# **COMMITTEE TERMS OF REFERENCE**

Revised September 2013

### Purpose:

The purpose of these Terms of Reference is to guide the implementation of both the Divisional Search and Survey processes for Divisions of medical departments as defined by the Medical Staff (General) Bylaws of the CDHA.

# Survey:

The Survey is a comprehensive review of the clinical care, education and research mandate of a division of a medical department conducted by a Committee as outlined below. The Survey is meant to provide the Division, the applicable Department and CDHA with information and feedback on the overall performance and operations of the Division being reviewed. The Survey will also inform the creation of priority areas for action and leadership objectives which help ensure the Division is functioning optimally. Surveys will be conducted once every five years which signifies the formal end of a term of appointment for the division Chief or at the call of the Department Head or Division Chief after consultation with the VP Medicine.

In the event that a Division Chief's role is being vacated, a Survey will be conducted in anticipation of the Survey Committee evolving into a Search Committee for the purposes of recommending the appointment of a new Chief.

The survey process will recognize that many divisions have strong alignments with multidisciplinary clinical programs. These linkages may play a greater role in the delivery of clinical care than the home Department.

# Search:

The Search is the process whereby a Committee comprised of the individuals as listed below conduct a process to interview potential candidates and make recommendations regarding the appointment of a new Division Chief.

### Timing:

Surveys will ordinarily be undertaken every 5 years. This period may be less should a situation arise where the VP Medicine, Department Head, DMAC Chair or DMSA President raise a concern that warrants an earlier survey. Searches will be conducted in anticipation of the ending of a term of a current appointment.



#### Chair:

The Chair is to be a senior, academic member outside of the involved Division. It is expected that many of the chairs will be from the involved department, yet there will be the ability to choose a chair from another department. The Chair will be discussed jointly by the VP Medicine, the President of the DMSA, and the Department Heads at the January meeting, with final confirmation by the end of March. The Chair who is selected will be accountable for completing the survey in a timely fashion to both their Department Head and the VP Medicine.

### Two (2) members nominated by the Department:

The department executive will nominate 2 individuals to represent the Department, taking into consideration a balance of academic education and clinical representation. These individuals may be Division Heads, although this is not absolutely required. They are not to be members of the division being surveyed. One of the 2 members should be chosen to be a representative of the Faculty of Medicine.

#### A member nominated by DMSA:

DMSA Executive will select an individual from another Department that interacts with the Division being surveyed. The DMSA will bring forth the names of individuals to serve on committees to the January meeting with final selection by the end of March. It will be the Department Head who will approach the individuals from their Department to sit on the committee to represent the DMSA.

#### A member at large:

If deemed necessary one individual may be selected to represent a program or other aspects of the organization where there is a strong affiliation or interaction with the division being surveyed or searched.

#### One member CDHA Leadership:

This individual will be a current member of the CDHA leadership team, usually at the Director level and will be appointed by the appropriate VP Person Centred Care. The appropriate VP of Person Centred Care will be given the list of divisions to be surveyed and will be asked to recommend the appropriate Director or Manager who should sit on the committee. The most appropriate person will be discussed in January with finalization by the end of March.

#### One member CDHA Physician Services:

This individual will normally be the Director, Physician Services or his/her designate and will be an ex-officio member of the committee.

#### 1. Selection of Committee members

- 1) During January of each year or, as required, the VP Medicine will call a meeting of the appropriate Department Head and the President of DMSA to review all upcoming Divisional Survey/Searches to be conducted within the next 12 to18 months. The purpose of this meeting is to discuss potential individuals who could serve on the committees in light of the required physician participation on committees as detailed below. Committee composition will consist of both appropriate administrative and physician personnel and such membership will be determined with a view to the natural relationships and linkages that are essential to the functioning of a particular Division.
- 2) Following the January meeting, the Department Heads, the DMSA and appropriate VP will finalize the selection of committee members.
- 3) It is expected that committee membership should be determined no later than the end of March. Members of both Survey and Search committees will be required by the VP Medicine to advise him or her of any actual or potential conflicts of interest.
- 4) A list of the committee membership will be sent to the Division being reviewed as well to the Dean of the Faculty of Medicine. The Division being reviewed will have 3 weeks to review the membership of the committee and if potential conflicts of interest are identified, a letter in writing from any member of the Division is required to be sent to the VP Medicine, the President of DMSA and the Department Head of the Division being surveyed. This letter will be reviewed to determine if changes to the committee membership are required. Once the committee membership has been finalized, the Division will be given notice that the Self Study and any other pre-survey documents are to be prepared and available in electronic format by September 1.
- 5) Once the committee has been finalized dates for the survey will be determined between mid September until the end of November, such that the committee members will have ample lead time with regard to fixing the appropriate dates.
- 6) A role description will be sent to each committee member and chair, outlining roles and responsibilities for the survey or search. This document will also include relevant information on claiming maintenance of competency credits.

### 2. Completion of Self Study Template

The Chief of the division to be surveyed will complete the Self Study Template and provide it with any supporting documentation to the Chair of the Survey Committee on or before September 1<sup>st</sup> in the year in which the Survey is to occur.

# 3. Pre-survey Activity

a) If the chair of the committee is a member of the Department to which the Division being surveyed belongs then the Department will distribute all material electronically to the committee chair. If the chair of the committee is external to the Department the VP Medicine's office will ensure distribution of all materials upon receipt from the Division Chief.

# 4. Conducting the Survey

- a) The Committee will seek to conduct face-to-face interviews with the following individuals:
  - 1. Division members. Consideration will be given to grouping staff in larger divisions but when requested, individual members may be granted an individual interview with the Committee.
  - II. other Department Members who express an interest in being interviewed, may be interviewed as part of a group process,
  - iii. the Department Head,
  - other faculty members in areas aligned or linked via programs with the Division being reviewed or who express an interest in being interviewed and who have a significant interaction with the Division being reviewed,
  - v. the Health Services Manager, Director and the VP of Person Centred Care for the Division
  - vi. other health care professionals (e.g. Unit Managers, Charge Nurses, Social Workers, etc) who express an interest in being interviewed, or any other individuals whose contribution is deemed necessary, e.g., External organizations, provincial programs, etc.
  - vii. DMSA President or their delegate if interview requested.
  - viii. Residents
  - IX. Dean of Faculty of Medicine or designate.
- b) The Committee may seek written feedback or electronic survey feedback from any of the identified groups above. That decision will be left to the discretion of the Committee to determine the best approach to obtaining appropriate feedback given the size, scope and mandate of the Division being surveyed; ie. written versus group versus individual surveys or interviews

### c) Committee Decision Making:

Committee will vote by consensus. In the event the committee is unable to achieve consensus it will go to a formal voting process where all members are eligible to vote. In the event of a tie, the Chair will cast the deciding vote. A quorum will be 50% plus one.

### d) Frequency of Meetings:

Committee meetings will occur as called by the Chair.

### e) Attendance:

Committee members are expected to be present for all committee activities.

### 5. Committee Timeline

- a) The Chair will ensure the Survey is conducted between the months of September and November. A meeting of the committee should occur within one month of appointment and notification of all committee members to afford the committee amble time to discuss the work plan and deal with the administrative tasks (room bookings, inviting / scheduling interviewees, arranging equipment, etc).
- b) At this time a formal request will be sent by the Chair to the Division Chief requesting the completion of the Division Self Study and supporting documentation.
- c) The Chair will aim to conclude the committee's work and submit the final report as outlined below two months following the conclusion of the committee's work. Should there be a need for an extension the Chair will submit a request to the Department Head and VP Medicine.

### 6. The Report

- a) The Report, if applicable, will include a recommendation regarding the appointment or reappointment of the Division Chief.
- b) The Report will make recommendations regarding the activities (clinical care, research and teaching) of the Division.
- c) The Report will include any other recommendations deemed appropriate by the Committee in relation to any of the activities of the Division.
- d) The Report will then be sent to the Division Chief for review and comment on factual content only. When the Division Chief's comments have been considered by the Survey Committee, the Chair will submit the report to the Department Head who will bring it forward for discussion and approval by the Department Executive Committee.

The appropriate VP of Person Centred Care and the VP Medicine will be present at that Executive meeting to take part in the discussion regarding the Survey and its recommendations. If the report is deemed acceptable, the Report will be officially considered finalized.

The VP Medicine and the appropriate VP Person centred care will then table the report with the CDHA Leadershift Enabling Team for endorsement leading up to the official offer to appoint or reappoint the leader. On or about the same time, the VP Medicine will share the results of the Division Survey with the DMAC Executive for information purposes. The formal offer to appoint or reappoint will be made by the CEO of the CDHA. The CEO and Department Chief will meet with the candidate to discuss the position and make an offer.

### 6. Follow-up to the report

Once the report has been finalized the Division Chief will be required to follow-up on the recommendations. A progress report which demonstrates how the Division leadership and the applicable CDHA Co-leader have worked to address the recommendations would be required one year after the Survey was conducted and again within the last year of the term of the Division Chief.

### Search Process

### 1. Selection of Committee members

The composition of the Search Committee will be the same as the Survey Committee with the following exceptions:

One member of the Division selected by the membership of the involved Division who is not the Division Chief nor a candidate for the position of Chief will we asked to serve on the committee

The CDHA representative who sat on the Survey committee will step down and will be replaced by the appropriate CDHA Co-leader who would be the potential Co-Lead with the candidate.

#### 2. Candidate Interview Process:

During the process of candidate interview and selection the Committee will:

- a. Work with the Department Head and the Division to develop the candidate profile which can be distributed to interested candidates and submitted to no more than two national journals for advertisement. The Profile will also be shared with Physician Services who will place it on their physician recruitment section of the CDHA website The position will be advertised for at least 1 month.
- b. Solicit recommendations from Division members and the Department Head for prospective candidates, considering internal and external prospects.
- c. Once the competition closes the Survey Committee will meet to discuss the potential candidates and consider the process for interviews as follows.

Candidates will be expected to:

- d. Conduct a presentation outlining their vision for the Division under their leadership. This may be scheduled during the Divisional grand rounds or at another opportunity as determined. Members of the Department, Division and key members from the CDHA, Dalhousie and other stakeholder communities will be invited to attend and provide the Search Committee with written feedback.
- e. Participate in a structured interview process conducted by the Search Committee.
- f. Meet with the Department Chief and Department Executive, the VP Medicine and appropriate VP Person Centred Care for the CDHA and the Dean of the Faculty of Medicine if required.
- g. Meet with additional individuals from key stakeholder communities who have significant interactions with the Division if required. Written feedback will be provided to the Search Committee.

Department / Division will be expected to:

- h. Work with the Search Committee Chair to organize and promote the time in which the candidate presentations will occur.
- i. Make available the most recent Division Survey Report and any other strategic level documents (i.e. Annual Reports) that outline the Division's activities, accomplishments challenges, etc. to all candidates as they prepare for the interview process.
- j. Assist the Survey Committee with scheduling the interview of candidates with members of the respective departments and other stakeholders as maybe required.

### *Committee Decision Making:*

Committee will vote by consensus. In the event the committee is unable to achieve consensus it will go to a formal voting process where all members are eligible to vote. In the event of a tie, the Chair will cast the deciding vote. A quorum will be 50% plus one.

### Frequency of Meetings:

Committee meetings to occur as called by the Chair.

### Attendance:

Committee members are expected to be present for all committee activities.

#### 5. The Report and Recommendation

At the end of the search process, having considered all the feedback and the results of the interview process, the Search Committee will develop a recommendation by consensus regarding the preferred candidate. The Chair, on behalf of the Search Committee, will communicate their recommendation, in written form, to the Department Head, and the VP Medicine.

The VP Medicine and Department Head will discuss the recommendation with the CEO and the decision to appoint will be determined. The formal offer to appoint or reappoint will be made by the CEO. The appointment will also be discussed with the DMAC Executive prior to the formal public announcement being made.

If a candidate is to be appointed, the documentation outlining the announcement will be developed jointly by the Department Head and the CEO, and official appointment will be made.

After the appointment has been finalized, the new Division Chief, in consultation with the VP Medicine and Department Chief will collaboratively develop his /her personal leadership goals. At about the same time, discussions will occur with the applicable CDHA Co-leader present to determine Divisional goals and objectives for the coming years which in turn will inform the process of career development for the new Division Chief as well as strategic goals for the Division as it relates to its mandate.

In the event the Committee can not recommend the appointment of a new Chief, the Chair of the Search Committee will call a meeting of the Department Chief and all members of the involved Division with the exception of any internal candidates to discuss the outcome of the Search process and future next steps which may include the appointment of an interim Chief until such time as the Search Committee is called back into action to convene a new search.