

# Scarborough Health Network Community Advisory Council Terms of Reference

## Role

### Purpose:

The Community Advisory Council (CAC) of Scarborough Health Network (SHN) is a volunteer body that provides advice and feedback to the Hospital's Board of Directors on its directions, policies, and services as they relate to the community and on current and emerging issues.

The CAC is part of the hospital's community engagement strategy, extending the hospital's communications network into the community. Along with the Patient and Family Advisory Council, the Scarborough Ontario Health Team and SHN's regular community stakeholder touchpoints, the CAC is an important means of ensuring that the hospital remains engaged with and accountable to the communities it serves.

### Objectives:

The objectives of the CAC are to:

1. Act as an advisory resource to the hospital's Board of Directors on the planning, implementation, and evaluation of hospital activities in alignment with the strategic plan, including but not limited to:
  - a. Participate in and provide input to the hospital's strategic planning process;
  - b. Provide feedback and guidance on corporate initiatives of strategic importance; and,
  - c. Respond to specific requests for advice in formulating policy drafts relating to service planning, population health needs, and service gaps.
2. Serve as a formal mechanism for the exchange of ideas and discussion of community concerns and ideas related to the hospital, as identified by CAC members and by members of the community served by the hospital.
3. Strengthen and maintain partnerships between the community and the hospital.
4. Serve as one of the hospital's communications and outreach channels to the community on the work and plans of the hospital and its impact on the community.
5. Participate in the hospital's community engagement strategy, as appropriate.
6. Participate in the development, monitoring, and revision of the hospital's Patient Declaration of Values.

## Responsibilities

To be effective, members of the CAC shall be expected to:

1. Be familiar with the hospital's mission, vision, values, services, and strategic plan.
2. Model the hospital's values and work positively, cooperatively, and respectfully with other CAC members, senior management, hospital staff, physicians, and the Board.

3. Keep informed of relevant hospital and community news, health issues, and needs; and proactively connect with the community, in consultation with the SHN staff support representative, to speak knowledgeably about the hospital, health needs, and views.
4. Act in good faith and in the best interests of the community as a whole and the hospital.
5. Attend at least 75% of meetings annually, and actively participate in CAC meetings.
6. Adhere to the hospital's confidentiality policy at all times. When specific confidential documents and verbal reports are shared with CAC they will be identified as such by the hospital.

### **Membership**

1. Members shall represent the hospital's diverse community, giving regard to gender, age (including youth and elderly populations), ethnicity, culture, and skills.
2. A member of the CAC may not be an elected public official, or an employee of SHN, Ontario Health or the Ministry of Health (MOH). This requirement does not apply to the hospital Chief Executive Officer who will serve as an ex-officio member of the CAC.
3. A member who is a candidate for public office or accepts a temporary role as an employee of SHN, Ontario Health or the MOH may either resign from the CAC or request a temporary leave of absence. A recommendation to grant a temporary leave of absence will be based on an in-camera vote of the CAC members (excluding the member requesting the leave) and submitted to the Governance Committee of the Board for approval.
4. Members may be from an external health service provider organization provided they present themselves and their views and feedback as a member of the community, rather than as an employee of their organization.
5. Total members of the CAC shall not be less than 10 individuals, and shall not exceed 20 individuals, not including the Board liaison and Hospital CEO.
6. Members of the Scarborough Health Network CAC shall represent the Scarborough community at large. Members shall live and/or work in Scarborough and/or identify with Scarborough Health Network as their hospital.
7. The members shall be selected through a robust recruitment, application and interview process conducted by the Governance Committee of the hospital's Board of Directors.
8. For recruitment of CAC members, the Governance Committee shall establish a selection panel comprised of representatives of the Governance Committee and two current CAC members to participate in the selection process of new CAC members. One of the two CAC members must be either the Chair or the Vice-Chair of the CAC. The selection process shall be based on clearly defined criteria and will include a written application and an interview process. To fill vacancies, the hospital shall advertise in local media, on their website, through social media, and any other means available to them at the time. Recruitment methods will respond to the diversity and geographic mix of the community.
9. Each CAC member shall be appointed for an initial term of three years, and may be reappointed for a second three-year term for a total membership of six consecutive years. Should exceptional circumstances present, the Governance Committee will retain the authority to appoint new members outside the scope of the Terms of Reference.

10. The terms outlined above may be for shorter durations, as determined by the Governance Committee, in order to stagger the turnover of members to promote CAC continuity and succession planning.

#### **Board Liaison**

1. On an annual basis, the Board of Directors shall designate a Director as the CAC liaison.
2. The Board Liaison, or delegate, will attend all CAC meetings, including in-camera meetings, as an ex-officio member.

#### **Chair**

The Chair of the CAC shall be a member of the community appointed by the Board of Directors, following recommendation by the CAC for a one-year term. The term may be extended no more than two additional times, for a total of three consecutive years as Chair by recommendation of the CAC

#### **Vice Chair**

The Vice Chair of the CAC shall be a member of the community appointed by the Board of Directors, following recommendation by the CAC for a one-year term. The term may be extended no more than two additional times, for a total of three consecutive years as Vice Chair by recommendation of the CAC

#### **Frequency of Meetings and Manner of Call**

1. The CAC shall meet at least 4 times annually (or greater or lesser number of times should more or fewer meetings be required). At 4 times annually, meetings shall not take place in July, August, and December. Should a special meeting be required in the months of July, August, and/or December, this will be called by the Chair and/or Vice-Chair, as needed.
2. The time and day of meetings shall be confirmed on an annual basis and approved by the CAC at the first meeting.
3. A virtual option shall be made available to those that cannot participate in person.
4. Meetings of the CAC shall be open to the public as observers. The CAC may, however, conduct in-camera sessions for CAC members only (including the CEO as an ex-officio member), without the public present. The public shall be notified of meetings through various communications tools such as the hospital's website and social media channels.
5. Members are encouraged to communicate among themselves and with other community groups to provide input prior to the formal meetings in adherence with the Hospital's confidentiality policy where applicable.

#### **Quorum and Decision-Making**

1. Quorum for the CAC shall be achieved by the majority of voting members (50% plus one).
2. The CAC shall strive to achieve consensus on issues; if necessary, recommendations shall be determined by majority vote (50% plus one). Where decisions are achieved by vote, the minutes shall reflect the motion and outcome of the vote.

3. The Chair is eligible to vote when a vote is called. In the event of a tie, a second vote shall be called and the Chair shall then abstain from the second vote

### **Resources**

1. The CAC shall be supported by hospital resources provided by the hospital to support meetings, schedule meetings, record and distribute minutes, prepare reports, etc.
2. The hospital's President and CEO, or delegate, will attend all CAC meetings, including in-camera meetings, as an ex-officio member and be available to provide information and updates to the CAC, at the CAC's request.
3. The CAC may invite health service providers and subject matter experts as guests to their meetings, as needed, to better inform the CAC members on issues being addressed.
4. New CAC members shall be provided an orientation to the CAC, to the hospital and to the Scarborough community. The Chair of the CAC will receive an additional orientation to support effective leadership of the group.

### **Reporting**

1. The CAC shall report to the Scarborough Health Network Board of Directors.
2. The CAC will prepare an annual work plan, in alignment with hospital priorities, to guide their meetings. This work plan will be prepared with assistance from management and submitted to the Board of Directors for approval.
3. The CAC Chair (or Vice Chair in their absence) shall present reports to the Board of Directors at their regularly scheduled meetings. Reports shall include updates on regular agenda items, as well as special reports that address specific matters.
4. The effectiveness of the CAC will be evaluated annually and the results reported to the Board. Content of reports shall be prepared collectively by the members of the CAC to reflect the CAC consensus or decisions.
5. Reports can be prepared with the assistance of hospital management, as needed.
6. Reports and minutes of the CAC meetings shall be posted on the hospital's public website.
7. The CAC shall be responsible for the annual review of its Terms of Reference for approval by the Board of Directors.

**Date Approved** – October 3, 2019

**Date of Last Review** – November 14, 2023