



SERVICE DELIVERY STANDING COMMITTEE

TERMS OF REFERENCE

HNHB HPC NETWORK VISION

Quality Hospice Palliative Care for all individuals in the HNHB LHIN area.

MANDATE

Using best practices and innovation, provide recommendations to the Network Advisory Committee to guide a collaborative and integrative approach to service delivery to achieve quality, seamless care and equitable access to HPC services across the HNHB, working in partnership and consultation with key stakeholders across the LHIN area.

Our Overarching Tenets are

- **Supporting the central role of primary caregivers**
- **Collaborative, consultative and shared care roles for palliative Care**
- **Capacity building as an imperative**

RESPONSIBILITIES

- Identify HPC service delivery needs within the HNHB LHIN area;
- Undertake environmental scans, needs assessments, literature reviews and research as required to provide best practice evidence on how to proceed;
- Provide recommendations to the Advisory Committee related to HNHB HPC service delivery needs, initiatives and innovations;
- Provide recommendations to the Network Advisory Committee related to the planning, coordination, implementation and evaluation of local service delivery initiatives that reflect, but are not limited to, the following goals:
 - Shifting the care of the dying from the acute setting;
 - Enhancing/developing a client-centered and interdisciplinary end-of-life service delivery capacity;
 - Improving access, coordination and consistency of services and supports;
 - Improve access to appropriate services, including pain and symptom management, 24-hour on-call health services, and home care services;
 - Providing coordinated entry; and
 - Applying technology in innovative ways.
- Promote collaborative and integrative partnerships with stakeholders providing HPC service delivery, and facilitate the effective use of existing service delivery resources within the HNHB LHIN area;

- Identify potential opportunities and resources that may facilitate the fulfilling of the HPC Service Delivery Committee mandate;
- Draft appropriate guidelines, frameworks and policies regarding HPC service delivery for HNHB HPC Network consideration and approval.

COMPOSITION

The nature of the committee is consultative, and as such the membership could change according to committee needs.

- HNHB HPC Network Advisory Committee Service Delivery Lead
- HNHB HPC Network Chair
- HNHB CCAC Palliative Care Manager
- 1 Other Member of the Network Advisory Committee (may change relative to the issue being addressed)
- HNHB HPC Consultants (x4)
- HNHB HPC Network Director
- LTC
- Residential Hospice
- Representative of Clinical Services Committee, Division of Palliative Care, McMaster
- Acute Care Hospital Palliative Care Team Representative
- Regional Cancer Care Program Representative
- Ad hoc HNHB LHIN representative at the level of systems planner or systems manager for palliative care
- Community team representatives
- Adhoc representation based upon priorities identified by the committee

ACCOUNTABILITY

The Committee is accountable to the HNHB HPC Advisory Committee through the HNHB HPC Network Service Delivery Lead. This is a standing committee of the HNHB HPC Network addressing HNHB HPC Service Delivery issues.

MEETINGS

It is anticipated that the Committee will meet a minimum of four (4) times per year, or more as required at the call of the Chair. The meetings will be formally laid out a year in advance. Teleconference options will be an available alternative. Meetings will be held at the most central LHIN location.

ATTENDANCE

Members will be expected to participate regularly and attend as many meetings as possible. If for some reason members are unable to attend a meeting, they will inform the Chairperson or the Director of the Network.

CHAIR

The Chair of the Committee will be the Service Delivery Lead on the HNHB HPC Network Advisory Committee.

NOTES

Notes of meetings will be kept and approved by consensus as the first order of business at the following meeting. A recorder will be delegated by the Chairperson, and can be a volunteer.

CONSULTATION

Consultation will be requested from all committee members, allowing input or an expert voice on any topic of discussion within the notes.

DECISION MAKING

Every effort will be made to achieve consensus for major issues in decision making. Decisions will be based on dialogue and discussion, and within the context of the shared principles. If it is not possible to achieve consensus, the decision will be deferred to the next meeting. All members not in attendance at meetings will be consulted on the issues and will have 2 weeks to respond.

CONFLICT OF INTEREST AND CONFIDENTIALITY

Members of the Committee providing advice to the HNHB HPC Network must declare at the earliest convenient time to the group any direct pecuniary conflict of interest and not participate in discussion or vote on the matter at hand which prompted the deliberation.

Amended – May 3, 2011

Approved by Advisory Committee – May 3, 2011

The Terms of Reference will be reviewed annually from the final approved date.