

## 17.0 SOCIAL ACCOUNTABILITY COMMITTEE

### 17.1 ROLE

The World Health Organization (1995) has defined the social accountability of medical schools as "the obligation to direct their education, research and service activities towards addressing the priority health concerns of the community, region, and/or nation they have a mandate to serve. The priority health concerns are to be identified jointly by governments, health care organizations, health professionals and the public."

The Faculty of Medicine is committed to meaningfully engaging with, and being socially accountable to its diverse, internal and external stakeholders. In striving to meet its education, research, patient care, population health and advocacy mandates, the Faculty actualizes this responsibility through the integrated, practical application of the following four socially accountability lenses to its deliberations, decisions and actions:

- Equity
- Diversity, Inclusion and Cultural Responsiveness
- Community/Stakeholder Engagement and Partnering
- Justice, Fairness and Sustainability

The Committee has two key purposes:

1. To provide advice and recommendations on current and future research, education and operational needs to meet the social accountability mandate within the Faculty; and,
2. To support the implementation of the Faculty's strategic plan's work on partnering with communities for improved health outcomes (currently Focus Area 7 in #DalMedForward).

### 17.2 MEMBERSHIP

The membership of the Committee shall strive to reflect a broad diversity of members, with representation from historically under-represented faculty and staff among self-identified persons, racialized persons, women, persons with disabilities and persons who belong to sexual orientation and gender identified minority groups.

#### a) Elected Voting Members

- i) Four (4) members of Faculty: two (2) from basic science departments and two (2) from clinical departments;
- ii) One representative nominated from the Indigenous Health Working Group;
- iii) One representative nominated from the PLANS Advisory Committee;
- iv) One representative nominated from the Diversity in Leadership Working Group;
- v) One graduate student representative nominated from the Faculty of Graduate Studies Society;
- vi) One medical student representative nominated from the Dalhousie Medical Student Society;
- vii) One postgraduate resident member nominated by Maritime Resident Doctors;
- viii) One representative from the Dalhousie Professional Managerial Group (DPMG); and,
- ix) One member from the Systems Change Committee.

**b) *Ex Officio Non-Voting Members:***

- i) Two (2) Assistant/Associate Deans appointed by the Dean;
- ii) Assistant Dean, Serving & Engaging Society;
- iii) Director, Global Health Office

**c) *Term of Voting Members:*** Voting members shall be appointed for five-year staggered terms. Graduate student, medical student and resident members will serve one-year terms.

**d) *Co-Chairs:*** The Assistant Dean, Serving and Engaging Society, will co-chair with a member of the Committee. The Committee will determine who will co-chair with the Assistant Dean.

### 17.3 RESPONSIBILITIES

The Social Accountability Committee is responsible for the following:

- a) Providing advice on UGME, PGME and CPD accreditation standards related to social accountability (e.g. CACMS 1.1.1);
- b) Providing direction on the implementation of DalMedForward, with a particular emphasis on Focus Area 7 “Partnering with Communities to Improve Health Outcomes”;
- c) Supporting the development of metrics to assess and evaluate the implementation of DalMedForward Focus Area 7 (Partnering with Communities to Improve Health Outcomes) and accreditation standards;
- d) Liaising with committees within the Faculty of Medicine with a mandate that encompasses social accountability to coordinate a collective vision and implementation plan (i.e. Advisory Committees for Indigenous Health and African Nova Scotian Health, and Diversity in Leadership Working Group; Service Learning Leadership Team);
- e) Facilitating initiatives led by Dalhousie learners, faculty and staff that meet the social accountability mandate and acting as a central point of engagement to recognize the collective network of social accountability across the Faculty of Medicine;
- f) Facilitating the implementation of evaluation frameworks including the “Social Accountability Evaluation and Enhancement Framework” for the Faculty of Medicine; and,
- g) Identifying, learning from and celebrating social accountability activities and accomplishments led by communities, learners, faculty and staff.

### 17.4 REPORTING

The Social Accountability Committee shall report annually (with the Systems Change Committee) to the Dean, Faculty Council and the Council of Associate and Assistant Deans.

The Social Accountability Committee will have an annual consultation with community members and organizations with the Systems Change Committee.

The Social Accountability Committee will also hold an annual town hall meeting with learners in the Faculty of Medicine with the Systems Change Committee.

## **17.5 CONFLICT OF INTEREST**

Conflict of interest means that a member's interests, whether personal or business, pecuniary or otherwise conflict with his/her committee responsibilities. The Committee will be guided by the Dalhousie University Conflict of Interest Policy at:

[https://www.dal.ca/content/dam/dalhousie/pdf/dept/university\\_secretariat/policyrepository/ConflictInterestPolicy.pdf](https://www.dal.ca/content/dam/dalhousie/pdf/dept/university_secretariat/policyrepository/ConflictInterestPolicy.pdf)

## **17.6 SPECIAL PROCEDURES**

The Social Accountability Committee shall meet at least eight times during the academic year.