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*An Overview of Voluntary Integration  
at Toronto Central LHIN*

*‘Voluntary Integration Manual’*

Updated May 2009

### ***What is Integration?***

Section 27(3)(A) of the **Local Health System Integration Act**, 2006 (LHSIA) requires a health service provider (HSP) to give notice to a LHIN of any integration that relates to services that are funded, in whole or in part, by the LHIN.

Under the LHSIA, the definition of ‘integration’ includes (but is not limited to) the following kinds of activities:

- **Coordination of services and interactions**
- **Partnering with others in providing services or in operating**
- **Transferring, merging, or amalgamating services, operations, or entities**
- **Starting or ceasing to provide services**
- **Ceasing to operate**

Under the LHSIA, the LHIN has the authority to stop a Voluntary Integration within 60 days of being given **formal notification**.

### ***What is the Toronto Central LHIN’s approach to Voluntary Integration?***

The LHIN’s goal is to *facilitate and enable* voluntary integrations that will improve system performance, sustainability and patient care.

Where possible, the LHIN will provide information, guidance and knowledge transfer.

Acknowledging that *one size does not fit all*, the LHIN will assess Voluntary Integration proposals according to their risk, size and scope, and impact.

### ***How do HSPs inform the Toronto Central LHIN of an Intended Voluntary Integration?***

Before providing a formal notice of voluntary integration, HSPs are encouraged to contact the LHIN in order to discuss their intended voluntary integration. HSPs should notify their key contact at the LHIN and/or Rachel Solomon, Director of Decision Support and Design at [Rachel.solomon@lhins.on.ca](mailto:Rachel.solomon@lhins.on.ca) or 416-969-3319.

Following this discussion with the LHIN, HSPs may be asked to provide additional information to aide the LHIN and HSPs in determining whether the proposal is a voluntary integration according to LHIN legislation and, if so, the readiness of the HSPs and of the proposal to proceed, and next steps for formally notifying the LHIN about the voluntary integration proposal. The LHIN will then ask the HSPs to provide **formal notification to the LHIN** by submitting a letter signed by HSPs involved indicating the HSPs’ intent to integrate along with a completed “**Voluntary Integration: Health System Improvement Proposal**.” The template for this proposal can be found on the LHIN’s website at: [www.torontocentrallhin.on.ca](http://www.torontocentrallhin.on.ca) Once the LHIN or LHINs involved receive formal notice, they have 60 days to review the proposal. During that period the LHIN(s) can decide to stop the voluntary integration. HSPs can begin implementing the voluntary integration after this 60-day period is over.

In **section 1.5** ‘Type of Improvement,’ HSPs must check ‘Integration Activity’

In **section 2.1** ‘Project Description,’ HSPs should include:

- Description of the intended integration
- Environmental scan
  - *Profile of population health*
  - *Inventory of the available resources, need and system capacity as they relate to the integration*
- Explanation of how the integration is in the public’s best interest
  - *How the integration will result in the provision of appropriate, coordinated, effective and efficient health services*
  - *How the integration will support the goals of LHIN and/or MOHLTC*
  - *How the integration will improve the quality of services, patient care and access*

In **section 2.2** ‘Population Impacted,’ HSPs should include:

- Impact of the integration on the population of the LHIN and any specific sub-populations
- Impact of the integration on labour and employment relations and volunteers
- Impact of the integration on other HSPs or organizations providing services in the LHIN
- Impact of the integration on government and organizations that provide funding to HSPs

In **section 2.3** ‘Community Consultation,’ HSPs should identify:

- Any community engagement and/or consultation that occurred
- Results of any engagement activities
- Specific groups or populations engaged and methods of engagement used
- Evidence of community/stakeholder support

In **section 2.4** ‘Benefit to the Population Served and the Healthcare System’ HSPs should include:

- How the proposed integration will improve the quality of services provided, patient care, and access
- How the proposed integration will promote efficient and effective use of resources

In **section 3.2** ‘Budget Estimate’ should include:

- How the integration will be financed

In **section 3.2 and 3.3** ‘Budget Estimate’ and ‘Sustainability,’ HSPs should include:

- How the proposed integration will contribute to overall health system sustainability

*For More Information contact:*

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