

## **Diabetes Care Program of Nova Scotia Advisory Council**

### **Terms of Reference**

#### **PURPOSE**

To support a coordinated, provincial approach to diabetes prevention and care by reducing variability in service delivery and practice approaches, improving the uptake of standards and guidelines, and enhancing cooperation in improving identified health outcomes across the continuum. The work of the Diabetes Care Advisory Council (Council) will be aligned with the Mission, Vision and Strategic Direction of the Department of Health.

#### **AUTHORITY**

The Diabetes Care Program of Nova Scotia Advisory Council is established by and governed by the Department of Health.

#### **ACCOUNTABILITY**

The Council is accountable to the Department of Health through its reporting relationship to the Director, Acute and Tertiary Care, Nova Scotia Department of Health.

#### **RESPONSIBILITY**

- To ensure that a Strategic Plan and Annual Goals are established and supported.
- To advise on diabetes service delivery models respecting the Vision for Diabetes Care and the continuum of care for the Province.
- To guide the development of recommendations regarding the development and dissemination of clinical and system standards.
- To review adherence to approved standards and strategize on ways to achieve/enhance outcomes.
- To promote the application of diabetes data in policy and practice decisions.
- To support Program recommendations and provide ongoing advice to the Department of Health, based on environmental scanning of emerging issues, research, best practice, and evaluation.
- To support/enhance effective two-way communication mechanisms with the District Health Authorities and the IWK, including reporting that supports the Business Planning Cycle.
- To develop a process for evaluating the work of the Council.

#### **MEMBERSHIP**

The Diabetes Care Advisory Council shall be comprised of 10 to 15 members. Membership will be from across jurisdictions with broad representation from the District Health Authorities and others within the health service delivery sector (administration, health professionals, and others), including the DCPNS Clinical Advisors, and aim to represent the full spectrum of health care, including health promotion, acute care and rehabilitation.

The Council shall be appointed by the Department of Health. Efforts will be made to ensure representation from founding, endorsing organizations of the DCPNS, including Dalhousie Faculty of Medicine, Doctors Nova Scotia, Canadian Diabetes Association, Nova Scotia Association of Health Organizations, and the Nova Scotia Dietetic Association. Each Council member will be expected to participate in the majority of the Council meetings and participate in working groups or committees as requested.

### **CHAIR**

The Chair of the Diabetes Care Advisory Council will be selected by the Department of Health and appointed for a two-year term, renewable once.

### **EX OFFICIO MEMBERS**

Ex officio members of the Council shall include:

- a) Program Manager, Diabetes Care Program of Nova Scotia
- b) Director/Executive Director, Acute and Tertiary Care, Department of Health

### **NOMINATIONS**

Existing Council members will forward names of qualified candidates for consideration for appointment by the Department of Health.

### **TERM**

Members of the Council shall be appointed for terms of two and three years initially and be eligible for one term renewal so as to create a staggered membership.

Council members will be appointed starting June 2007.

### **VOTING**

At all Council meetings, members will strive for consensus. Failing a decision by consensus, the question shall be determined by a simple majority of votes. In the event of a tie vote, the Chair will cast the deciding vote. Quorum shall be fifty percent (50%) plus one, not including the Chair and ex-officio members.

### **SPECIFIC COUNCIL RESPONSIBILITIES**

Council members shall:

- a) Recognize the Chair as Council Spokesperson.
- b) Attend regular Council meetings and be prepared for meetings by reading relevant material.
- c) Respond to correspondence/requests regarding the DCPNS business in a timely manner, or if unable to fulfill the request, communicate this in a prompt and courteous manner.
- d) Ensure that controversial issues are presented and discussed fairly and without bias.
- e) Respect all decisions and so will act in a way that strengthens the functions of the Council within the broader community.

### **CONFIDENTIALITY**

The Council may at times be privy to information that shall remain confidential to the Council members. Each member shall:

- a) Respect and protect the proprietary and confidential information entrusted to the Council and its members.
- b) Avoid public discussions or comments about the Program or Program staff, Council, or Committee members that could reasonably be seen as revealing confidential or potentially harmful information.

## **RELATIONSHIPS**

*The DCPNS provides leadership "to improve the health of Nova Scotians with or at risk of developing diabetes." It does so by developing and sustaining individual and organizational partnerships fostered within an environment of trust, honesty, and respect.*

General. Council members shall:

- a) Respect the opinions of others and treat all with equality and dignity without regard to gender, race, colour, creed, ancestry, place of origin, political beliefs, religion, marital status, disability, age, or sexual orientation.
- b) Act with fairness, honesty, integrity, openness, and in good faith with a view to the best interests of the DCPNS.
- c) Promote the mission, vision, and values of the DCPNS in dealing with the public, representing agencies/organizations, and stakeholder groups.

Pharmaceutical and Medical Devices Industries. Council members shall:

- a) Disclose fully and specifically, on an annual basis, any professional and relevant personal activities and affiliations, paid or otherwise, which might bias Program discussions and interactions.

## **EXPENSES**

Council members shall receive no remuneration, but will be entitled for reimbursement of legitimate expenses for conducting Council business.

## **REPORTING**

The Council shall report regularly to the Department of Health through a variety of mechanisms including the Business Planning Cycle.

An annual written report concerning the activities of the DCPNS and Council, including accomplishments and concerns will be submitted to the Department of Health. The report will be submitted at the end of each fiscal year to support the business planning cycle and the call for new and enhanced programs.

Ongoing activities of the Council will be evaluated as part of the Strategic Plan. An operational review will occur within five years in order to review mandate.

## **MEETINGS**

While it is acknowledged that the Council shall meet more frequently, a minimum of two (2) meetings shall be held annually with minutes duly recorded, approved, and circulated.

I have read and agree to abide by the above Terms of Reference.

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**Signature**

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**Date**