

Couchiching Ontario Health Team Primary Care Network (COHT PCN)
NEWLY: The Couchiching OHT PCN Leadership Council

Draft Terms of Reference – Sept 11, 2020; updated March 24, 2021; updated Sept 29, 2021; updated October 17, 2021; **REVISION TO COHT PCN LEADERSHIP COUNCIL May 3rd, 2024**

1. Vision

Primary Care Networks (PCNs) will connect, integrate and support primary care providers within the Couchiching Ontario Health Team (COHT) to improve the delivery and coordination of care for patients and improve primary care provider experience

2. Couchiching Ontario Health Team

Ontario Health Teams (OHTs) are being introduced to provide a new way of organizing and delivering care more connected to patients in their local communities. Under the model of OHTs, health care providers work as one coordinated team - no matter where they provide care (including hospitals, doctors, public health, mental health and addictions, human and social services, home and community care providers and community leaders). At maturity, OHT providers, advisories and organizations will be clinically, ethically, and fiscally accountable for delivering a complete and coordinated continuum of care to a defined geographic population.

The COHT is a community-based coalition that facilitates and supports a collective vision for health care in Couchiching (i.e. Orillia, Oro-Medonte, Severn, Ramara). The COHT includes indigenous, municipal, and healthcare leaders to develop a seamless, patient-centred health system.

3. Purpose

The COHT Primary Care Network Leadership Council (PCN-LC) has been established to represent the voice of the primary care provider community. The PCN-LC will provide collaborative advice and leadership for the planning and implementation of the COHT. The PCN will be defined as all those providing primary care in the Couchiching geography. It is expected that the appointed representatives will represent the best interest of all primary care providers within the COHT and champion primary care informed initiatives with mutually agreed upon accountabilities.

4. Guiding Principles

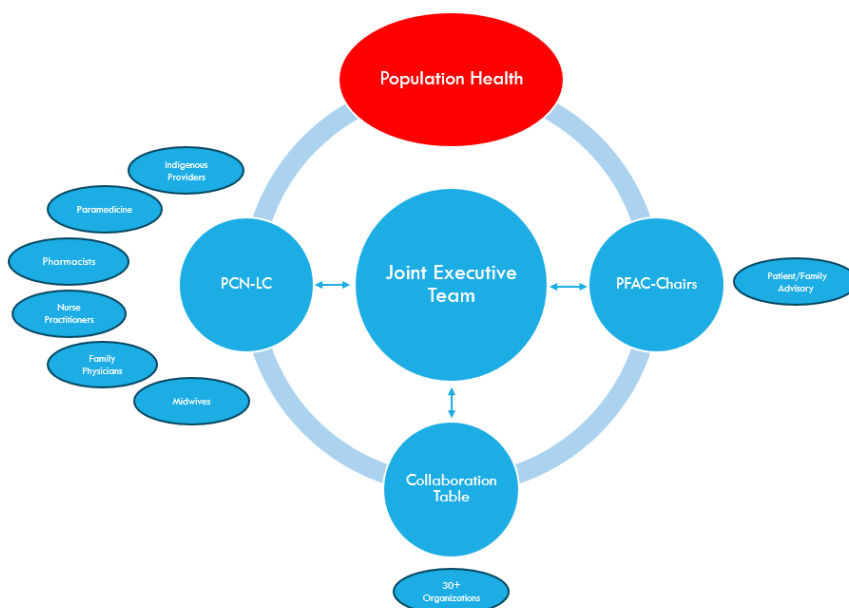
The PCN-LC will embrace and adhere to the following guiding principles:

1. All members are committed to the Couchiching OHT shared vision and strategic priorities
2. All members will work in a respectful, professional, collaborative, and empowering manner to model excellent diversity and equity practices
3. All members will recognize and respect the diversity of personal experiences, skills, expertise, communication styles and leadership styles within the group

5. Accountability

Membership will reflect and consider the health care needs of the population in the Couchiching region. Membership may vary to represent the uniqueness of practice populations and delivery models in the Couchiching region as it evolves. The PCN-LC may invite other healthcare and community members to participate as needed. The Nurse Practitioner Community of Practice, Community Pharmacist Network and Clinical non-voting leadership roles will help inform the work of the PCN-LC. The PC Lead (Chair) and PC Associate Lead will serve as voting members on the Joint Executive Committee as the Primary Care Leads. All PCN members (including Leadership Council) are encouraged to attend the COHT Collaboration Table.

Collaborative Relationship Structure



6. Members of Primary Care Network - Leadership Council:

Members of the PCN-LC will include:

- Couchiching OHT Primary Care Physician Lead*
- Couchiching OHT Primary Care Associate Lead*
- Couchiching Family Health Team Lead*
- Orillia Family Health Organization Lead*
- Couchiching Family Health Organization Lead*
- Huronia Nurse-Practitioner Led Clinic Lead*
- Orillia Midwifery Lead*
- OSMH Dept Family Medicine Chief*
- Mamaway Clinician/Indigenous Primary Care Provider*
- Rama Primary Care Provider*

- Pharmacist x 2 – Community Pharmacist Network*
- Nurse Practitioner x 1 – Community of Practice*
- Community Paramedicine x 2* (Simcoe County, Rama)
- Clinical Co-Leads, Integrated Clinical Pathways
- Clinical Lead, Homecare Modernization
- Clinical Digital Lead
- Clinical Co-Leads, Unattached and Vulnerable Care Planning
*voting member

7. Quorum and Decision-Making

50% of membership attending will constitute quorum. Members are encouraged to send a delegate if they cannot attend a meeting. Consensus decision-making is preferred and voting can be conducted to determine level of consensus. Decision-making will be 50% + 1 if voting.

8. Terms

As per the term of the organizations represented OR 3-year term with the option to renew for 3 more years. Job positions posted followed by a joint selection process by PCN-LC and COHT JET for the PC Lead (Chair) and Associate Lead and Clinical leadership positions with PCN-LC having final approval.

9. Roles and Responsibilities

- Attend monthly COHT PCN-LC meetings or send a delegate
- Support planning and implementation of the Couchiching OHT
- Provide feedback and advice on the priority populations for integrated care planning and implementation and follow the guidance from OH in OHT evolution
- Support the various working groups (with planning, model of care design etc.)
- Inform the development of strategies to improve access to primary care, including virtual and the broader adaptation of digital health tools, recruitment of providers and access specifically for vulnerable populations
- Provide advice and strategic direction on the alignment of primary care providers and organizations to improve system integration, enhance patient care and provider experience
- Communicate and engage with all local primary care providers and physician specialist colleagues to gather feedback through formal and informal mechanisms in order to advise the Council and to share key messages back to the primary care and physician community
- Provide advice and strategic direction on the planning, development and implementation of specific primary health care initiatives to the Couchiching OHT JET
- Council may be asked to promote the Couchiching OHT strategic directions and new initiatives back to their respective communities in partnership with the Couchiching OHT JET and membership at large.
- **Confidentiality** - Members will respect the privacy of the council participants and agree not to disclose information or views expressed by individuals during

meetings. Deliberations should remain confidential until there is general agreement and consensus to make them public. In addition, all council members must agree to not disclose any other confidential information or documentation.

10. Role of Primary Care/Family Physician Lead

To provide leadership and continuity of communication across the primary care groups and to be a Primary Care/Physician Lead on the COHT JET and to Chair PCN-LC.

- Set the agenda for meetings, ensure meeting materials are distributed prior to the call/meeting
- Lead meetings to ensure advancement of the agenda within the timelines allocated for specific agenda items
- Facilitate meetings to ensure input is solicited from members and each member has an equal voice
- Organize the structure and function of the PCN and PCN-LC ensuring responsiveness and effectiveness for all members
- Ensure the broadest bi-directional informing occurs across all types of primary care provider groups in the COHT
- Ensure the Physicians of the COHT have access to and input into all COHT initiatives, clinically informing the work ongoing
- Consolidate the recommendations and action items from the PCN-LC to inform and engage with the COHT JET and COHT planning table
- Inform the PCN-LC of recommendations and action items from the COHT planning table
- Participate directly in COHT work to clinically inform as needed

11. Role of Primary Care Associate Lead

To provide leadership and continuity of communication across the primary care groups and to be a Primary Care Lead on the COHT JET.

- Coordinate and chair PCN-LC meetings when required (Chair is absent)
- Facilitate meetings to ensure input is solicited from members and each member has an equal voice
- Organize the structure and function of the PCN and PCN-LC ensuring responsiveness and effectiveness for all members
- Ensure the broadest bi-directional informing occurs across all types of primary care provider groups in the COHT
- Consolidate the recommendations and action items from the PCN-LC to inform and engage with the COHT JET and COHT planning table
- Inform the PCN-LC of recommendations and action items from the COHT planning table
- Participate directly in COHT work to clinically inform as needed

12. Meeting Frequency

Monthly meetings September to June inclusive with the possibility of additional meetings if need arises. It is anticipated that the time commitment will be approximately 1 hour of meeting and 3 hours of preparation time per month. It is anticipated there will be members on additional Couchiching OHT working groups and/or Collaboration Table. This could be an additional bi-weekly or monthly meeting. Primary Care Physician Lead and Associate Lead will attend COHT JET and hold a vote each. Non-voting Leads (see job descriptions) will attend all COHT activities related to their area of leadership and report into and help inform the work PCN-LC as required. Affiliated primary care groups will also help inform the work as required by attending Leadership Council.