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1.0 Purpose and Scope

Ontario Health Teams will help to transform the provincial health care landscape. By building high-performing integrated care delivery systems across Ontario that provide seamless, fully coordinated care for patients, Ontario Health Teams will help achieve better outcomes for patients, improved population health, and better value for the province¹. The Guelph & Area Ontario Health Team (G&A OHT) has been designated as an “Ontario Health Team” by the Minister of Health under the Connecting Care Act, 2019. This ‘Terms of Reference’ describes how partners of the G&A OHT work together to achieve their shared vision of providing a continuum of integrated health care and support services to the persons to whom they provide care and services. Partners of the G&A OHT share a commitment to achieving the quadruple aim as it advances the vision and goals of the G&A OHT on behalf of its community. Partners of the G&A OHT collectively commit to working together to fulfill Ministry of Health expectations.

The Guelph and Area Ontario Health Team Steering Committee will provide leadership and oversight to the development and operational activities of the Guelph and Area Ontario Health Team.

The Guelph and Area Ontario Health Team Steering Committee has no authority to make a decision binding on a member organization. The Steering Committee will not duplicate or replace any member organizations’ governance or operational decision-making. The purpose of the Steering Committee is to enable strategic decisions and facilitate the implementation of collaborations and other initiatives in an efficient manner to achieve the shared objectives, work plans and the joint strategic plan (once developed) etc.

2.0 Guiding Principles

Partners are committed to the draft ‘Guiding Principles for the G&A OHT’, as developed by the G&A OHT Strategic Governance Council in consultation with all G&A OHT core partner Boards of Directors members (See Appendix 1).

3.0 Mandate

The Steering Committee’s role is to create a forum for core partners to plan, design, implement, and oversee the Guelph and Area OHT. The Steering Committee’s roles and responsibilities include to:

a. Planning and Priorities

- i. establish an overall strategic plan for the G&A OHT and develop and oversee (i.e. measure, monitor and track progress of) an annual work plan consistent with a common strategic plan; ensure key actions of working groups continuously align with strategic plan and support course correction as necessary.
- ii. identify and measure the priority populations for the G&A OHT and the impact of decisions on them; oversee system level change in support of enhanced care for those populations and all the residents of the OHT at mature state
- iii. develop the name and central brand for the G&A OHT

b. Quality and Risk

- i. Provide oversight for quality and risk

¹ ‘Ontario Health Teams Full Application Form’ template

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- ii. Ensure processes are in place to identify and advance evidenced-based and best/leading practices across the G&A OHT;
- iii. Review, collaborate on, and monitor safety and quality standards and performance and quality improvement for the G&A OHT;
- iv. Identify risk issues and consider risk allocation, mitigation, and corrective actions for G&A OHT activities;
- v. Ensure the development of a complaints and significant event process for issues that impact more than one partner;
- vi. Develop a risk management framework (e.g. risk registry) for issues that could negatively impact the G&A OHT and its residents; and
- vii. Review and approve standards and mitigation plans to address cyber security risk.

c. Resources and Accountability

- i. Develop guidelines for allocation and sharing of costs and resources, including funding earmarked for G&A OHT and as well as human resources, capital, and facilities and costs related to supporting the work of the G&A OHT;
- ii. Review and collaborate on financial performance of the G&A OHT, resource allocation and use, best practice, and innovation;
- iii. Develop clinical and financial accountability standards; and
- iv. Facilitate and oversee the development of a digital health strategy for the G&A OHT

d. Governance and Compliance

- i. Evaluate and identify opportunities for improvement as it relates to the integrated leadership and governance function and structure of the G&A OHT on an ongoing basis, including the establishment of a standardized process to identify and admit additional partners to the G&A OHT, moving towards sectoral representation as appropriate;
- ii. Develop processes to facilitate dispute and conflict resolution; and
- iii. Ensure compliance with all reporting requirements.

4.0 Structure: Sub-Committees and Working Groups

- a. See Appendix 2 for a description of the Guelph and Area OHT (G&A OHT) Year 1 Organizational Structure.
- b. The composition, mandate, and processes of each working group are set out in each group's Terms of Reference
- c. With the support of an Executive Sponsor (i.e. a member of the Steering Committee) each working group will support the functions of and develop a work plan to achieve the annual objectives within, their respective mandate(s). In doing so, working groups will develop recommendations for consideration by the G&A OHT Steering Committee, including requests for resources and will provide updates regarding key milestones achieved and bring to the Steering Committee any material barriers to progress or risks to be mitigated.
- d. The Guelph & Area Ontario Health Team (G&A OHT) Strategic Governance Council will provide oversight for the development and execution of the G&A OHT joint strategic planning process and make a recommendation to the Direct Core Partner Boards regarding a G&A OHT governance structure that ensures governance best

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practices and processes by Year 2 and beyond. The composition, mandate, and processes of the G&A OHT Strategic Governance Council are set out in the Council's Terms of Reference.

5.0 Duties, Responsibilities and Commitments

- a. As an Ontario Health Team under the Connecting Care Act, 2019 the G&A OHT will be the recipient of funding from the Ministry of Health and/or Ontario Health. Partners will contribute resources (e.g., funds, people, capital, and facilities) to the shared priorities and accountabilities of the G&A OHT - such contributions to be made recognizing different abilities and depth in resources and funding.
- b. The Guelph and Area Ontario Health Team (G&A OHT) Steering Committee is established as the collaborative decision-making body of the G&A OHT and will:
 - i. Provide executive support to the Strategic Governance Council including:
 - Development of a joint strategic planning process²
 - Execution of the joint strategic planning process
 - Development and recommendation to the Strategic Governance Council of a leadership structure for the Guelph and Area Ontario Health Team in Year 2 and beyond.
 - ii. Provide support and oversight of the development and execution of G&A OHT work plan to achieve the objectives and deliverables.
 - iii. Support the collection of data to identify the G&A OHT attributed population and to use this data to understand and improve the health of the attributed population.
 - iv. Provide executive level leadership and support of the G&A OHT Working Groups including ensuring that the work of each working group is informed by engagements with local communities, patients, families and caregivers and physicians and other clinicians. (See 'Executive Sponsor Role Description')
 - v. Provide support, direction and performance evaluation of employees of the G&A OHT

6.0 Conflicts of Interest

- a. Each partner will, to the best of their ability, eliminate, minimize, or mitigate any conflict between the G&A OHT and its other contractual and service obligations and relationships outside of the G&A OHT.
- b. If a partner becomes aware of any fact or circumstance that may harm that or another partner's ability to perform its obligations as described in this document, it will promptly notify the Steering Committee and the other partners of the nature of the fact or circumstance and its anticipated impact so that the partners, through the Steering Committee, may consider how to remedy, mitigate, or otherwise address the fact or circumstance.
- c. A formal conflict of interest policy will be developed at the Governance level

7.0 Quorum

- a. A majority of the Core Direct Partners (i.e. voting) (50% plus 1) is required for meetings
- b. If a member is not able to attend, the member may (but is not required to):
 - i. send a designate for that meeting, who shall be included in quorum and may vote, or
 - ii. consent to the meeting proceeding in the member's absence by so informing the acting Co-Chair in which case the member shall be deemed to have consented to all business transacted at the meeting for which prior notice was given.

² The Vision and Values of the G&A OHT will be developed as part of the joint strategic planning process.

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- c. If no quorum, the members present may meet for discussion purposes only and no decisions shall be made.

8.0 Decision Making

- a. The G&A OHT Steering Committee Decision Making Framework (see Appendix 3) will be used to support collaborative discussion aimed at reaching a consensus³.
- b. Members will be expected to demonstrate fairness and a commitment to in-depth evaluation of a matter under review and to endeavour to put the interests of the persons served by the G&A OHT, and the success and sustainability of the G&A OHT, above the interests of their respective organization.
- b. Each Direct Core Partner Executive member will be entitled to one vote.
- c. All decisions will be made by majority (i.e. 50% plus 1) support from voting members in attendance

9.0 Inter-team Performance Discussions and Dispute Resolution

- a. All working group and Steering Committee members shall use their best efforts to address inter-team performance issues and to resolve any disputes in a collaborative manner through informal discussion and resolution. As one approach to facilitate and encourage this informal process, the partners involved in the dispute may jointly develop a written statement describing the relevant facts and events and listing options for resolution. If these efforts do not lead to a resolution, any involved partner shall refer it to the Steering Committee.
- b. The Steering Committee shall work to resolve the dispute in an amicable and constructive manner. If the Steering Committee members have made reasonable efforts, and the dispute remains unresolved, the Steering Committee shall escalate to the Strategic Governance Council.
- c. A formal dispute resolution policy will be approved at the Strategic Governance Council.

10.0 Privacy and Confidentiality

- a. G&A OHT Steering Committee members commit to maintaining confidentiality of information presented and discussed at the Steering Committee meetings and through their interactions with other partners in their role as a member of the Guelph and Area OHT Steering Committee.

11.0 Information Sharing & Transparency

- a. Partners shall engage in on-going communication and disclosure and shall provide information to each other, and to the Steering Committee and working groups of the Steering Committee to achieve the shared objectives/strategic goals.
- b. If a partner becomes aware of an issue that might materially impact its, or another partner's ability to perform its obligations under this Terms of Reference, they will promptly notify the Steering Committee of the nature of the fact or circumstance and its anticipated impact so that the partners, through the Steering Committee, may consider how to remedy, mitigate, or otherwise address the fact or circumstance.
- a. Each partner will try to eliminate, minimize, or mitigate any conflict between the G&A OHT and its other contractual and service obligations and relationships outside of the G&A OHT.

³ Consensus means that each member is prepared to support the decision or, if applicable, recommend it to their board of directors or governing body, even if they do not agree with the decision/recommendation.

12.0 Financial Management

- a. As decided by the G&A OHT Steering Committee, Guelph General Hospital will receive and manage funds on behalf of the G&A OHT.
- b. The G&A OHT Finance Working Group will support financial reporting requirements, variance analysis and year end reconciliation.
- c. Each partner will contribute to the G&A OHT annual budget as per the methodology recommended by the Finance Working Group and approved by the G & A OHT Steering Committee.
- d. Each Working Group will propose resource requests to the Finance Committee (through the G&A OHT Director) to support the development of the annual budget which will be presented to the G&A OHT Steering Committee for consideration/approval.

13.0 Membership

- a. The Guelph and Area Ontario Health Team Steering Committee includes:
 - i. Direct Core Partner Executives - One executive from each direct core partner agency (Voting)
 - ii. Enabling Core Partner Executives - One executive from each enabling core partner agency (Non-Voting)
 - iii. Guelph & Area Physician Association representative (Voting)
 - iv. Patient/Caregiver – 2 representative(s) (Voting)
 - v. Director of the Guelph and Area OHT Transformation (Non-voting)
 - vi. Other non-voting staff as agreed upon by the Committee
- b. A core partner may replace its member on the Steering Committee or appoint a temporary alternative at its own discretion on reasonable notice to the other partners and to the Steering Committee Chair(s), provided the replacement or alternative has decision-making authority comparable to the member being replaced.
- c. The Steering Committee, through a majority vote, may require a partner, or other representatives on the Steering Committee, as the case may be, to replace its Steering Committee member where that member is not acting in accordance with the guiding principles and in pursuit of the shared vision of the G&A OHT. The replacement member shall have authority comparable to the member being replaced.
- d. The G&A OHT joint strategic plan support the identification of the sequencing of additional priority populations (based on data & need). Additional Steering Committee membership will then be added to the G&A OHT accordingly.

14.0 Other Procedural Items

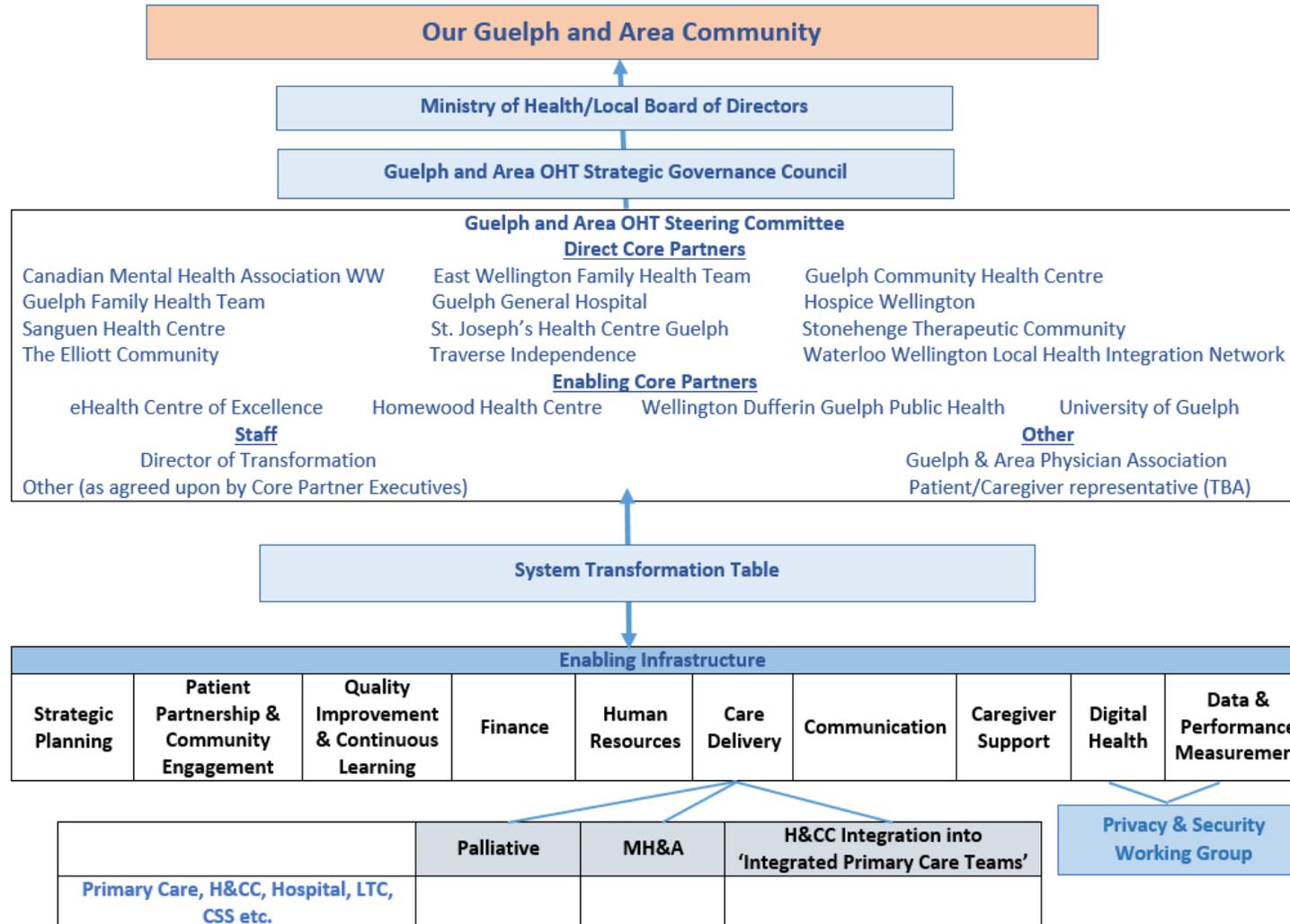
- a. The Steering Committee, through its working groups, will develop and implement a joint communication and engagement strategy to ensure timely and relevant information sharing with all stakeholders including Community Partners, Patients/Clients, Families and Caregivers, the community and other stakeholders. The strategy will include a plan identifying a spokesperson for the OHT and describing distribution and alignment of key messages, target audiences and communication type and frequency.
- b. The Steering Committee shall meet bi-weekly or as needed
- c. Terms of reference and work plan will be reviewed annually

Appendix 1 – DRAFT G&A OHT Guiding Principles

1. Clearly identified shared priorities and achievement of established outcomes
<ul style="list-style-type: none"> • Clearly identify the problem • Establish measurable outcomes/metrics within realistic timeframes
2. Focused on the health of our community (Systems Focused)
<ul style="list-style-type: none"> • Better patient and population health and prevention <ul style="list-style-type: none"> - evidenced – based outcomes but also consider innovation that results in new outcomes; - better patient, family and caregiver experience; better provider experience; and better value and efficiencies. • Keep front line in mind when making changes and include them in the planning of change <ul style="list-style-type: none"> - change takes time and effort and has an impact on providers • Shift accountability from organizations to an unwavering focus on and accountability for what we share i.e. the patients we all serve within Guelph and Area OHT <ul style="list-style-type: none"> - letting go of our “turf” to collectively and collaboratively meet the health care needs of our patients, their families’ and care givers and our unique community • Equity <ul style="list-style-type: none"> - more services for those more in need • Partnerships/shared resources <ul style="list-style-type: none"> - share knowledge and resources to optimize the health of the population – we all own it/share responsibility for it
3. High functioning and engaged governance structure including an appropriate balance of representation, skill and diversity
<ul style="list-style-type: none"> • Patients/clients and physicians/clinicians are active participants in planning and decision making <ul style="list-style-type: none"> - Consider a patient/caregiver position OR alternative options to have a representative voice of a patient group at the table - Physicians/clinicians are active participants in planning and decision making • Ensure right size i.e. not too large
4. Transparent clear processes and communication for decision-making
<ul style="list-style-type: none"> • Establish processes to address conflict resolution and conflict of interest • Use an ethical decision-making framework and tools to support decision making process • Clearly communicate decisions, resources allocated & expected outcomes (including how success will be measured) • Build foundational trusting relationships through the investment of time and resources to establish process that will ensure transparency and open, accessible, bidirectional communication
5. Focus on Sustainability of OHT Resources
<ul style="list-style-type: none"> • Financial Stability • Quality • Relationships

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Appendix 2 – Year 1 G&A OHT Structure



Appendix 3 - Year 1 Decision Making Framework

Elements of Best Health Care System (As developed by the Guelph Puslinch Leadership Table, June 2019)	Decision Making Framework
<p>Our best health care system will:</p> <ol style="list-style-type: none"> 1. Be guided by the voices of people who use our services – we will listen to our client ideas and feedback 2. Value and invest in prevention – including early intervention; promoting protective factors and reducing risk factors; and supporting healthy behaviours 3. Be easy to access – access will be integrated, seamless and without barriers 4. Provide empathetic, client-centered, high quality and consistent care – practitioners will be equipped to best meet the individual needs of their patients 5. Leverage the power of partnerships – partners will include traditional, non-traditional and community stakeholders 6. Embrace digital innovation – Maximize digital health and technical solutions (e.g. electronic health records, connected IT) 7. Be supported by good governance - good governance is effective and efficient 8. Be accountable for outcomes – meaningful impact in the lives of people we serve 	<ol style="list-style-type: none"> 1. Is the decision supported by those who we serve (i.e. patients, caregivers, families etc.)? 2. Is the decision aligned with legislative, accountability and other requirements? 3. Does this decision support our commitments to prevention and health equity? 4. Does the decision support achievement of the quadruple aim i.e. better outcomes, better value/efficiency, better patient experience, better provider experience? 5. Does this decision support partnerships? 6. Does this decision advance digital innovation? 7. Is the decision align with/support achievement of the Guelph and Area OHT strategic plan, governance practices and processes? 8. Does this decision mitigate risks and minimize unintended consequences?