

Executive Summary

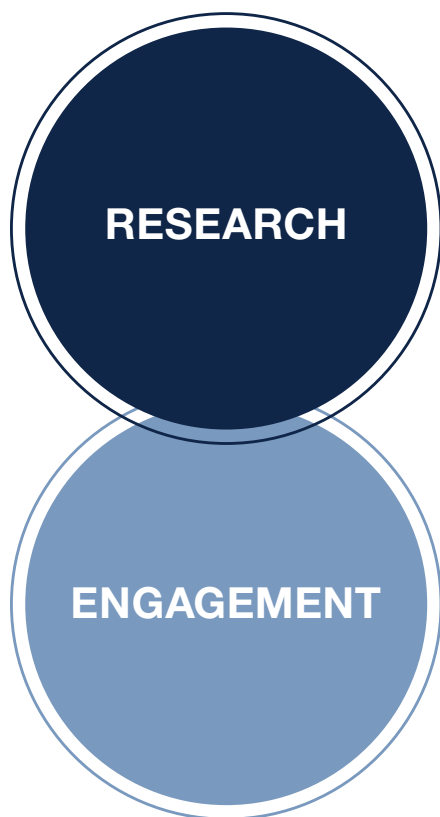
Better Together Governance Transformation Plan

OCTOBER 2019

The SuccessMap™ Consultation Process

The GT20/SuccessMap governance transformation consultation process included confidential interviews with 125 individuals. The key findings included:

- OMA Members want the OMA to be successful in addressing the priorities of Members
- OMA Members want a transparent OMA with open and fair elections
- OMA Members want to be kept informed, consulted and re-engaged in the priority setting and solution generation process of their Association
- OMA Members want fair compensation and a proactive Association that effectively deals with emerging challenges and capitalizes on opportunities
- OMA Members want an effective Board of Directors that champions the profession and protects its Members
- OMA Members want a Council that is unified and collaborative
- OMA Members want a Council that identifies priorities and guides the Board in fulfilling its mandate
- OMA Members want to see a better return on investment for their annual dues



Completed 125 in-depth, confidential, one-to-one interviews with Stakeholders

- OMA Council Leadership
- OMA Board Members
- Council Members
- OMA Members
- OMA Senior Management Team
- OMA Legal Counsel
- Deputy Minister & Key Ministry Partners
- Key Provincial Health Care System Partners
- OMA Government Relations Council

SuccessMap sent an email blast to 246 Council Members requesting input into the Governance Transformation Process. 247 follow-up calls were made, and 168 emails were sent to encourage participation in the process. 76 Council members actively participated in the interview process.



The OMA Governance Transformation Drivers



CORE GOVERNANCE TRANSFORMATION DRIVERS



ACTION RECOMMENDED

1	Confused roles and responsibilities among Board and Council leading to conflict and power struggle	➤	The Board of Directors is responsible for organizational oversight (governs OMA business affairs). New leadership body leads generative thinking, driving and shaping health care policy
2	Council Members/Board Directors concerned with meeting practices including size of Board/Council, decision-making processes, and ever-increasing Board meeting expenses	➤	Smaller governing bodies, skills-based Board Directors, fewer Board meetings and reduced Board meeting expenses
3	Members demanding more value for dues paid	➤	Board ensures increasing OMA performance and Member satisfaction through effective measurement
4	Members demanding PSA/compensation success	➤	Board, with Member input, ensures PSA/PSC process effective
5	Members demanding resolution to the relativity issue	➤	Development of a new leadership structure that enables recommendation of informed and credible policy solutions to the Board
6	Members/stakeholders expect a unified OMA organization	➤	Effective, aligned and unified Board of Directors and a re-imagined Member leadership body that enables all voices to be heard and re-establishes confidence among Member groups
7	Stakeholders expect a credible and consistent OMA message/response	➤	A new OMA governance structure influences outcomes with strong knowledge/policy recommendations. OMA President is primary spokesperson, using official OMA messaging for physician issues. CEO speaks on OMA organizational matters.
8	Perceived inequality in representation among Family Physicians and Specialists	➤	Ensure the representation model at the OMA is fair and that all voices are heard
9	MOHLTC requires solutions and support from OMA to transform health care system	➤	A re-imagined representative body drives and shapes policy to ensure physicians and patients are protected/thriving
10	<i>Ontario Not-for-Profit Corporations Act 2010</i>	➤	Transform OMA governance structure to be compliant with ONCA 2010.

The new OMA governance structure will enable a high-performing organization that is consistently focused on Member priorities:

- ✔ High importance placed on Member participation, Member engagement and Member outcomes
- ✔ Member-driven, issue prioritization process
- ✔ High importance placed on generating solutions
- ✔ Open dialogue and a consultative approach
- ✔ Transparency in decision making with clearly articulated mandates
- ✔ Election processes that are democratic, high integrity and open to all
- ✔ Successfully negotiated PSA
- ✔ OMA that is easy to navigate, organized and focused
- ✔ Continuous recruitment of innovative leaders
- ✔ All Constituency Groups and specialties heard
- ✔ Opportunities to set priorities for compensation, issues and policy, and advocacy
- ✔ Feed-in-loops for Members to bring forward issues, concerns and opportunities
- ✔ Efficient, evidence-based decision making
- ✔ Modern and accessible digital connectivity
- ✔ Focus on goal achievement instead of activity traps

The Role of Members

The new OMA will undergo an organizational transformation that will place the highest priority on Member needs. There will be many more opportunities for Members to increase engagement and shape solutions for pressing challenges.

In the current OMA, Members play a limited role:

- Members elect their District, Section and Fora leadership
- Members within Districts, Clinical and Trainee Sections, elect Board of Directors
- Members appoint an Auditor
- Members participate in a non-binding referendum on approving a PSA

In the newly transformed OMA, improved transparency will reduce suspicion between groups and build unity among the profession. Members will be empowered to play a leading and integral role:

- **Members will ratify their PSA**
- **Members will participate in an open and democratic election process**
 - **Members will directly elect their Board of Directors**
 - **Members will elect the President-Elect of the OMA based on profiles that detail the candidates qualifications and experience**
- **Members will elect their District, Section and Fora leadership**
- **Members will continue to appoint an Auditor**



The Board of Directors

The SuccessMap consultation process identified that the Board structure must evolve to be more effective in leading the OMA.



THE ROLE OF THE BOARD

- ✓ Oversee the management of the corporation's activities and affairs
- ✓ Provide unifying and inspiring leadership for the OMA
- ✓ Approve the PSA negotiations mandate with input from a diverse representative body
- ✓ Secure a proposed PSA and forward to Members for ratification
- ✓ Oversees CEO recruitment, support & accountability
- ✓ Lead the strategic planning process with the CEO, Senior Management Team, and with input from a diverse representative body
- ✓ Oversee Board Committees
- ✓ Provide risk management
- ✓ Oversee human resource policy

SuccessMap Recommendations (as adopted by the Board in September 2019)

THE NEW BOARD STRUCTURE

- Implement a smaller, skills-based Board of Directors with a small number of non-physicians
- Reduce the Board of Directors to 11 Directors (8 physicians and 3 non-physicians)
 - Directors elected by the OMA Membership based on a fair nomination process and detailed candidate profiles provided to Members
 - Board Chair elected by Directors
 - The OMA will contract with reputable, neutral, third party provider to deem Board nominees as eligible, to provide a skills and experience summary, and to create digital profiles for all nominees
 - A transparent and high integrity process to recruit qualified candidates for the Board will enable Members to trust the process and make an informed choice for their Board Directors

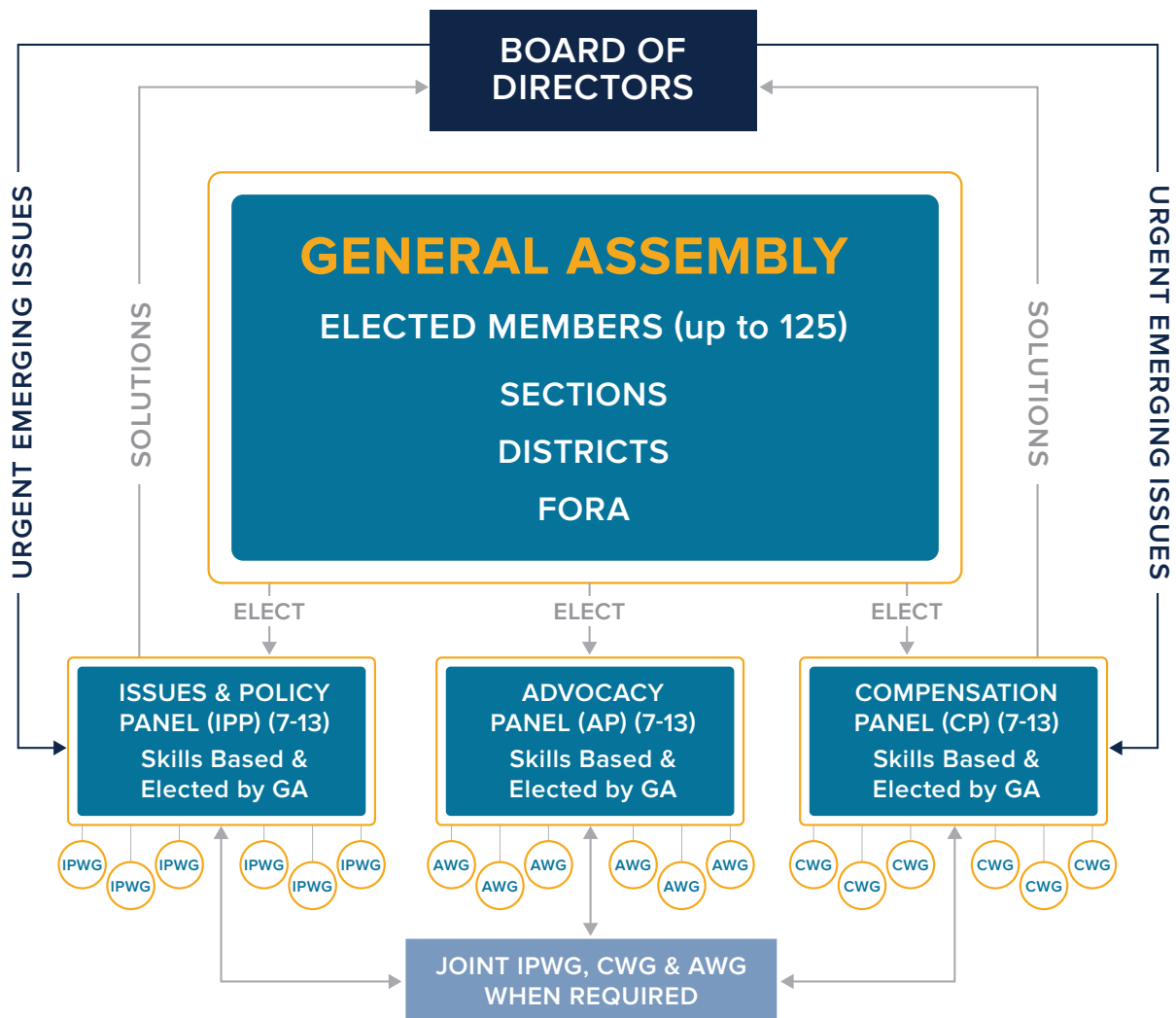
The New General Assembly

General Assembly Function

1. Set the priorities for the OMA concerning professional issues, compensation, external policy and to set directions and priorities for advocacy (government relations, public relations, stakeholder relations)
2. Provide input into the PSA framework
3. Assist with the development of the OMA strategic plan
4. Direct the various Panels to create Working Groups to provide Member input into the solutions and policies developed for the benefit of the profession
5. Facilitate leadership development and intra-professional networks
6. GA to convene at least once a year

General Assembly Structure

- A maximum of 125 Members from Sections, Districts and Fora
- The GA to be representative but optimum composition to be determined by Council (through a consultation process that includes Sections, Districts and Fora)
- General Assembly elects Issues & Policy Panel, Advocacy Panel, Compensation Panel and General Assembly Steering Committee (GASC) (formerly the Council Governance Steering Committee)
- GASC ensures the work of the GA and the working panels remain evidence-based, high-integrity and solution-focused



OMA staff will support General Assembly & Working Groups

To review the complete Better Together Transformation Plan please go to oma.org

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