

Acute Care Enhanced Surveillance ("ACES") Advisory Council:

Terms of Reference

July 2014

Purpose:

Acute Care Enhanced Surveillance ("ACES") is a surveillance system that assists Public Health to better protect the health of the population and encourages collaboration among the Public Health and Acute Care sectors. The establishment of the ACES Advisory Council is intended to improve opportunities for consultation about the current and future directions of ACES, which will help continuously ensure optimal ACES performance and outcomes.

Mandate:

The mandate of the ACES Advisory Council is to provide general advice, recommendations, and relevant updates for ACES, and to discuss and suggest strategies respecting the following aspects of ACES:

- system improvement;
- communications strategy;
- scientific developments;
- technological advances;
- uses in various public health scenarios;
- new evidence and best practices;
- future applications.

The mandate of the Council does not include consideration of legal or privacy matters.

Membership:

The ACES Advisory Council shall be comprised of representatives from the following organizations:

- Dr. Kieran Moore, Associate Medical Officer of Health, Kingston, Frontenac and Lennox & Addington (KFL&A) Public Health (Chair) or delegate;
- Dr. Paul Belanger, Associate Director, Knowledge Management, KFL&A Public Health;
- Two representatives from two local public health agencies (public health units) in Ontario;
- One representative from the Emergency Preparedness Division of Public Health Ontario;
- Two representatives from Emergency Departments of two public hospitals in Ontario;
- One representative from the Emergency Management Branch of the Ontario Ministry of Health and Long-Term Care;
- One representative from the Public Health Division of the Ontario Ministry of Health and Long Term Care;
- One representative from the South East Local Health Integration Network (LHIN) of Ontario;
- Other *ad hoc* subject matter experts as required.

Roles:

Chair

The ACES Project Lead will be the Chair of the Council. The Chair will be responsible for setting meeting dates, soliciting agenda items and circulating the agenda prior to the meeting.

Recorder

The Chair shall designate one member of the Council to act as Secretary of the Council for the purpose of recording Minutes at Council meetings. Minutes will be completed within two weeks of each meeting and circulated to Council members.

All Members

Members of the Council are expected to participate in meeting discussions and provide objective advice in their area of expertise when relevant.

Appointment of Members:

The terms of membership are as follows:

- The Chair of the Council shall nominate all members of the Council.
- Other than for the position of Chair of the Council, the term of membership shall be two years.
- The position of Chair of the Council shall be a permanent one, unless the Chair elects to resign.
- If the Chair elects to resign, he shall appoint a new Chair in advance of his resignation.
- A member's term may be renewed at the discretion of the Chair for any number of additional two-year terms.
- A member may withdraw their membership on the Council at any time upon written notice to the Chair in advance of his/her resignation, with a statement of the effective date of resignation on the notice.

Meetings:

- The ACES Advisory Council shall meet twice per year for one hour, and on an *ad hoc* basis as required.
- The Chair of the Council shall set meeting dates and will provide at least two weeks notice to Council members of the date and time of the meetings.
- Meetings may be held in person or by teleconference, at the discretion of the Chair.
- There is no quorum requirement for meetings of the Council.
- These Terms of Reference will be reviewed by the ACES Advisory Council and the KFL&A Steering Committee for ACES on an annual basis and will be amended as required.

Accountability and Reporting:

The Council reports to the KFL&A Public Health Knowledge Management Division and the Medical Officer of Health for KFL&A Public Health. The Council shall prepare a written report of each meeting (which may be in the form of Meeting Minutes), which will include any advice, recommendations, suggestions, updates or proposed strategies for ACES that were discussed during the meeting. The Council shall provide a copy of the report to both the KFL&A Public Health Knowledge Management Division and the Medical Officer of Health for KFL&A Public Health.

The Chair of the Council may, in their discretion, make the Minutes of Council meetings available to the public, including any advice, recommendations, suggestions, updates or proposed strategies identified and discussed by the Council at the meeting.

Independence of KFL&A Public Health Knowledge Management Division and Medical Officer of Health for KFL&A Public Health:

Neither KFL&A Public Health, its Medical Officer of Health, nor the KFL&A Public Health Knowledge Management Division is obliged to adopt any recommendations of or to follow any suggestions or advice made by the Council.

Related Documents:

Ontario's *Personal Health Information Protection Act, 2004*;
Ontario's *Health Protection and Promotion Act, 1990*;
Ontario Agency for Health Protection and Promotion Act, 2007;
Template Data Sharing Agreement for ACES;
Privacy Impact Assessment for ACES;
Privacy and Confidentiality Charter for ACES;
User Manual for ACES;
Data Flow Diagram for ACES;
List of hospitals and Health Units participating in ACES.

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