Office of the Auditor General of Ontario
Bureau de la vérificatrice générale de l'Ontario

Value-for-money audit of:

LHINs—Local Health Integration Networks

2015 Annual Report, Section 3.08

Background

- Ontario's 14 not-for-profit LHINs began operating in April 2007 with mandate to achieve a "fully integrated" health system under local control

- LHINs responsible for, among others, hospitals, long-term-care homes, and Community Care Access Centres

- LHINs provided $25 billion FOR health-care services in 2014/15, or about half of Ontario's total health-care spending

Audit Objective

- Assess whether LHINs, in conjunction with the Ministry, have effective systems and procedures in place to facilitate the provision of the right care at the right time in the right place for Ontarians

Overall Conclusions

- Ministry has not clearly defined what would constitute a "fully integrated" health system

- Ministry has not developed ways to measure how effectively LHINs are performing as planners, funders, and integrators of health care

- Depending on where they live, some people get better access to better integrated health care than others

Specific Findings

- In 2014/15, LHINs on average met performance targets in 6 of 15 performance areas

- Performance gap among LHINs has widened over time in 10 of 15 areas

- Ministry does little to hold LHINs accountable when low performance persists year after year

- LHINs need to better monitor health service providers' performance

Recommendations

- Establish a clear picture of what a fully integrated health system looks like, and set timelines for achieving targets

- Analyze reasons for widening gap in performance of LHINs

- Set timelines for bringing performance gaps among LHINs to acceptable levels

- Communicate best practices observed in well-performing LHINs to LHINs that need intervention

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