PATIENT AND COMMUNITY ADVISORY COMMITTEE TERMS OF REFERENCE

1.0 MANDATE
CADTH provides health care decision-makers with objective evidence to help make informed decisions on the optimal use of drugs and medical devices (defined as medical devices, clinical interventions, and diagnostic tests; and medical, dental, and surgical devices and procedures) in our health care system. The Patient and Community Advisory Committee provides CADTH with advice on issues relevant to CADTH’s mandate, from the perspectives of those using the Canadian health care system.

2.0 ROLES AND RESPONSIBILITIES
The Committee shall:
• help CADTH understand how its policies and activities will impact patients, families, and communities, and raise awareness of the needs of all of those who use the Canadian health care system, especially the vulnerable and disadvantaged
• provide advice on approaches to enhance the transparency of CADTH processes and their performance
• provide patient and public perspectives to CADTH in the development of initiatives to improve the appropriate use of drugs and devices across the life cycle of health technologies
• provide guidance on initiatives to strengthen engagement with patients, families, and communities across all CADTH programs
• provide input into CADTH strategic plans and annual business plans
• participate in internal and external evaluations of CADTH activities.

3.0 AUTHORITY
The Committee shall report to the CADTH President and CEO through its Chair.

4.0 MEMBERSHIP
The Committee shall be composed of twelve (12) members, including a Chair.

Membership is for individuals, not groups. Members do not represent a specific constituency and are expected to bring views based on their range of experience.

Core competencies for members include:
• extensive lived experience engaging with the Canadian health care system
• the ability to use personal experiences constructively
• familiarity with issues in health care in Canada (at the community, regional, or national levels)
• the ability to provide specific perspectives identified in the current CADTH strategic plan
• the ability to offer a unique perspective that contributes to the diversity of perspectives of Committee members
• awareness of others’ experiences and views within a specific community or disease area; for example, experience as a patient organization board member, staff member, or volunteer
• the ability to act with integrity, independent of specific interests
• the ability to work constructively as a member of a team
• interest in empowering patients, families, and communities to participate in health technology assessments
• the availability to participate in meetings.

The Chair shall preside over all Patient and Community Advisory Committee meetings. Additionally, the Chair is expected to represent the Committee in other CADTH meetings and engagements.

Additional competencies for the Chair include:
• previous Chair experience preferred
• the ability to remain impartial and objective
• an aptitude for managing a committee
• an ability to facilitate a group toward consensus and decision-making.

The President and CEO (or his or her delegate) is an ex-officio member of the Committee, without voting privileges.

4.1 Appointment Process
A public call for nominations will be issued seeking candidates with the competencies described in section 4.0.

Appointments will be made by the CADTH President and CEO.

4.2 Resignation
A member may resign from office by giving a written resignation to the Chair and CADTH President and CEO; the resignation becomes effective when received by CADTH or at the time specified in the resignation, whichever is later.

4.3 Removal
Notwithstanding anything set out in these terms of reference, the CADTH President and CEO shall have the right to remove a member before the expiry of his or her term.

4.4 Observers
The following organizations may appoint an observer to the Committee, who shall be entitled to receive notices of meetings and meeting materials, and who will be able to attend meetings of the Committee, but who shall not have the right to vote thereat:
• Health Canada
• Institut national d’excellence en santé et en services sociaux–INESSS
• pan-Canadian Pharmaceutical Alliance–pCPA
• CADTH expert committees.

CADTH, in consultation with the Chair, may invite additional observers to attend Committee meetings from time to time.

The Committee shall have the right to exclude observers from any meeting held in camera, either in whole or in part.
5.0 TERM OF OFFICE
Members of the Committee, including the Chair, shall normally be appointed for a three-year term, but the term may be once-renewed at the discretion of the CADTH President and CEO.

Any member who has served two (2) consecutive terms of office shall not normally be eligible for reappointment to the Committee until a period of at least one (1) year has elapsed since the end of that member’s second consecutive term in office.

The President and CEO may, however, appoint a member who has served two consecutive terms of office for an additional term for the purpose of that member serving as Chair or if a third term is in the best interests of CADTH.

6.0 MEETINGS
The Committee shall meet a minimum of three (3) times per year, generally by teleconference. Meetings will — for the most part — be two hours’ duration. A longer face-to-face meeting will be held once per year.

6.1 Attendance
Members shall make best efforts to attend all meetings of the Committee. A member who is unable to attend a meeting in person may request permission from the Chair to participate in the meeting via teleconference or other means. Permission will be granted provided all members are in agreement. Alternate representatives are not permitted to attend in place of a member.

6.2 Quorum
A majority (50% plus one) of voting members of the Committee shall constitute a quorum.

6.3 Agenda
Meeting agendas are prepared by CADTH in consultation with the Committee Chair.

6.4 Decision-Making
Participants will be encouraged to express and explore a diversity of perspectives during Committee meetings, in the Committee’s work, and via reports from the Committee.

Decisions of the Committee shall ordinarily be made by a consensus of the members present at the meeting. Should a consensus not be reached, the Chair shall refer the question to be decided by a majority vote of the members. The Chair of the meeting shall not normally vote, except in the event of a tie, in which case the Chair of the meeting may exercise a casting vote. All Committee members will support a Committee decision once it is made.

6.5 Minutes
CADTH staff members will keep a written record of meetings of the Committee. A copy of the minutes will be provided to each member of the Committee.

7.0 CODE OF CONDUCT
All members of the Committee shall comply with the CADTH Code of Conduct.

8.0 CONFLICT OF INTEREST
All members of the Committee shall comply with the CADTH Conflict of Interest Policy. Conflicts of interest shall be declared at the commencement of each meeting.
9.0 REMUNERATION
Members shall be entitled to remuneration in accordance with the CADTH policy on remuneration. Expenses incurred in the course of performing duties as a Committee member are eligible for reimbursement in accordance with the *CADTH Travel Policy*.

10.0 REPORTING
The Committee shall prepare a report for the CADTH Board of Directors at least annually via presentation by its Chair, by verbal and/or written means.

11.0 SECRETARIAT SUPPORT
Secretariat support for the Committee shall be provided by CADTH staff.

12.0 AMENDMENT TO THE TERMS OF REFERENCE
These terms of reference may be amended at any time at the discretion of the CADTH President and CEO.