

Description of Proposed New Regulation under the *Connecting Care Act, 2019*

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About this Proposal

The Ontario government is proposing a new regulation to be made under the [*Connecting Care Act, 2019*](#) (CCA) that outlines additional requirements that would need to be met before the Minister of Health (Minister) may designate an Ontario Health Team (OHT). The proposed regulation would also provide that OHT-related activities are exempt from the procedural requirements relating to voluntary integrations that are set out under section 35 of the CCA.

Background

Under section 29 of the CCA the Minister may designate a person or entity, or a group of persons or entities, as an OHT. The Minister shall not make a designation unless the entity or group has met the eligibility requirements set out in the CCA, and any additional requirements that may be prescribed by the Lieutenant Governor in Council (LGIC) through regulation.

Pursuant to Part IV of the CCA, designation is a discretionary ministerial power; the Minister has no obligation to designate a proposed OHT, even if all requirements have been met. Furthermore, the Minister may impose additional terms and conditions that an OHT must meet to obtain and maintain a designation, in addition to the requirements that are specified by the LGIC in regulation. A designated OHT that ceases to meet the designation requirements specified by either the LGIC or Minister (including any specified terms and conditions applying to the designation) may lose its designation.

Section 29 of the CCA provides that the Minister may designate an OHT if it has the ability to deliver at least three of the following services in an integrated and co-ordinated manner:

- Hospital services
- Primary care services
- Mental health or addiction services
- Home and community care services
- Long-term care home services
- Palliative care services
- Any other prescribed health service or non-health service that supports the provision of health care services [Note: no regulations prescribing additional health services or non-health services have been made to date.]

There are 58 approved OHTs across the province and no designated OHTs. “Approved” OHTs have received the Minister’s written authorization to use the title “Ontario Health

Team”. In October 2023, the government [communicated](#) that an initial group of 12 approved OHTs will receive dedicated supports to advance more rapidly toward maturity and be considered first for potential designation.

Purpose of Designation

As set out in the original 2019 OHT guidance document titled, “[Ontario Health Teams: Guidance for Health Care Providers and Organizations](#)”, designation is associated with an OHT’s readiness to receive an integrated funding envelope and enter into an OHT accountability agreement with Ontario Health. Designation does not equal full maturity as OHTs will continue to advance even once they are designated.

Once an OHT is designated under the CCA, the group of entities that comprise the OHT can be funded collectively by Ontario Health under an integrated funding envelope to provide health and non-health services to the patients of the OHT constituent members. Under the proposed regulation, the individual organizations or entities that make up the membership of a designated OHT would be referred to as “constituent members.”

Once funded, a designated OHT becomes subject to the accountability measures provided for under the CCA, including audit, review, investigative and supervisory powers. These accountability measures also extend to the constituent members which receive funding as part of the designated OHT.

Since 2019, the Ministry of Health (ministry) has been working closely with OHTs and Ontario Health to understand how OHTs have been progressing and what supports they require to achieve the goals of improved health outcomes, patient and provider experience, and value.

Based on learnings to date, the government is proposing to set out specified requirements in a regulation to be made under the CCA that OHTs would be required to meet to be eligible for consideration by the Minister for designation.

These proposed requirements have been developed to ensure that designated OHTs have the necessary structures and capacity in place to receive an integrated funding envelope and provide services in an integrated and co-ordinated manner as contemplated under the CCA.

In addition, the proposed requirements are aligned with the direction provided to OHTs in November 2022 through the [OHT Path Forward](#) document. That document outlined patient-facing and structural expectations of OHTs as they continue to advance towards greater maturity. The proposed designation requirements capture the core structural components of the *Path Forward*.

The proposed requirements also support the role of OHTs in the provision of home care supported by Ontario Health atHome, as set out in Bill 135, the *Convenient Care at Home Act, 2023*. This legislation has received Royal Assent and is anticipated to be proclaimed into force in 2024.

The ministry, together with support and advice from Ontario Health, will continue to support OHT advancement as they work to achieve the proposed designation requirements, and beyond.

Proposed designation requirements include:

- Creating a not-for-profit co-ordinating corporation
- Involving patients, families and caregivers
- Establishing a primary care network
- Demonstrating readiness for home care delivery

Details of these proposed requirements are outlined in the following sections.

Not-for-Profit Co-ordinating Corporation

Policy Objective

To ensure appropriate governance and decision-making structures are in place, OHTs would be required to create a new, dedicated not-for-profit co-ordinating corporation according to certain specified requirements.

These requirements are being proposed to promote standardization and to foster strong collaborative governance practices.

Proposed Regulatory Requirements

To be considered eligible for potential designation by the Minister, an OHT would be required to include as one of its constituent members a not-for-profit corporation for the purpose of managing and co-ordinating OHT activities (a “co-ordinating corporation”).

The co-ordinating corporation would be required to meet the following requirements:

1. Be incorporated under the Ontario *Not-for-Profit Corporation Act, 2010 (ONCA)* or have been incorporated under the *Corporations Act* before ONCA was proclaimed into force in October 2021.

With the creation of this co-ordinating corporation, the corporation would also be required to:

<p>2. Adopt the following standardized corporate purpose statement as part of its corporate documents:</p> <ul style="list-style-type: none">○ <i>The purposes of the OHT corporation are to promote collaboration and co-ordination of integrated service activities among the constituent members of the Ontario Health Team and affiliated partners with the aim of improving patient and population health outcomes, patient and provider experience, value and health equity.</i>○ OHTs would also be permitted to adopt additional purposes specific to their local needs, provided that they are aligned with the objectives set out in the standardized statement above.
<p>3. Have by-laws which require that the co-ordinating corporation's board of directors meets a minimum required set of necessary competences and experiences, that include:</p> <ul style="list-style-type: none">a. Financial risk management and auditsb. Corporate governance and accountabilityc. Quality and performance improvementd. Integrated care and co-ordinatione. The provision of clinical care directly to patientsf. Population health managementg. Equity, diversity and inclusionh. Patient, family and caregiver engagement
<p>4. Have by-laws which require that the following committees be established to assist the board of directors in addressing:</p> <ul style="list-style-type: none">a. Auditing, finance and risk managementb. Quality and performancec. Nominations
<p>5. Have by-laws which require that the membership of the nominations committee not be limited to individuals who are members of the co-ordinating corporation's board of directors.</p>
<p>6. Have by-laws which require that the nominations committee be responsible for identifying and vetting potential nominees who meet the experiences and competencies required of the board of directors.</p>
<p>7. Have by-laws which provide that only nominees recommended by the nominations committee and approved by the board of directors are eligible to be voted upon and elected as directors at the co-ordinating corporation's annual meeting.</p>

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| 8. Have by-laws which require that the only voting members of the co-ordinating corporation are:
a. the constituent members; or
b. the constituent members together with the members of the board of directors. |
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| 9. Establish one or more planning table(s) that include affiliated partners of the OHT to assist the co-ordinating corporation and other constituent members with local planning and program development activities. |
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Proposed Minister Terms and Conditions

In addition to the above proposed requirements to be established in regulation, the Minister may also impose additional terms and conditions that must be met to receive and maintain an OHT designation under section 29 of the CCA. It is proposed that the Minister impose terms and conditions that include the following:

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| <ul style="list-style-type: none">• Require that the board of directors of the co-ordinating corporation be limited to no more than 14 members and no fewer than 8 members, subject to any exemptions that may be granted by the Minister in her discretion. |
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Patient, Family and Caregiver Involvement

Policy Objective

The involvement of patients, families and caregivers is foundational to the OHT model and a critical enabler for improving population health outcomes.

Patients, families and caregivers involved in OHTs provide valuable lived/living experience that help OHTs improve patient experience and outcomes.

Proposed Regulatory Requirements

In addition to the above foregoing requirements, the OHT co-ordinating corporation would also be required to:

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| 10. Establish an advisory council composed of patients, families and caregivers to advise both the board of directors, as well as the operational management of the co-ordinating corporation. |
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| 11. Include an ex-officio position on the board of directors for the chair of the |
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advisory council, while ensuring that this ex-officio board position is a voting member of the board of directors (i.e., with the same voting rights as other elected board members).

Based on advice from OHTs, OHTs will also have flexibility in creating their co-ordinating corporations. To that end, the ministry intends to release supplemental guidance for OHTs including best practices based on expert governance advice, as well as leading models that OHTs themselves have developed to reflect their local needs.

Primary Care Network

Policy Objective

To deliver care in a more integrated and co-ordinated way, the ministry has identified that OHTs must have strong primary care partnerships in place.

Primary care networks (PCNs) have been identified as the primary vehicle to connect, integrate and support primary care providers within OHTs to improve the delivery and co-ordination of care for patients.

PCNs would help to organize the local primary care sector and would provide a voice and input into OHT decision-making. PCNs would also help to improve population health outcomes by implementing local and provincial clinical priorities.

Proposed Regulatory Requirements

To be considered eligible for potential designation, an OHT would be required to:

12. Include a primary care network that performs the following core functions:
 - a. Connecting primary care within the OHT.
 - b. Providing the local primary care sector's voice in OHT decision-making.
 - c. Supporting primary care providers to advance OHT clinical change management and population health management approaches to care.
 - d. Facilitating access to clinical and digital supports and improvements for primary care providers.
 - e. Supporting local primary care health human resource planning within the OHT.
13. Include at least one seat on the board of directors for a clinician who is selected by the primary care network and confer voting rights on such member(s).

Home Care Delivery Readiness

Policy Objective

When amendments made to the CCA by the *Convenient Care at Home Act, 2023* are proclaimed into force, the 14 Home and Community Care Support Services (HCCSS) organizations would be amalgamated into a single organization, Ontario Health atHome.

Over time, and in a phased way, accountability for providing home care services would transition to health service providers (HSPs) that are members of designated OHTs funded to provide home and community care services, and Ontario Health atHome would take on the role of providing operational supports to HSPs in OHTs to assist with their provision of home care.

When HSP members of OHTs take on accountability for providing home care, they will become responsible for care co-ordination, managing contracts with service providers for front-line care, and ensuring all applicable requirements related to home care service delivery are met. Requirements are or will be set out in legislation, regulations, funding agreements, and service contracts.

The operational supports Ontario Health atHome would provide include assignment of Ontario Health atHome employees to deliver care co-ordination services under the direction of an OHT member. Furthermore, Ontario Health atHome’s operational supports to OHT members funded to provide home and community care services would also include administrative or business supports to help the OHT members manage service contracts with external providers, and patient care technology supports.

Before HSP members of designated OHTs can take on accountability for providing home care services to their patients, OHTs must be able to show a readiness to take on this work, including a plan for delivery.

The ministry, with support from partners, will develop a template to support the development of this plan.

Proposed Regulatory Requirements

To be considered eligible for potential designation, an OHT would be required to:

- 14. Have submitted a plan that includes:
 - a. a description of how the OHT intends to provide services in an integrated and co-ordinated manner, in accordance with subsection 29(1) of the Act; and
 - b. a readiness and delivery plan indicating how the OHT intends to provide home care (i.e., professional, personal support, and no-charge

homemaking services), including through contracted providers.

This requirement would ensure that the ministry is able to assess the readiness of the OHT (through one or more of its members) to take on home care service delivery accountability. It would also ensure member(s) of the OHT have worked together with one another and engaged with HCCSS/Ontario Health atHome and service provider organizations to develop an appropriately detailed plan for carrying out home care roles and responsibilities in alignment with provincial legislation, regulations, and direction.

For further information: [Connected Care Update](#)

Exemption From Procedural Requirements Related to Voluntary Integrations Under Section 35 of the CCA

OHTs seeking designation by the Minister would also be exempt from the procedural requirements relating to voluntary integrations set out under section 35 of the CCA.

With this exemption, OHTs would not be required to provide a notice to the Minister and meet the information submission requirements under section 35 when they are seeking designation by the Minister as an OHT (or an amendment to an existing OHT designation).

Summary of Proposed Regulatory Requirements

In summary, proposed regulatory requirements are:

Not-for-Profit Co-ordinating Corporation

Proposed Regulatory Requirement
1. Incorporate a new not-for-profit corporation under the Ontario <i>Not-for-Profit Corporations Act, 2010</i> (or its predecessor statute) for managing and co-ordinating OHT activities.
2. Adopt a specified, standardized corporate purpose statement, with permission for additional purpose statements tied to local needs.
3. Ensure that the corporation's board of directors meets a minimum required sets of necessary competencies and experiences.
4. Establish specified types of committees to assist the board of directors with various aspects of their work.

5. Require that the membership of the nominations committee not be limited to individuals who are also members of the co-ordinating corporation's board of directors.
6. Require the nominations committee be responsible for identifying and vetting potential nominees who meet the experiences and competencies of the board of directors.
7. Require that only nominees recommended by the nominations committee and approved by the board of directors are eligible to be voted upon and elected as directors at the co-ordinating corporation's annual meeting.
8. Require that the only voting members of the co-ordinating corporation are: <ul style="list-style-type: none"> a. the constituent members; or b. the constituent members together with the members of the board of directors.
9. Establish one or more planning table(s) that include affiliated partners of the OHT to assist the co-ordinating corporation and other constituent members with local planning and program development activities.

Patient, Family and Caregiver Involvement

Proposed Regulatory Requirement
10. Establish an advisory council composed of patients, families and caregivers to advise both the board of directors, as well as the operational management of the co-ordinating corporation.
11. Include an ex-officio position on the board of directors for the chair of the advisory council, with the same voting rights that are given to other elected members of the board of directors.

Primary Care Network

Proposed Regulatory Requirement
12. Include a Primary Care Network that implements specified functions.
13. Include at least one seat on the board of directors for a clinician who is selected by the primary care network and confer voting rights on such member(s).

Home Care Delivery Readiness

Proposed Regulatory Requirement
14. Have submitted a plan that includes: <ul style="list-style-type: none"> a. a description of how the OHT intends to provide services in an integrated and co-ordinated manner, the services referred to in subsection 29(1) of

- the Act; and
- b. a readiness and delivery plan indicating how the OHT intends to provide home care (i.e., professional, personal support, and no-charge homemaking services), including through contracted providers.

Summary of Proposed Minister Terms and Conditions

In addition to the above proposed requirements to be established in regulation, the Minister may also impose additional terms and conditions that must be met to receive and maintain an OHT designation under section 29 of the CCA. It is proposed that the Minister impose terms and conditions that include the following:

- Require that the board of directors of the co-ordinating corporation be limited to no more than 14 members and no fewer than 8 members, subject to any exemptions that may be granted by the Minister in her discretion.

Discussion Questions

1. Are there any additional requirements, beyond those being proposed, that you would suggest being included in the proposed requirements for designation?
2. What impacts (qualitative or quantitative) do you anticipate from these proposed requirements?
 - a. Please quantify costs or impacts, where possible.
 - b. Potential costs or impacts may include, but are not limited to, fees, upfront operating costs, ongoing operating costs, and administrative costs.