Quality Improvement & Implementation Science Committee

Terms of Reference

1. Purpose

The purpose of the CSN Quality Improvement and Implementation Science (CSN-QUIS) Committee is the promotion of quality assurance (i.e., achievement of performance indicators) and quality improvement (i.e., ongoing activities to improve care) within all aspects of nephrology practice in Canada.

This includes three broad goals:

- To establish and monitor key nephrology performance indicators (i.e., quality assurance)
- To educate and act as a resource for nephrology healthcare providers on quality improvement methods
- To increase the number of quality improvement initiatives being done in nephrology and spread best practices

2. Frequency of Meetings & Attendance

Full committee meetings will be held every 3-4 months via teleconference, including one face-face meeting per year scheduled around the CSN Annual General Meeting if it coincides with the meeting schedule. (i.e., ~3 total meetings per year).

Committee members should make every effort to attend all meetings and are expected to review material and provide feedback to the Chair/Vice Chair when unable to attend.

Participation in at least 70% of meetings is required, barring extenuating circumstances. Attendance will be monitored by the CSN administration.

3. Governance

A quorum for a meeting is constituted by a simple majority (50% + 1) of the Committee members, present either in person (when applicable) or by teleconference. Decisions can only be made if quorum is met. If the quorum is not met, the meeting may be adjourned and rescheduled.

All members on the Committee are voting members, except administrative staff, ad hoc members and/or guests. Major policy changes require subsequent approval by the CSN Officers.

<u>Voting Procedures:</u>

- Decisions shall be made by a simple majority vote of the members present.
- Each member shall have one vote. In the case of a tie, the Chair shall cast the deciding vote.
- Voting may occur during a meeting, either in person or virtually. **Votes must be cast by members who are present at the meeting in accordance with CSN bylaws. Proxy or absentee voting is not permitted.**

4. Membership & Member Selection

Committee Chair:

The Chair is a member of the CSN Board of Directors, appointed by the President, on recommendation of the previous CSN-QUIS committee Chair and other members of the CSN Officers, for a 4-year term. The Chair may serve for no more than two (2) consecutive terms. On behalf of the CSN-QUIS committee, the Chair will be in close communication with the CSN President and/or other Officers members throughout the year.

Vice-Chair:

The Vice-Chair is appointed by the Chair, on recommendation of the previous CSN-QUIS committee Chair for a 2-year term. The Vice-Chair may serve for no more than three (3) consecutive terms. They may transition to the Chair role at any time during their term, at the discretion of the Chair.

Membership:

A Vice-Chair, the past Chair of the CSN-QUIS Committee, and the President of the CSN will automatically become members.

Other members will include:

- At least four (4) more CSN members from the general membership (one representing pediatric nephrology and at least one from community-based nephrology)
- At least one (1) resident/learner representative
- At least two (2) patient representatives
- At least two (2) non-physician nephrology providers (e.g., nurses, administrators, pharmacists, and allied health)

The term for committee members will be 2-4 years depending on roles and capacity. All members may serve for no more than two (2) consecutive terms, unless a member becomes Chair (at which point two (2) terms as Chair and one (1) as past Chair may be served) or Vice-Chair (after which point two (2) terms as Chair and one (1) as past Chair may be served).

The maximum number of committee members at any one time is 20.

Expressions of interest will be called for to fill missing roles and whenever a vacancy presents. Specific skill sets will be posted to reflect the needs of the committee (including geographic representation), and appropriate candidates appointed by the CN-QUIS Chair and/or President of the CSN. Preference will be given to individuals already active on subcommittees (on recommendation of the Chair /Vice-Chair), as well as those with advanced training in quality improvement and methods.

All members should be CSN members in good standing, except for patient/non-physician providers.

Role	Selection Criteria	Term Limit
Chair	Member of the CSN Board of Directors, appointed by the President, on recommendation of the previous CSN-QUIS Committee Chair and other members of the CSN Officers.	*3 years,* *2 term limit*
Vice-Chair	The Vice-Chair is appointed by the Chair, on recommendation of the previous CSN-QUIS Committee Chair.	*3 years,* *2 term limit*
Past-Chair	After term as Chair, individual will move automatically to Past-Chair role for a 1-year term.	*1 year,* *1 year term*

Role	Selection Criteria	Term Limit
Emeritus Member	In this non-voting advisory role, past chairs will contribute to discussions and committee activities.	*1 year, no term limit*
Member(s)	Proposed by the Chair or solicited from committee membership. Expressions of interest will be called for to fill missing roles and whenever a vacancy presents. A Vice-Chair, the past Chair of the CSN-QUIS Committee, and the President of the CSN will automatically become members.	*2-4 years depending on roles and capacity, 2 consecutive term limit (unless member becomes Chair, at which time they may serve full term as chair).*
Learner	*(Clinical Nephrology or KRESCENT Trainees)* Nephrologist-in-training, either clinical or research training.	*2 years, non-renewable*

5. Responsibilities

a. Chair

The Chair is responsible for the following:

- Chairing all Committee meetings.
- Consult with CSN Administration to draft and distribute meeting agendas and minutes.
- Reporting to the CSN President through sharing of all meeting minutes and documents.
- Preparing progress reports for publication within CSN newsletters as requested by the CSN President.
- Preparing annual report for presentation to the CSN Board of Directors and publication in CJKHD.
- Choosing a member to assist with quality improvement content at the Annual General Meeting and/or CANA meeting; this will include reviewing and judging the quality improvement abstract submissions.
- Ensuring progress on each of the three committee goals.
- Choosing a Vice-Chair, in coordination with the past Chair.
- In coordination with the CSN President and the Past Chair of the CSN-QUIS committee, the Chair will decide if an established indicator or education module requires updating or if a new indicator/module requires development. They will also determine potential quality improvement project areas of focus.
- Choosing members to populate subcommittees, in coordination with the Vice Chair. Individuals will be considered based upon prior quality improvement training and work, topic expertise, and geographic representation. When desirable and feasible, non-CSN members, such as patients and/or non-physicians, may be asked to participate in the subcommittees.

b. Vice-Chair

The Vice-Chair is responsible for the following:

- Performing duties as delegated by Chair.
- Acting as proxy for Chair in their absence.
- Performing all duties of Committee member (see below).

- Supporting the Chair in all committee activities.
- Leading at least one workgroup, including attending all workgroup meetings, when their schedule permits, and staying current on all three (3) workgroup activities.
- Choosing members to populate the subcommittees, in coordination with the Chair.

c. Committee Members

Members are accountable for contributing to the effectiveness of the committee by:

- Reporting to the Chair and Vice-Chair, based on workgroup assignments.
- Disclosing any potential conflicts of interest to the Chair.
- Attending and participating in CN-QUIS teleconferences and face-to-face meetings throughout the year.
- Participating in at least 70% of meetings, barring extenuating circumstances.
- Joining at least one subcommittee (indicators, education, or projects) and participating in at least 50% of its activities.
- Actively participating in all meetings; being open, honest, and transparent; discuss matters respectfully and professionally and being open to other member's ideas and perspectives.
- Completing action items as assigned.

Membership will be reviewed if participation does not meet terms of reference criteria.

Members may be asked by the Chair and/or Vice-Chair to assist with the following:

Indicator subcommittee:

- Development/curation of national quality indicator scorecard, in consultation with CORR
- Review of performance indicators for improvement progress, stratified by province
- Knowledge translation activities to support the quality indicator work

Education subcommittee:

- Quality improvement resources, housed on the CSN website
- CSN webinars, annual general meeting content, and abstract scoring

Project subcommittee:

- Update and maintain CSN quality improvement project repository, with CSN administrative support
- Introduce mentorship system for quality improvement projects (and act as available resource within each province)
- Participation in the nephrology fellow annual quality improvement project

d. CSN Administration

The CSN Administration is responsible for the following:

- Providing administrative support for meeting organization and minute-taking.
- Working closely with the Chair and Vice Chair.

6. Emeritus Committee Member

The Emeritus Committee Member designation is an honorary status granted to former Chairs of the Committee who have demonstrated significant contributions and exemplary service. This role allows for the continued involvement of experienced leaders, providing historical knowledge, mentorship, and strategic guidance to current committee activities.

Responsibilities

- Serve as an advisor to the Committee, offering insights based on prior experience and institutional knowledge.
- Participate in committee meetings as requested, providing input on key discussions and decisions without assuming active project or task responsibilities.
- Engage in strategic discussions to support the committee's goals and objectives.

Voting Rights

Emeritus Committee Members are non-voting members of the committee. Their input is valued in deliberations, though their participation in formal votes is limited based on the committee's requirements.

***NOTE**: If an Emeritus individual wishes to have voting rights, approval must be reached by Committee consensus and would apply for the individual's duration on the Committee.*

Meeting Attendance

Emeritus Committee Members are encouraged, though not required, to attend all scheduled committee meetings. Their attendance is at the discretion of the committee Chair and may be requested for meetings where their expertise and historical perspective would be beneficial.

Exclusion from Membership Cap

Emeritus Committee Members are honorary participants and, as such, are not counted within the maximum number of committee members allowed under the TOR. This designation ensures the committee retains sufficient capacity for active roles.

7. Funding

The CSN-QUIS committee has no direct responsibility for fundraising to support its events. The CSN Officers will be responsible for securing funds to allow the CSN-QUIS committee to perform their responsibilities.

8. Approval Date

Approved by the QUIS Committee | 05SEP24