

CorHealth Ontario

Stroke Evaluation and Quality Committee:

Terms of Reference

1. BACKGROUND

The mandate of CorHealth Ontario (CorHealth) is to provide evidence-based and strategic leadership for cardiac, stroke, and vascular care services in Ontario. This includes developing and disseminating evidence-based standards, informing provincial planning, access and resource allocation of services, and measuring and reporting on quality and outcomes across both hospital and community settings. CorHealth is committed to working collaboratively with the Ministry of Health and Long-Term Care (MOHLTC), LHINs, health care providers, agencies, patients, families and researchers, to inform and support the provincial system of cardiac, stroke, and vascular services.

Drawing on the successes of previous working groups and committees from the legacy organizations (Cardiac Care Network and Ontario Stroke Network), CorHealth Ontario has redesigned its advisory and working group structure to continue to utilize the network of expertise in a collaborative, integrated manner across our three clinical domains and full continuum of care. The Stroke Leadership Council is a new advisory structure and reports into the Clinical Advisory Committee, a clinically integrated committee established to support the Board in decision making (see Appendix A). The Stroke Evaluation and Quality Committee (SEQC) reports into the Stroke Leadership Council and brings together key clinical and system experts from across the province that represent the continuum of stroke care.

2. PURPOSE

To recommend to the Stroke Leadership Council strategic goals and priorities for evaluation and reporting that align with priorities of the Ministry of Health and Long-Term Care, CorHealth, Local Health Integration Networks and Regional Stroke Networks. SEQC will support quality improvement through the interpretation of results and provision of subsequent recommendations to the Stroke Leadership Council. Additionally, SEQC will guide the execution of stroke reporting and evaluation products

across the province in the pursuit of realizing the vision of an integrated stroke measurement system in Ontario.

3. FUNCTIONS

In order to achieve our Purpose, the key responsibilities of the Committee will include, but not be limited to the following:

1. Embrace the CorHealth vision, mission and values in conducting the work of the Stroke Evaluation and Quality Committee.
2. Oversee the implementation and refinement of an evaluation and quality reporting program that meets the needs of provincial stakeholders, supports improvement and policy decisions, and identifies successes and gaps.
3. Identify and define measurement characteristics and monitor indicators that will effectively measure performance across the stroke continuum and support progress towards CorHealth's vision.
4. Establish and refine methods for provincial benchmarks, targets and corridors for performance for identified indicators.
5. Review, interpret and approve evaluation and quality reports and develop recommendations for action and knowledge translation strategies to address results. In doing so, SEQC will uphold its commitment to data and methodological transparency.
6. Provide support and guidance to the Stroke Leadership Council, stroke regions, LHINS, Ministry of Health and Long-Term Care, and other health care stakeholders regarding the results of the ongoing evaluation, benchmarking and recommendations for improvement.
7. Identify opportunities for collaboration across initiatives that support the strategic plan to ensure alignment and avoid duplication of effort.
8. Develop strategies to address gaps in data to ensure evaluation across the domains of health care quality.
9. Establish task teams/working groups as required to develop specific evaluation approaches and indicators; identify membership and terms of reference/scope of work for these teams.

Key priorities for the Committee in 2018/19 include:

- Providing guidance and input on the development of the 2017/18 Stroke Report Cards
- Identify and recommend prioritization of opportunities to enhance:

- Future stroke reporting to support quality improvement (e.g. more timely reporting)
- Stroke data capture (e.g. identifying data gaps, strengthening data quality)
- Providing guidance on the evaluation of stroke bundled funding – TBD

4. REPORTING RELATIONSHIPS AND ACCOUNTABILITY

- The Stroke Evaluation and Quality Committee advises the Stroke Leadership Council, and collaborates with Ontario’s 11 Regional Stroke Networks on the development and implementation of an infrastructure to monitor, evaluate and drive continuous quality improvement in stroke prevention, care and recovery.
- The Stroke Evaluation and Quality Committee will report to CorHealth’s Stroke Leadership Council and senior leadership team, and ultimately to the Ministry of Health and Long-Term Care.
- CorHealth Ontario will provide support and lend its expertise to the Stroke Evaluation and Quality Committee by assembling current state internal information, and facilitating Committee engagement to obtain insights and expert advice on different aspects of service delivery, outcomes and inform priorities or improvements required within the system.

5. MEMBERSHIP

The Stroke Evaluation and Quality Committee membership reflects a balanced representation of clinical experts and system administrators from across the continuum and the various geographic regions.

The Committee is Co-Chaired by Dr. Mark Bayley and Dr. Matthew Meyer, and includes the following members:

Co-Chairs	Role	Organization
Dr. Mark Bayley	Medical Director, Brain and Spinal Cord Rehab Program	University Health Network
Dr. Matthew Meyer	Senior Population Health Strategist	London Health Sciences Centre

Member	Role	Organization
Dr. Albert Jin	Medical Director, Regional Stroke Network of Southeastern Ontario	Kingston Health Sciences Centre
Alda Tee	Community and Long-Term Care Stroke Specialist, Central East Stroke Network	Royal Victoria Regional Health Centre
Dr. Alexander Khaw	Medical Director, Southwestern Ontario Stroke Network	London Health Sciences Centre
Dr. Amy Yu	Stroke Neurologist and Institute for Clinical Evaluative Sciences Scientist	Sunnybrook Health Sciences Centre
Beth Linkewich	Regional Director, North and East GTA Stroke Network	Sunnybrook Health Sciences Centre
Cally Martin	Regional Director, Stroke Network of Southeastern Ontario	Kingston Health Sciences Centre
Cheryl Moher	Regional Director, Central East Stroke Network	Royal Victoria Regional Health Centre
Elizabeth Chiu	Manager of Coding and Abstracting, Decision Support	University Health Network
Esmé French	Regional Stroke Rehabilitation Specialist, Northwestern Ontario Regional Stroke Network	Thunder Bay Regional Health Sciences Centre
Gwen Brown	Regional Stroke Community and Long-Term Care Coordinator, Stroke Network of Southeastern Ontario	Kingston Health Sciences Centre
Jenn Fearn	Regional Rehabilitation Coordinator, Northeastern Ontario Stroke Network	Health Sciences North

Joan Porter	Senior Epidemiologist	Institute for Clinical Evaluative Sciences
Lisa McDonnell	Director, Champlain Regional Stroke Network	The Ottawa Hospital
Marianne Thornton	Education Coordinator, Champlain Regional Stroke Network	The Ottawa Hospital
Ministry Representative	Provincial Programs Branch	MOHLTC
Dr. Moira Kapral	Physician and Institute for Clinical Evaluative Sciences Senior Scientist	University Health Network
Nerissa Campbell	Manager, Sarnia Lambton District Stroke Centre and Vascular Program	Bluewater Health
Dr. Rick Swartz	Medical Director, North & East GTA Stroke Program	Sunnybrook Health Sciences Centre
Stefan Pagliuso	Regional Director, Central South Stroke Network	Hamilton Health Sciences Centre
Sue Verrilli	Regional Education Coordinator, Northeastern Ontario Stroke Network	Health Sciences North
Sylvia Quant	Rehab and Community Re-engagement Coordinator, North & East GTA Stroke Network	Sunnybrook Health Sciences Centre
Venessa Bailey	District Stroke Coordinator, Central South Regional Stroke Network	Brant Community Healthcare System

CorHealth Ontario Members:

- Laurie Bourne, Senior Director, Health System Policy, Planning and Performance
- Mirna Rahal, Senior Director, Data Collection, Analysis, Reporting and Funding Policy

- Shelley Sharp, Senior Strategist, Clinical Programs
- Kathryn Yearwood, Clinical Specialist, Clinical Programs
- Anar Pardhan, Senior Strategist, Data Collection, Analysis, Reporting and Funding Policy
- Kris Britton, Strategist, Data Collection, Analysis, Reporting and Funding Policy

Additional stakeholder representation will be considered as required.

Committee members are expected to:

- Act in good faith and in the best interests of the people of Ontario, network/system stakeholders and of CorHealth.
- Declare real or perceived conflicts of interest, including financial and potential organizational conflicts of interest once per year. Information provided will be kept confidential and only reviewed by the Co-Chairs.
- Be a member in good standing at their place of employment and/or hospital, professional college /regulatory body with no conditions on licenses or limitations in clinical practice.
- Ability to commit the necessary time to participate in Committee meetings and preparation.

6. PROCESS FOR SELECTION OF MEMBERS

- CorHealth, in collaboration with the Co-Chairs, will select members through a targeted selection process.

7. TERMS OF OFFICE OF MEMBERS

- Membership commitment of a minimum of two years is requested to ensure continuity of deliverables.

8. PROCESS FOR SELECTION OF CO-CHAIRS

- Co-Chairs will be designated through a targeted selection process led by CorHealth.

9. MEETING SCHEDULE

- The Committee will meet at minimum four (4) times annually. Webinars and teleconference meetings will be arranged, and there will be no remuneration for participation in meetings.
- Additional meetings, as required, will take place at the call of the Co-Chairs.
- Meeting agendas and related meeting materials will be prepared and distributed by CorHealth in collaboration with the Co-Chairs. Agendas will be approved in advance by the Co-Chair(s). Minutes will be prepared and distributed by email.

10. CONFLICT OF INTEREST

Committee members must ensure that any actual or potential conflict of interest arising in regard to any matter under discussion by the Committee is drawn to the attention of the Committee Co-Chairs. The Co-Chairs will determine what action, if any, arising from the conflict of interest is required and will take appropriate action.

11. CONFIDENTIALITY

- Council members will be required to sign the CorHealth Confidentiality Agreement in order to participate.
- Members may not use any data or information obtained as a result of their membership on the Committee for their personal financial benefit or gain, or for the benefit or gain of any entity or corporation in which they have a financial interest or in which they have an interest as an employee or officer.
- Members will undertake to keep confidential and inviolate and not directly or indirectly disclose to any person, association of persons, corporations or government, or use at any time, either during or subsequent to their term as a member of the Committee, any data or information that is not generally available.
- Members are requested to refer inquiries about the Committee and its products to CorHealth.

12. COMMITTEE RECOMMENDATION PROCESS:

The Committee will act in the best interests of the health care system. Recommendations will be based on the interest of the system of services rather

than on the interests of any single organization or component of that system. All Committee members share accountability for recommendations and results. Committee meetings will support open and direct communication based on honesty, respect and transparency to ensure that all perspectives are heard. Recommendations will be based on scientific evidence wherever possible. Recommendations will be made by consensus if possible, if consensus is not achieved then a majority-based recommendation will be made.

13. TERMS OF REFERENCE

The Terms of Reference will be reviewed annually by CorHealth Ontario and the SEQC Co-Chairs and updated as required to reflect modifications or additions.

APPENDIX A

CorHealth Ontario's Advisory and Task Group Structure - Expanded 2018-19

