

## **Terms of Reference**

### **Policy and Health Issues Committee**

#### **1. Purpose**

On behalf of the Doctors Nova Scotia Board of Directors, the Policy and Health Issues Committee will develop and review evidence-based policies and positions on issues of interest and importance to Doctors Nova Scotia.

#### **2. Definitions**

##### **Policy**

A statement of guiding principles adopted by the Board that provides broad strategic direction to the Board and to Association members on a specific topic or issue. Principles may also be identified that are relevant to the actions of other stakeholders to achieve, in the Board's view, an effective, broader response to the topic or issue under consideration. Policies are formally adopted by the Board and are reviewed at a minimum every three years, but may be reviewed and amended at any time, as directed by the Board.

##### **Position**

A statement of key considerations adopted by the Policy and Health Issues Committee. A position represents the Association's views on an important topic or issue to broadly inform staff, stakeholders, the media, and the general public.

#### **3. Duties and Responsibilities**

- To develop, identify and address critical issues or key areas that include but are not limited to: public policy, legislation, and health promotion initiatives which affect the mandate of the Board and recommend further action to the Board, including the development of a policy, position or perspective.
- To create an action plan that identifies critical issues and proactive approaches for the committee to pursue.
- To make recommendations to the Board on potential AGM motions that align with the DNS Strategic Plan and the work of the association.
- To ensure policies, positions, and perspectives remain current by conducting regular reviews and recommending appropriate revisions to the Board.
- To participate, in consultation with the Board Chair, the President, CEO and others, in community-based discussions regarding critical areas of public policy affecting the mandate of Doctors Nova Scotia.

- To form working groups, or sub groups, as necessary in order to advance the work of the Committee.
- To review, consult and recommend a position or perspective on proposed legislative changes.
- To review, consult and recommend actions to support health promotion activities.
- To oversee and coordinate Doctors Nova Scotia representation on external working groups or committees.

#### **4. Committee Membership**

The Policy & Health Issues Committee is comprised of a broad representation of physicians across the membership. There shall be a minimum of 10 and a maximum of 12 committee members of Doctors Nova Scotia, including at least one Board member. All Committee members will be appointed by the Board of Directors. The Board will strive to ensure the committee membership is representative of the general membership and includes members with an interest in health policy and health promotion.

Committee members are expected to attend a minimum of half the meetings per year. Issues regarding attendance will be addressed by the Chair. Members who cannot regularly attend meetings may not have their terms renewed.

The committee will appoint a chair as needed. When the chair is unable to attend a meeting, a designate chair will be appointed to conduct the meeting.

##### **Committee Chair**

The chair is responsible for the leadership of the committee and ensuring that the business of the committee is carried out efficiently, effectively, and in an appropriate manner.

The following skills are required:

- Strong leadership skills (communication, ability to motivate, positivity, integrity, responsibility, etc.),
- Strong organizational skills,
- A sense of diplomacy and democracy,
- Excellent facilitation skills, including the ability to:
  - encourage active participation by all committee members,
  - summarize the discussions, and
  - ensure all items are brought to a suitable resolution.

Duties include:

- Working with staff to schedule dates and locations of committee meetings,
- Facilitating committee meetings,
- Allowing the additional time required to plan and prepare for meetings,
- Reviewing meeting agendas and material in advance of the meeting,
- Ensuring minutes are complete and accurate and reviewed at the next meeting,
- Attending an orientation for new committee chairs with the chair of the Board and staff (and attending annual refreshers as needed),
- Ensuring the committee is aware of its responsibilities under the Code of Conduct/ Conflict of Interest Policy and the Respectful Workplace Policy (annual overview with the committee),
- Becoming familiar with the potential conflicts of interest by reviewing conflict of interest declarations submitted by the committee members at the beginning of the year,

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- Liaising or conferring with the Board Chair as required for advice or guidance on governance matters or in response to a request from the Board Chair,
- As needed, providing Committee members with feedback and coaching regarding their participation and performance on the Committee; and
- Only voting in the event of a tie.

#### **Terms**

Terms of office may have staggered end dates to ensure a required level of continuity. All subsequent terms will be for a maximum three-year period. A member may be reappointed for a second term of up to three years. A member cannot serve more than two terms or six consecutive years on the Committee.

#### **Ex-Officio Members**

The CEO, President and President-Elect are ex-officio, non-voting members of the Committee. Delegates may attend meetings on behalf of the ex-officio members.

#### **Staff Resources**

The Director of Policy and Communications, the Director of Partnerships and Finance and other members of the Policy and Communications department are assigned to the Committee as a resource and to provide committee support.

### **5. Committee Meetings**

The Chair of the Policy & Health Issues Committee will convene meetings as required.

There will be a minimum of four meetings per year, with at least two meetings being held in-person. A schedule of meetings for the year will be distributed in advance.

Committee members are encouraged to attend all meetings. However, there will be instances where specific committee members will be sought out when their expertise is needed to discuss particular topics.

#### **Quorum and Voting**

A minimum of one half of the voting committee members will comprise a quorum. A decision is made by a majority vote of members in attendance. The Chair will cast the deciding vote only if required in the event of a tie.

### **6. Review and Evaluation**

The Policy and Health Issues Committee will complete

- (a) a review of the committee's terms of reference every two years; and
- (b) a committee evaluation at least once a year.

<b>7. Accountability</b>
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The Policy & Health Issues Committee is advisory to, and accountable to the Board of Directors of Doctors Nova Scotia. Board approval will be required for any formal policies or positions, as well as any external communications on behalf of Doctors Nova Scotia.

Committee business will be reported at regularly scheduled Board meetings. Minutes of Committee meetings shall be maintained and made available to the Board upon request.

Last approved by the Board of Directors: May 7, 2021