

Waterloo Wellington LHIN

November 14, 2018

For Decision

Board of Directors Item 10.6 – Annual Business Plan (ABP) 2019-2020 Development

PURPOSE

To provide an overview of the 2019-2020 Annual Business Plan (ABP) process, timelines and MOHLTC expectations; and, seek approval for the ABP planning principles that will guide the process and decision-making for inclusion or exclusion of content in the plan.

CORE CONTEXT

- The ABP for 2019-2020 focuses on the first year of the LHIN's three-year strategic plan (Integrated Health Services Plan 2019-2022).
- Building on the progress achieved over the past year, and guided by our strategic directions in 2019-2020, we will continue to drive our mission forward to improve the health of every single person who lives in Waterloo Wellington.
- The plan is based on provincial priorities as well as locally identified priorities:
 - Hospital Overcrowding
 - Capacity Planning
 - Mental Health & Addictions
 - Primary Care Integration / Care Communities
 - Long-Term Care
 - Innovation & Digital Health
 - Home Care
- LHINs are required to provide an annual business plan (ABP) to the Minister for approval.
- Submission of the ABP with draft template and content is due to the MOHLTC December 31, 2018 and the final ABP is due on March 1, 2019.
- The ABP also includes the LHIN's resource allocation, staffing and communications plan. These items will be included in the January version for Board approval.

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RECOMMENDATION

THAT the Board of Directors of the Waterloo Wellington Local Health Integration Network approve the following Annual Business Plan planning principles that will guide the development of the 2019-2020 ABP.

1. Use the Integrated Health Service Plan (2019-2022) as the basis and build off of the five strategic directions in the previous year's business plan: Starting with the Patient Experience; Igniting Innovation & Creativity; Driving through Community Leadership; Empowering Clinical Leadership; and, Creating a Great Place to Work.
2. Deliver on the five provincial focus areas from the Ministry while addressing the needs of local residents.
3. Let outcome measures drive the change initiatives.
4. Be bold with our change initiatives to improve the outcome measures – our residents are depending on us.
5. Build in areas of success and ensure we deliver on areas not met in this year's plan, including a focus on commitments in the MLAA.
6. Optimize the use of technology and digital health to increase efficiencies within the system.
7. Collaborate with our sub-region leadership tables on planned initiatives focused on the needs of each sub-region population, and addressing provincial and LHIN priorities at the sub-region level, where appropriate.

BACKGROUND INFORMATION

Ministry Expectations

The Agencies and Appointments Directive (AAD) requires all provincial agencies with governing boards, including Local Health Integration Networks, to provide an annual business plan (ABP) to the Minister for approval. The ABP summarizes key initiatives for the year, publicly sets accountabilities, and provides guidance to staff and the system for the organization's operations.

Provincial Focus Areas

The MOHLTC has outlined five provincial priorities for the government:

- Hospital overcrowding
- Mental health and addictions
- Long-term care
- Home care
- Capacity planning

The Ministry has asked all LHINs to reference these focus areas and demonstrate how services will be delivered as efficiently as possible. These focus areas will be operationalized in the Annual Business Plan.

In addition to the requirement outlined in the AAD, the provincial focus areas and the LHIN IHSP and ABP must take into consideration:

- The *Local Health System Integration Act, 2006* (LHSIA)
- *Home and Community Care Services Act*
- LHINs' role in the delivery of home and community care and as a health-system manager, including in the context of regional digital health delivery
- French-language health services
- Indigenous peoples
- The Memorandum of Understanding and Accountability Agreement between the Ministry and each LHIN

All LHINs are expected to use the format included in the 2019-2020 Guidelines that were provided by the Ministry as the foundation for their ABPs and complete the templates in full. LHINs are free to customize the design, communications and layout of their ABP.

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Content to be included in the required template includes:

- Context (transmittal letter, LHIN's mandate, alignment with IHSP priorities)
- Health system oversight and management (identifying local priorities, goals and action plans)
- LHIN-delivered home and community care
- LHIN sub-regions (planned initiatives focused on the needs of the sub-region population)
- French-language health services
- Indigenous health
- Health equity
- Performance measures
- Risks & mitigation plans
- LHIN spending & staffing tables
- Integrated communications strategy
- Community engagement

Process and Timelines

LHINs are required to submit their draft ABPs to the Ministry by December 31, 2018 for review. Final, board-approved ABPs incorporating Ministry feedback are required by March 1, 2019. ABPs are not final until approved by the Minister of Health & Long-Term Care. Waterloo Wellington and many LHINs communicate the plan and directions in advance to the field since approval is often not received until well into the next fiscal year.

NEXT STEPS

1. Staff will use the Board-approved ABP 2019-2020 planning principles to guide the development of the next ABP which is currently underway.
2. Staff will share draft content with the Board, management, staff, patient advisory groups, sub-region leadership tables and others in the weeks ahead.
3. The Annual Business Plan also includes the LHIN's resource allocation, staffing and communications plan. These items will be included in the January version for Board approval.