office
- CE LHIN Engagement/Planning Partners (including B2B)
- CE LHIN Decision Making Framework
- Governance Toolkit
- Back-Office Integration Toolkit and Risk Assessment Framework (CE, Central and Toronto LHIN Project Team)

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