
 Mental Health - Care & Research Santé mentale - Soins et recherche		<b>NOTICE OF MEETING</b> <b>ROYAL OTTAWA HEALTH CARE GROUP</b> <b>INNOVATION COMMITTEE</b> <b>GOVERNANCE AGENDA</b> <b>April 27, 2020 at 4:30 – 6:30 p.m. (this time includes the Generative Thinking Agenda)</b> <b>via Zoom</b>			<ul style="list-style-type: none"><li>○ Oral presentation</li><li>● Paper enclosed</li><li>●● Paper to follow</li><li>●●● Paper at meeting</li></ul> <b>IN</b> Information <b>DEC</b> Decision required <b>**</b> Guidance required	
<b>MANDATE</b>  <i>Definition of Innovation</i>			To advise the Board and encourage a culture of Innovation at The Royal in order to provide better quality of care for patients  <i>Implementing new or better ways of doing valued things</i>			
Time (min)	#	ITEM	REFERENCE	RESPONSIBILITY	STATUS	
4:30pm	1.	<b>CALL TO ORDER</b>		N. Bhargava	○	IN
4:33pm (01)	2.	<b>APPROVALS AND UPDATES</b>	a) Approval of Agenda	All	●	DEC
4:34pm (01)			b) Approval of Previous Minutes	All	●	DEC
4:35pm (05)			c) Updates from Chair, Innovation Committee	N. Bhargava	○	IN
4:40 pm (10)			d) Update from Innovation Council - Vice-President, Innovation & Transformation	K. Corace	○●	IN
4:50pm (05)			e) Update from Research Committee - President, IMHR/Vice-President, Research	F. Dzierszinski	○	IN
	3.	<b>INNOVATION GOVERNANCE</b> <i>(From work plan)</i>	a) Discuss potential Innovation Initiatives at infancy stage	K. Corace		
4:55pm (10)			i. Update on Digital Health Strategy	K. Corace	○●	IN
5:05pm (20)			ii. AccessMHA Phase 1: Digitally enabled regional coordinated access	K. Corace G. Arturi M. Willows T. Dobson G. Garner	○	IN
5:25pm (15)			b) Review the Innovation Committee Terms of Reference, Work Plan, Governance Framework and Scorecard	N. Bhargava K. Corace	○●	DISC
<b>CONSENT AGENDA</b>						
5:40pm (02)		<b>INNOVATION GOVERNANCE</b> <i>(From work plan)</i>	a) Review the Governance Framework to be applied to Innovation Initiatives	N. Bhargava	○	IN

			b) Review the Work Plan and Proposed Framework with the Board	N. Bhargava	○	IN
			c) Review and Assessment of Innovation Initiatives using the Governance Framework and recommendation for approval of Innovation Initiative to the Board of Trustees and involve other Board Committees, as appropriate/relevant/required	K. Corace	○	IN
5:42pm (03)	4.	<b>OTHER BUSINESS</b> (if any)				
5:45pm	5.	<b>ADJOURNMENT</b>	Next Meetings for 2021-2022 are on October 26, 2021 and April 12, 2022	N. Bhargava	○	DEC


N. Bhargava, Chair

RSVP to [patricia.robb@theroyal.ca](mailto:patricia.robb@theroyal.ca)

 Mental Health - Care & Research Santé mentale - Soins et recherche		<p><b>NOTICE OF MEETING</b> <b>ROYAL OTTAWA HEALTH CARE GROUP</b> <b>INNOVATION COMMITTEE</b> <b>GENERATIVE THINKING AGENDA</b> <b>April 27, 2020</b> (<i>following the Governance portion of the meeting</i>) <b>Via Zoom</b></p>			<ul style="list-style-type: none"><li>○ Oral presentation</li><li>● Paper enclosed</li><li>●● Paper to follow</li><li>●●● Paper at meeting</li></ul> <p><b>IN</b> Information <b>DEC</b> Decision required <b>**</b> Guidance required</p>	
<p><b>MANDATE</b></p> <p><i>Definition of Innovation</i></p>		<p>To advise the Board and encourage a culture of Innovation at The Royal in order to provide better quality of care for patients</p> <p><b><i>Implementing new or better ways of doing valued things</i></b></p>				
Time (min)	#	ITEM	REFERENCE	RESPONSIBILITY	STATUS	
5:45pm (01)	1.	CALL TO ORDER		N. Bhargava	○	IN
5:46pm (15)	2.	REPORT ON INNOVATION GOVERNANCE FOR DIRECTORS COURSE (March 2021)	a) Learnings	N. Bhargava	○	IN
6:01pm (10)			b) Application to The Royal	N. Bhargava	○	DISC
6:11pm (19)	3.	ROUNDTABLE DISCUSSION		All	○	DISC
6:30pm	4.	ADJOURNMENT		N. Bhargava	○	IN

N. Bhargava, Chair

RSVP to [patricia.robb@theroyal.ca](mailto:patricia.robb@theroyal.ca)

 <div>MINUTES ROYAL OTTAWA HEALTH CARE GROUP INNOVATION COMMITTEE (<i>GOVERNANCE</i>) December 1, 2020 at 4:30 – 6:00 p.m. Zoom meeting (<i>details in calendar</i>)</div>					
<b>MANDATE</b>  <i>Definition of Innovation</i>		To advise the Board and encourage a culture of Innovation at The Royal in order to provide better quality of care for patients  <i>Implementing new or better ways of doing valued things</i>			
<b>Members</b>	<b>Present</b>	<b>Regrets</b>	<b>Members</b>	<b>Present</b>	<b>Regrets</b>
N. Bhargava, Chair	X		J. MacRae	X	
R. Anderson, Vice Chair	X		L. Leikin	X	
D. Somppi	X				
A. Graham	X				
<b>Ex-officio</b>					
A. Milne, Foundation		X	Mike Mount, IMHR	X	
J. Bezzubetz	X		R. Bhatla	X	
<b>Non-Voting Members</b>					
M. Langlois, Chair FAC	X		G. O'Hara, Chair CAC	X	
<b>Management Staff Members</b>					
S. Joynt	X		F. Dzierzinski	X	
C. Crocker	X		K. Corace	X	
K. Monaghan	X		P. Robb, Recorder	X	
E. Millar	X				
<b>Observers</b>					
M. Bellman	X		E. Millar		
J. Lambley	X		S. Farrell	X	

#	ITEM	REFERENCE	ACTION REQUIRED
1.	CALL TO ORDER	The meeting began with N. Bhargava, Chair, acknowledging that the land on which we gather is the traditional and unceded territory of the Algonquin nation. He then called the meeting to order at 4:31 p.m. and declared it to have been regularly called and properly constituted for the transaction of business.  Everyone was welcomed.	
2.	APPROVALS AND UPDATES	a) Approval of Agenda	
		Moved by L. Leikin seconded by D. Somppi  <b>BE IT RESOLVED THAT</b> the agenda for the December 1, 2020 Innovation Committee meeting be accepted, as presented.  <b>CARRIED</b>	
		b) Approval of Previous Minutes	
		Moved by J. MacRae seconded by D. Somppi  <b>BE IT RESOLVED THAT</b> the minutes from the September 1, 2020 Innovation Committee meeting be approved, as presented.  <b>CARRIED</b>	
		c) Updates from Chair – N. Bhargava	
		The Chair thanked the organization on behalf of the Committee for making innovation a priority topic. The Committee was delighted to see all the hard work and progress being made and to see how far the organization has come. Thanks was also given to J. Bezzubetz and K. Corace for operationalizing the topic of innovation and moving it forward.	All

		<p>The Chair then asked Committee members to reflect on the evolution of the Innovation Committee. A lot has progressed since the Committee was first formed. The Committee wants to ensure it provides the right value to the Board and to the organization. This can be discussed throughout the meeting, but members were also encouraged to contact the Chair after the meeting as he will be discussing what's next with the Board.</p>	N. Bhargava
		<p>d) Update from Innovation Council and VP, Innovation &amp; Transformation – K. Corace</p>	
		<p>K. Corace welcomed S. Joynt to the meeting as a new member of the Committee's management staff. S. Joynt introduced herself to the Committee.</p> <p>K. Corace then provided an overview of the SMT Innovation Council's revised Terms of Reference, which was included in the meeting package. She noted that the Terms of Reference have been approved by the Senior Management Team and there was a first meeting of the Council.</p> <p>The goal of the Council is to encourage and foster innovation and dialogue throughout The Royal and in line with the Strategic Plan. The Council will work very closely with the Research Committee. F. Dzierszinski will be speaking about the Research Committee later on in the agenda.</p> <p>The membership of the Council is broad and diverse</p> <p>The Council has since formed two working groups: (1) Call for Proposals / Evaluation Working Group, and (2) Dashboard Creation Working Group.</p> <p>Following the update, the Chair opened the floor for questions and feedback. There were comments on various aspects of the Terms of Reference such as the following:</p> <ul style="list-style-type: none"><li>- Under the Role of the Council it was suggested that rather than 'all' innovation would be captured, it should be 'material innovation would be captured'. K. Corace will bring this comment back to the Council.</li><li>- Some innovation projects may require Board approval.</li><li>- The Chair of the Innovation Council does not have voting rights, but other ex-officio members of the Council do.</li><li>- Interaction between the Innovation Committee, Innovation Council and the Quality Committee. There needs to be some linking mechanism between these groups and to inform the Board to understand them. This was flagged for consideration. In the meantime, the Quality Committee will look at its own Terms of Reference to see whether a member of the Innovation Committee should sit on the Quality Committee.</li><li>- The Committee Chair shared that some additional feedback had been provided including the word 'Implementing' in the definition and its importance in the mandate, as well as the identification of barriers to implementation.</li></ul> <p>There was also discussion about bureaucracy and operations vs the oversight role. When the Innovation Committee was formed it was to strike the balance of having oversight, but not to slow things down. Now that there is a Council, the Committee should evolve to the fact there is a management structure in place.</p>	

		A copy of the Innovation Council's Terms of Reference was included in the meeting package.	
		e) Culture of Innovation Dashboard Report – K. Corace	
		This item was combined with the previous item. At the next meeting there will be an update on progress on the Dashboard.	K. Corace
		f) Update from Research Committee – F. Dzierszinski	
		<p>A brief overview of the Research Committee's Terms of Reference was provided. A copy of the Terms of Reference was included in the meeting package.</p> <p>The Research Committee is a sister Committee to the Innovation Council. It is a large and multi-disciplinary committee, and working groups will be formed to focus on specific topics. One of the first working groups will be design of framework for client- and family-oriented research, which will be a priority working group. Other groups will focus on knowledge mobilization and transfer, and integration of research and care. Another working group may carry out match making to make connections across the organization for people with great ideas.</p> <p>There was discussion following the presentation. Committee members were pleased that the IMHR and ROHCG Boards were collaborating on this topic, as was senior management. The Chair and IMHR agreed to have a follow on conversation.</p> <p>There was a question about how the Foundation weaves into this. The Foundation leadership is looking for ways to support The Royal and its vision. It was noted that currently there is nobody from the Foundation on the Council, and that a conversation to include membership is happening.</p>	N. Bhargava S. West M. Mount
3.	<b>INNOVATION GOVERNANCE</b> <i>(From work plan)</i>	a) Discuss potential Innovation Initiatives at infancy stage – K. Corace	
		i. Update on Digital Health Strategy – K. Corace	
		<p>The purpose of this item was to inform the Committee on the status of the development of a prototype for a Digital Health Strategy. A briefing note was sent to Committee members prior to the meeting, which included an update on where we have been since we last left off from that work and a highlight of activities to date. There is hope that a design team will be in place by January and to have the digital health prototype done by the fall of 2021.</p> <p>Following discussion it was agreed that this is material and the Board would like to have more updates and oversight on this topic. A question was also raised on clarifying the definition of innovation prototypes at the Royal.</p> <p>The briefing note is attached to these minutes.</p>	J. Bezzubetz
		ii. Update on Prompt Care Clinic – S. Farrell	
		<p>An update was provided and a copy of the presentation was included in the meeting materials. Discussion and questions followed the presentation. The success of C-Prompt was recognized and the interest in a sustainable model is encouraged.</p> <p>The Board would like to have more updates and oversight on this topic as well.</p> <p>The Committee was advised that this topic will also be covered at the December Board meeting as part of the mini-series so more is still to come.</p>	J. Bezzubetz
		iii. Update on the Patient Portal and EHR – C. Crocker	

		<p>C. Crocker provided a brief update. Three projects that focus on the patient involvement in care re:</p> <ul style="list-style-type: none"><li>- The health portal, My Health My Way, has been implemented, but will transition over time</li><li>- Community Wide Scheduling ties in nicely to the patient portal as it makes all scheduling electronic. In future patient and families will be able to go in and look at schedules. This puts more control back to the patients</li><li>- Web Ambulatory is for outpatients in community care. Patients will be able to look at the latest information</li></ul> <p>Technology will continue to advance and we will implement new features as we advance. The partnership with Waypoint and Ontario Shores has gone well. The benefits and expertise we are getting from these organizations far outweighs any negatives. Covid is slowing progress a little since there are not as many meetings, but it is a learning experience.</p> <p>The Committee was pleased to hear about the progress of this work as part of the culture of innovation, but these were not needing board oversight. Congratulations was given to all.</p> <p>A copy of the update was included in the meeting package.</p>	
		b) Review the Innovation Governance Framework – N. Bhargava	
		<p>A copy of the Framework that was approved by the Board in December 2019 was included in the meeting package. The framework will need to be adjusted and synchronized with the Innovation Council. The Chair will alert the Board that this is being done as part of the Committee report to the Board in December. The Chair asked P. Robb to coordinate that synchronization.</p> <p>Following this report there was a brief discussion about the spectrum of options for the evolution of the Innovation Committee from accelerating, to whether it is needed anymore, to adjusting its mandate to related areas. This will be part of the continuing discussion about the evolution of this Committee that the Chair is taking to the Governance Committee.</p>	<p>N. Bhargava</p> <p>P. Robb</p> <p>N. Bhargava</p>
	<b>CONSENT AGENDA</b>	There were no items removed from the Consent Agenda.	
4.	<b>OTHER BUSINESS</b>	There was no other business.	
5.	<b>ADJOURNMENT</b>	Next Meeting March 23, 2021 at 4:30 p.m.	
		There being no further business, the meeting adjourned at 6:02 p.m. James moved and Roxanne seconded.	
<div><div>N. Bhargava, Chair</div><div>J. Bezzubetz, Secretary</div></div>			

Innovation Committee Meeting Action Items

Action Item	Individual Responsible	Status
<b>January 26, 2021 From Governance Committee</b>		
At the next Innovation Committee meeting, a review is to be done of the current Terms of Reference and Work Plan in order to update them to reflect the changes needed. The Committee will also comment on the SMT Innovation Governance framework, which will replace the Innovation Governance Framework that the Board approved. The Governance Committee agreed with this recommendation. Once the Innovation Committee has done their work at their next meeting, it is to be brought forward to the Governance Committee.	N. Bhargava P. Robb	April 27, 2021  May 25, 2021 Governance Committee meeting
<b>December 1, 2020 GOVERNANCE SESSION</b>		
Committee members to provide feedback to Chair on evolution options of Committee/Innovation oversight. Chair to review evolution of Committee with Board via Governance Committee	All N. Bhargava	COMPLETED January 26, 2021 Governance Committee – Invite Niraj to Governance Committee meeting April 27, 2021
Dashboard update for Board/Committee	K. Corace	April 27, 2021
Digital Strategy and Prompt Clinic to be included for Committee/Board Oversight Governance process.	J. Bezzubetz ( <i>can be separated and assigned to two leaders</i> )	
Innovation Council ToR and Framework update.	K. Corace	April 27, 2021
The framework will need to be adjusted and synchronized with the Innovation Council. The Chair will alert Board that this is being done as part of the Committee report to the Board in December. Governance Framework alignment with SMT	P. Robb N. Bhargava	April 27, 2021
Research Committee updates and alignment with Innovation Committee and IMHR	N. Bhargava M. Mount S. West	
<b>September 1, 2020 GOVERNANCE SESSION</b>		
As the Innovation Council forms, the Committee wants to hear back on the dashboard development as well as update on the Terms of Reference and Governance Framework.	K. Corace	April 27, 2021 (Update on dashboard development only)
To provide an update on digital health strategy and the prompt care clinic at the next Committee meeting.	K. Corace S. Farrell	April 27, 2021
To provide an update on the patient portal and an HR project.	C. Crocker	April 27, 2021
To amend the Innovation Committee Terms of Reference and Work Plan to send to the Governance Committee on October 13, 2020.	P. Robb	COMPLETED
Scientific Advisory Council - to report back to Committee when there is something further to report.	F. Dzierszynski	
<b>September 1, 2020 IDEATION</b>		
To send link to Committee members on work Tanya is doing on Youth Project in Lanark County.	D. Somppi	COMPLETED



**To:** The Innovation Committee of the Board  
**Date:** April 27, 2021  
**Subject:** Innovation Council - Update  
**From:** Dr. Kim Corace & Dr. Florence Dzierszinski

### **I. Purpose:**

The purpose of this briefing note is to inform the Innovation Committee of the Board on the status of the Innovation Council's activities and the first Call for Innovation Proposals.

### **II. Background:**

The second meeting of the Innovation Council took place on March 9, 2021. Twenty-one team members from across the entire enterprise met to review four project proposals and discuss the role of the Innovation Council in supporting the Royal's new strategy through Innovation. The Proposal Working group put four presentations forward, selected from the fifteen proposals received. Each sponsor provided a 10 min. overview of their proposal idea and spent 5 min. answering questions.

The Council also discussed the selection process for the proposals and opportunities to improve the process for future calls. More time was required to fully review and discuss the information from the presentations and the recommendations for the other eight proposals. The next meeting on April 29<sup>th</sup> will allow the Council to determine next steps for the proposals and to provide feedback to the sponsors in May. The discussion will also center on what the council team members can do to support the culture of Innovation at The Royal.

### **III. Present status and Activities to date:**

Updates on the three working groups:

1. The Proposal working group has met to discuss improvements for the next call for proposal template and how the scoring criteria could be improved in the future.
  - a. 15 submissions received:
    - i. 9 online and 6 via email
    - ii. 5 related to Peer Support, and others focused on Technology, Human factors design and Communications related solutions
    - iii. 3 of these went back for further information
2. The second team is working on recommendations for the development of an Innovation Dashboard. This work will continue to evolve and include a dashboard of innovation projects, where they are in the innovation cycle and how they fit in the strategy.
3. The third sub-group is a joint Advisory group formed from the Innovation Council and the Research Council. The Advisory group is working with the Program Evaluation Review project Core team, to review materials and recommendations put forward as part of the review. Please see the update specific to this working group.

The next meeting of the Innovation Council is April 29<sup>th</sup>; this is a special meeting called to determine next steps of the first 4 proposals reviewed in the Innovation call.

### **IV. Next Steps:**

- Determine the next steps for the four presentations and eight remaining proposals under review
- Provide Recommendations for the Innovation Dashboard

- Review the definition of Innovation with the Council and ways that the Council can support and help drive Innovation at The Royal
- Continue to foster joint working groups between the Innovation Council and the Research Council given shared priorities
- Determine next steps in collaboration with CAMH to host a joint Innovation Showcase

**To:** The Innovation Committee of the Board  
**Date:** April 27, 2021  
**Subject:** Review of Program Evaluation Models in Academic Hospital Settings:  
 Developing a Program Evaluation Model for The Royal - Project Update  
**From:** Dr. Kim Corace & Dr. Florence Dzierszinski

### **I. Purpose:**

The purpose of this briefing note is to update the Innovation Committee on the status of the Program Evaluation Review Project and the ongoing role of the Joint Advisory Group.

### **II. Background:**

The project was commissioned to review program evaluation models in academic hospital settings to inform the development of an organizational model for The Royal that will organize, leverage, and enhance its infrastructure for program evaluation across the enterprise. In the final stages, results from both the internal and external stakeholder sessions and preliminary recommendations were presented to the Advisory committee and HRT. Dr. Brian Rush and his team at VIRGO Planning and Evaluation Consultants, Inc. are working on the final report and it will be delivered in the coming weeks. The report will first be presented to the Advisory committee, for review and feedback. A summary presentation of the project is also being prepared for an upcoming SMT agenda, and feedback will be sought. The final report and executive summary will be shared broadly with SMT, the Advisory committee, and HRT to help inform and integrate project results with organizational design work already underway. There is a great deal of interest in the work - not only across The Royal, but also with our external partners. All the organizations consulted reported that they wish to learn from this process to evolve their respective program evaluation models. In this context, the final phase of the review process will include an aspect of knowledge transfer.

### **III. Present status and Activities to date:**

The Project approach and governance included:

1. Internal assessment – describe the current state of structures, resources, and initiatives across The Royal relating to program evaluation; based on a review of documents and literature as well as interviews and/or focus groups with internal stakeholders. (Focus groups completed and preliminary results pending in March)
2. External assessment – identify current and best practices at other academic hospital settings across Canada; based on a rapid review of published literature and semi-structured interviews with external key informants. (Preliminary findings reviewed with the Advisory Group late February)
3. Report and recommendations – summarize project findings and recommendations relevant to the structure and implementation of a program evaluation model for The Royal, including supportive connections between program evaluation, research, and care, as well as “on the ground” changes required as part of the Royal’s organizational alignment work. (Pending April)

### **IV. Next Steps:**

This work started in December 2020 and will be completed by May 2021. Next steps include:

- Review the draft report and recommendations as per process described above; start date April 19, 2021
- Update the Innovation Council and Research Council at the June Meetings

**To:** The Innovation Committee of the Board  
**Date:** April 7, 2021  
**Subject:** Development of Digital Health Strategy (DHS) at ROHCG  
**From:** Kim Corace, Florence Dzierszinski, Cal Crocker, Jim Lambley

### **I. Purpose:**

The purpose of this briefing note is to inform the Innovation Committee of the Board on the status of the development of a DHS strategic initiative.

### **II. Background:**

The rapid evolution of our current internal and external environments, including the COVID-19 pandemic, together with the multiplicity of initiatives and options, call for the development of a DHS for The Royal.

The vision for the DHS is to integrate and develop relevant technologies in order to provide access to “high-quality, easily accessible mental health and addictions support throughout [individuals’] lifetime, where and when they need it” (Roadmap to Wellness, 2020). The DHS aligns with and supports the strategy of “Co-creating Access, Hope and New Possibilities” and “The Hospital without Walls”, and is catalyzed by the integration of care, research and education.

### **Intended Impacts:**

#### Short Term (2021/22):

- Develop the engagement strategy for the DHS framework and co-create the strategic framework for the DHS

#### Medium Term (2023/24):

- Establish process metrics for the DHS development
- Initiate the co-design of initiatives in line with the DHS framework

#### Long Term (2025/26):

- Support the development, delivery and evaluation of digital health initiatives in line with the DHS that improve client and family-oriented outcomes, quality of care and access to services
- Leverage new partnerships and technology to co-create incremental growth
- Position The Royal in the 4th industrial revolution

### **III. Present status:**

- Integrating and developing the DHS at The Royal will help to advance best practices in virtual care and clinical informatics.
- In consultation and collaboration over the next 12 months, the plan is to complete the environmental scan and work with our clients, families, leaders, teams and key partners to develop an engagement strategy and co-create the framework needed for the DHS.
- Meaningful metrics will be co-created and embedded to monitor progress.

- The process has started with an Engagement strategy kick-off meeting on March 24, 2021 to ensure the right people are at the table and key considerations were discussed. The initial core-design team, including clients and families met and additional invitations are pending to complete the broader engagement team.
- Organizations highlighted the importance of widespread engagement and consultation in the strategy development, including with a user-centered design approach. A culture shift was also reported as key to progressing with the plan. Most noted the importance of identifying common priority areas as well as clinician and scientist champions.

#### **IV. Activities to date:**

##### ***1. Stakeholder engagement***

- Initial engagement team assembled and kick-off meeting (March 24, 2021)
  - Subject matter expertise represented: 15 team members, including client and families
- Invites sent to additional team members based on feedback including
  - Telemedicine, HR, ethics, and Northern rural voice
- Purpose, Process, and Impact for the DHS strategic initiative developed and shared at Board Connection day (February 24, 2021)

##### ***2. Consultations***

- A number of partner institutions have been consulted, including the following:
  - Hamilton Health Sciences, UHN, CAMH, TOH, Ontario Health Mental Health & Addictions CoE, MH-HIS Cluster, Ontario Shores, uOttawa
- Other consultations planned, include private sector (e.g., Cisco, Telus, IBM)
- Example: uOttawa's digital campus transformation plan: <https://it.uottawa.ca/DigitalPlan>

##### ***3. Other activities***

- CAMH has shared their new DHS for review
- Ontario Shores has shared their IT Strategic Plan for review
- Based on the lessons learned from other institutions, a DHS is a large institutional endeavor requiring significant subject matter expertise; the services of a consultant might be required.

#### **V. Next Steps:**

- The Innovation Council & Research Council, along with their associated working groups, will continue their efforts launched at the end of 2020
- Review the requirements for a RFP to engage external support, based on the size and importance of the endeavour and the experience of others
  - Complete Environmental scan (ie. discussion with other institutions)
    - Consolidate information with additional examples
    - Highlights to date: wide-spread engagement and consultation needed, culture shift is key
- Determine next steps and meetings for the core design team
  - Build on the team assembled for the kick-off meeting
    - Engagement group, clients / families, members of Innovation Council / Research Council

### Briefing Note

<b>To: Innovation Committee</b>	<b>Date: April 27, 2021</b>
<b>From: Governance Committee</b>	<b>Prepared By: Patricia Robb</b>
<b>CC to:</b>	
<b>Subject: Recommendations from the Governance Committee</b>	

Purpose (mark an X beside the appropriate choice)

For approval	<input type="checkbox"/>	For Information	<input type="checkbox"/>	For Discussion	<input checked="" type="checkbox"/>	Other	<input type="checkbox"/>
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#### Issue:

The future of the Innovation Committee.

#### Background:

As the Chair of the Innovation Committee, N. Bhargava was invited to the January 26, 2021 Governance Committee meeting to provide a status update on the Innovation Committee.

N. Bhargava was pleased that the topic of innovation is strengthening at the Royal, with the newly developing strategies and Senior Management Team (SMT) priorities, and the Innovation Council engagement at SMT.

The Innovation Committee was initially formed as a message to signal commitment from the Board. The topic of the evolution of the Committee was discussed openly with Committee and Board members, with a spectrum of options as follows:


- Adjust Committee to become Innovation (and Generative Thinking) Committee. The generative thinking portion would replace Ideation.
- Reduce meetings to two per year (and other meetings as needed at the call of the Chair). In order to lessen the workload of SMT prior to Board meetings, the meetings would not need to be scheduled adjacent to Board meetings. There is a lot of work for SMT to prepare for Committee meetings and the purpose is not to put up barriers or add bureaucracy. It should not be burdensome to management, especially in light of the new Innovation Council and Research Committee.
- The Committee membership should be left largely as is. It is important to have a forum where there can be bridging conversations among the various groups attending.
- The next phase of the Committee should be light and more fluid, and include CEO chosen topics that can change over time. An example given was the 'Strategy Implementation Dashboard'. Also, there could be oversight (and foresight) on innovation implementation,

with short briefings from SMT leaders: Innovation, Research, Strategy, Foundation and Quality. This is to be further reviewed and discussed over time, however, Strategy will be reporting to the Board of Trustees and we would want to avoid duplication of effort.

**Discussion:**

A recommendation was made that at the next Innovation Committee meeting, a review be done of the current Terms of Reference and Work Plan in order to update them to reflect the changes needed. The Committee will also comment on the SMT Innovation Governance framework, which will replace the Innovation Governance Framework that the Board approved.

## Modifications to be discussed on April 27, 2021

 Mental Health - Care & Research Santé mentale - Soins et recherche		<b>Innovation Committee</b> <b>Terms of Reference</b>	
<b>TITLE: ROHCG BOARD COMMITTEES</b>			
<b>SECTION: INNOVATION Committee Terms of Reference</b>		<b>NO: ROHCG Schedules Section 6.1.1</b>	
<b>Issued and Approved By:</b>	<b>ROHCG Board of Trustees</b>	<b>APPROVAL DATE : February 20, 2020</b>	
		<b>Date Initially Issued: 2019-02-21</b>	
		<b>Date Reviewed: 2020-12-17 2020-01-23</b>	
		<b>Date Revised: 2020-02-20</b>	
<b>Role</b>	The Innovation Committee's role is to encourage a culture of innovation and to advise the Board on matters relating to innovation at the Royal. This is to provide better quality of care for clients and families and is not limited to clinical care – it includes all aspects of the organization, including corporate services.  Definition of Innovation – New or better ways of doing valued things.		
<b>Responsibilities</b>	<ol style="list-style-type: none"><li>1. To encourage a culture for Innovation in keeping with the Vision and Strategy to improve the clients and families quality of care;</li><li>2. To dialogue with senior management on Innovation initiatives that are new, Innovation initiatives outside the scope of approved budgets or board approved strategies.</li><li>3. To determine what matters within the scope of the Innovation Committee will be required to be submitted to the Board for its approval along with consulting with other relevant Board Committees as appropriate;</li><li>4. To review and report to the Board the ROHCG's approach and activities, (and also review the Board's approach), to Innovation and its measurement;</li><li>5. To facilitate learning on Innovation topics including external contacts, experiences and Ideation Sessions. Innovation Ideation Sessions may include the full Board and additional staff members of the ROHCG and be informal in nature;</li><li>6. To review and assess <i>significant</i> Innovations as recommended by senior management;</li><li>7. To recommend to the Board significant strategic Innovations as recommended by senior management and, if approved, monitor their implementation; and</li><li>8. To review the Terms of Reference annually to ensure its relevancy and make the appropriate recommendations to the Board.</li></ol>		



<b>Membership &amp; Voting</b>	<p><u>Voting Members of Committee</u></p> <p>The Innovation Committee shall be composed of the following voting members:</p> <ul style="list-style-type: none"> <li>• Three to five trustees who are independent of the ROHCG, the ROFMH and The Royal's IMHR. The intention is to have representation from each ROHCG Board Committee on the Innovation Committee</li> <li>• the Psychiatrist-in-Chief/Chief of Staff (ex- officio);</li> <li>• the ROHCG President and Chief Executive Officer (ex-officio)</li> <li>• A representative of IMHR Board (ex-officio)</li> <li>• A representative of the Foundation Board (ex-officio)</li> <li>• Vice President, Innovation and Transformation (ex-officio non-voting (management resource))</li> </ul> <p><u>NOTE:</u> Any member of the Innovation Committee who is an <i>ex officio</i> Trustee or who is an employee or a Medical Staff or Dental Staff member shall have a vote on advisory matters but shall not have a vote on matters delegated for final disposition to such Committee by the Board.</p>
	<p><u>Non-Voting Members of Committee</u></p> <ul style="list-style-type: none"> <li>- Chair, Client Advisory Council</li> <li>- Chair, Family Advisory Council</li> <li>-</li> </ul> <p>There shall be French-speaking representation on the Committee.</p>
<b>Chair</b>	The Chair shall be an independent ROHCG trustee.
<b>Appointment of delegates</b>	The ROHCG President and Chief Executive Officer may appoint up to three non- voting delegates to the group.
<b>Frequency of Meetings</b>	The Innovation Committee shall meet at least four (4) times per year and has a goal of four additional Innovation Ideation Sessions a year.
<b>Quorum</b>	The quorum shall be 51% of the voting members provided a majority of those present are independent trustees.
<b>Resources</b>	<p>The ROHCG Chief Executive Officer will identify staff member(s) to act as resources to Board Committees.</p> <p>One staff member will be identified as the Committee Secretary.</p>
<b>Reporting</b>	The Innovation Committee shall report to the ROHCG Board of Trustees on a regular basis.

## INNOVATION COMMITTEE WORK PLAN FOR FISCAL 2020/2021

MANDATE		To advise the Board and encourage a culture of Innovation at The Royal in order to provide better quality of care for patients.  Definition of Innovation – Implementing new or better ways of doing valued things.			
	ITEM/DATE	April 27, 2021	October 26, 2021	April 12, 2022	
1.	Review Terms of Reference (8)	X			
2.	Review of the state of the Culture of Innovation (1)		X		
3.	Discuss potential Innovation Initiatives at infancy stage (2)	X	X	X	
4.	Review the Governance Framework to be applied to Innovation Initiatives (3)	X		X	
5.	Review the Work Plan and Proposed Framework with the Board		X		
6.	Approve the Innovation Governance Framework	X		X	
7.					
8.	Review Innovation Initiatives reported by the Innovation Council	X	X	X	
9.	Review and report to the Board on the ROHCG's approach and activities (including the Board) to Innovation and its measurement (4)			X	
10.	Participate in Ideation Sessions (5)	X	X	X	
11.			X		
12.	Review the means of measuring Innovation and reporting of same		X	X	

Deleted: May

Deleted: Sept. 1, 2020

Deleted: Dec. 1, 2020

Deleted: Mar 23, 2021

Deleted: 11, 2021

Deleted: X

Deleted: (including determining the means of measurement and frequency of measurement)

Deleted: X

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Deleted: Review and Assessment of Innovation Initiatives using the Governance Framework and recommendation for approval of Innovation Initiative to the Board of Trustees and involve other Board Committees, as appropriate/relevant (6)(7)

Deleted: X

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Deleted: Monitor implementation of Innovation Initiatives approved by Board of Trustees and report same to Board of Trustees (7)

Deleted: X

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Deleted: X

Deleted: Review the objectives and goals of the Royal's Research Group with respect to Innovation

Deleted: X

Deleted: X Deferred to Sept. 2020

Deleted: X

Deleted: X

## Royal Innovation Committee – Draft Framework for review – v3 April 8, 2021

### Innovation Governance Committee (IGC)

The Innovation Committee's role is to encourage and support a culture of innovation and to advise the Board on matters relating to innovation at the Royal.

**Deleted:** Royal Innovation Committee – Draft Framework for review – v2 December, 2019 ¶

The Innovation Council has created management and operating processes to drive, prioritize and promote innovation ideas.

The overall process is described in the Innovation Council Terms of Reference (TOR) and mirrors the process that was included in the previous version of the Innovation Committee Governance Framework.

The TOR describe the link to ICG as outlined below:

**Deleted:** CEO reviews *materiality* of proposed innovation and determines what Innovations come to the Innovation Governance Committee (IGC) ¶  
Innovation Committee provides governance oversight with stage/gates ¶

The Council will present to the Board Innovations Governance Committee:

- Innovation ideas received
- Ideas/projects that have advanced to:
  - Step 1 (innovation council presents ideas to SMT)
  - Step 2 (business case development and decision for operation)

Innovation ideas approved by SMT. If a project has budget requirements, and/or materiality that is outside of the SMT approval parameters, then approval will be sought by SMT through the Innovation and Finance committees of the Board.

**Deleted:** Gate 0: Ideation – CEO Prioritizes to Innovation Ideation Committee (IIC); Information is provided to the Board ¶  
Gate 1: Go/No Go to Investigate/Develop/Pilot ; ICG gives feedback to Management, informs Board and when ready makes recommendation to the Board ¶  
Gate 2: Go/No Go to Fully Develop /Implement; ICG gives feedback to Management, informs Board and when ready makes recommendation to the Board ¶  
Gate 3: Go/No Go to Go-live/ Operate; ICG gives feedback to Management, informs Board and when ready makes recommendation to the Board ¶  
Gate 4: Wind down option at regular review time; ICG makes recommendation to the Board ¶  
Note: For all gates it is possible that the Innovation may go to another committee before going to the Board, for example, Quality or Finance. ¶

**Deleted:** Typical Business Case includes: ¶  
Opportunity ¶  
Required resources ¶  
**Impact:** Clients, System, Quality... ¶  
Return(s) ¶  
Risks and Mitigation plans, including best case/worst case ¶  
Implementation Plan/Phases/Checkpoints ¶  
Champion-Owner/Team/Partners