

DEEP RIVER AND DISTRICT HEALTH

Terms of Reference: Long-Term Care Development Committee	
Original Date: 2021-05-26	Policy Manual: Governance
Approved by: <input checked="" type="checkbox"/> Board of Directors <input type="checkbox"/> Chief Executive Officer <input type="checkbox"/> Chief Financial Officer <input type="checkbox"/> Chief Nursing Executive	

Purpose:

The purpose of the LTC Development Committee is to provide advice and oversight to support the Long-Term Care Capital Development Project allocated to the Deep River and District Hospital (DRDH). The Committee will provide advice and oversight in relation to the design, funding and fundraising activities, community consultation, construction and delivery of the Deep River and District Hospital Long-Term Care Development Project.

The Committee will provide status reports to the Deep River and District Hospital Board of Directors throughout the project.

Terms of Reference:

- The Development Committee shall be a Standing Committee of the Board of Directors for the duration of the development project;
- Meetings shall be called by the Chairperson as needed to respond to any items of significance;
- Minutes of the LTC Development Committee will be recorded by the committee secretary and distributed to all committee members and the Board of Directors;
- The LTC Development Committee Chairperson shall be appointed by the Deep River and District Hospital Board of Directors and will:
 - Preside at all meetings;
 - Cast the deciding vote in case of a tie vote;
 - Report to the DRDH Board of Directors
- Other resource people will be asked to attend as required by the Agenda.

Membership:

Shall consist of seven (7) voting members in total, including:

- Four Deep River and District Hospital Board member;
- The Board of Directors Chair
- Deep River and District Hospital President and CEO (Project Sponsor);
- Deep River and District Hospital Chief Financial Officer;
- A LTC Resident/Family Representative; (non-voting)
- Others as the LTC Development Committee sees fit to engage in the process. (non-voting)

Quorum:

- Minimum meeting quorum shall be five (5) voting members.

Scope of Responsibilities of Members:

Overarching responsibilities of LTC Development Committee members is as follows:

1. To provide oversight and advise the Deep River and District Hospital Board of Directors on issues relating to the design, funding and fundraising activities, community consultation, tendering, construction and delivery of the Deep River and District Hospital Long-Term Care Development Project.
2. The frequency of advice and reporting will, at a minimum, coincide with the Deep River and District Hospital Board of Directors regular meetings. Frequency of advice and reporting can be adjusted to address demands of the project;
3. To remain informed on progress and key developments regarding the delivery of this project;
4. To receive periodic briefings from the Deep River and District Hospital Long-Term Care Development project manager, project architects, advisors, major contractors regarding critical project milestones and any significant developments relative to the project.
5. To remain informed with respect to the design, function and operational effectiveness of the redevelopment project;
6. To participate in community consultation processes and stakeholder engagement undertaken in relation to the project.

Additional responsibilities and oversight activities may include, dependent on the phase of the project:

Initiation Phase:

1. Develop and approve a Project Charter that defines the boundaries of the project, including stakeholders and authorities of the project manager.
2. Initiate community engagement and communication, focusing on establishing fundraising objectives and stakeholder roles.

Execution Phase:

The Committee will monitor and support the conventional elements of project delivery, including but not limited to:

1. Scope control (siting, design, construction, fit up, commissioning of building services, hiring and training staff, for the new LTC)
2. Schedule control
3. Cost control
4. Quality control
5. Human resources planning and control
6. Communications within the project and to Stakeholders
7. Risk management
8. Procurement control (tender preparations, bid evaluations, contractor selection, contract award, and contractor oversight for design and/or design construction)
9. Selection of major milestones, and approval of milestone completion
10. Review and approval of major changes to the project (typically scope, schedule, cost changes)
11. Fundraising progress

12. Plans to operationalize the facility would be monitored (including recruitment, training, and process/procedure development for the new facility).

Completion Phase:

1. Support closeout of the design and construction contracts, commissioning completion and turnover to operationalization.

Reference Documents	<ul style="list-style-type: none">•
Acknowledgements	<ul style="list-style-type: none">•
Review Process	<ul style="list-style-type: none">• Long-Term Care Development Committee: 2024-03-05• Governance Committee: 2024-03-06• Board of Directors: 2024-03-26