

<p style="text-align: center;">Terms of Reference Families First Practice Council (FFPC) Winnipeg Health Region</p>

1.0 Purpose

- To provide a forum for staff members involved in Families First services to monitor, identify, examine, and make recommendations regarding current and future practice issues and initiatives.
- To promote a consultative and collaborative culture and healthy work environment for all staff members involved in the delivery of Families First services.
- To strengthen and enhance the delivery of Families First through communication, capacity building, and collaboration.

2.0 Function

- Promote the integration of Families First services within the Population and Public Health continuum of care.
- Provide an ongoing review of the delivery of Families First in the region and recommend strategies and practice guidelines that support and maintain meeting the Families First Program Standards and goals.
- Foster consistent unified delivery of Families First services in the region through the sharing of collective expertise on practice and program priorities.
- Develop a cohesive representative voice providing leadership and direction for home visiting, evidence-informed practice, education, and research.
- Further Home Visitor and Public Health Nurse Competencies as it relates to Families First services.
- Uphold and embody Families First principles of being strength-based, solution-focused, family-centred, relationship-based and culturally competent.
- Support the PPH Director and PPH leadership in informing regional partners and provincial leadership about the practice of Families First in the WRHA.

3.0 Membership

Voting Members

- Families First Home Visitor (FFHV)
- Public Health Nurse Reflective Supervisor (PHN RS)

Members of the council will include one Families First Home Visitor and one Reflective Supervisor PHN representative from each of the 13 Public Health Community Area Offices. Members will be selected by their teams and endorsed by the Team Manager.

Term of Office

Voting members of FFPC will participate for a 2-year term. Members may continue in successive terms after consultation and support of their team and Team Manager.

Non-voting members

- Team Manager, Healthy Parenting and Early Childhood Development
- One Community Area Team Manager to liaise with PPHOT
- Clinical Nurse Specialist with Families First portfolio
- Public Health Coordinator with Families First portfolio

Ad Hoc Member

- Director of Population and Public Health

Voting and Non-voting Members are expected to:

- Participate in all bi-monthly meetings. Attending 5 times per year.
- Inform the co-chairs of planned meeting absence.
- Ensure each team is represented by having an alternate attend when they are unable.
- Share the views of their community area teams by participating in round table discussions.
- Share field expertise to generate solutions to address Issue Papers.
- Advance the work of FFPC within their community area by sharing information, distributing minutes, facilitating opportunities for team members to provide their perspectives and collecting feedback and direction on Issue Papers.
- Bring forward current practice issues or initiatives by electronically submitting best practices and Issue Papers to FFPC co-chairs. Ensure items brought forward are reviewed, resolved or referred.
- Facilitate collaboration and consensus within their team regarding the decision to vote in favor of resolving an issue paper, in opposition, or to abstain from the vote.
- Lead, co-lead, or participate in working groups when required.
- Advocate and support FFPC Representatives scheduling time within their regular workday to complete FFPC tasks.

Chairs

The council will elect two co-chairs from the FFPC membership. The Co-chair configuration will maintain One FFHV and one PHN RS. One co-chair will be elected for a 2-year term every year at the November meeting. The terms of the two co-chairs should be staggered to provide continuity and succession planning at FFPC. A co-chair may complete a maximum of two consecutive terms if mutually agreed upon by the community area team and Team Manager.

FFPC representatives are invited to nominate individuals to serve as co-chairs. In the case of no accepted nominations, a representative who volunteers for the position of co-chair may be appointed by acclamation.

When a co-chair position is unable to be filled through election or appointment by acclamation the FFPC Co-Chair Position Coverage List (see Appendix A) will be used to determine which community area will be assigned to fill the duration of the full term.

If a co-chair is unable to fulfill their 2-year term, a replacement co-chair from the same office must be assigned to fulfill the remainder of the term.

Co-chair Duties

- Call and Chair FFPC meetings
- Develop meeting agenda
- Review and revise meeting minutes
- Confer with Public Health Coordinator, CNS and Team Manager, HPECD on matters related to the council's work and meeting planning.
- Maintain and update the FFPC electronic shared drive
- Communicate and collaborate with community area teams and FFPC representatives to build capacity regarding issue paper development and FFPC processes.
- Updating issue papers in coordination with the Public Health Coordinator
- Review newly submitted issue papers.
- Create an annual FFPC Review to summarize council activities and achievements during the year. Identify issues that are ongoing or have been redirected for follow-up. The review should be presented to FFPC in January of each year.
- Facilitate discussion and planning related to the priorities for FFPC in the upcoming year.
- PHN RS co-chair to represent and speak on behalf of the council at provincial Families First meetings.

4.0 Accountability

- Families First Practice Council reports to the Director of Population and Public Health directly or indirectly through the Team Manager HPECD.
- Families First Practice Council members are representatives of their community area. Members provide a two-way communication system for practice on significant issues, changes to practice and issue resolutions.
- The Terms of Reference will be reviewed every 3 years or earlier if needed.

5.0 Meetings

Process

- Agenda items will be submitted to the co-chairs no later than two weeks prior to a scheduled meeting.
- Stakeholders and guest speakers will be invited to participate on an ad hoc basis.
- The addition or cancellation of meetings is at the discretion of the co-chairs with the support of the Team Manager HPECD.
- Documents in preparation for the monthly meetings will be circulated by email in an agenda package approximately one week prior to the meeting.

Best Practice

- FFPC reps will be given an opportunity to share Best Practices. This can include, but isn't limited to; the celebration of successes, innovative uses of activities and visuals, new resources, community connections, team learning and curriculum service delivery success.

Quorum Governance

- The Family First Practice Council operates by voting on issues, with each FFHV member granted the privilege of voting on behalf of their community area team.
- When the FFHV is not able to be present to vote then the PHN RS will vote on behalf of their community area team.
- Members will accept that if a team is unable to send a representative to the meeting, they will not have a vote.
- Co-chairs will facilitate items requiring a vote and ensure a quorum.
- All decisions require the vote of a majority of the Community Areas or the majority of the quorum. A quorum constitutes 70% of regularly attending voting team members. A 2/3 majority or 9 votes or more from a total of 13 teams will constitute a passed vote.
- Issue Papers will require a motion to vote for resolution and closure. The vote will be recorded as a number in favor of resolving an issue paper, in opposition, or to abstain from the vote.

Minutes

- FFPC meetings will be documented in minutes that are reviewed and passed by the council.
- Issue Paper discussions will be tracked within the paper itself. Decisions will be recorded in both the paper and meeting minutes.
- Items requiring action will be identified in the minutes under Next Steps.
- Responsibility for taking minutes will be rotated amongst the community area teams. Rotation posted in Families First Practice Council Folder.
- FFPC minutes and documents will be circulated in a timely fashion and saved in the regional (R:) drive within the Family First Practice council folder.

Working Groups

- Creation of a working group will be at the discretion of the council and with the approval of Team Manager HPECD.
- Participation on working groups will be as required.
- Membership will include at minimum 1 FFHV and 1 PHN RS and may include a Team Manager, Public Health Coordinator, Clinical Nurse Specialist or ad hoc member for collaboration and resolution of the matter.
- Working group members will nominate a lead responsible for reporting to the council on group progress at the next practice council meeting.
- Working groups will bring back recommendations to the Families First Practice Council for discussion. Community Area teams will then be provided with the opportunity to discuss and provide feedback. Community Area recommendations will be brought back to the Families First Practice Council to determine the next steps.
- Working groups will meet in person, on MS Teams or by phone between practice council meetings as required.
- Meetings will be documented in minutes that are reviewed and passed by the group membership. Minutes will be saved in the regional (R:) drive within the Family First Practice council folder.

Appendix A:

FFPC Co-Chair Position Coverage List

Please review the FFPC Terms of Reference Document for full details.

When a co-chair position is unable to be filled through election or appointment by acclamation the following list will be used to determine which community area will be assigned to fill the duration of the full term.

*The list will need to be updated when a team is assigned to fill a term. Teams will move up in position sequence. Team #2 team taking the #1 spot and the assigned team covering the term moved into spot #13.

FFHV Co-Chair

1. Fort Garry
2. River Heights
3. Inkster
4. Seven Oaks
5. St. Boniface
6. Assiniboine South
7. St. Vital
8. St. James
9. Point Douglas
10. River East
11. Transcona
12. Downtown East
13. Downtown West

PHN Co-Chair

1. Transcona
2. St. Vital
3. Downtown East
4. River Heights
5. Assiniboine South
6. Fort Garry
7. St. Boniface
8. Seven Oaks
9. Point Douglas
10. St. James
11. Inkster
12. River East
13. Downtown West

*List created January 2023. Refer to FFPC meeting minutes and minute package for details.