

Terms of Reference Third Party Review - Quinte Health Care

Context

QHC gave notice to the SE LHIN in October 2008 that the operating deficit was projected at \$6.7 million for 2008/09 and at \$8.5 million for 2009/10. On October 21, 2008, the SE LHIN directed the hospital to prepare a mitigation plan and to submit it to the SE LHIN within 60 days. The objective of the mitigation plan is to develop alternatives to achieve the performance objectives in the QHC Hospital Service Accountability Agreement (i.e., the requirement to achieve performance targets specified in Schedule B-1; specifically the requirement to achieve a total margin of zero or better, waived in 2008/09 to a maximum of \$3.6M, and to achieve a balanced budget position by March 31, 2010).

The hospital's initial mitigation plan will include two or three detailed strategies which will be designed to ensure the hospital will continue to provide safe, high quality health care within its allocated resources. The strategies will be prepared by QHC's management to be presented to QHC's Board prior to it undertaking an extensive community engagement. The community engagement is required for the purpose of seeking input on the strategies and to provide the opportunity for the generation of new ideas and strategies for the QHC Corporation to consider on how it can provide safe, high quality, hospital care within its allocated resources.

It was agreed on November 13, 2008 that before the strategies are discussed with the Board and the communities that a third party review be conducted to test the ability of the options to achieve the required goal of providing safe, high quality care within the existing resource allocation.

The Third Party Reviewer will be jointly selected by the SE LHIN and QHC. The Third Party Reviewer will report jointly to the SE LHIN and QHC.

Review Process

The Third Party Review will:

1. Evaluate the Mitigation plan prepared by QHC Management and its two or three strategies, including validating, adding to and/or adjusting the assumptions and principles in six main categories:
 - A) Provision of Care – that the strategies have the ability to continue to meet the service levels currently provided by the Corporation and meet the requirements of safe, high quality care.

- B) Operations –the clinical framework will focus on quality of care in the following areas: Access, Efficiency, Effectiveness, Safety, Satisfaction for Patients and Staff.
- C) Finance will focus on the following areas: Financial viability from the standpoint of Capital, operations, PCOP and fundraising.
- D) Capital Redevelopment will focus on the relevance and scope of the planned redevelopment at the BG site and support for its expedited approval.
- E) Medical, Nursing and other Professional Staff required to support the options and the redevelopment.
- F) Risks and Constraints –vetting and evaluation of management approaches for addressing significant risks and constraints

2. Evaluate the Community Engagement Strategy and Communication Plan

Subsequent to the third party evaluation of the mitigation strategies and acceptance by the QHC and LHIN Boards, a series of interactions with health care stakeholders and community members will be held to seek feedback. The stakeholders will be internal and external to the process.

The approach will be multi-faceted and include solicited comment and input via multiple approaches, which may include email, web, open houses, as well as individual and group meetings with interested parties, including:

- General Public
- Physicians
- Hospital staff
- Patients and families

Evaluation of the communication plan and approach to ensure cohesive and coherent messaging from QHC, SE LHIN, MoHLTC and other stakeholders. Plan should include risk mitigation approach to address errant communications by media or other sources.

It is expected that the third party reviewer will oversee the community engagement process.

Scope of the Third Party Review

In addition to QHC management expertise, the scope of the review must incorporate available data and information from data review, current initiatives (including Regional Capacity, ER/ALC, etc) and appropriate subject matter experts (including the regional critical care and emergency department leads).

Measures of success to include financial and other performance metrics, with targets, consistent with existing benchmarks and existing internal and external measures, relative to the strategies.