



Planning Together for Our Future Generations



Capital Plan Development Task Force Update #21/22

RELEASE: August 1, 2018

The Capital Plan Development Task Force met on July 16 and 30.

The task force received the collated results of the 23 individual evaluations by the eligible members and engaged in robust discussion about the final analysis of the three models against the 12 evaluation criteria supported by 500 pages of data. The task force acknowledged the evaluation analysis would not be a purely numbers-driven exercise and agreed to approach the evaluation with both quantitative and qualitative analysis. Members shared their observations from completing the evaluation and noted that no one criterion could stand alone because the criteria were so interconnected. Members discussed challenges that rose to the surface, like maintaining volumes that achieve critical mass while also ensuring reasonable access, and how some study findings were ultimate “game changers”.

The task force identified that its study of a preferred service delivery model has been based on the best information available today. For example, members acknowledged that affordability of a model (both capital and operating) are important considerations, but are not driving the recommendation. The task force agreed some assumptions are necessary to make when contemplating how the future health care landscape could be different — from hospital funding formulas to better integration of care locally — and the importance of revisiting and refreshing information at every stage of the Ministry’s capital planning process.

Task force members acknowledged there are advantages and disadvantages to each model, and reinforced the need to ensure the preferred model is flexible enough to sustain necessary changes in acute care, yet protects viability of core acute care services. The task force will present its service delivery model recommendation to the Board on August 8 ([learn more about this meeting](#)).

The task force determined that any potential shortcomings of the model would need to be addressed in their subsequent Part B work when deliberations turn to model design and how best to configure or structure it in order to achieve the best model for the future.

The next task force meeting is September 4, 2018.

Membership

Cameron Renwick (Chair)

Don Mitchell (Vice Chair)

Scott Aitchison

Dr. Sheena Branigan

Natalie Bubela

Charlane Cluett

Dr. Caroline Correia

Dr. Keith Cross

John Curran

Jan Davidson

Peter Deane

Donna Denny

Michael Duben

Harold Featherston

Dr. Graeme Gair

Dr. Biagio Iannantuono

Dr. Jennifer Macmillan

Dr. David Mathies

Philip Matthews

Cathy McMurray

Graydon Smith

Terry Shields

Eric Spinks

Cathy Still

Beth Ward