

LDCP CALL FOR PROPOSALS

Project Teams and Knowledge Users

Guidance for Completing LDCP Project Charter, Section 1.0

1.1 Core Project Team

The purpose of this section is to indicate to provide the full legal name and address of the participating health unit(s), project team member names and contact information, and to provide details about each core team member's role on the project, and relevant information on their expertise and experience as it relates to this project. Collaboration is a key tenant of LDCP, each LDCP team must include:

- 1 lead public health unit (PHU)
- At least 1 additional PHU as a co-applicant
- At least 1 academic or stakeholder organization as a co-applicant
- At least 1 student
- Optional: knowledge users and advisors, who may participate on an advisory/consultancy basis (rather than members of the core LDCP team)

Each team articulates how their team members will be involved in their Project Charter Section 1.0. Table 1 provides more information on the types of roles and responsibilities specific team members can have:

Table 1. Roles and Responsibilities of LDCP Project Team Members.

Туре	Roles & Responsibilities	How many Required?
Lead Public Health Unit	 Considered an authorized representative of the team and acts as a signatory on the LDCP Project Charter Leads the day-to-day activities of project implementation Administers and effectively manages project funds Chairs team meetings and teleconferences Maintains study documents including Gantt charts, protocols, and ethics applications Leads the development of group processes to ensure the effective functioning of the team Ensures team policies and procedures are followed Ensures the LDCP team follows an ethical code of conduct Ensure all co-applicant organizations have read and abide 	1

Туре	Roles & Responsibilities	How many Required?
	 by the terms and conditions set out in the Project Charter Submits interim and final activity and financial reports to PHO Ensures all milestones are met and deliverables produced in a timely manner 	
Co- Applicant Public Health Units	 Considered an authorized representative of the team and acts as a signatory on the Project Charter. Participates in day-to-day activities of project implementation May lead the implementation of some aspects of project (such as data collection or analysis) May lead a project sub-committee or working group Contributes to team teleconferences and meetings Provides feedback on study documents 	Minimum 1
Co-Applicant Academics /Stakeholder Organizations	 Considered an authorized representative of the team and acts as a signatory on the Project Charter. Provides methodological and/or content expertise during proposal development and project implementation May lead the implementation of some aspects of project (such as data collection or analysis) May lead submission to their institutional ethics board Participates in day-to-day activities of project implementation Contributes to team teleconferences and meetings Provides feedback on study documents 	Minimum 1
Students	 Supports the development of the proposal and/or implementation of the project May conduct literature review, including developing inclusion/exclusion criteria, retrieving articles, and synthesizing literature May participate in data collection (such as conducting interviews of focus groups) or data analysis May develop knowledge products/deliverables to support the team's knowledge exchange activities 	Minimum 1
Knowledge Users and Advisors	 May be requested to act on an advisory committee, provide feedback on data collection tools, reports and other project outputs, and attend meetings periodically May support the implementation of the knowledge exchange strategy Involving appropriate decision-makers (e.g., 	Optional, but recommended if resources allow

Туре	Roles & Responsibilities	How many Required?
	MOHs/AMOHs, MOHLTC staff, etc.) as knowledge users is strongly recommended	
	 Where possible, recommended to include from multiple disciplines and/or professional roles, including those with project management and/or management experience and from other (non-health) organizations. 	
	May supports team's knowledge exchange activities	

Additional Considerations:

When developing a project team, it may be helpful to ask the following questions:

- Who will act as the project lead(s)? Who will act as a 'back up' if needed?
- Who will lead specific phases or tasks for the project (e.g. data collection, analysis, report writing)?
- What skills, experience, and expertise does each member of the core team bring to the project?
- What other expertise needed may be needed to complete the project?
- How your will you work together collaboratively?
- How can each project team member's experience and expertise add value?

1.2 Knowledge Users

Knowledge users or advisors are organizations or individuals who are interested in the project, but are unable to participate as a member of the core project team. Knowledge users and advisors are not expected to participate in the day-to-day execution of the project to the extent that co-applicants do. Rather, they should act in an advisory/consultative capacity. Knowledge users may be asked to:

- support on an advisory committee,
- provide feedback on data collection tools, reports and other project outputs,
- attend meetings periodically, and/or
- support the implementation of the knowledge exchange strategy.

Where possible, it is recommended to include knowledge users from multiple disciplines and/or professional roles, including those with project management and/or management experience and from other (non-health) organizations. Involving appropriate decision-makers (e.g., MOHs/AMOHs, MOHLTC staff, etc.) as knowledge users is also recommended.

Disclaimer

This document was developed by Public Health Ontario (PHO). PHO provides scientific and technical advice to Ontario's government, public health organizations and health care providers. PHO's work is guided by the current best available evidence at the time of publication. The application and use of this document is the responsibility of the user. PHO assumes no liability resulting from any such application or use. This document may be reproduced without permission for non-commercial purposes only and provided that appropriate credit is given to PHO. No changes and/or modifications may be made to this document without express written permission from PHO.

Public Health Ontario

Public Health Ontario is an agency of the Government of Ontario dedicated to protecting and promoting the health of all Ontarians and reducing inequities in health. Public Health Ontario links public health practitioners, front-line health workers and researchers to the best scientific intelligence and knowledge from around the world.

For more information about PHO, visit publichealthontario.ca.



© King's Printer for Ontario, 2024

Optional Template: Terms of Reference for Core LDCP Project Teams

Some project teams may find it useful to internally agree on a Terms of Reference; below is a template that can be used.

LDCP PROJECT TEAM – TERMS OF REFERENCE

for the Locally Driven Collaborative Project

[Insert Project Title]

Research question: [Insert Research Question]

Objectives: [Insert Project Objectives]

1. Purpose

a) The **LDCP Project Team** oversees the Locally Driven Collaborative Project on [insert project name]. The Project Team [insert brief purpose].

2. Accountability

a) The LDCP Project Team reports to [insert].

3. Chair(s) [revise as required]

a) The LDCP Co-lead Public Health Unit representatives will co-chair the meetings. The chair will normally alternate each meeting.

4. Membership [revise as required]

- a) The LDCP Project Team is made up of representatives from the co-lead Public Health Units, coapplicant Public Health Units and academic partners, LDCP Knowledge Users and any students involved in the research project.
- b) Public Health Ontario is an ex-officio member of the Team and may appoint a representative.

5. Meetings & Agendas [revise as required]

- a) Meetings are held from [insert].
- b) Meetings are held on Zoom lines provided by Public Health Ontario.
- c) Agendas and background material are prepared and distributed by the Chair (or designate) prior to each meeting with enough lead time for members to review materials prior to the meeting.
- d) Quorum is 50% plus 1 of the co-applicants and at least one project co-lead present.
- e) Team members review all materials in advance to facilitate discussion and development.
- f) Team members provide sufficient notice to the Chair, in the event they are unable to attend.

6. Minutes and Administration [revise as required]

- a) Minutes are taken of all meetings of the LDCP Project Team.
- b) Minutes are posted to the LDCP Collaborative site.
- c) Team members ensure that minutes and other news about project activities are shared as appropriate within their organization.
- d) All meeting and project documentation is stored on the LDCP Collaborative site provided by Public Health Ontario so that it is accessible to all members of the Team.

7. Roles & responsibilities [revise as required]

- a) Co-leads
 - i. Participate in (and alternately chair) all LDCP Project Team meetings
 - ii. Actively participate on at least one working group
 - iii. Undertake other work as required to meet the requirements outlined by Public Health Ontario for project (co)leads.

b) Co-applicants

- i. Actively participate in all LDCP Project Team meetings
- ii. Actively participate on at least one working group
- iii. Undertake other work as required to meet the requirements outlined by Public Health
 Ontario for project co-applicants

c) Knowledge users

- i. Are invited to all LDCP Project Team meetings and encouraged to actively participate according to their capacity
- ii. Are encouraged to actively participate on working groups according to their capacity
- iii. Undertake other work as required to meet the requirements outlined by Public Health Ontario for project knowledge users

d) Students

- i. Are invited to all LDCP Project Team meetings and encouraged to actively participate according to their capacity
- ii. Are encouraged to actively participate on working groups according to their capacity
- iii. Undertake other work as required to meet the requirements outlined by Public Health Ontario for project knowledge users

8. Decision making [revise as required]

- a) Decisions are made by consensus.
- b) Where consensus cannot be reached in a timely manner, decisions will be made by voting. In such cases, each organization has one vote.

9. Working groups [revise as required]

- a) The **LDCP Project Team** may establish working groups to guide and/or undertake work related to the research project.
- b) Working groups:
 - i. Are chaired by a co-lead or co-applicant member;
 - ii. Have specific objectives or deliverables and timelines;
 - iii. Meet as needed at the call of the chair or at least 2 other members;
 - iv. Record minutes of their meetings and post those minutes to the LDCP Collaborative site; and report to the LDCP Collaborative Team at its regular monthly meetings.

10. Review of the Terms of Reference [revise as required]

a) The Terms of Reference will be reviewed annually and revised as needed.

Optional Template: Terms of Reference for LDCP Working Groups

Some project teams may find it useful to internally agree on a Terms of Reference for relevant Working Groups; below is a template that can be used.

LDCP WORKING GROUP-TERMS OF REFERENCE

for the Locally Driven Collaborative Project

[Insert Project Title]

Research question: [Insert Research Question]

Objectives: [Insert Project Objectives]

- 1. Purpose
 - a) The **LDCP** [insert working group name] Working Group oversees the Locally Driven Collaborative Project [insert project name]. The Working Group [insert brief purpose].
- 2. Accountability
 - a) The LDCP Working Group reports to [insert].
- 3. Membership [revise as required]
 - a) The LDCP Working Group is made up of [insert].
- 4. Meetings & Agendas [revise as required]
 - g) Meetings are held from [insert].
 - h) Meetings are held on Zoom lines provided by Public Health Ontario.
 - i) Agendas and background material are prepared and distributed by [inset].
 - j) Team members review all materials in advance to facilitate discussion and development.
- 5. Minutes and Administration [revise as required]
 - a) All meeting and project documentation is stored on the LDCP Collaborative site provided by Public Health Ontario so that it is accessible to all members of the Team.
- 6. Roles & responsibilities [revise as required]
 - a) Co-leads
 - b) Co-applicants
 - c) Knowledge users
 - d) Students
- 7. Duration of Working Group [revise as required]
 - a) [insert]