

## **Building blocks**

### **RISE brief 19:** Collaborative governance templates (Last updated 30 July 2020)

## Overview

As described in RISE brief 3:

- collaborative governance is a governing arrangement in which leaders from organizations drawn from multiple sectors engage in a collective decision-making process that is deliberative, consensus-oriented, and directed to the achievement of a shared goal; and
- 2) choices about end states are not needed now.

That said, Ontario Health Teams (OHTs) will need agreements in place to ensure that:

- 1) all OHT members understand their and others' commitments to the OHT and can hold one another accountable for these commitments; and
- 2) each OHT can fulfil its obligations to the Ministry of Health to have an agreement in place among the members, and have a mechanism to receive any one-time implementation funds that might be made available by the ministry prior to the establishment of an integrated service funding agreement.

# Box 1: Coverage of OHT building blocks

This RISE brief primarily addresses **building block #6**:

- 1) defined patient population
- 2) in-scope services
- 3) patient partnership and community engagement
- 4) patient care and experience
- 5) digital health
- 6) leadership, accountability and governance
- 7) funding and incentive structure
- 8) performance measurement, quality improvement, and continuous learning

Given the widespread interest expressed by OHTs in having

access to templates that they could draw upon as they see fit, RISE commissioned the law firm Borden Ladner Gervais LLP (BLG) to prepare four templates for OHTs and to lead several webinars to provide additional support to OHTs that would like to adapt and use these templates. Templates can reduce legal costs by allowing teams to focus on identifying the adaptations needed for their context and not starting from scratch. This RISE brief serves as an introduction to the templates. Details about the webinars will be made available through the RISE website and newsletter.

### Templates

We provide below a description of the purpose and key topics covered by the four templates, as well as offer additional notes about their use. BLG has also prepared a guidance document to assist OHTs in adapting the templates for their own use.

Template	Purpose	Key topics covered (and additional notes about three of them)
Collaboration	• To formalize	• Shared vision, guiding principles and commitments for the OHT
agreement	collaboration	• OHT governance structure, including:
	between OHT	• Collaboration Council that makes decisions for the OHT
	members and	o Chairs' Council that supports board-to-board engagement of OHT members
	allow for a variety	o Patient, Family and Caregiver Advisory Council involvement that provides
	of long-term	advice to and participates in decisions of the Collaboration Council
	arrangements to	• Primary Care Council that provides advice to and participates in decisions of
	be established in	the Collaboration Council
	the future	Collaboration on OHT projects
		• Notice and recommendations on any integration involving OHT member(s)
		• Privacy and confidentiality provisions for OHT members

		• Dispute resolution among OHT members
		• Term, termination, withdrawal and expulsion of OHT members
Decision- making framework agreement	• To provide an alternative form of the collaboration agreement	• Largely identical to those listed above Note that this agreement is less formal in style than the collaboration agreement and is intended for teams with larger membership that wish to adopt a network or sector structure for representation in decision-making at the Collaboration Council
Fundholder and indemnity agreement	• To formalize the terms under which one OHT member is designated as the fundholder on behalf of the OHT	<ul> <li>Implementation fundholder obligations</li> <li>Implementation fundholder indemnity</li> <li>Term and termination</li> <li>Note that this agreement can be used after finalizing a collaboration agreement and it allows the OHT to begin receiving implementation funds from the Ministry of Health through a transfer payment agreement</li> </ul>
Project agreement	• To formalize the terms under which OHT members collaborate with other members or external organizations on a particular project	<ul> <li>Project</li> <li>Term and termination</li> <li>Dispute resolution</li> <li>Liability and indemnification</li> <li>Insurance</li> <li>Additional schedules to describe specifics about: <ul> <li>Project</li> <li>Costs and financial contributions</li> </ul> </li> <li>Note that this agreement requires the greatest amount of customization given that projects will vary in the number of members involved, the nature of their involvement, the degree of changes to current practices, etc.</li> </ul>

In future, RISE and/or other members of the OHT Central Program of Supports will make available complementary resources to, for example, support working through difficult decisions before invoking the formal dispute-resolution process contemplated in the templates.

If your OHT has developed agreements or frameworks that you have found useful in supporting your approach to collaborative governance and are willing to share the documents with other OHTs, please send them to rise@mcmaster.ca.

#### **Additional resources**

Lavis JN. RISE brief 3 on OHT building blocks: Collaborative governance. Hamilton: McMaster Health Forum; 2019.

Borden Ladner Gervais. Ontario Health Teams Series. Toronto, Canada: Borden Ladner Gervais; 2020.

Government of Ontario. <u>Guidance for Ontario Health Teams: Collaborative decision-making arrangements for a connected health care system</u>. Toronto, Canada: Government of Ontario, July 2020.

Lavis, JN. RISE brief #19: Collaborative governance templates. Hamilton, Canada: McMaster Health Forum, 2020.

RISE prepares both its own resources (like this RISE brief) that can support rapid learning and improvement, as well as provides a structured 'way in' to resources prepared by other partners and by the ministry. RISE is supported by a grant from the Ontario Ministry of Health to the McMaster Health Forum. The opinions, results, and conclusions are those of RISE and are independent of the ministry. No endorsement by the ministry is intended or should be inferred.

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