



Steering Committee

1.0 Purpose

The Northern Maternal Child Network (NMCN) Steering Committee provides leadership and oversight to the strategic directions of the NMCN.

2.0 Scope & Deliverables

The NMCN Steering Committee will...

- Serve to provide operational and organizational direction of the NMCN
- Support the NMCN strategic plan, network deliverables and annual work plan
- Demonstrate a strong capacity to problem solve and advocate for the voice of the North
- Make a recommendation on what an initial Network model can look like to aid in strategic direction. The strategic direction of the Network is expected to be relevant to both community and hospital settings, and attuned to differences in urban, rural and remote parts of the region.
- Collaborate with partners to identify the unique needs of the maternal/newborn and pediatric populations within the North
- Provide leadership to the NMCN Committees/Tasks forces/Working groups
- Receive regular reports from the NMCN Committees/Task forces/Working groups
- Share fiduciary responsibilities with the host agency related to the Network including review and approval of a sound operating budget.
- Work closely with provincial and regional entities, including but not limited to, the Ministry of Health, Provincial Council of Maternal and Children's Health (PCMCH), Ontario Health (OH) North Regions, Better Outcomes Registry & Network Ontario (BORN), regional networks, and other partners in order to fulfil the NMCN mandate (Appendix 1).

3.0 Guiding Principles

- Keep the patient/client/family at the centre of all we do
- Ensure active involvement of members – we share responsibility to get the work done and thus are accountable to each other and our patients/clients/families/communities for the outcomes produced.



TERMS OF REFERENCE

- Ensure respect and compassion
- Create space for, and listen intently to, the diversity of voices and perspectives
- Be transparent – we will share information (related to process and content) broadly and in a timely way
- Engage in a meaningful and appropriate way with the many people who can enrich the work of the network
- Ensure equity, inclusion, and diversity are incorporated in all aspects of the network
- Representatives have a responsibility to solicit input from and report to the participating organizations they represent. Participating organizations and sectors need to have an informed voice at the table, even if they are not at the table.
- Be intentional about ‘systems’ thinking (vs. organizational thinking)

Further Guiding Principles may be developed with the Steering Committee once formed and scope/deliverables are confirmed.

4.0 Accountability

The NMCN Steering Committee will function based on principles of collaboration. The NMCN is accountable to the funding ministry, the Ministry of Health (MOH), and will support the work of the PCMCH. Members will have accountability to their respective organization and/or existing sectoral that may already exist.

The Steering Committee will be responsible to provide a written meeting summary after each meeting summarizing their work and key agreements. This summary will be accessible to all contributors. It is the responsibility of Steering Committee members to share the information with their respective organizations, sectors, as well as with broader system partners that may not be directly involved.

Each Steering Committee member will also ensure that updates are brought forward to these contributors for discussion (e.g. adding as a standing agenda item to meetings) to ensure information has been received and there is opportunity to engage meaningfully on topics and gather feedback. Steering Committee members will bring all feedback back to council for consideration.

5.0 Decision-making Guidelines & Quorum



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All members share accountability for decisions and results. There will be open and direct communication based on honesty, respect, and transparency to ensure that all perspectives are heard.

Quorum is set at 50% + 1 of membership for decisions.

Decisions will be made by consensus if possible; if consensus is not achieved, then a majority-based decision will be made. If voting is required, members are entitled to one vote, which should include the opportunity for absentee members to provide input.

Further decision-making guidelines may be developed with the Steering Committee once formed and scope/deliverables are confirmed.

6.0 Length of Commitment

Members will serve a 1-year term on a voluntary basis with an option to renew.

7.0 Terms of Reference

The Terms of Reference for the Northern Maternal Child Health Network Planning Team will be reviewed on an annual basis.

8.0 Meeting Frequency and Location

The Steering Committee will meet monthly, or as determined by the Co-Chairs. Meetings will be held virtually to ensure broad and equitable access.

9.0 Membership

The overall composition of the Steering Committee reflects a balance of skills, perspective and leadership needed to achieve the defined Scope and Deliverables. Consideration of members include representation from both community and institutional setting, professional disciplines, perspectives that represent geographical range including representation from northeastern and northwestern Ontario; and provision of Indigenous care from Indigenous members.

This includes but is not limited to:

- Family Physician, Obstetrics, Gynecology, Pediatrician, Rural Generalist
- Developmental Services



TERMS OF REFERENCE

- Social Services
- Academia/Health Research
- Midwifery
- Public Health
- Family and Youth Representatives

Membership will also include representation from Ontario Health North Regions to ensure alignment with Ontario Health and Ministry directions.

Delegates will not be allowed.

All prospective candidates are required to submit the Expression of Interest Application for the Northern Maternal Child Network Committee. If the Steering Committee deems it necessary to obtain additional information from an applicant, they may request a copy of their curriculum vitae (CV). Applications undergo review and approval by the Steering Committee. Should a committee member vacate their position, their successor must undergo the application process anew to join the committee.

Exceptions are:

- Administrative Director of the NEO Kids and Family program at Health Sciences North
- Director of Women's and Children's Program at Thunder Bay Regional Health Centre
- Ontario Health Leads for both Northeast and Northwest

10.0 Chair

The Steering Committee will be co-Chaired by two council members to be determined by membership.

11.0 Resources

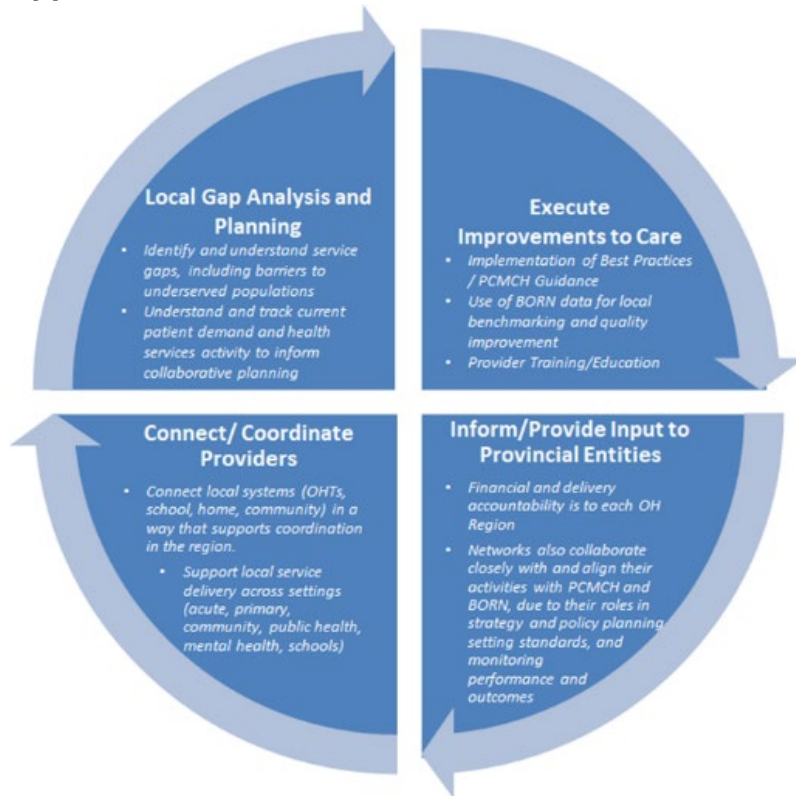
The NMCN Regional Coordinator will support the Steering Committee. Other in-kind resources and necessary investments in resources will be identified by the Steering Committee once formed and scope/deliverables are confirmed.

Version date: April 29, 2024

Approval date: TBD



Appendix 1:



Ministry of Health (2021). Maternal/Newborn/Child Regional Networks. *Networks proposed core functions align with functions of the regional entities in the system proposal. 3.*