

CSS Collaborative, Ontario East (‘The Collaborative’)

Terms of Reference

Overview

Community Support Service (CSS) provider organizations work to ensure that older adults and adults living with disabilities are empowered and feel supported to live independently and safely at home.

The CSS Collaborative, Ontario East (‘The Collaborative’) provides an opportunity for CSS providers to work collaboratively as system leaders across the East region to co-design initiatives and make recommendations to enhance the sector. It aims to ensure that the CSS sector is fully recognized and included as a partner in the health system.

The CSS Collaborative partners with health care and community stakeholders to build strong, responsive and seamless systems of services, in alignment with the Ministry of Health (MOH) and Ontario Health (OH priorities), so that clients and caregivers can receive the care they need.

Objectives

- Build mechanisms to support effective communication for community sector partners across the East region, and determining the channels that will be most effective to share information at a local, regional, and provincial level;
- Collaborate to create a functional local and regional-level approach that supports advancement of leading practices and innovations, integrated care models, and ensures an equity approach to service planning and delivery in the CSS sector;
- At maturity, identify common and emerging issues across the CSS sector care continuum and developing regional strategies through collaboration with system partners;
- Provide well-informed advice to Ontario Health East and, provide a forum where Ontario Health East can engage the CSS sector to advance provincial priorities as outlined in the OH Annual Business Plan; and
- Provide input into the development of provincial-level performance indicators and targets for the CSS sector and participate in provincial performance management through regular reporting and performance discussions.

Membership

Membership in The Collaborative is open to all not-for-profit providers of CSS services who are funded by Ontario Health. Members participate voluntarily, with the support of their organizations (in kind).

The Collaborative is comprised of up to 18 executive leaders, including two (2) Co-Leads, from member organizations which represent the depth and breadth of Community Support Services provided across the geography. To the extent possible, membership will reflect the region's geography, CSS functional centres/services, and cross-sector expertise ensuring equity and diversity of populations served.

The Regional Director is an ex-officio member of The Collaborative.

a. Selection Criteria

The composition of The Collaborative is intended to mirror the diversity of CSS providers, to the best extent possible, including:

- Representation of CSS functional centres and programs to facilitate two-way communication and connection with frontline providers of CSS services. Membership is attached to experienced and knowledgeable individuals and not to organizations.
- Geographical representation based on a combined understanding of service area and population. To ensure equitable representation, membership will be proportionately reflective of the sub-regions within OH East (OH East).
- Indigenous Health Service provider(s)
- Designated French Language Service provider(s)
- A balance of Rural/Urban/Suburban perspectives.

Essential competencies that reach beyond experience and representation are advised. Members are health system leaders who:

- Have applied for membership through their response to an Expression of Interest
- Are experienced, committed providers of Community Support Service(s) with decision-making authority to move forward key issues and recommendations
- Are able to balance local and regional perspectives
- Are willing and able to actively participate in the regular meetings and work of The Collaborative; and
- Are committed to the Objectives of The CSS Collaborative.

b. Term

Members of The Collaborative will serve a two (2) year term. For purposes of continuity and historical context, some terms may be extended to complete assigned projects or to overlap with new members. No more than 50% of The Collaborative shall turnover at the same time.

Membership will be reviewed annually during the Fall of each year.

- Re-appointment of a member after completion of a term will be at the discretion of the members. Members may serve up to a maximum of three (3) consecutive terms (i.e. 6 years).
- New members will be selected from those who have responded to an Expression of Interest. Membership applications will be screened by the Co-chairs of The Collaborative, with recommendations moving forward to the members of The Collaborative for a vote.

- Vacancies (through attrition or end of term) will be filled within six (6) months, based on the selection criteria.

c. Guests / Subject Matter Experts

Subject matter experts are ex officio to The Collaborative and regular guests at meetings of The Collaborative. They include representatives from:

- Ontario Health East (OH East)
- the Ontario Community Support Association (OCSA)
- Ontario Health atHome
- The Patient and Family Advisory Council of OH East.

Additional members from other sectors may be included as guests, on an as needed basis. All members and guests agree to share responsibility, resources and accountability in achieving the goals of The Collaborative.

Structure

The Collaborative represents the CSS provider organizations operating within Ontario Health East (OHE). The Collaborative is responsible to contribute to the hiring and oversight of the Regional Director, in alignment with the terms defined in the funding agreement. The Collaborative provides strategic vision, leadership and direction for the work of the Regional Director and team. The Collaborative also plays a critical role in ensuring the regional resources are overseen, accountable, and effective.

Together, The Collaborative and the Regional Director are responsible for priority setting and advancing strategic directions. They bring together individuals and organizations to create and act on opportunities toward a common vision and collective goals.

- a. Co-Leads- will be individuals selected by the members, from amongst their numbers. Co-Chairs shall serve one term of two (2) years, with terms staggered between the Co-chairs to ensure continuity of leadership.

Co-Leads will:

- Co-chair meetings of The Collaborative and identify any guests to be invited
- Champion initiatives and operational priorities of The Collaborative
- Ensure unity of message with decisions and positions of The Collaborative, and speak to them, as required
- Work closely with the Regional Director to ensure sufficient and appropriate resources are allocated to supporting the work of The Collaborative (i.e. coordinating meetings, materials, guests, minutes and follow-up activities)
- Monitor the work performance of the Regional Director in collaboration with the Employer of Record¹
- Participate in an ex officio capacity in any Standing Committee and Task Force.

¹ As at 2023, the Employer of Record is Western Ottawa Community Resource Centre (WOCRC).

- b. Members: members of the CSS Collaborative will bring a system perspective to the table and function as good stewards of the health care system on behalf of the people of Ontario.

Members will:

- Actively participate in meetings to ensure that emerging opportunities, risks and issues are identified and that the perspectives of membership inform the work of The Collaborative.
- Provide input and expertise to enhance the quality and equity of Community Support Services provision throughout the region.
- Ensure the focus of discussions reflects the lived experience of clients and caregivers.
- Ensure the perspective of their peers are considered in decision-making.

- c. The Collaborative: working with unity of purpose, the group will:

- Champion the value of Community Support Services
- Provide strategic vision and contribute to planning that supports the common goals and overall vision of The Collaborative
- Be proactive and forward-thinking in identifying trends and opportunities that may inform decision-making and action
- Discuss and provide input and feedback regarding community support policies and/or the strategic directions of OH East (OH East) and other funding agencies.
- Review these Terms of Reference annually and adjust as needed.

d. Regional Service Networks: Regional Service Networks are formal groups of CSS provider organizations with interest in a specific OHRS functional centre (ie MOW, Transportation, Assisted Living Services, Attendant Services, Adult Day Programs, Homemaking, etc.) Participation in a Regional Service Network is voluntary and open to all CSS providers across the greater geography of Ontario Health East.

Regional Service Networks are encouraged to share their specific issues and perspectives through a representative who has applied for membership and been invited into The Collaborative.

Meeting Frequency

The Collaborative will meet monthly or at the call of the Co-chairs. Meeting agendas, minutes and action items will be recorded, and made available to members in a timely manner.

Quorum

Quorum shall be achieved when the majority (50%+1) of members of the CSS Collaborative are present.

Conflict of Interest

Each member of The Collaborative is expected to demonstrate fairness and commitment to matters under discussion, and to put the interests of persons served by OH East and community support services above the interests of their respective organization(s). At each meeting, members shall disclose any real, perceived or potential conflict(s) of interest.

Decision Making

Where decision making is needed, The Collaborative will work toward consensus. Members of The Collaborative that are actively employed by health service providers of Community Support Services are each entitled to one vote. Proxy votes/delegates are not permitted.

Consensus means reaching majority agreement from amongst all members of The Collaborative. This ensures that all opinions, ideas and concerns are taken into account. Consensus is neither compromise nor unanimity. The consensus process means that members will focus on putting forth their best effort to achieve the best recommendation at the time.

Consensus involves the following concepts:

- 'I can live with it'
- Not voting
- Flexibility
- Patients/clients are at the centre of our work
- Everyone at the table is equal – bringing different experiences, resources, knowledge/strengths.

Should a consensus or agreement not be reached, a decision may be made to consult, in a timely fashion (ie between scheduled meetings), with a broader constituency of CSS providers. Should further discussion not yield consensus, a majority vote will decide the outcome of the discussion.

Standing Committees and Task Forces

Finance Committee – shall be established to monitor the use of the financial resources allocated to the regional resources. The Finance Committee shall meet as needed. Membership of the Finance Committee shall include one or both Co-chairs, the Regional Director and others selected from the membership, as needed.

Task Forces shall be convened as determined by The Collaborative.

Dissemination of Information

Minutes of meetings of The Collaborative will be distributed to all funded CSS providers and other networks as appropriate within OH East.

Other communication pathways will be established and used to ensure the balancing of timeliness and accuracy of information flow, with consideration of duplication.

