

TERMS OF REFERENCE

CHLNet NETWORK PARTNERS' ROUNDTABLE

MANDATE: All matters related to the governance of CHLNet as a *value network* shall be the prerogative of the collective of CHLNet Partners through the Partners' Roundtable (“*The Partners*”), including:

- *The Partners* are responsible for setting broad policy parameters and directions for CHLNet.
- *The Partners* are responsible for approving the annual work plan, strategic plan and budget of CHLNet.
- *The Partners* have ultimate responsibility for engaging the Executive Director of CHLNet.
- *The Partners* have ultimate political accountability for oversight of CHLNet marks, products and services.^a
- *The Partners* have responsibility for appointing members of the CHLNet Secretariat, including co-chairs (see companion document attached) and approving the selection of the Host Secretariat.
- *The Partners* will abide by the value networks' stated values and principles (see companion document attached).

MEMBERSHIP: The number of Network Partners is expected to continue to grow as the value of the network grows. “Membership” in the network shall be inclusive as follows:

- Any public, private, *not-for-profit* health or health-related organization that has demonstrated a strong, ongoing commitment to growing health leadership capacity in Canada is eligible, upon approval by *The Partners*, to join CHLNet.^b
- Network Partners are required to make a three year financial commitment to support CHLNet (paid annually if so desired) at rates set from time to time by the Partners' Roundtable. One year notice is required to discontinue being a *Partner*.
- Prospective partners agree, on a “best effort” basis, to embrace *LEADS in a Caring Environment*^c as a leadership platform or LEADS-compatible framework for their own organization and promote the framework within respective spheres of influence.
- The host secretariat bears ultimate legal/financial responsibility for CHLNet. Partners agree, however, to bear “proportionate” financial risk assumed in “good faith” by the Host Secretariat* on behalf of CHLNet for approved extraordinary events (e.g. major conferences).

^a Formally, all legal/fiduciary responsibility, including signing of contracts, protection of marks, etc., resides with host secretariat, currently the Canadian College of Health Leaders.

^b This principle of inclusivity does not extend to specific vendors of health leadership products and services.

^c Only for non-commercial or not-for-profit use.

MODUS OPERANDI: As a “value network”, CHLNet is served and enabled, not administered, through a distributive leadership governance model such that:

- *The Partners* will normally convene face-to-face in Ottawa or virtually twice per annum to set policy directions; appoint members of the CHLNet Secretariat; to set Network Partner fees and to conduct such other CHLNet business that will, from time to time, be required.
- *The Partners* will normally work through the co-chairs and strive for consensus decision-making. All Network Partners have a vote. The co-chairs do not vote except in the case of a tie.
- *The Partners* will approve new partners for the Partners’ Roundtable.
- The CHLNet Secretariat, working with the Executive Director, will provide ongoing network oversight in-between Network Partners’ Roundtable meeting but may convene teleconferences or seek on-line input from Network Partners from time to time as required.
- The CHLNet Secretariat, working with the Executive Director, will communicate with the partners, at regular intervals to be determined by the Partners, regarding the activities and achievements of the Network.

EFFECTIVE DATE: May 5, 2022

Revised:

May 24, 2018

June 15, 2011

May 26, 2015

Appendix A:

CHLNet Co-Chairs

Duties and Responsibilities

- Share chairing duties at the semi-annual Network Partner meetings and quarterly secretariat meetings.
- Assist in the talent management and succession planning strategies related to the Co-chairs, Executive Director, and Senior Policy and Research Advisors.
- In consultation with the Executive Director, monitor the development and implementation of a strategic plan, business plan and budget.
- Regularly liaise with the Executive Director to ensure open communication and consultation on CHLNet's value streams and ongoing value proposition.
- Provide strategic advice and guidance with respect to CHLNet's ongoing role in the health system.
- Participate in developing strategic alliances and other opportunities to ensure CHLNet's sustainability.
- Act as an advocate and representative for CHLNet at key meetings.
- Advise on the recruitment of senior leaders for dialogue and engagement forums including semi-annual roundtables, working groups, and other CHLNet meetings.

Terms of Office

- a. Nominees for appointment of the Co-chairs will be solicited from Network Partners prior to the next semi-annual Network Partner meeting.
- b. The current co-chairs will interview the potential nominees and then compile a prioritized list of viable candidates to present first to the secretariat and then to Network Partners for consideration.
- c. At a semi-annual Network Partner meeting, the partners will hold an election for the Co-Chair positions. Each co-chair will be appointed by a majority vote of Network Partners.
- d. The term of office for the Co-chair is two years, with the term to take effect immediately following the semi-annual Network Partner meeting where voting took place. Another two-year term may be granted by a vote of the Network Partners.

Selection Criteria

Nominees for appointment of co-chairs, should meet the following criteria:

- Represent a Network Partner;
- Be active in the health care community;
- Between the two Co-chairs, represent a balance between national vs. regional health organizations, as well as government vs. non-government organizations; and
- Time and willingness to assume duties and responsibilities.

Appendix B:

CHLNet Network Partners

The Canadian Health Leadership Network (CHLNet) is a value network that spans many of the health professions and jurisdictions from coast to coast. It began with 12 founding partners but rapidly expanded. It now consists of partner organizations who represent government, health regions, national and provincial/territorial health organizations, academic institutions, patient organizations and emerging health leaders. Its vision is *Better Leadership, Better Health – Together*.

Values

CHLNet Partners must commit to the twin principles of trust and reciprocity, i.e. are willing to work together, share resources, and seek to achieve a collective result that each will benefit from; and that ultimately benefits the patients and citizens of Canada.

Principles

Network Partners must generally support the following principles:

1. Supportive of the shared purpose in improving Canadian health performance and sustainability through evidence-based leadership;
2. Dedication to improving the quantity and quality of leadership to achieve our shared purpose;
3. Acceptance of the importance of leadership in all contexts within the health system;
4. Belief that evidence is foundational for best practice of leadership and leadership development;
5. Recognize that a stronger link between the research community and decision-maker community is required to better understand the discipline of leadership;
6. Endorsement of the need for a common leadership language such as *LEADS in a Caring Environment* or other LEADS-compatible framework; and
7. Bring a perspective of the organization they represent.

Criteria for Acceptance

- Agreement by the potential Network Partner to support the values and principles of CHLNet's value network as outlined above;
- Motion by Network Partners at a semi-annual Network Partners' roundtable supporting acceptance or through an electronic vote in-between meetings; and
- Financial support through payment of annual Network Partner fees.