

Great Lakes Border Health Initiative

Terms of Reference

Approved for a period of one year on July 16, 2015

Membership

The Great Lakes Border Health Initiative (GLBHI) has representation from health agencies for the U.S. states of Indiana, Michigan, Minnesota, New York, Ohio, Pennsylvania, Wisconsin, and the Canadian province of Ontario as well as local health agencies near international borders. Given the broader stakeholder context within which public health works, GLBHI will also maintain a small list of Invitees and Guests representing stakeholders, who are invited to participate in meetings.

Mandate and Key Tasks

The mandate of the Great Lakes Border Health Initiative is to share public health related data, both individually identified and population-related, for the purpose of preventing, detecting or responding to a public health event, as outlined in the Public Health Data Sharing Agreement.

GLBHI members will use two methods to do this:

- 1) Notifying other members in real-time, as outlined in the GLBHI Infectious Disease Emergency Communications Guideline
- 2) Participating in periodic teleconferences to share population-related updates (depending on the ability to pay for these teleconferences)

GLBHI members are also responsible for updating the Public Health Data Sharing Agreement and GLBHI Infectious Disease Emergency Communications Guideline as needed. Additionally, Subject Matter Experts in areas such as: legal, lab, food, surveillance or communications, may be called upon to consult/advise GLBHI individually or as an ad hoc subcommittee(s) if needed.

Governance

On an annual basis, in April, a co-chair from Canada and at least one co-chair from the United States will be identified to coordinate organizational activities.

Members are requested to take turns hosting and assuming costs associated with teleconferences.

GLBHI representatives will be identified to participate on the Pan-Border Council, in accordance with the council's terms of reference.