

DRAFT TERMS OF REFERENCE¹

Anxiety Disorders and Obsessive-Compulsive Disorder Quality Standard Advisory Committee

I. Background:

As part of its legislated mandate under the *Excellent Care for All Act*, Health Quality Ontario (HQO) is responsible for developing and supporting the adoption of standards of care for the Ontario health system that are supported by the best available scientific evidence. In support of this mandate, HQO is developing quality standards for patient populations or health care service areas where there are substantial opportunities to improve patient outcomes, enhance patient experience, and reduce unwarranted variations in practice across Ontario. Quality standards are concise sets of easy-to-understand statements based on the best available evidence. They are intended to be a go-to resource for supporting high quality care. Each quality standard includes both a clinician-facing guide and a version of the guide oriented toward patients, caregivers and families.

Each quality standard defines 5-15 evidence-informed, measurable quality statements directed toward high-priority, achievable areas for quality improvement in the topic area within Ontario. Each individual quality statement is accompanied by an associated quality indicator that enables health care professionals to measure their adherence to the statement and guide quality improvement activities. HQO develops each quality standard in close collaboration with a Quality Standard Advisory Committee that brings together clinicians, researchers, administrators, patients and caregivers.

HQO's Anxiety Disorders and Obsessive-Compulsive Disorder Quality Standards are focused on improving the care and service for people living with an anxiety disorder or obsessive-compulsive disorder in Ontario. It is anticipated that these quality standards will be broadly promoted to a variety of audiences across Ontario and their adoption will be supported by vehicles such as HQO's public reporting platforms, Quality Improvement Plans, web-based resources and tools, communications vehicles, and through collaborative work with partner organizations.

This document sets out the terms of reference for the Anxiety Disorders and Obsessive-Compulsive Disorder Quality Standard Advisory Committee.

II. Role:

The committee shall provide advice to HQO to support the development of a Quality Standard for the care and service for people living with an anxiety disorder or obsessive-compulsive disorder in Ontario. Committee members will provide advice and make key decisions regarding the content of all quality statements, quality indicators, and implementation tools. HQO's Board of Directors will subsequently approve the quality standard as per its role under legislation.

III. Responsibilities:

In support of the role of the committee, members are responsible for the following:

- Participating in meetings and contributing to deliberations

¹Terms of reference, mandate, activities, membership, and relevance of the committee will be reviewed as needed.

- Reviewing a synthesis of guidelines and publications (provided by HQO) related to the quality standards topic areas
- Identifying and prioritizing opportunity areas for quality improvement
- Reviewing and advising on content for the quality standards
- Advising on the development of quality statements
- Advising on the development of quality indicators related to the quality statements
- Advising on tools to support implementation of the quality statements
- Advising on the implementation strategy and supports specific to the quality standards
- Acting as champions throughout the development and implementation of the quality standards
- Promoting dissemination, implementation, and adoption of the quality standards

Appendix A includes a work plan, associated deliverables, and a timeline.

IV. Membership:

- Co-chairs (2) selected by HQO
- Other members selected by committee co-chairs in consultation with HQO staff after an open call for nominations

Membership will include representation from various perspectives and expertise that has been identified by HQO as necessary to fulfill the stated purpose of this committee, including:

- Broad geographic representation from across Ontario, including rural and urban settings (e.g., GTA, East, West, and North)
- Representation from all relevant care settings
- Representation from clinicians, service providers, and related organizations and programs/services
- Administrators and researchers
- Patients and caregivers with lived experience
- Quality improvement experts
- Performance measurement experts

At the discretion of the co-chairs, membership may be reviewed to ensure that the goals and objectives of the committee are being met. Committee members wishing to withdraw from the quality standard committee may do so by notifying HQO in writing.

V. Meeting Guests and Observers:

Guests or observers may be invited to any committee meeting, subject to pre-approval by HQO on a case-by-case basis. Meeting guests and observers are non-voting attendees and may include invited guest speakers, government representatives, students, representatives from key stakeholder organizations, or expert advisors of a particular topic or field. All committee meeting materials are assumed to be confidential and not for wider distribution, unless otherwise stated.

VI. Frequency of Meetings and Manner of Call:

The committee is expected to meet four to five times over a 6- to 12-month period. All committee meetings will be held in Toronto at locations determined by HQO, with reasonable notice given in advance to each member. Meetings will generally be about 5 to 7 hours in duration. It is expected that committee members will strive to attend meetings in person; however, accommodations for remote participation by teleconference will also be available.

VII. Attendance:

To maintain continuity and consistency in discussion and group composition, members will strive to attend all meetings. Attendance at a minimum of 50% of meetings is required for acknowledgement as a member of the committee.

VIII. Decision-making:

A quorum of 50% of membership is required for decision-making. Although members will strive to make decisions by consensus, it may be necessary to vote on certain quality statements. Vote totals will be recorded in the minutes without identifying the votes of any specific member(s). When voting on any issue other than to adopt a quality statement, approval by majority of members present shall constitute a passing vote. Quality statements require the support of at least 80% of committee members present for approval.

IX. Expenses:

HQO will reimburse travel, hotel, and meal expenses incurred by committee members in accordance with its Travel, Meal, and Hospitality Policy. Please note that HQO will not reimburse travel, hotel, or meal expenses for meeting guests or observers.

X. Secretariat and Project Management Support:

HQO will be responsible for providing secretariat and project management support for the committee by:

- Developing and maintaining a project plan
- Scheduling committee meetings
- Coordinating the preparation of meeting materials (including, but not limited to, agendas, minutes, records of proceedings, reports, and maintaining information for the committee)
- Ensuring committee meetings take place in venues accessible to persons with disabilities
- Ensuring that meeting agendas and materials are distributed no later than 1 week prior to meetings

XI. Conflict of Interest and Media Inquiries:

Conflict of Interest: Committee members must make a declaration of any real or potential conflicts of interest related to committee business on HQO's conflict of interest form. In consultation with the co-chairs, HQO will determine what action, if any, is required in each case of a conflict of interest.

Media Inquiries: Committee members are requested to refer media inquiries about the committee and its work to HQO's senior communications advisor, Ana Laing, at Ana.Laing@hqontario.ca

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