



Health Service Provider Proposed Voluntary Integration Template

Ontarians expect responsive, accessible, and high-quality healthcare. The [Connecting Care Act](#), 2019 (CCA), outlines that one of Ontario Health's objectives is to promote health service integration to enable appropriate, coordinated, and effective health service delivery. This involves working with diverse Health Service Providers (HSPs) and Ontario Health Teams (OHTs) to identify, plan, and implement integration opportunities that increase overall system interdependence and connectivity. The CCA outlines this relationship and shared responsibility, stating “[Ontario Health] and each HSP and OHT shall separately and in conjunction with each other identify opportunities to integrate the services of the health system”.

Under section 35 of the CCA, HSPs are empowered to integrate services with those of another person or entity. Where the integration relates to services funded in whole or in part by Ontario Health, the HSP is required to provide Notice of Intended Integration and specified information about the integration. Alternative implementation pathways may exist for other activities. Ontario Health staff will aid HSPs to make these distinctions. Ontario Health encourages HSPs to have ongoing dialogue with Ontario Health staff regarding integration activities, including the submission of this template. This process is highlighted in HSP Service Accountability Agreements (SAAs) (MSAA & LSAA article 6.3; HSAA article 7.2). Exception: There is a different process for voluntary hospital integrations where section 4 of the *Public Hospitals Act* applies (mergers/amalgamations of hospitals).

Following preliminary discussions with Ontario Health, HSPs proposing voluntary integration can utilize this template to submit proposed integration activities to Ontario Health. It should be **completed jointly by all HSPs, organizations, agencies, and entities participating directly in the integration** (Integrating Parties').

This template is divided into two sections and should be completed in two stages. If the Integrating Parties elect to submit a proposed voluntary integration in an alternative format, the submission should nonetheless include the same questions and answers for ease of review.

Section 1 serves as a “Pre-Proposal”. Integrating parties are encouraged to complete and submit this template early in their integration process. This section will provide a high-level description of a prospective HSP integration opportunity, for the consideration of Ontario Health leadership. Importantly, submission of Section 1 does not constitute Notice under s. 35 of the CCA but rather guides thoughtful planning discussions among parties. Under the CCA, HSPs may provide Notice of Intended Integration (“Notice”) to Ontario Health at any point, however, completion of this section in advance is highly encouraged.

Following Ontario Health review of Section 1, Ontario Health will notify integrating parties of the required next steps. If an activity is considered a Voluntary Integration under the CCA, the integrating parties should complete Section 2.

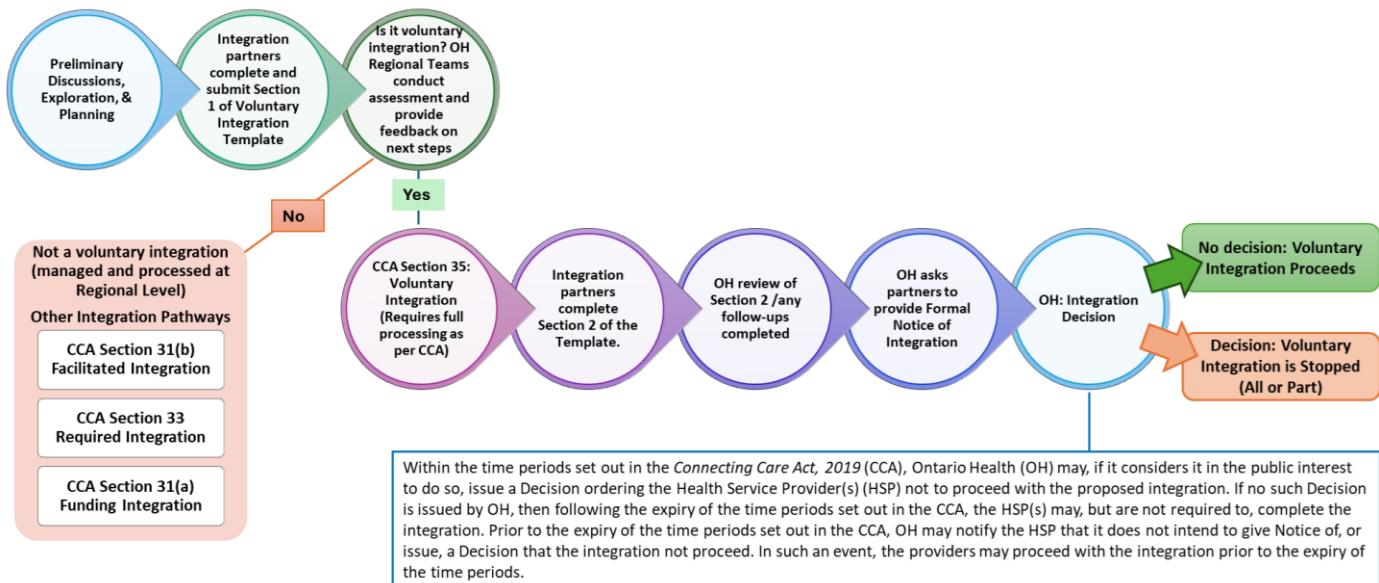
Section 2 provides space to outline additional details supporting an activity that is considered a proposed Voluntary Integration. It serves as a more in-depth expansion of section 1 that may have been completed and submitted to Ontario Health previously.

Once review of this section is complete by Ontario Health, the partners will then be required to provide Notice to Ontario Health.

Unless otherwise advised by Ontario Health, such Notice should include the information requested in Sections 1 and 2 combined. This information is requested under Section 35 of the CCA to ensure that Ontario Health has sufficient information to enable it to determine whether the proposed integration should proceed.

Diagram 1:

Voluntary Integration Proposal Process



Reference Materials:

- Ontario Health's Integration Framework
- Voluntary Integration Process Guide for Health Service Providers
- French Language Services Integration Process Guide

Section 1: HSP Voluntary Integration Pre-Proposal

Overview: This section provides a template for a high-level description of a prospective HSP integration opportunity, for the consideration of Ontario Health leadership, and will be used to gauge whether a proposed activity constitutes a Voluntary Integration under Section 35 of the *Connecting Care Act, 2019* (CCA).

Completion of this section will not constitute Notice of Voluntary Integration under the CCA. Rather, the completion of this section, to the best of the integrating parties' abilities, will initiate planning discussions with Ontario Health to advance the proposed activity. Upon assessment of Section 1, Ontario Health staff may find that the proposed activity is *not* a Voluntary Integration and should thus be processed via an alternative pathway.

Please attach any relevant supporting documentation as needed to inform this Section (Pre-Proposal).

General Information	
Proposed integration title	
Date of submission	
Contact Information	
Please list all Integrating Parties that are considered OH-funded (fully or partially), with their best contact persons' names and email addresses	
Please list all Integrating Parties that are <i>not</i> considered OH-funded, with their best contact persons' names and email addresses	
Ontario Health, Ontario Health Team (OHT), & Other Impacted Parties	
Please list all impacted/associated Ontario Health Region(s)	
Please list all impacted/associated Ontario Health Teams (OHTs)	
Please list any other potentially impacted parties such as impacted/associated organizations, agencies, institutions, funders, government ministries, etc.	
Description of Proposed Integration Activity	
Please describe the rationale and/or desired outcomes of the proposed integration. Please highlight the challenge or issue the proposed integration seeks to address.	
Please describe the key elements and activities of the proposed integration , including changes to any services funded fully or in part by Ontario Health.	

Referring to Ontario Health's Integration Framework , please describe the clinical, digital, and/or administrative components of the proposed integration (e.g., Administrative Approach – Service/Funding Transfer; Administrative Approach – Single Corporate or Legal Entity; Digital Approach – Shared IT/IS).
If the intended result of the proposed integration is a single corporate or legal entity , please provide a brief description of the transaction (i.e. statutory amalgamation, merger by asset transfer etc.)
Please describe how the proposed integration aligns with the mandates of each Integrating Party .
Please describe if/how this integration will impact resources agreed to be funded by Ontario Health and related accountabilities (such as under a Service Accountability Agreement (SAA)). Please elaborate on how existing SAAs or other arrangements may need to be adjusted or if new agreements need to be created.
Please briefly describe why the proposed integration is advantageous compared to the status quo and/or alternative courses of action .
Please describe key demographic, socioeconomic, linguistic (e.g., French Language and associated services), and health characteristics of the proposed integration's impacted population .
Please outline any key assumptions and constraints for the proposed course of action.

Anticipated Impacts of Integration
Please describe how the proposed integration would impact client/patient access, experience, and/or outcomes . Have clients/patients been engaged yet? If so, how.
Please describe how the proposed integration would impact provider experience .
Please describe how the proposed integration would impact issues of health equity – in particular, Indigenous and Francophone populations . Are there any populations that may experience significant unintended health impacts because of the planned integration? If so, how do you plan to mitigate potential negative impacts and/or amplify the positive impacts? Consider referencing Ontario Health's Equity, Inclusion, Diversity and Anti-Racism Framework
Please describe how the integration has or will involve the work of local OHT(s) or if there have been discussions with local OHT(s).
Please describe how the proposed integration will/may generate efficiencies and/or greater value for the health system .

Project Considerations

At a high level, please outline how this plan has or will include, consult, and engage with **potentially impacted parties and local communities**. Note that **results** from this communication and engagement process are requested in any Notice of Intended Integration.

At a high level, please describe **how the proposed integration process will be funded** (e.g., using existing resources). If applicable, please outline any **one-time resources needed** to undertake and complete the proposed integration project.

At a high level please outline **key milestones, anticipated timelines, necessary decisions, and next steps** for advancing the proposed integration.

At a high level, please outline **key risks** to the proposed integration and any associated mitigation strategies and/or contingencies.

SECTION 1 END

Please submit the completed Section 1 to your Ontario Health Region. You do not complete Section 2 unless requested to do so by Ontario Health.

Following Ontario Health review of Section 1, Ontario Health will notify integrating parties of the required next steps. Refer to diagram 1 on page 2

If Ontario Health has provided notification that the proposed activity is considered a Voluntary Integration under the CCA, the integrating parties are then required to complete Section 2.

Section 2: Notice of Intended Integration Under S. 35 of the CCA: Additional Integration Details

Overview: This information is requested under Section 35 of the CCA to ensure that Ontario Health has sufficient information to enable it to determine whether the proposed integration should proceed.

Completion and submission of this section, along with supporting documentation (i.e., signed Formal Notice of Integration letter), constitutes provision of Notice of Intended Integration under the CCA, triggering legislated timelines for Ontario Health to review, request additional information, and communicate a decision about whether to stop the integration from proceeding or allow it to proceed. Please contact Ontario Health with any questions, concerns, or comments about this process.

Key Attachments: In addition to any other supporting documentation viewed as valuable to this Proposal & Business Case, please ensure to attach the following with this form:

- HSP CEO/ED/Board Chair Letter for Notice of Voluntary Integration (signed by each Integrating Party)
- Copies of Boards' resolutions in support of proposed integration
- Other expressions of endorsement from key stakeholders

General Information	
Date Ontario Health notified partners that the activity is considered a Voluntary Integration under the CCA and to proceed with completing Section 2 and submitting with a Formal Notice of Integration	
Date of submission of Section 2:	
Are there any changes to information previously provided in Section 1? If so, please highlight or enable track changes to show where changes have been made.	

Part A: Voluntary Integration Project Description

Anticipated Impacts/Changes of Proposed Voluntary Integration
Please describe the governance or leadership changes, if any, that will result from this integration.
Please describe the labour relations impact, if any, of this integration (e.g., salary harmonization).
Please describe the human resources impact, if any, of this integration (e.g., changes to number of FTEs, volunteers, etc.). Please specify whether a human resources adjustment plan has been developed.

Please describe how this integration will impact financial and other resources (e.g., information technology, infrastructure; expanded upon below in Part 5).
Please describe any changes to organizational policies, procedures, and legal structures that will be necessary to advance this integration.
Please describe the integration's expected impacts on, and opportunities for expansion of, French Language Services within the affected population. Please include a statement on the FLS status of each HSP associated with the integration (e.g., designated, partially identified, identified, non-identified). <i>Refer to the French Language Services - Integration Process Guide.</i>

Part B: Communications & Engagement

Communications & Engagement Results		
Groups Engaged	Where applicable, please provide a description of any communications and engagement processes that were, or will be, used to consider the proposed integration.	Please provide, if applicable, a description of any issues that were raised in those consultation processes and your analysis, if any, of those issues.
Clients/Patients		
Staff/Human Resources		
OHT(s)		
Local Community (including priority/structurally vulnerable communities)		
Other Local HSPs, Agencies, and Organizations		
**Other (Non-OH) Funders		
Other: <insert>		

*Please attach any letters of endorsement from impacted parties, as is considered applicable

**For Non-OH Funders, please ensure answers provided specify the degree to which funds have been guaranteed beyond the proposed integration's completion date and identify any associated funding risks and mitigation strategies.

Part C: Voluntary Integration Considerations

Action Plan and Timelines <i>Please outline the key steps that have been taken and/or will need to be taken prior to completion of the proposed integration (include start and anticipated end dates and add more rows as needed).</i>	
Activity/Milestone	(Proposed) Date of Completion
Original Integration Planning/Initiation Start Date	
Overall Proposed Integration Completion Date	

Resource Plan <i>Including funds, staffing, infrastructure, assets, supporting services, contracts, etc.</i>
Please list each of the Integrating Parties' funders . Comment on if/how these funding dynamics will change and be sustained during/after the integration.
Please provide an overview of the financial analysis of the proposed integration. Describe if any fiscal savings can be reasonably expected from this integration, and if so, when (e.g., 1 year, 3 years). Describe where these will come from, when they will reasonably be realized, and how they will be reinvested. Outline any assumptions underlying these projections. Alternatively, indicate if no fiscal savings or efficiencies are expected. For ease, if a financial analysis was completed by the integrating parties, it can be referenced and attached as an appendix.

Evaluation Plan		
Please outline 2-3 key Process Measures/Indicators of Success that will be monitored throughout the integration process. These measures can be qualitative and/or quantitative. For each of these measures/indicators, please describe how it aligns with desired project outcomes, the frequency of its measurement, the intended goals/targets, and mitigation steps in case the goal/targets are not attained.	Example process indicator areas: <ul style="list-style-type: none">• Staff training and readiness for change• Community buy-in and support• Adherence to planned budget• Care continuity and service disruptions• Timeline adherence• Staff turnover/retention	

<p>Please outline 2-3 key Outcome Measures/Indicators of Success that will be assessed after this integration project is completed. These measures can be qualitative and/or quantitative. For each of these measures/indicators, please describe how it aligns with desired project outcomes, the frequency of its measurement, the intended goals/targets, and mitigation steps in case the goal/targets are not attained.</p>	<p>Example outcome indicator areas:</p> <ul style="list-style-type: none"> • Service delivery targets • Client and staff satisfaction • Fiscal savings and efficiencies • Geographic distribution of service offerings • Care continuity • Provider communication and data sharing • Equity, Inclusion, Diversity, and Anti-Racism 	
<p><i>Please note that A one- and two-year post integration progress report, summarizing achievements/progress based on the following will be required</i></p>		

Risk Mitigation Plan Please provide an overview of the proposed integration's key risks. Please address each of the pre-populated risks (1-6) and add as needed.

No.	Risk	Likelihood (low, medium, high)	Impact (low, medium, high)	Mitigation Tactic	Contingency Plan
1	Client/Patient				
2	Financial				
3	Human Resources				
4	Labour Relations				
5	Governance				
6	Legal/Policy				
7	Other: <insert>				
8	Other: <insert>				
9	Other: <insert>				
10	Other: <insert>				

Please submit the completed Section 2 to your Ontario Health Region. A team at Ontario Health will review the submission and may reach out to clarify / follow-up with any additional information requests.

Once the completed submission has been reviewed by Ontario Health, and all follow-ups are complete, Ontario Health will ask the integrating partners to provide Notice of the Intended Integration to Ontario Health (template available upon request).