

Central East Regional Specialized Geriatric Services Entity

Governance Authority

Accountabilities and Responsibilities

1.0 Background

In May, 2011, the Central East Local Health Integration Network (Central East LHIN) and their health service partners endorsed a Shared Governance framework as a mechanism to move forward a more coordinated and integrated Specialized Geriatric Services (SGS) system across the Central East LHIN. With the burgeoning population of seniors, the Central East LHIN and its health service partners recognize that in order to further advance the planning and implementation of a network of specialized services across the LHIN, inter-organizational collaboration and overall system coordination is more critical than ever. Through the creation of an organized system and common infrastructure, partners will leverage their existing investments in SGS and capitalize on new funding opportunities, with the intention of extending service delivery beyond what is currently possible and delivering a truly “regional” geriatric program. Formally organizing and coordinating SGS across the LHIN is a significant step in the evolution of a seniors’ strategy that will bring about the integration of services for frail seniors across sectors and communities in the Central East LHIN.

Following release of the report titled *“Regional Specialized Geriatric Services in the Central East LHIN – Options for Coordinated Delivery, Organization and Governance” (April 2011)*, the Central East LHIN Board of Directors approved the implementation of a regional model for the organization, coordination and governance of specialized geriatric services. The Central East Regional Specialized Geriatric Services (CE RSGS) entity will provide a platform and structure to facilitate clinical and service delivery integration activity intended to build better health outcomes for frail seniors across the Central East LHIN.

2.0 Definition of Specialized Geriatric Services

Specialized Geriatric Services provide a range of services to support older individuals who are frail. It includes specialized geriatric assessment, consultation, short-term treatment, rehabilitation, and short-term specialty case management. It includes both the specialties of geriatric medicine and geriatric psychiatry. SGS uses inter-professional teams with expertise in the care of the elderly, and have specialty physicians (geriatricians or geriatric psychiatrists) as part of the team.

SGS includes both established and emerging service components. These include, (but are not limited to) geriatric emergency management, geriatric rehabilitation, geriatric day hospital,

geriatric outreach, geriatric specialty clinics, inpatient geriatric consultation, inpatient geriatric assessment and treatment, acute care of the elderly units, urgent-emergency care clinics, psychogeriatric resources supporting community and long-term care, and nurse-led outreach to long-term care.

3.0 **Vision, Mission, Core Values and Foundational Principles for the Central East RSGS Entity**

The following preliminary vision, mission, principles and values to guide the development of Regional Specialized Geriatric Services are contained in the RSGS (2011) report noted in the Background section above:

Vision: Better Health Outcomes for Frail Seniors in the Central East LHIN.

Mission: Together, we are accountable to create and deliver an integrated continuum of care that is responsive to the needs of frail seniors and their caregivers and achieves equitable and timely access to quality services at the right time in the right place.

Core Values: Integrity, Dignity, Independence, Participation, Security and Safety, Transparency, Trust.

Foundational Principles support coordinated and integrated health services for frail seniors across the Central East LHIN; and include:

- Equitable Access to Care
- Innovation and Best Practice
- Seamless Care
- Timeliness, Responsiveness
- Collaboration and Respect
- Accountability and Commitment

4.0 **Purpose of the RSGS Entity Governance Authority**

The RSGS entity Governance Authority is the “umbrella organization” for Central East Regional Specialized Geriatric Services) and is ultimately accountable for the development, delivery and monitoring of an integrated regional system of Specialized Geriatric Services for frail seniors.

The Governance Authority will provide overall system leadership including:

System Planning

- Ensure commitment to the philosophy and intent upon which the shared governance framework is founded, through the execution of Memorandums of Understanding with the Central East LHIN and its health service providers

- Ensure compliance of member health service providers with the Vision, Mission, Values and Principles for the CE RSGS, and standards set for SGS services.
- Lead the development of a region-wide CE RSGS Strategic Plan and associated priorities.
- Develop a five-year strategic plan to guide investments and activities related to SGS in the Central East LHIN.
- Ensure ongoing and proactive planning for the health needs of frail seniors taking into consideration the changing demographic profile of seniors in the region.

System Funding and Performance

- Negotiate annually with SGS providers the deliverables and priorities for the upcoming fiscal year.
- Submit a CE RSGS Annual Service Plan to the Central East LHIN.
- Review, endorse and commission proposals for submission to the Central East LHIN for new SGS funding streams.
- Monitor performance of the system (financial, efficiency and quality) and ensure accountability of SGS providers for service performance and quality standards.
- Hire, set the compensation for and monitor the performance of the Executive Director.

Advocacy, Communication and Education

- Advocate for the needs of frail seniors and promote the enhancement of specialized services to meet their unique health challenges.
- Champion health system changes that improve access to and delivery of health services for seniors, both locally and provincially.
- Engage members of administrative teams from service provider organizations through opportunities to participate in education to expand the working knowledge of senior administration related to frail seniors and SGS.
- Leverage social change to address system-wide ageism and the stigma associated with frailty and dependency.
- Participate in community engagement activities related to frail seniors and related issues in the Central East LHIN.

5.0 **Host Agency**

In August 2011, the Central East LHIN Board awarded Northumberland Hills Hospital (NHH) as the host agency for the RSGS entity. As the host agency, NHH committed to meeting three key deliverables as follows:

- Establish a shared governance model;
- Recruitment of the RSGS program staff; and,
- Citing of RSGS offices and back office support.

The host agency does not hold any additional authority over the governance of the system. As an SGS provider, NHH is an equal partner in the shared governance model.

6.0 Governance Authority Committees

As outlined in the Governance Authority Committee Structure (Appendix A), the Governance Authority will be supported by the Service Operations Committee (SOC). Reporting to the Service Operations Committee will be a number of subcommittees and tactical teams. Much of the coordination and integration work will occur through both the standing subcommittees and the tactical teams.

The Service Operations Committee is responsible for coordinating the delivery of the CE RSGS Annual Service Plan that includes the strategic initiatives and priorities established by the Governance Authority, and for making recommendations to the Governance Authority regarding integration and/or quality improvement opportunities.

7.0 Conflict of Interest

The role of the Chair and members is to, by bringing their expertise/experience; represent the interests of frail seniors in the Central East LHIN, and not personal interests nor the interests of the organization, sector or profession to which they are affiliated.

The Governance Authority Chair and members have a duty to ensure that trust and confidence in the integrity of the decision-making processes of the Governance Authority are maintained. Key to this is ensuring members of the Governance Authority are free from conflict or potential conflict in their decision-making. A member who is in a position of conflict or potential conflict should immediately disclose such conflict to the RSGS entity Governance Authority by notification to the Chair or Vice Chair. The disclosure should be sufficient to disclose the nature and extent of the member's interest. Disclosure should be made at the earliest possible time and prior to any discussion and/or decision making on the matter. The member shall not attempt in any way to influence the decision making.

8.0 Decision-making Process

Decisions of the Governance Authority will be made through a process of achieving consensus. In the event consensus cannot be achieved, voting of the membership shall occur. The Chair will vote only in the event of a tie vote. The results of all decisions will be recorded in the minutes. Once a decision is made, all members will support the decision. The Governance Authority will speak with one voice. The Chair and Executive Director are the spokespersons for the CE RSGS entity Governance Authority.

9.0 **Confidentiality**

All information furnished to or acquired by members of the Governance Authority written or verbal, shall be considered public information UNLESS it is stamped or otherwise indicated confidential. In the event that personal health information is collected, used and/or disclosed by a member, the members agree that any such collection, use and/or disclosure shall be in accordance with the Personal Health Information Protection Act, 2004.

10.0 **Insurance and Indemnification**

Members of the CE RSGS entity Governance Authority shall seek and confirm insurance coverage from their current insurance provider for their work on the CE RSGS entity Governance Authority. Northumberland Hills Hospital's insurance coverage will be extended to the Senior's Advocate/ Public Member. Insurance coverage recommended is claims arising in relation to decisions made by the Governance Authority including general liability, professional liability, products liability and contractual liability in an amount not less than five million dollars for any one occurrence for personal injury, bodily injury or property damage howsoever caused. The members shall indemnify and hold each other harmless from and against all damages, costs, expenses, charges, losses or liabilities whatsoever (including, without limiting the generality of the foregoing, claims of third parties of whatsoever kind, legal fees or otherwise) arising from or incidental to any failure by the defaulting member to perform and discharge their obligations and liabilities.

11.0 **Membership**

All efforts will be made to balance the membership of the Governance Authority by continuum of care sector, skill, and geography. Initial membership will include the following:

- Chief Executive Officer/ Executive Directors from SGS provider organizations (4)
- Chief Executive Officer/ Executive Director from other health care provider organizations serving frail seniors (1)
- Seniors Advocate, Public Member (1)
- Physician Specialist in Geriatric Medicine or Psychiatry (1)
- Long Term Care Home Administrator (1)
- Primary Health Care Representatives (Family Physician/ Nurse Practitioner) (2)
- CEO (or designate) of the CE CCAC (1)
- Executive Director, Community Support Service Agency (1)

- Central East LHIN CEO (or designate)(1) – ex officio, non-voting
- Executive Director (or delegate) of the Regional Geriatric Program of Toronto (1) – ex officio, non-voting
- Executive Director, CE RSGS (1) ex officio, non-voting

12.0 **Selection and Terms of Office for Governance Authority Members**

Terms of office of CE RSGS entity Governance Authority members will be three years. Initial Authority members will have a combination of one, two, and three-year terms, in order to protect the integrity of the Authority during its first few years of operation. Beginning in the second year of operation, the Governance Authority will establish a Nominating Committee to bring forward nominations for consideration and approval.

13.0 **Chair and Vice-Chair Appointments**

The Chair and Vice-Chair positions will be one-year terms and will be appointed from within the Governance Authority membership.

14.0 **Frequency of Meetings**

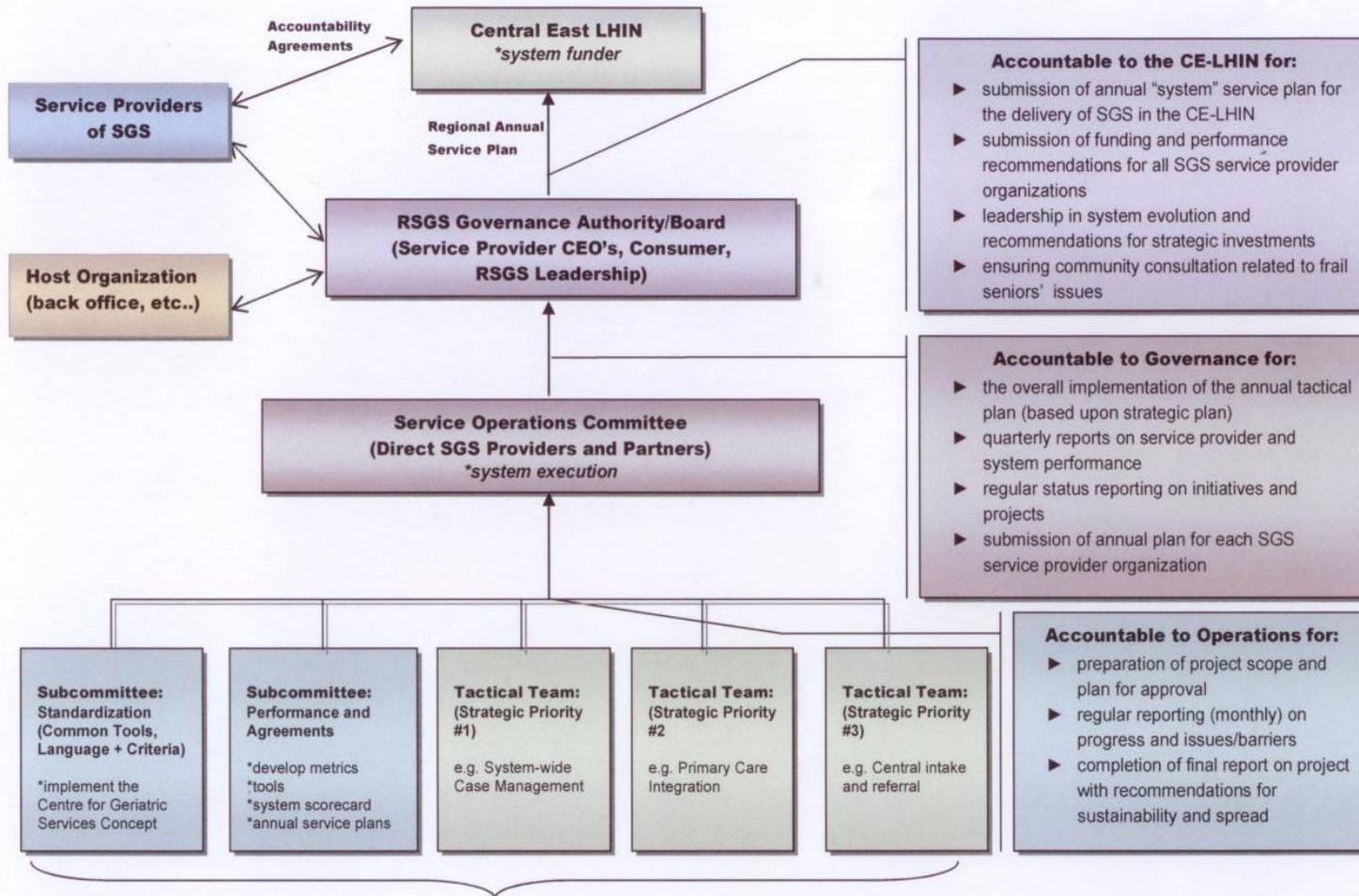
The Governing Authority will meet monthly during the first year of operation and a minimum of six times per year in subsequent years.

15.0 **Quorum**

A quorum for decision-making shall be considered 50% plus one of the Governance Authority membership.

APPENDIX A:

Figure 8. Shared Governance Committee Structure for the Organization and Coordination of Central East Regional Specialized Geriatric Services (CE-RSGS)



"Service delivery integration activity is based upon the integration and standardization of processes versus people and organizations"