

Waterloo Wellington Advance Care Planning Education Program (ACPEP) Steering Committee Terms of Reference

1.0 Background

<u>Advance care planning</u> is a process of reflection and communication to let others know what kind of health and personal care one would want in the future if one became incapable of consenting or refusing treatment or other care. ACP is about the conversation.....

The Waterloo Wellington Advance Care Planning Education Program (ACPEP) is designed to build system capacity and enhance the quality of palliative care and patient/family experience for residents of Waterloo Wellington. While ACP is recognized as a valuable part of quality care, the practice of ACP is variable, and at times, contrary to Ontario law. It is often begun poorly, begun in crisis or after life sustaining treatments have already started. Waterloo Wellington lacks a common protocol for advance care planning and much needed collaborative support for education, awareness and system coordination. This initiative will reach out to community and health care settings as critical sites for engagement and education with the goal of providing the system co-ordination, common protocol and increased understanding necessary for meaningful and achievable change.

The concept of a compassionate community as defined by World Health Organization is grounded in the holistic view of health that includes social, mental and physical wellbeing and connects palliative care to a community responsibility. An increase in the number of Ontarians who engage in advance care planning is identified as an indicator of success for achieving transformational change. This WWLHIN funded initiative is an opportunity to move forward on provincial and local commitments to quality palliative care.

2.0 Role of the Waterloo Wellington ACPEP Steering Committee

- Understand the goals, objectives and desired outcomes of the project for purpose of providing feedback on project deliverables
- Understand and represent the interests of project stakeholders
- Provide advice and guidance on strategic or logistics issues facing the project
- Use influence and authority to assist the project in achieving its outcomes
- Assist with resolving strategic level issues and risks
- Review and provide feedback on changes to the project with a high impact on timelines and budget
- Participate, when able, in community and public events to support community engagement and project activities.
- Actively participate in meetings through attendance, discussion and review of minutes, papers and other Steering Committee documents

3.0 Responsibilities of the Steering Committee Chair

ACPEP Program Lead will act as Steering committee Chair. Should the Project Coordinator be unable to attend the meeting, the Palliative Pain and Symptom Management Consultant will serve as Committee chair.

The responsibilities of the Chair are as follows:

- Sets the agenda for each meeting
- Ensures that agenda and supporting materials are delivered to members in advance of the meetings



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- Facilitates balanced and respectful discussion in orderly, timely and democratic manner
- Encourages and supports members to participate in open discussion and debate within context of agreed upon agenda and meeting time
- Summarizes meeting discussion and supports members in completion of identified action items.
- Ensures consistent participation and recruits /provides orientation to new members in event a vacancy arises.

4.0 General

The table below lists the Steering Committee membership by stakeholder group:

ACPEP Steering Committee

Community Representatives	Health Care Representatives
Public Health	Acute Care
Regional/Municipal Government	Long Term Care
Legal Community	Community Care
Insurance Sector	Primary Care Physicians/NPs
Non Profit Sector	Family Health Team
Financial Investment	Community Health Centres/Health Links
Funeral	Pain and Symptom Management
Business –Chamber of Commerce	LHIN

4.1 Quorum and Decision Making

A minimum number of 8 Steering committee members are required for decision making purposes with a course of action requiring the support of 50% plus one of members present where there is quorum. The quorum must include a minimum number of health care representatives (4) and community sector representatives (4) to ensure balanced representation between community and health care sectors.

4.2 Frequency of Meetings

The ACPEP is a 3 year initiative and Steering Committee Meetings will be held quarterly commencing in April 2015 . Circumstances may require consultation with steering committee members between quarterly meetings and effort will be made to use email/telephone contact and to keep these communications to a minimum.

4.3 Agenda, Minutes and Decision Papers

A package will be sent to members 3-5 business days in advance of a Steering Committee meeting. This package will include the following:

- Agenda for upcoming meeting
- Minutes of previous meeting
- A progress report for the project
- Any other documents/information to be considered at the meeting.



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4.4 Participation

Given that the ACPEP represents a 3 year initiative and has scheduled Steering Committee meetings as quarterly events, it is expected that members will make every effort to attend each meeting. If a member misses more than 2 meetings, the committee chair will follow up to explore options to facilitate member participation or the need for an alternative representative from that sector. Members are requested to provide 2 days business notice of pending absence so that the Chair can ensure quorum for the Steering committee meeting.