



**DR. DON LENIHAN, PRESIDENT
MIDDLE GROUND POLICY RESEARCH INC.**

Don is an internationally recognized expert on public engagement, Open Government, and democracy. He has over 25 years of experience using public engagement processes to develop policy, as a project leader, writer, speaker, senior government adviser, trainer, and facilitator.

He has developed and led many research and consultation projects involving senior public servants, academics, elected officials, journalists, and members of the private and third sectors from across the country. Recently, Don led an Expert Group process for the UN and the OECD on public engagement models to support the post-2015 UN agenda on sustainable development. He also recently served as Chair of the Open Government Engagement Team for the Government of Ontario.

He is the author of numerous articles, studies and books, and a regular columnist for *National Newswatch*. Don's most recent book, *Rescuing Policy: The Case for Public Engagement* is an introduction to the field of public engagement, as well as a blueprint for change, and a sustained argument for the need to rethink the public policy process. He earned his PhD in political theory from the University of Ottawa.

**GRÉGOIRE JODOUIN, LL.B., PRESIDENT
PACE PUBLIC AFFAIRS & COMMUNITY ENGAGEMENT**

Greg is a strategic communications and engagement expert. His strengths are in identifying and bringing together the relevant community stakeholders and partners needed to move city-building initiatives and complex projects forward.

He has designed and executed a number of engagement processes at the local, provincial and national levels, and has extensive experience with municipal institutions in the National Capital Region, on both sides of the River.

As part of his most recent assignments, Greg helped develop and manage community and stakeholder engagement programs in support of The Ottawa Hospital's future campus and the new Ottawa Central Library Project. Prior to this, Greg helped develop and implement an engagement program with Algonquin Anishinabe communities and other First Nations groups, in support of the planning of the Zibi development, intended to be the world's most sustainable community. The indigenous relations program is being recognized as one of the most robust private-sector led programs in Eastern Canada.

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Introduction and Objectives of the Report

The Ottawa Hospital (TOH) is planning a comprehensive, multi-year engagement process to support the planning, design, and development of a new campus. This facility will rest on 50 acres of prime crown land whose historic and cultural legacy has national significance. It will be the largest city-building project in the National Capital Region’s history, after light rail.

The new campus reflects a 21st-century vision of a health-care facility. Unlike hospitals from the last century – often monolithic presences, surrounded by a sea of parking – the new campus will be fully integrated with the community it serves. Designing it will be as much about community-building as healthcare.

This report is the third in a series of reports to be released by TOH during the campus design process. A major finding from the first report, *Turning the Page, Setting the Stage*,¹ is that this 21st-century vision requires a 21st-century engagement process. Such a process aims at getting more from the community than “buy-in” on a plan for the new facility. It must build a genuine sense of **community ownership** of the plan, one that gives community members a personal stake in the new campus.

Traditional consultation won’t achieve this. Ownership requires a more ambitious process that engages the community directly in the hard work of resolving community issues related to campus design, from parking and greenspace to respect for linguistic and cultural diversity. This, in turn, requires something we call **deliberation**. Specifically, the new campus engagement process:

...must be designed to resolve the complex value conflicts inherent with this project – or, at least, to manage them more fairly – by giving people a meaningful role in making the trade-offs. For this, the process should aim to find win-win solutions, rather than pitting participants against one another in a winner-take-all contest. This requires genuine dialogue and deliberation. Participants must listen to one another’s views, arguments, and aspirations and they must treat them with respect. [¹ *Turning the Page*, page 14]

This kind of engagement requires focused and often lengthy exchanges between individuals, and must be supported by research, briefings, facilitation, and more. In short, it requires time, effort, and resources – and this makes deliberation impractical on a community-wide scale. We have therefore proposed the creation of a smaller, special body called **The Ottawa Hospital New Campus Engagement Group** (CEG) to meet this need.

Nevertheless, the community at large will play an integral part in the process. The CEG is only one of three engagement streams. The other two include an “in-person” and an “online” stream, each of which will engage significant numbers of people. This will ensure that anyone in the region can participate in the process AND that there will be searching and informed deliberation on key issues. While the in-person and online streams will include some “light” deliberation, responsibility for “deep” deliberation will belong to the CEG (see below).

This report describes the CEG’s structure and governance and discusses its role in the process and how it will be used to help resolve complex issues.

¹ Available at: www.ottawahospital.on.ca/wp-content/uploads/2018/01/Setting-the-Stage-Turning-the-Page-FINAL-Report-September-2017-En..pdf

Methodology

Between December 2017 and April 2018, TOH engaged Middle Ground Policy Research Inc. and Public Affairs & Community Engagement (PACE) to provide recommendations on the CEG's structure, governance, and membership criteria. This is part of the foundation for the multi-year engagement process, which will be fully defined and finalized in the second quarter of 2018.

Middle Ground is an Ottawa-based firm that specializes in policy development through public engagement. PACE, also Ottawa-based, is a public affairs consultancy that helps organizations move major city-building projects forward through engagement and relationship-building.

Our work on CEG during this period included four steps. First, we developed two documents: a draft Terms of Reference and draft Membership Criteria for the Campus Engagement Group (see Appendix A). These documents were based on previous experience with deliberative processes and an expert knowledge of the region's stakeholder community, including how its members' interests align with the campus' vision (more on this below). Draft versions of these documents were submitted to TOH's Board of Governors for review.

Because the deliberative approach we are proposing is very different from traditional engagement processes, we wanted to be sure it was fully understood and supported by community members. This led to our second step: we hosted two stakeholder workshops (February 14 and March 6, 2018) to explain and discuss the CEG and its role in the engagement process. Copies of the draft Terms of Reference and Criteria were shared in advance and participants were invited to comment on them at the sessions.

In planning these sessions, we assembled a comprehensive list of stakeholder organizations from the region with a significant stake in the campus design. They ranged from neighbourhood groups adjacent to the site, to the business community, to academia, heritage, ecology and sustainability, and Indigenous groups. TOH then invited everyone on the list to attend the workshop.

About 32 organizations accepted the invitation, including groups such as Invest Ottawa, the Civic Hospital Neighbourhood Association, Glebe Annex Community Association, Heritage Ottawa, Algonquin College, Ottawa Greenspace Alliance, United Way and the Ottawa Community Foundation. A full list of the participants can be found in Appendix B.

In addition to the workshops, we met with representatives from the planning departments of the City of Ottawa and the National Capital Commission to brief them on the CEG and to discuss their role as potential "institutional members" of it.

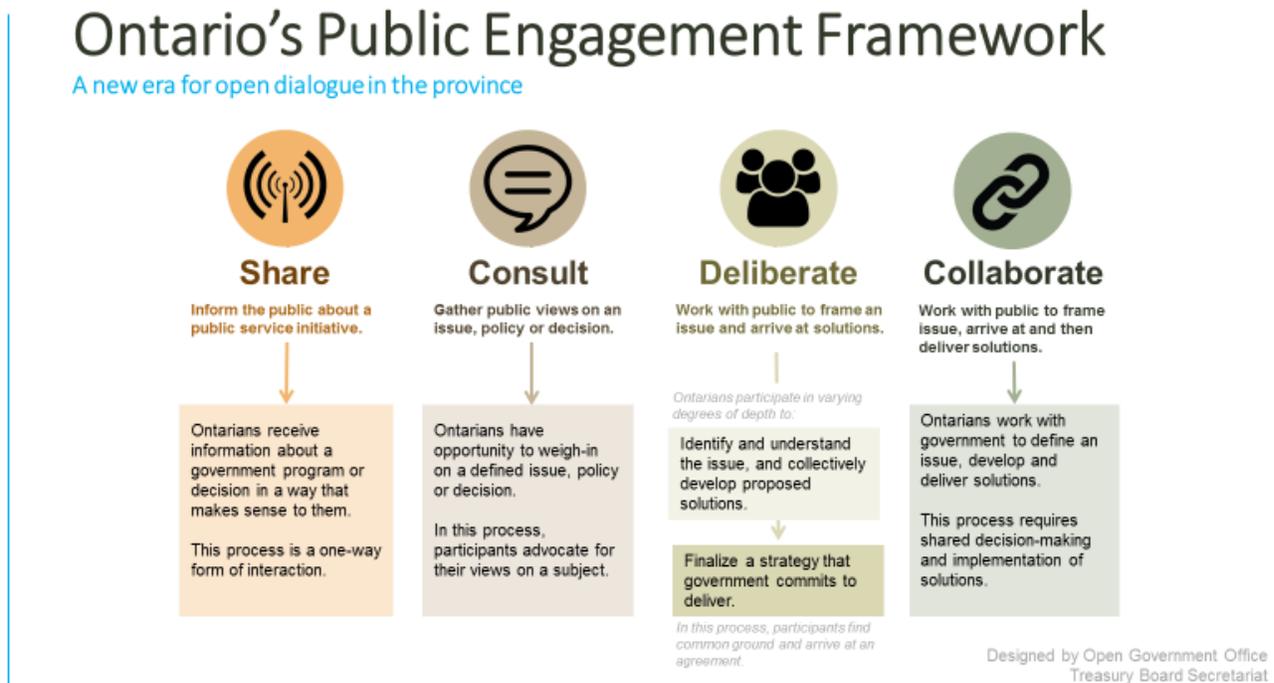
In our third step, workshop participants who were interested in serving on the CEG were invited to inform TOH through a letter. PACE and Middle Ground then met with each candidate to ensure he/she met the membership criteria and fully understood the role of the CEG and its members.

Lastly, we provided TOH's Board of Governors with a list of recommended candidates, based on this process. The Board will review it and make final decisions on the CEG membership.

What Is Deliberation?

The Engagement Framework

TOH has adopted the Ontario Public Engagement Framework as the basis for its engagement approach. The OPEF, which is discussed in *Setting the Stage* (page 14), includes four basic types of processes:



- **Information Sharing** is used when the public needs to be informed on some issue or aspect of an emerging plan. This may involve face-to-face sessions, but information can often be shared in other ways, such as a brochure, TV or radio ads, posting information on a website, or social media.
- **Consultation** gives the public a chance to share their views on a subject. It is appropriate when the planning team needs to hear from stakeholders or the public to help inform its decision-making.
- **Deliberation** is designed to produce an exchange of views between the public, possibly including TOH, to help solve difficult issues, especially where trade-offs or priority-setting is required.
- **Collaboration** is used when TOH, stakeholders, and/or community members want to align their efforts to achieve a shared goal. For example, they might work to promote community health by offering cooking or exercise classes. In such programs, community members and organizations often take responsibility for planning and delivering the sessions. Collaboration thus combines and aligns resources and effort from the hospital and the public to achieve a shared goal.

The Ontario approach sorts both issues and processes into these four categories, effectively matching each issue with a process type. Thus, if an issue lands in the consultation box, consultation is used to solve it. Like tools, each process type has a different task. Just as we wouldn't use a hammer to cut

down a tree or a saw to pound a nail, we shouldn't use, say, consultation to solve a problem with difficult trade-offs. These belong in the deliberation box.

The Ontario framework is like a toolbox, which contains four different types of tools – i.e. the four process-types – needed to solve different kinds of engagement issues. For purposes here, we need only focus on the difference between consultation and deliberation. To understand how these two types differ it is helpful to compare consultation to the proceedings in a law court.

Consultation as a Competitive Process

Legal processes can be divided into three stages: arguments, deliberation, and sentencing. In Stage One, the defense and prosecution appear before a judge and each one gets an opportunity to provide evidence and make their case that the defendant is innocent or guilty.

The judge listens to the arguments, then, in Stage Two, retires to his/her chambers to consider the evidence and reach a verdict. Once he/she has finished deliberating, Stage Three begins. The judge returns to the courtroom to announce the verdict, provide the reasoning behind the decision, and state what action will be taken (judgement).

Now, let's suppose the architects for the new campus want public input on, say, the building's appearance and decide to hold a consultation to get it, such as public hearings or town halls. Consultations like these follow a three-stage process much like the law courts:

- **Stage One:** The public is given an opportunity to present their views on the building's appearance to the architects. Normally, they will include some commentary on why they think their views are appropriate. In doing so, the participants are in effect advancing "arguments" for their views, much as the defense and prosecution do with a judge. They are also competing with one another for influence over the architects, much as lawyers do with a judge. Like a court case, the consultation process thus is **competitive** or **adversarial**.
- **Stage Two:** Once the architects have heard from the public, they will withdraw to "deliberate" over what they heard. Like a judge, they will sift through these views, weighing their respective merits and seeking to eliminate bad ones and incorporate good ones into their plan. Note that, although appearances may be based on preferences, designing the look of a building is not just subjective. The architects' aesthetic preferences must be weighed against, and aligned with, all kinds of **expert considerations**, such as the kinds of materials that can be used for building, their costs, the dimensions of the building, the design challenges of different shapes and styles, and the space requirements inside the building. In short, choosing a look is a complex process that greatly restricts and disciplines the aesthetic choices open to the architects, much as statutes, rules of evidence, and past precedent restrict and discipline the choices a judge can make.
- **Stage Three:** The architects announce their plan and provide public explanations for why some views were ignored, while others influenced their choices. Choosing a look may have subjective elements but, as we saw, it also involves high-level technical skill and discipline. This means the architects, like the judge, should be able to provide reasons why some views were adopted, while others were rejected. There will, of course, be an element of preference at work here, but the point remains that choosing a look for the building involves at least as much a skill as preference.

To summarize, a successful and legitimate consultation process (or a court case) must meet three basic conditions:

1. All sides must be given a **reasonable opportunity to present their views**. If one side is given, say, insufficient time to make their arguments, this can prejudice the outcome.
2. The decision-makers (or judge) must **treat all views fairly**. They must be willing to listen to the arguments and consider them from a relatively neutral or impartial perspective.
3. The decision-makers (or judge) must be **competent to assess the merits of these views**. Thus, the architects in our example must be able to situate the participants' views in the context of other considerations about the building, just as a judge must consider the laws and circumstances relevant to the case at hand.

If these three conditions are met, the consultation (or legal decision) should be effective and legitimate; but if one or more of them fails, a case can be made that the process was unfair and that the findings should be disqualified.

Deliberation and Values-Based Issues

Many issues in TOH's design process for the new campus will not be of this sort. We can call them "subjective" because they are largely decided by appeal to people's values, priorities, or preferences. Consider the tensions between parking and greenspace. There is no objective way to decide where the right balance between the two lies. While some hospital parking is surely required, greenspace advocates can usually argue that there should be less of it; or that parking should be mainly underground, whatever the cost. Proponents may reply that the high cost of underground parking trumps the preference for greenspace.

Disagreements like these can't be solved the same way as disagreements over the building's look. If decision-makers hold a consultation on parking vs. greenspace, then go behind closed doors to "weigh the evidence," they will find themselves comparing two fundamentally different values or priorities: "celebrating nature" vs. "meeting the exigencies of daily life," which is like comparing apples and oranges.

This, in turn, means they won't be able to provide objective reasons for striking a balance that favours one over the other. In the end, such reasoning will come down to an assertion that one value has priority over the other: greenspace is more important than parking, or vice versa. To those on the losing side, this kind of "reasoning" will seem arbitrary and unfair.

Now recall the three conditions we said consultation must meet to be legitimate. The third one, **competence**, says that decision-makers must be able to **fairly assess the merits** of the participants' views. The lesson here is that decision-makers cannot claim any special expertise to weigh the merits of subjective commitments. Such decisions therefore cannot be made through consultation.

So, how can we make them? As we argued in *Setting the Stage*, complex trade-offs like these will be regarded as legitimate only if they are mutually agreed to by a significant number of the people they affect. We think the best way to get such agreement is **to let the people affected participate in making**

the trade-offs. This requires a shift in engagement processes away from consultation and onto deliberation.

To find a balance that is fair to all, the parties need to propose and explore different options together, in search of one that most can accept. To achieve this, participants must be willing to listen to one another, learn about each other's concerns, discuss their similarities and differences, weigh evidence, and work together to make reasonable compromises that allow them to arrive at new solutions to difficult issues. The goal is to find a solution that is a win for as many people as possible.

Deliberation is the main task of the CEG. In the new campus process, the CEG will use it to resolve important conflicts over values and priorities. This, in turn, will build shared ownership of the process and a shared commitment to the results.

The Campus Engagement Group

Design of the Campus Engagement Group

The CEG will be led by two co-chairs, who will convene and preside over its meetings, develop meeting agendas, report to the Board of Governors on the CEG's activities, and liaise with the media (as required) about its role in the process and its findings.

The CEG will be composed of individuals with a demonstrated ability to work effectively with colleagues who have different and sometimes competing views and interests; and to balance advocacy with collaboration.

A majority will come from respected associations or not-for-profit organizations whose mission is central to the planning, design, and development of the new campus (e.g. the patient and family experience, environmental protection, heritage preservation, the community use of hospital land, or the well-being of neighbouring communities).

The CEG will also include members from other categories, including "citizens at large," patient advisors, and "institutional stakeholders," such as TOH, the National Capital Commission or the City of Ottawa.

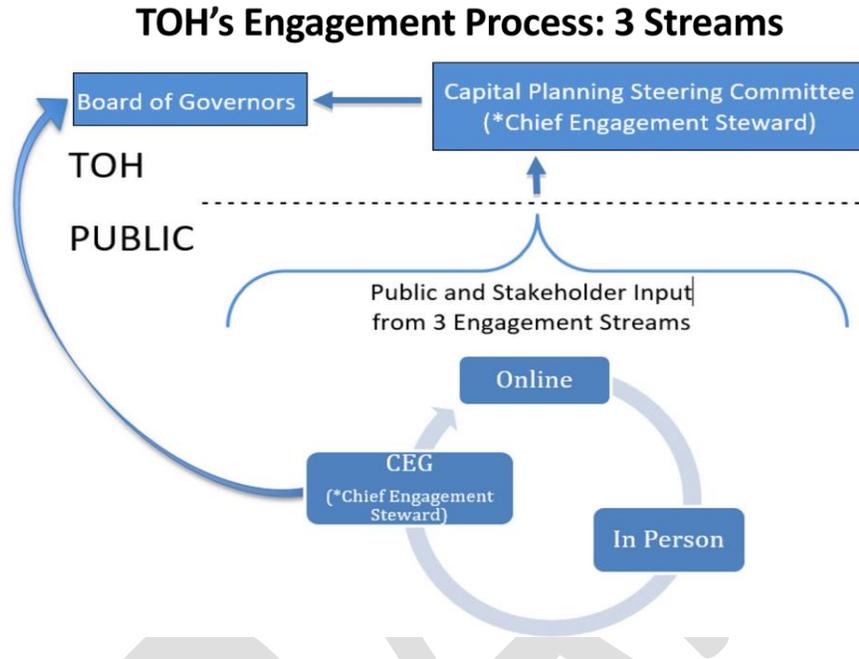
In total, the CEG will have about 20 members. This number is large enough to ensure key interests are represented, while also being mindful of best practices, which set the optimal size for deliberative groups at 20 – 25 members. Beyond this, their effectiveness diminishes.

The CEG's deliberations will be guided by an overarching set of design principles (see *Turning the Page*), which will serve as a lens through which all design decisions related to the site plan and the campus facilities will be viewed and made.

When deliberating, the CEG's members do NOT have full control of an issue or the final say on whether a solution is adopted. The CEG's role will be to find better balance between competing interests or realign priorities, then make recommendations to TOH's Board of Governors based on their discussions. For example, the CEG will not be asked to decide how many parking spaces will be built or the precise specifications of a greenspace. It will be asked to consider the overall balance. Recommendations will be arrived at through votes.

Process Governance

The CEG is one of three engagement streams in the campus process, the other two being the **In-Person Events Stream** and the **Online Stream**. The following diagram illustrates how these three streams are related and depicts the governance arrangements for the engagement process:



The three engagement streams – Online, In-Person, and the CEG – are independent but complementary aspects of a single process. They will work together to create an ongoing cycle of dialogue – represented by the circular arrow in the diagram – in which issues are identified, explored, analyzed, discussed, and resolved.

For example, the CEG will monitor and interact with the other two streams, shaping and being shaped by them. Thus, the CEG might comment on the findings from a town hall or online forum. Similarly, participants in town halls or online forums will be encouraged to consider and respond to views advanced by the CEG.

The goal is to create an open and informed exchange of ideas between these different streams so that, ideally, the findings from them are increasingly aligned over the course of the engagement process.

The process will be punctuated by several sets of recommendations, which will be drafted by the CEG and presented to the Board of Governors. The CEG will also report to the Board. The Online and In-Person Events streams will report to the Chief Engagement Steward (see below).

The Capital Planning Steering Committee is the body responsible for the overall planning, design, financing, and construction of the new Campus. It will include key TOH decision-makers and planners, such as the architects, engineers, as well as the Chief Engagement Steward.

The Chief Engagement Steward

TOH's engagement process includes an innovative feature that we believe will make a significant contribution to its overall legitimacy and success. Acting on a recommendation in the *Turning the Page* report, TOH has named a Chief Engagement Steward. The CES is a person in a senior position at TOH who will act as the hospital's principal representative and advocate for engagement. He/she will be the hospital administration's primary spokesperson on the new campus engagement process. The Steward will oversee planning and implementation of it and will contribute to its overall success in three additional ways:

1. The Chief Engagement Steward will be a full member of the Capital Planning Steering Committee. As we noted in the *Setting the Stage* report, this has the effect of:

...elevating engagement to a core competency within the campus' design team. In practice, this means a 'chief engagement steward' will be a permanent member of the team during the project's five-year planning phase (see Timelines below). He/she will work with team members to identify issues of public concern as they arise. The CES will also play a "challenge role," helping to ensure that technical experts do not arbitrarily limit public involvement through unjustified appeals to expertise. [*Turning the Page*, page 17]
2. The CES will serve as one of CEG's two co-chairs. This means an executive-level resource from TOH will be closely involved in the deliberative discussions. He/she is responsible for the success of the process and will present, explain and, where appropriate, defend the CEG's recommendations to TOH administrators and/or the Steering Committee.
3. Finally, as a co-chair of the CEG, the CES will report to the Hospital's Board of Governors on CEG's behalf. This will ensure that its recommendations are ably explained, defended, and championed by a senior hospital official who is well-versed on the discussions underway on all sides of the process, including the CEG, the administration, and the Steering Committee. This should guarantee that the CEG's recommendations will be taken very seriously and duly considered by the Board.

Building the Narrative

The new campus aspires to be a 21st-century health-care institution that is fully embedded in and integrated with the community it serves. The engagement process aims at creating a plan and the level of community ownership needed to realize this vision. A key success factor will be the development of a story or narrative that describes the way community members have resolved their differences on the key issues, from parking and greenspace to respect for cultural and linguistic diversity, and arrived at a plan that they feel they have a personal stake in.

This narrative will be forged as the three streams unfold and interact over the next few years. It will codify the key compromises and trade-offs community members have made. Some parts are already clear, but others will emerge as different tensions in the community are aired and resolved.

While the CEG will be responsible for "deep" deliberation, all three streams will play a critical role here. The In-Person and Online streams will involve some "light" deliberation through different kinds of participant interactions and exchanges. For example, participants will be invited to engage in storytelling, which can communicate important messages to large numbers of people, whose views may

be altered or shaped by the stories they hear. Storytelling can play a key role in helping people shift established priorities or revisit how they weigh different goods; and this, in turn, can make the difference between finding a solution to a problem that a majority can accept.

As envisioned, the CEG will “hold the pen” for the process, producing written material on the narrative, as well as written recommendations on different aspects of the process, which will be submitted to the Board of Governors for consideration.

Making Recommendations

The engagement process will address community-related aspects of the campus design, such as the balance between parking and greenspace, options for access routes, and the impact of traffic on adjacent neighbourhoods. The process will NOT focus on the programs and services to be offered at the new Campus. Those will be dealt with through a separate process.

The CEG will be responsible to consolidate these views and form recommendations that incorporate the learning. These recommendations will then be presented to TOH’s Board of Governors. However, to be clear, the CEG is not intended to direct or supersede the other two streams. As the diagram above illustrates, they are three aspects of a single, integrated process, which is reflected in the shared narrative.

Looking Ahead – CEG Priorities

The CEG will meet for the first time this spring. Several tasks must be completed before it can turn its attention to the issues of campus design. One is to finalize its own governance practices, including setting voting rules for how it arrives at recommendations and finalizing ground rules on how the members will work together.

The CEG will also need a workplan for the coming year. Several considerations should be top of mind when forming it. For example, the plan must be closely aligned with the Steering Committee’s plans. If the Committee is focused on, say, identifying access routes to the hospital, it will be conducting traffic studies, holding discussions, and sorting out options. If the CEG hopes to have an impact on these decisions, it must focus on key issues like this at the same time as the Committee.

Similarly, the CEG’s work plan must be aligned with the Chief Engagement Steward’s overall plan for the engagement process. We’ve already seen how the three streams must work together to produce a single, integrated narrative and to build a sense of community ownership for the campus design. To achieve this, the vetting of issues across these streams must be coordinated.

Challenges around alignment and coordination thus loom large for campus planning, with different streams, issues, and bodies all contributing. There are big questions about how information and ideas will be shared between them. The engagement process is only one part; and the CEG is only one stream within the engagement process. Its members will need to think carefully about how and where they fit in this complex ecosystem.

Yet another task for the new CEG is the consolidation of a lengthy list of design principles. Various approvals bodies for the campus have created lists of principles they want to guide development of the

Sir John Carling Site (see *Turning the Page*). For example, the National Capital Commission has defined five principles that say the new facility's design must be world-class, complimentary to the site's uses and heritage character, and worthy of a capital city.

The City of Ottawa and the community adjacent to the Sir John Carling site have developed a vision for the area's future growth in the Preston-Carling District Secondary Plan and Community Design Plan. TOH has its own set of seven draft design principles, which range from providing the best patient and family experience to promoting innovation and research, sustaining the environment, and being respectful of, and aligned with, the community.

Although these principles reflect different interests and viewpoints, the *Turning the Page* report concludes that they can work together. Indeed, they can be both a source of discipline and creative tension for the CEG's deliberations. But that will take goodwill, effort, and the right process.

To help support such a process, the report further concludes that the list could be consolidated into a smaller, more streamlined set. This is also a good place for the CEG to get started on its mandate. It would provide the members with an opportunity to get acquainted, and to introduce themselves to the range of perspectives and interests around the table. Consolidating these principles would act as a smooth segue into their deliberations on the issues and the development of the narrative:

A useful first step in the engagement process would [have the CEG] review these different sets of Design Principles and distill them into a single, cohesive set of, say, ten principles...Once [the CEG has] arrived at a single set of Design Principles, the next phase will begin using them to articulate a common community narrative for the new campus...The narrative will serve as the backdrop or storyline against which specific design issues will be considered and assessed. (*Turning the Page*, page 24)

There are, of course, further priorities that will occupy the CEG in these early days. We've mentioned only a few here. The members will need to review the complete list at their initial meetings and develop a short-term plan to get the forum up and running.

Conclusion

The CEG is an innovative forum that has been designed to meet a special challenge in engagement processes like this one on campus planning. Consultation alone won't resolve issues that are based on competing values, interests, priorities, and preferences. Trade-offs must be made and to be legitimate they must be made in an inclusive, open, and transparent way that treats everyone's views fairly. The CEG provides a forum where this can happen.

This does not mean every recommendation by the CEG will please its members. Recommendations will not require unanimity; and, over the life of the process, they will be made on a range of issues. Sometimes members will find themselves voting against the majority. That is unavoidable. The real test of success is whether, at the end of the process, each member feels that, notwithstanding such decisions, the interests he/she has spoken for were better served by this process than a conventional consultation. For us, that is the ultimate test of success. For TOH, the end goal will be community ownership for the new campus.

Appendix A: Campus Engagement Group Reference Documents

The Ottawa Hospital New Campus Engagement Group Terms of Reference

Mandate

The Ottawa Hospital New Campus Engagement Group (the “Campus Engagement Group” or CEG) is a deliberative body that will help foster informed dialogue and consolidate views throughout the various planning stages for the new campus. In particular, the CEG will consider values-based issues related to the campus’ design and recommend “win-win” solutions that will help ensure its successful integration into the community.

- The CEG will serve as a clearing house for information and ideas and a mechanism to process, refine and consolidate findings from across the engagement process.
- On key issues, the CEG will present recommendations to The Ottawa Hospital’s Board of Governors that incorporate findings from other public input streams in the engagement process. Where possible, it will seek to interact with these streams to help shape and inform their exchanges. For example, the CEG might respond to the findings from a town hall or social media exchange. For their part, participants in town halls or social media discussions will be encouraged to comment on views advanced by the CEG. The overall goal is thus to create an open and informed exchange of ideas between different engagement streams within the process. In the end, however, the CEG will be responsible for consolidating these views and providing The Ottawa Hospital (TOH) with recommendations.
- The CEG’s deliberations will be guided by an overarching set of design principles that will be defined at the start of the process. These principles will articulate the norms and goals that will guide development of the campus. They will serve as a lens through which all design decisions related to the site plan and the campus facilities will be viewed and made.
- The CEG’s composition will reflect the range of community and institutional interests at stake. Each group member must be willing to rise above advocacy for the specific goals of his/her organization and to work toward fair and reasonable accommodation of all interests in the process.
- TOH’s official engagement plan will provide a roadmap for the process, which the CEG will use to help plan its activities. In addition, the co-chairs (see below) will consult regularly with TOH officials to ensure the CEG’s activities are aligned with the planning stages for the new campus.

Governance

The Campus Engagement Group (CEG) will be led by two co-chairs, who will be appointed by and report to The Ottawa Hospital’s (TOH’s) Board of Governors, through the board’s Master Planning Committee. The two co-chairs will include:

1. A respected individual from a key community interest organization whose skill and experience in committee leadership is widely recognized.
2. TOH's Chief Engagement Steward.

The co-chairs will guide the CEG in the realization of its mandate. They will be responsible for convening and presiding over meetings, developing meeting agendas, reporting to TOH's Board of Governors on the CEG's activities, and speaking with the media about the group's role in the process and findings.

Membership

The Ottawa Hospital's (TOH's) Board of Governors will appoint the members of the Campus Engagement Group (CEG). (See "The Ottawa Hospital New Campus Engagement Group Selection Criteria.")

Members will have a demonstrated ability to:

- Work collaboratively with colleagues who have different and sometimes competing views and interests, and to fairly balance advocacy with collaboration.
- Engage in complex policy discussions, supported by analysis and evidence, and to communicate the results in succinct and accessible language.
- Effectively represent one of the key public interest areas related to the development of the new campus, such as the environment, heritage, the recreational use of hospital land, the well-being of neighbouring communities, Indigenous Peoples, economic development, accessibility, or scientific and medical research and education.

The CEG will also:

- Include members from several other categories, including "citizens at large," patient advisors, and "institutional stakeholders," such as TOH, the National Capital Commission and the City of Ottawa.
- Include about 20 members. This ensures key interests will be represented, while also being mindful of best practices, which set the optimal size for deliberative groups at 20 to 25 members. Beyond this, their effectiveness diminishes.
- Play a key role in helping to ensure stability and continuity throughout the engagement process. To achieve this, CEG members will be expected to serve approximately three years.

In addition, members:

- May not be replaced by substitutes at meetings, except as permitted by the co-chairs.
- May use the official language of their choice.

Responsibilities

- The Campus Engagement Group (CEG) will meet on a regular basis.
- The co-chairs will propose a meeting schedule and will convene special meetings, as needed.
- One of the CEG's first tasks will be to establish "ground rules" to guide members' comportment in meetings and deliberations. The CEG will also establish rules for other key matters, such as voting on recommendations, establishing quorum, and the circumstances for calling special meetings.
- Generally, the CEG's meetings will be used to review progress on important issues, consider how and where the CEG's involvement in the process can best add value to these discussions, and engage in its own discussions to work toward fair and balanced recommendations on key issues.
- Since most members will be spokespersons for larger constituencies and networks, they will be expected to engage with these communities, keep them informed on project developments and the CEG's deliberations, and gather feedback from them, which they will then bring back to the group. They will also help raise awareness concerning opportunities for the broader public to participate in the process and provide input.
- At the same time, confidentiality on some aspects of the discussions may be required to ensure the integrity of the deliberations. Under the direction of the co- chairs, the CEG will define rules regarding confidentiality and transparency.
- The CEG's findings and recommendations will be disseminated through public reports to The Ottawa Hospital's Board of Governors. Minutes of the group meetings will also be made public.
- The CEG may establish subcommittees and/or special committees to carry out special tasks.

Administrative Support and Expert Advice

The Campus Engagement Group (CEG) co-chairs will be supported by a small secretariat from The Ottawa Hospital (TOH), as well as third-party engagement experts (to be engaged by TOH) who will advise on the CEG's role in the process and assist the co-chairs in planning meetings and conducting deliberations, say, by providing facilitation services. The CEG will also benefit from presentations and materials that it may request from TOH's Capital Planning Committee and the expert consultants on the campus design team (such as architects and land-use planners).

The Ottawa Hospital New Campus Engagement Group Selection Criteria

The following criteria will guide the selection of members of the Campus Engagement Group:

1. An understanding that the Campus Engagement Group (CEG) operates on a collaborative model of decision-making and requires genuine dialogue and deliberation on challenging issues. Members must be willing to work through issues together to arrive at recommendations that treat one another's interests and views fairly and with respect.
2. A demonstrated ability to work effectively with colleagues who have different and sometimes competing views and interests, and to balance advocacy with collaboration.
3. Leadership or senior position in a respected association or not-for-profit organization whose mission is central to the planning, design and development of the new campus site plan and associated facilities and infrastructure (e.g. the patient and family experience, environmental protection, accessibility, heritage preservation, the recreational use of hospital land, or the well-being of neighbouring communities).
4. Willingness to rise above advocacy for the specific goals of his/her organization and to work toward fair and reasonable accommodation of all interests in the process, guided by the overarching set of design principles.
5. Possession of a strong network of contacts within the interest-area he/she represents and is known and respected by these networks.
6. Demonstrated analytical and communications skills, and significant policymaking experience, ideally including public engagement processes.
7. Willingness to serve as a volunteer and able to attend most of the CEG's meetings over the next two to three years.
8. Gender balance, diversity, and other key public values.
9. "Citizens at large" (from the LHIN catchment) will be included as well as "institutional stakeholders" such as The Ottawa Hospital, the National Capital Commission, and the City of Ottawa.

Appendix B: Participants at the CEG Information Sessions

The following is a list of individuals that attend the CEG information sessions hosted by TOH on February 14 and March 6, 2018:

Organization	Participant
Age-Friendly Ottawa; Council on Aging	Caroline Midgley
Algonquin College	Claude Brule
Carlington Community Association	Robert Brinker
Central Experimental Farm Advisory Council (CEFAC)	Eric Jones
City of Ottawa	Mark Young
Civic Hospital Neighbourhood Association	Karen Wright
Civic Hospital Neighbourhood Association	Peter Eady
Dalhousie Community Association	Michael Powell
DARA Tennis Club	Tim Birch-Jones
Dementia Society	Susan Kennedy
Dow's Lake Residents' Association	Louise Aronoff
Dow's Lake Residents' Association	Bhagwant Sandhu
Friends of the Central Experimental Farm	Blaine Marchand
Glebe Annex Community Association	Heidi Thomson
Glebe Annex Community Association	Sue Stefko
Glebe Community Association	Josh Van Noppen
Greenspace Alliance	Paul Johanis
Heritage Ottawa	Leslie Maitland
Invest Ottawa	Michael Tremblay
Liveable Bayswater	Amy Johnson
Liveable Bayswater	Deborah Ironside
National Capital Commission	Luc Fournier
OCSCC 837	Shaun Hopkins
Ottawa Community Foundation	Danielle Cote
Ottawa Community Immigrant Services Organization	Patricia Davies
Ottawa Disability Coalition	Jerry Fiori
TOH	Karen Stockton
TOH	Michelle Currie
TOH's Patient and Family Advisory Committee (PFAC)	Bill Wong
TOH's Patient and Family Advisory Committee (PFAC)	Martin O Petersons
United Way Centraide Ottawa	Dennise Taylor-Gilhen