

## **HealthYYC Initiative Terms of Reference**

### **1. Overview**

In December of 2015 the Nose Creek Area Structure Plan (NCASP) and Health Impact Assessment (HIA) was adopted by council. This was the first community planning project that integrated a health impact assessment into the process. One key outcome of that process was the eight Healthy Planning Principles that were the foundation for the plan, which also included a set of policies. It was this new approach and principles that prompted the conversation at council to learn more. In January of 2017 a presentation was made to the Standing Policy Committee on Planning and Urban Development on the eight Healthy Planning Principles and the topic of health impact assessments as a tool. At the 23 January 2017 Regular Council meeting council directed administration to create a committee that would provide recommendations to advance the inclusion of health principles into planning and development policy and/or practices.

Another key outcome of the Nose Creek Area Structure Plan and Health Impact Assessment was the interest in this health approach and the HIA tool from many external stakeholders of varying disciplines and interest groups. This resulted in the development of many new partnerships for sharing information, ideas and educational presentations.

To build upon these aforementioned outcomes, the HealthYYC Initiative is designed to provide a framework that will capture many individual partnerships and ideas together to leverage, build and create opportunities to further support the inclusion of health in building and sustaining our communities. The ultimate goal is to embed a mindset around health in all aspects of our communities.

### **2. Purpose**

The purpose of the Initiative is to connect, share and accelerate action towards positive health outcomes in building healthy communities for Calgary.

### **3. Mandate**

The Initiative is a resource that could provide recommendations to Administration, community groups or agencies to advance the inclusion of health principles into planning and development policy and/or practices, but it has no formal decision-making authority.

### **4. Composition**

The HealthYYC Initiative is a City of Calgary-led initiative administered by the Urban Strategy department, on behalf of the City of Calgary. The HealthYYC Initiative will consist of a mix of City administration and external stakeholders serving on the Advisory Board which is led by the Co-chairs.

#### **4.1 Co-Chair**

The General Manager of Urban Strategy will appoint one Co-Chair from that department, and one Co-Chair from the Urban Land Institute.

#### **4.2 Administration Advisory Board Members**

The Initiative will be supported by an Advisory Board that consists of a balanced mix of Administration and external experts and stakeholders who influence the field of built form and health of our communities. The composition of this group demonstrates the interest in and impact of health across several disciplines.

Four members of Administration are appointed as follows:

- Representative appointed by the General Manager of Planning and Development
- Representative appointed by the General Manager of Community Services
- Representative appointed by the General Manager of Transportation
- Representative appointed by the General Manager of Utilities and Environmental Protection

Administration members may send a delegate if they are unable to attend.

#### **4.3 External Advisory Board Members**

Six external members will be approved by the Co-Chairs of the Initiative.

External membership composition shall be aligned with the following criteria:

- One member – representing Alberta Health Services
- Two members – representing local development industry partner (BILD, NAOIP)
- Three members - representing community, academic and/or health advocacy sectors (University of Calgary, MakeCalgary, Federation of Calgary Communities, VIVO)

External members may send a delegate if they are unable to attend.

#### **4.4 Qualification for Administration members**

Administration members are appointed to the board by their department and will be selected based on their expertise in public health, or in their discipline that contributes to healthy built environments, or both.

#### **4.5 Qualifications for external members**

External members appointed to the board will be selected based on their expertise in the fields of public health, healthy built environments, or both.

#### **4.6 Attendance by non-members**

Other members of Administration and external stakeholders will be invited to meetings, based on agenda topics and with the agreement of the Advisory board.

#### **4.7 Role of the Co-Chairs**

The Co-Chairs shall have the authority to schedule meetings; accept agenda items from the Advisory Body, Administration and external bodies; and set the agenda.

## **5. Appointment Terms**

### ***5.1 Administration Advisory Board members***

Initial appointments to the Advisory Board will be for a two year term, and if a person occupying one of the Administration offices changes, the successor to that role shall be appointed to the Advisory Board upon taking over the role until the end of the original term with the approval of the two Co-Chairs, or a suitable alternate as selected by the General Manager of that department that meets the qualifications outlined in this terms of reference.

### ***5.2 External Advisory Board members***

Initial appointments to the board will be for a two year term, and should the representative leave the office or agency they are representing a new member from that agency or a similar agency may fill that vacancy with the approval of the two Co-chairs.

## **6. Conduct of Meetings**

### ***6.1. Procedures***

The procedures of meetings shall be determined by the Co-Chairs, who will rotate hosting the meetings. The intent is that meetings will be informal and agenda items will be presented verbally.

### ***6.2. Decision-Making***

The Advisory Board members do not have decision-making authority on the matters that are discussed at the meetings.

### ***6.3. Frequency of Meetings***

Meetings shall be scheduled four times per year. Additional meetings may be scheduled at the call of the Co-chairs, and subject to the availability of Advisory Board members.

## **7. Committee Continuity**

The Terms of Reference and functioning of the Initiative shall be reviewed and the Advisory Board members shall make a recommendation to continue, change or disband the Initiative no later than two years after the initial appointments are made, following the approval of these Terms of Reference. The Terms of reference may be amended through a majority vote of the HealthYYC Initiative Advisory Board members, with the support of the Co-Chairs.