

CHAIR/S:	Valerie Bishop De Young	NOTE TAKER:	Reem
ATTENDEES:	Chris Cobus, Jennifer Lalonde, Arvind Mohandoss, Anne Leduc, Andrea Nelson, Stephanie Fragman, Tanya Mac Donald, Makyla Gendron, Denic Boileau, Pono Traore, Steve Walsh, Emma Tibbo, Sylvie Lefebvre.	REGRETS:	

ITEM#		ITEM DESCRIPTION	ITEM NOTES / ACTION / OUTCOME
1.0	WELCOME		
2.0	Purpose: Help organizations understand integration in Ontario's health system, why it matters, and what it practically involves		Foster System Integration.pdf
	2.1	Why Integration Matters	<p>-Integration is a legal expectation under the Connecting Care Act, requiring health service providers and Ontario Health Teams to identify opportunities to coordinate and improve services for patients and communities</p> <p>-It is about improving care pathways, efficiency, access, and transitions across the system—not just structural change</p>
	2.2	What “Integration” Really Means	<p>-In healthcare, integration is broader than just mergers; it includes cooperation, coordination, partnership, alliances, and, in some cases, full mergers or amalgamations</p> <p>- Key message: Integration does not automatically mean losing identity or being absorbed. There are many levels of partnership.</p>

	2.3	Continuum of Partnership	<p>From lowest to highest complexity:</p> <ol style="list-style-type: none"> 1. Cooperation – informal, mutually beneficial collaboration 2. Coordination – aligned efforts with clearer processes 3. Collaboration – shared goals and agreed rules 4. Strategic Alliances – formal agreements, shared decisions 5. Full Integration – merger/amalgamation with shared systems/resources <p>Each level comes with different expectations, risks, and administrative effort</p>
	2.4	Voluntary vs. Involuntary Integration	<p>-Voluntary: When two or more non-profit agencies explore integration opportunities without direction to do so from the Ministry/Ontario Health. However, it is best to involve Ontario Health from the onset, so that they are aware of such exploration taking place and able to offer guidance/resources available.</p> <p>-Involuntary: Ministry/Ontario Health may direct integration and set timelines.</p>
	2.5	Process, Requirements & Timelines	<p>- Preliminary Discussions, Exploration, Planning between non-profits and letting Ontario Health know of these.</p> <p>-Ontario Health requires notification and a pre-proposal form when funded services or dollars may move between organizations.</p> <p>-If approved to proceed, organizations must submit a full business case, including stakeholder input and risk assessment.</p>

			-A 90-day review period applies (with possible extensions); Ontario Health do not formally approve integration efforts moving forward; however, 'silence' after the given review period generally means they have no objection.
	2.6	Types of Integration Considered by Ontario Health	<ol style="list-style-type: none"> 1. Clinical / Service Integration – improving quality, continuity, and efficiency 2. Digital Integration – shared systems, technology, and data supports 3. Administrative Integration – back-office efficiencies (finance, HR, IT, reception, etc.)
	2.7	Key Discussion Themes from Participants	<ul style="list-style-type: none"> • -Integration should ultimately benefit clients and communities. • -Opportunity to reduce duplication and streamline services. • -Importance of clarity on what exactly is being integrated (services, funding, back-end, etc.). • -Need to acknowledge risks and mitigation plans.
	2.8	Resources to Support the Exploration of Integration: Voluntary Integration Process Proposal Guide for HSPsOHTs (1).pdf VoluntaryIntegrationTemplateV2.docx French Language Services Integration Process Guide.pdf	-Ontario Health's Voluntary Integration Process and Proposal Guide for HSP's, including templates for the pre-proposal and proposal. -Document related to the impact on French Language Service requirements.
	2.9	Questions to consider when considering integration:	<ul style="list-style-type: none"> • Why integrate? – to enable financial stability? To improve governance, policies, and procedures? To improve/expand services? Other? • What does your agency have to offer?

			<ul style="list-style-type: none"> • How might your stakeholders respond/react to an integration, e.g., patients, clients, staff, others? • What is needed to come together? • What might you be prepared to give up, to reinvest in the integration? • What are the best options (let your imagination flow)?
	2.10	Lessons Learned:	<ul style="list-style-type: none"> • Develop your agency's policy on Voluntary Integration now, before considering an integration. • Contact Ontario Health (Shannon Gesualdo) from the start, if considering integration. • Consider your CSS partners before exploring integrative opportunities with other healthcare entities. • Do not be afraid to explore possibilities and engage in conversations.