

**DHA Consolidation
Q&As - DHA Boards Announcement and
Official Administrator Appointment
June 6, 2014**

Summary:

- Leading up to the transition to one provincial health authority and the IWK Health Centre on April 1, 2015, the services of the voluntary boards of directors of the nine District Health Authorities (DHAs) will no longer be required as of June 30, 2014. Under the Health Authorities Act, an Official Administrator, Mr. George McLellan, is being appointed to lead the DHAs beginning July 1, 2014.
- Consolidating the nine district health authorities into one provincial authority means that their existing boards of directors will be replaced by one new provincial board next spring. As part of health system re-structuring, it is typical to change governance well in advance of the new board being created.
- This change only involves the district health authority boards of directors and there will be no impact on the delivery of health services and programs as a result. The nine DHAs remain as organizations (legal entities) until they are replaced by the new provincial authority March 31, 2015, and the IWK will remain a separate authority and will maintain its current governance structure.
- This is part of the DHA consolidation process and does not relate to the performance of the boards. The boards are populated by men and women who have dedicated countless hours, and in many cases years, to promote and support the health and wellness of their fellow residents. We owe a debt of gratitude to these boards of directors and sincerely thank the board chairs and members for their efforts and contributions.

1. What was announced today?

The people who sit on the District Health Authority boards are being replaced with an Official Administrator. This change will take place on July 1, 2014. The administrator is George McLellan, a senior administrator with significant board and volunteer experience, including a seat on Accreditation Canada's board of directors. As the IWK Health Centre will remain a separate entity, its board of directors will not be affected by this change.

2. With this announcement, do the District Health Authorities cease to exist?

No, nothing has changed except that the District Health Authority Boards are being replaced with an Official Administrator. Our health authorities continue to exist until March 31, 2015. Until then, board governance duties are assumed by the Official Administrator.

3. What is the impact on programs and services?

There is no impact. The Official Administrator will provide the leadership that was provided by the board of directors.

4. Why are you appointing an administrator to lead the system now, why not later in the fall?

As a part of health system re-structuring, it is typical to appoint an administrator to provide leadership in advance of the new board being created. A number of factors have gone into this decision.

Board vacancies: The current boards have a number of vacancies. No new appointments are being made to the boards during this transition period since as it is a very time-consuming appointment process (months) and it is not reasonable to expect citizens to join a governance board for an organization that will not exist in spring 2015.

Quorum: Boards require quorum in order to make decisions. As time goes on, it will be increasingly difficult for the boards to meet quorum and to effectively carry out their duties. Our boards have very committed volunteers and all are meeting quorum to date. Their numbers, however, are dwindling.

Challenges planning for the future: Some of their duties cannot be effectively carried out given that the organizations will not exist after April 1, 2015, like strategic planning.

Provincial planning: As we move towards a provincial view of health care, having nine separate boards will become increasingly challenging. Having a provincial administrator with a provincial view can assist in beginning to ready the organizations for the new structure.

Summer break: The boards don't regularly meet over the summer so moving forward with this change at the end of June allows the boards to wrap up their activities and projects prior to the scheduled summer break.

5. What role and responsibilities will the Official Administrator have?

The administrator assumes the roles and authorities of the board in governing and overseeing the health authorities. Some of the administrator's key responsibilities are: the supervision of the CEOs; approving credentialing and privileging of physicians, monitoring quality and patient safety risks and business plan and financial monitoring

The CEOs of the DHAs will report to the Administrator.

6. Will the administrator lead the DHA consolidation work?

No. The administrator is responsible for governing the existing nine authorities until they are replaced by a new structure on April 1, 2015. He is not responsible for designing the future structure. That is being done by a Transition and Design Team.

7. When will the new Board of Directors be in place?

The new Board will be recruited and oriented in early 2015 so that they are ready to begin their term on April 1, 2015, when the provincial authority is legally created.

8. How will current Board committees and functions take place with an Administrator?

Over the next few weeks the Administrator will work with the Department and CEOs to put in place the processes to ensure continuity of critical board functions such as medical credentialing, quality control and financial monitoring. The goal is to ensure a seamless transition of duties.

9. How will this impact community health boards, foundations and auxiliaries?

Community health boards, foundations and auxiliaries will continue to operate as usual. Where community health boards, foundations and auxiliaries had matters that came before the boards, they would now go before the administrator. Otherwise we anticipate no changes.

10. How will this impact on Health Association Nova Scotia, given that many of their board members are health authority board members?

The HANS Board remains in place. However, a number of seats on its board are held by DHA board members. As administrator, Mr. McLellan will have options available to ensure that the HANS board continues to have the necessary membership. Consultation will occur with the Chair of the HANS board in this regard. This change will have no impact on the ability of HANS to continue operating and providing its mandated services.