

Joint Municipal Physician Recruitment and Retention Committee

Staff Recommendation

Staff is recommending that this Committee not be re-established.

The previous Committee completed its term with the recommendation that the regional municipalities and stakeholders consider the merits and determine there is interest in the creation of a “Not for Profit” Corporation that would essentially replace the municipally led and financially supported Committee.

Staff are seeking Council direction on how to proceed with the organization of the Corporation concept and what level of leadership and promotion of this initiative is desired.

Previous Mandate:

The Mandate of the Joint Municipal Physician Recruitment and Retention Committee is to:

1. Undertake strategic planning, program development, implementation and evaluation of initiatives for the recruitment and retention of new and existing Physicians, medical student locums and/or resident physicians within the area served by the Committee membership catchment population by support of Councils of participating towns or municipalities;
2. Extend an invitation to all neighbouring towns or municipalities to become members of the Joint Municipal Physician Recruitment and Retention Committee;
3. Educate the Council, community and stakeholders of participating towns or municipalities with regard to the Mandate of the Committee;
4. Connect with stakeholders who may assist in recruitment and retention of physicians, i.e., Medical Schools and their respective Post Graduate programs, local health care providers, surrounding acute care hospitals, Rural Ontario Medical Program (ROMP), the new Ontario Health Teams (LHIN replacements), local Chambers of Commerce and other applicable stakeholders;
5. Actively work with the local medical community, health care providers and ROMP in developing, supporting and sustaining a physician mentoring/training program;
6. Connect with community stakeholders that may be able to provide in-kind support;
7. Make recommendations by April 15, 2021 whether the services of a Physician Recruiter be retained to aid the Committee in meeting its specified mandate:
 - a. Establish the set of skills and competencies required and costs associated with delivering the Physician recruitment and retention strategy;
 - b. The Physician Recruiter shall be governed and managed by the terms and conditions of a separate agreement with the participating towns or municipalities;
8. Recommend to Councils of participating towns or municipalities, on an annual basis, an operational budget that will also contemplate a long-term strategy for funding recruitment efforts;

9. Recognize that this mandate cannot be undertaken in isolation of other health care professionals given the interprofessional nature of current and, more importantly, future primary health care delivery models that Physicians are educated to practice within;
10. Where a participating municipality is not designated an Area of High Physician Need by the Ministry of Health and Long Term Care, and there are indicators, including high population growth, that it is an Area of High Physician Need, consideration should be given to such a re-designation, actively reflect on current and future needs to develop a plan to support same.

Previous Composition:

The JMPRR Committee will be defined by the number of participating Towns or municipalities. Councils of each participating town or municipality will appoint up to two (2) members for a term that runs concurrent with its respective Council.

Voting Members:

- One (1) Council member and one (1) alternate, representing one (1) vote
- Up to One (1) community member, representing one (1) vote

Previous Meeting Frequency:

Monthly with additional meetings able to be called by the Chair.



Joint Municipal Physician Recruitment and Retention Committee

TERMS OF REFERENCE

1. PURPOSE

The Town of The Blue Mountains (“Town”) Joint Municipal Physician Recruitment and Retention Committee (“Committee”) is an advisory committee of the councils of participating towns or municipalities for matters related to the development, implementation and progress monitoring of a sustainable solution for the recruitment and retention of Primary Care Physicians (“Physicians”) for the Committee membership catchment population.

2. MANDATE

The Mandate of the Joint Municipal Physician Recruitment and Retention Committee is to:

11. Undertake strategic planning, program development, implementation and evaluation of initiatives for the recruitment and retention of new and existing Physicians, medical student locums and/or resident physicians within the area served by the Committee membership catchment population by support of Councils of participating towns or municipalities;
12. Extend an invitation to all neighbouring towns or municipalities to become members of the Joint Municipal Physician Recruitment and Retention Committee;
13. Educate the Council, community and stakeholders of participating towns or municipalities with regard to the Mandate of the Committee;
14. Connect with stakeholders who may assist in recruitment and retention of physicians, i.e., Medical Schools and their respective Post Graduate programs, local health care providers, surrounding acute care hospitals, Rural Ontario Medical Program (ROMP), the new Ontario Health Teams (LHIN replacements), local Chambers of Commerce and other applicable stakeholders;
15. Actively work with the local medical community, health care providers and ROMP in developing, supporting and sustaining a physician mentoring/training program;

16. Connect with community stakeholders that may be able to provide in-kind support;
17. Make recommendations by April 15, 2021 whether the services of a Physician Recruiter be retained to aid the Committee in meeting its specified mandate:
 - a. Establish the set of skills and competencies required and costs associated with delivering the Physician recruitment and retention strategy;
 - b. The Physician Recruiter shall be governed and managed by the terms and conditions of a separate agreement with the participating towns or municipalities;
18. Recommend to Councils of participating towns or municipalities, on an annual basis, an operational budget that will also contemplate a long-term strategy for funding recruitment efforts;
19. Recognize that this mandate cannot be undertaken in isolation of other health care professionals given the interprofessional nature of current and, more importantly, future primary health care delivery models that Physicians are educated to practice within;
20. Where a participating municipality is not designated an Area of High Physician Need by the Ministry of Health and Long Term Care, and there are indicators, including high population growth, that it is an Area of High Physician Need, consideration should be given to such a re-designation, actively reflect on current and future needs to develop a plan to support same.

3. COMMUNICATION POLICY & PROTOCOL

The purpose is to establish guidelines for effective communication practice and tactics to support the activities between the Committee, the public and the media.

Definition

Communication protocol of the Committee includes social media, interviews, advertisements and other relevant correspondence, etc., and will be conducted by the Committee Chair and/or support staff of participating towns and municipalities, to promote the progress of initiatives and to communicate all/any engagement activities.

To achieve successful communication practices -- a coordinated approach will reflect consistent standards, messaging and branding and will be in collaboration with staff of respective towns and municipalities on all communication regarding what the Committee is doing.

Protocol Objectives

The Committee will have a profile in the communities of the participating towns and municipalities and as a result, members may be engaged in activities that put them in direct contact with citizens and various organizations. The primary responsibility for communication of information is held by the Committee Chair.

All Committee members are expected to know and abide by relevant conduct policies of their respective towns and municipalities. In addition, the following guidelines should be understood by advisory Committee members:

1. Only the Committee Chair can speak on behalf of the Committee.
2. Committee members shall not direct any messaging without approval of the Chair.
3. The Committee Chair plays an important role in ensuring that a functional relationship with high integrity exists within the Committee, and with Councils, the public and staff of participating towns and municipalities. Conflict can be a constructive part of the group decision-making process. When conflict becomes ongoing, inappropriate, unconstructive, or offensive, the Chair may need to intervene with an appropriate dispute resolution mechanism.

Policy Directives

1. Communications produced from the Committee cannot be contradictory to the policies and by-laws of participating towns and municipalities or respective Councils.
2. Any communication of a policy nature shall be recommended to Councils for their ratification.
3. If a staff liaison is uncomfortable with a proposed communication from the Committee, the staff member should direct it to the Department Head for guidance.

4. ACCOUNTABILITY

Committee will report to and/or provide recommendations to Councils of participating towns or municipalities on a twice per year basis through accessible reports. Councils of participating towns or municipalities may request update reports at any time on specific projects or initiatives.

5. MEMBERSHIP / VOTING

The Committee will be defined by the number of participating towns or municipalities.

Councils of each participating town or municipality will appoint up to two (2) members for a term that runs concurrent with its respective Council. Composition from each participating town or municipality is noted below:

- One (1) Council member and one (1) alternate, representing one (1) vote
- Up to One (1) community member, representing one (1) vote

The Chair shall remain in place for the remaining 2018-2022 term of Council.

A Vice Chair shall be elected and remain in place for the remaining 2018-2022 term of Council.

After the 2018-2022 term of Council, the Committee shall, from amongst its members, choose a

Committee Chair and Vice Chair. The Vice Chair will become the Chair for the following year and a new Vice Chair will be chosen and affirmed.

Openings for community membership shall be publicly advertised as appointment opportunities arise and is the responsibility of the respective municipality.

Non-Voting Members:

- Mayors of participating towns or municipalities, not appointed as voting members, may attend as ex-officio
- Chief Administrative Officers of each participating towns or municipalities or their designate
- Practicing/Retired Local Family Physician(s) acting in an advisory role
- Additional Town staff as approved
- Administrative Assistant

Community Members will:

1. Have demonstrated interest and/or expertise in healthcare;
2. Be able to allocate sufficient time for participation in regularly scheduled meetings;
3. Be able to allocate sufficient time to review the agenda, minutes and any applicable documentation in advance of each regularly scheduled meeting;
4. Demonstrate a strong interest in and commitment to remaining informed on current and emerging health trends that impact the recruitment and retention of primary care physicians;
5. Participate as a team member;
6. Be capable of an ambassador role.

6. QUORUM

Quorum for the Committee, per the standards of the *Municipal Act, 2001*, is 50% plus one (1) of the membership.

Council members appointed to the Committee count towards quorum. Any non-voting members present (including non-voting Mayors) do not count toward quorum.

7. SUB-COMMITTEES

Should the Committee feel a sub-committee is required to deal with specific issues, such sub-committees shall be ad hoc in nature, with specific, clearly articulated mandates. Membership on sub-committees may include additional individuals with specific expertise who are not Council-appointed Committee members. Sub-committees must include a member of Council in their composition and shall be composed such that a quorum of the membership is not met (maximum sub-committee membership of quorum minus 1). Sub-committees will not have the support of the Administrative Assistant and will provide an accessible report on sub-committee matters to the Committee on a minimum of a quarterly basis.

8. REMUNERATION

No compensation shall be made to members of the Joint Municipal Physician Recruitment and Retention Committee for their participation. As a member of the Committee there is no remuneration reward.

9. MEETING DETAILS, AGENDA, MINUTES & PROCEDURE

1. The committee will meet monthly. Additional meetings of the Committee may be called by the Chair. Meetings will be held in the Council Chambers at the Town of The Blue Mountains Town Hall. If the Council Chambers are not available an appropriate alternative location will be selected.
2. Meetings are open to the public.
3. Agenda items will be set by the Chair and the Vice Chair.
4. Minutes will be kept by the Town of The Blue Mountains Administrative Assistant who will distribute to Councils of participating towns or municipalities.
5. All meetings shall be conducted in accordance with Town of The Blue Mountains Procedural By-law.
6. Administrative Staff and Resources provided by the Town of The Blue Mountains (services provided by Town staff will be included in the operational budget for the Committee and tracked).
7. Committee may form a separate Non-Profit entity to be employer of the professional recruiter and receive community in kind or financial contributions.
8. Committee must establish clear goals and objectives that are measurable. Upon an ability to hire a Physician Recruiter as appropriate these goals and objectives will transfer to this role. Reporting arrangements prior to the hiring of a Physician Recruiter will be established with the members of the Committee.

9. The Terms of Reference is a living document and will be reviewed once per term of Council at a minimum and may be revised as required by approval of Council.

10. RELATED POLICIES & TRAINING REQUIREMENTS

POL.COR.07.07 Code of Conduct for Members of Council, Town of The Blue Mountains
POL.COR.17.04 Accessibility Standards for Customer Service, Town of The Blue Mountains
POL.COR.18.04 Protocol Policy for Complaints Related to Council Members and Local Boards, Town of The Blue Mountains
POL.COR.18.08 Workplace Violence & Harassment Policy, Town of The Blue Mountains
POL.COR.18.10 Social Media Policy, Town of The Blue Mountains
POL.COR.19.02 Council Staff Relationship Protocol, Town of The Blue Mountains
[Accessibility for Ontarians with Disabilities Act, 2005, S.O. 2005, c.11](#)
[Municipal Conflict of Interest Act, R.S.O. 1990](#)
[Municipal Freedom of Information and Protection of Privacy Act, R.S.O. 1990](#)

The training noted above can be achieved for members of Council from other towns or municipalities that have been provided similar legislative training.