Simcoe Muskoka COVID-19 Vaccination Campaign Advisory Committee Terms of Reference

In a changing and globalized world, factors such as international travel, migration, displacement and climate change can increase the risk of threats or other emergencies that have significant health system impacts. These influences increase the scope and severity of the threats and increasingly draw on the need for an integrated response either at the local, provincial or federal level.

The COVID -19 pandemic has challenged the world including health system and community agencies' ability to cope with and recover from threats to public health. Within Simcoe Muskoka, a resilient health system is vital to allow for effective and efficient service delivery to our communities. A resilient health system has the ability to respond, cope with, and recover from identified and emerging threats by ensuring coordination in preparedness and response activities training and exercises, resource development, consultation and support and partnership development. Effective planning requires a whole-of-community, whole-of-government approach that coordinates efforts across sectors and levels of response.

Purpose

The Simcoe Muskoka COVID-19 Vaccination Campaign Advisory Committee will advise on the planning and coordination of the mass vaccination campaign against COVID- 19 for the population within the geographic boundaries of the Simcoe Muskoka District Health Unit (SMDHU) which includes the County of Simcoe and the District Municipality of Muskoka.

Assumptions

- The mass vaccination campaign within the region of Simcoe Muskoka will be based on provincial direction.
- The mass vaccination campaign will consist of three phases:
 - Vaccine administration will initially be provided by SMDHU staff, and will continue to be provided throughout the three phases in coordination with other health system partners
 - 2. Vaccine administration at Long-Term Care Homes (LTCHs) / Retirement Homes (RHs) and other congregate settings
 - 3. Vaccine administration by primary care, community pharmacies and possibly other providers

Objectives

- 1. To advise health system partner leads on how to operationalize the provincial mass vaccination campaign.
- 2. To identify local health systems risks and operational implications that may impede the campaign.
- 3. To identify strategy/mechanism to allow for the identification/enumeration of vulnerable populations within communities.
- 4. To explore resources, opportunities and supports to allow for health system partners capability and capacity to participate in the mass vaccination campaign.
- 5. To facilitate the coordination, cooperation and communication between heath care organizations and agencies within the identified communities and with the Province and other organizations as required.
- 6. To develop a localized strategy/plan for community-based vaccination distribution/administration.

Committee Membership

The membership will be based on a matrix to ensure representation based on the six sub LHIN regions that had been in place in the past in Simcoe Muskoka, as well as on sectors.

Each sector will have representation for the committee:

- Simcoe Muskoka District Health Unit
- Long Term Care/ Retirement Home
- Acute Care (Hospitals)
- Primary Care
- First Nations communities and urban/rural Indigenous populations
- Community pharmacies
- Municipalities: Simcoe County and District Municipality of Muskoka, Separated Cities
- The Central Region of Ontario Health / North Simcoe Muskoka LHIN
- Racialized and newcomer populations
- Marginalized populations (homelessness; mental illness and addictions)

The present membership is listed in Appendix A.

Committee Member's Responsibilities

- To actively participate in meeting the committee's objectives
- To carry out the objectives outlined within the Terms of Reference
- Participate in committee meetings and complete assigned tasks

Chairperson

• Senior leadership from SMDHU or designate

Role of Chair/Co-Chair

The chairperson will:

- Coordinate and chair meetings
- Hold meetings at a location convenient for all committee members
- Disseminate all materials relevant to meetings (not limited to agendas or minutes)
- Retain official committee documents, including but not limited to agendas, minutes and correspondence
- Transfer all official committee documents, including all electronic or hard copies, to the next committee chair

Role of the Recorder

The recorder of the meeting minutes will be provided by the lead agency

The recorder will:

- Track agenda items and ensure that actions to be completed are clearly documented.
- Provide completed minutes to the Chair via email within an agreed upon time prior to next meeting date

Simcoe Muskoka COVID-19 Vaccination Campaign Advisory Committee Terms of Reference: 2021

Frequency and Duration of Meetings

- Meeting Frequency: weekly or at the call of the chair starting until the completion of a plan
 for COVID-19 vaccination in Simcoe, targeting to be completed in the third week in January.
 Following this, meetings will take place monthly to monitor the implementation of the plan
- Duration: 1 hour or determined by the chair
- Commencement date: the second week in January 2021
- Additional meetings may be called at the discretion of the chair, or if there is an identified need to complete projects, agreed to by all committee members
- Meeting schedule/dates to be mutually agreed upon by the committee
- Meeting will be done by teleconference and web conferencing options

Quorum

Representation from at least 50% of the membership agencies must be present to proceed with committee business. Committee representation is linked to a respective agency not the number of individual representatives from each agency.

Date Committee Formed

Duration of Committee

Ongoing participation

Review of Terms of Reference

The terms of reference will be reviewed by all committee members

Appendix A:

Simcoe Muskoka COVID-19 Vaccination Campaign Advisory Committee

Individual	Organization	Region	Sector
Dr. Charles Gardner	SMDHU	Simcoe Muskoka	Public Health
Janice Skot	RVH	Barrie	Hospital
Dr. Chris Lalik	Barrie FHT/FHO	Barrie	Primary Care
Carmine Stumpo	OSMH- Couchiching OHT	Orillia	Hospital
Karen Cameron	Couchiching OHT – Pharmacy Committee Lead Waypoint – Simcoe Geriatric Services	Orillia	Pharmacy
David Jeffery Glen Chenard, Clinical Manager (alternate)	Chigamik	Midland	Primary Care – Link to Beausoleil FN
Dr. Harry O'Halloran	Georgian Bay FHT, South Georgian Bay OHT	Collingwood	Primary Care
Natalie Bubela	Muskoka Algonquin Healthcare	Muskoka	Hospital
Dr. Melanie Mar	Muskoka & Area OHT	Muskoka	Primary Care
Dr. Peter Cameron	Mamaway Wiidokdaadwin Primary Care Team and North Simcoe Muskoka Indigenous Health Circle	North Simcoe Muskoka	Indigenous Health – urban and link to Beausoleil, Rama, Wahta and Moose Deer Point FNs
Leanne Douglas	Rama First Nation	Rama First Nation	First Nations
Jody Levac Alternates: Carrie Jeffreys- VP/CNE Chief of Staff – Dr. Barry Nathanson	Stevenson Memorial Hospital	South Simcoe	Hospital
Karen Taillefer	NSMLHIN	North Simcoe Muskoka	Home and Community Care

Kim Sontag	Ontario Health (Central	North Simcoe	Ontario Health
	Region) NSMLHIN	Muskoka	
No see Brookle	District Charles	84 .1 .1 .	District of March of St.
Norm Barrette	District of Muskoka	Muskoka	District of Muskoka
	Commissioner of Health		Link to Wahta &
	& Paramedics		Moose Deer
Jane Sinclair	County of Simcoe	Simcoe County	County of Simcoe
	Health & Emergency &		
	Paramedics		
Michael Varieur	Director of Quality and	Muskoka	Marginalized
	Risk, Canadian Mental		populations
	Health Association,		(homelessness;
	Muskoka-Parry Sound		mental illness and
	Branch		addictions)
	Dranen.		
John Henderson	Chair of IPAC &	Simcoe County	Marginalized
	Manager, North Simcoe		populations
	ACTT & Lead, Quality &		(homelessness;
	Risk Management,		mental illness and
	Canadian Mental Health		addictions)
	Association		
Sandra Lee	Manager, Local	Simcoe County	Racialized and
Sanara Ecc	Immigration	Simcoc county	newcomer
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	Partnership, County of		populations
	Simcoe		