



## **ONTARIO PRIMARY CARE COUNCIL TERMS OF REFERENCE**

### **MANDATE**

Primary care is the foundation of Ontario's health-care system. The Ontario Primary Care Council (OPCC) provides leadership, through relationships, to advance person-centred primary care in Ontario and develops actionable plans informed by pressing provincial priorities and trends, as well as legislative mandates and reports such as the *Excellent Care for All Act*, the Minister's Action Plan for Health and the Primary Health Care Planning Group Reports on Access, Accountability, Efficiency, Quality and Governance.

### **GUIDING PRINCIPLES**

The Council's guiding principles include:

- Primary care is central to the performance of whole health system effectiveness;
- Planning for the system needs to be based on population needs;
- Programs and services must be appropriate, accessible, timely, high-quality, comprehensive, continuous, evidence-informed, equitable and culturally competent;
- Care coordination is a core function of primary care; and
- Collaborative interprofessional teams working to full scope of practice are key to success.

### **SCOPE OF AUTHORITY**

The Council's scope of authority is confined to the following areas in relation to primary care policy, funding and programmatic developments:

- To position the Council as a co-ordinated association committee that is proactively engaged by government and its agencies for consultation.

- To collectively strategize to inform individual organizational responses.
- To strive for a unified voice through collective response.

The Council will focus its efforts by building a strategic common vision for a primary care system and collectively address priorities that are identified and approved annually.

## **COMMITTEE COMPOSITION**

Founding members of the Council are:

- Association of Family Health Teams Ontario
- Association of Ontario Health Centres
- Nurse Practitioners' Association of Ontario
- The Ontario College of Family Physicians
- Ontario Medical Association
- Ontario Pharmacists Association
- Registered Nurses' Association of Ontario

The representatives of the Founding Members are the Board Chair, and the CEO or Executive Director. While delegates will be accepted on occasion, the senior leadership is expected to attend.

One staff person from each Founding Member organization may attend the meetings in an observer or resource capacity.

Founding Member Organizations may bring a permanent observer to the meetings with the approval of the Council. Founding Members may, from time to time, bring a one-time observer to a meeting with the approval of the Co-Chairs.

## **OTHER PARTNERS:**

The Assistant Deputy Minister of the Ministry of Health and Long-Term Care's Negotiations and Accountability Management Branch, and a designated LHIN CEO will be invited to serve as liaisons for their respective agencies. These individuals are invited to attend a portion of each meeting and do not have voting privileges. Founding Member Organizations will agree to other partners and any changes to these.

The Council endeavours to engage with external partners (e.g. HQO, Public Health, CCO) or subject matter experts, at least twice a year and when needed.

## **OPERATIONAL PRINCIPLES**

The Council will:

- Strive to operate by consensus and collaboration;
  - When engaging in collective response exercises, organizations reserve the right to opt-out.
  - When speaking as a collective, if consensus is not achieved, the Council will specify which members have provided their endorsement.
- Recognize and value each Association;
- Utilize open, effective, timely, and transparent communications;
- Function through the active participation of all members;
- Openly debate perspectives and issues in a confidential manner; and
- Communicate outcomes, not the process or particular organizational positions.

## **CHAIR ROLE:**

The Council will always be co-chaired by two founding member organizations on a rotating two year term. During the inaugural term, one co-chair will agree to serve for a single year to provide staggered continuity. The Council will strive for continuity by electing an incoming co-chair 12 months in advance of the expiration of the outgoing co-chair's term.

Founding members are invited to submit their organizational nomination by notifying the current co-chairs. The Council will appoint co-chairs through a majority vote. Each founding member organization has one vote for the purpose of electing the co-chair. A proxy vote will be accepted by email for the election if the senior leadership of the organization is unable to attend the meeting. The Council will strive to ensure that the co-chairs have access to the capacity needed to assume the secretariat role and represent the diversity of the founding member organizations. Upon expiration of a co-chair term, one year must elapse before the same organization can assume the co-chair role again.

The responsibilities of the co-chairs will alternate and include:

- Chairing meetings;
- Tracking action items and ensuring continuity of issues between meetings;
- Preparing and distributing the meeting agenda and minutes;
- Co-ordinating meeting materials and uploading them to the online repository;
- Inviting guests;

- Scheduling meetings 12 months in advance; and
- Securing meeting space and refreshments.

The elected organization will decide which person will serve as the co-chair, however, it must be either the CEO/ED or President/Chair.

The co-chairs are not automatic spokespersons for OPCC. The co-chairs can serve as spokespersons on matters relating to OPCC, however, only with the approval of founding members. Only approved messaging will be communicated and organizations that have 'opted-out' will be noted.

## **COMMUNICATIONS**

When engaging in collective response, the Council will appoint a founding member to provide leadership in co-ordinating the response.

Minutes from the meetings will be distributed within two weeks following the meeting and will focus on outcomes, actions and decisions.

Approved meeting minutes may be shared by Council members with their own constituencies; and with other stakeholders through the Council co-chairs.

An online document repository will be hosted by the Ontario Medical Association (OMA). The co-chairs will provide the OMA with materials for publication in advance of the meeting and are responsible for ensuring that the repository is complete. One secure account will be provided to each founding member association.

## **FREQUENCY**

The Council will meet in person a minimum of six times per year. The Council will aim to schedule half-day meetings the morning of the third Wednesday of every second month.

## **WORKING GROUPS**

The Council may appoint time-limited and task-based working groups to focus on particular projects or responses. The mandate will be defined by the Council and the working group will report to the Council. The working groups will be chaired by a Founding member that is approved by the Council.

## **UPDATES TO THE TERMS OF REFERENCE**

The Terms of Reference will be updated on an annual basis in July.

Approved: August 2012  
Revision #1: December 2014  
Revision #2: July 2015