

# **Terms of Reference**

# PURPOSE

The major 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:

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

### MEMBERSHIP

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

The maximum number of committee members at any one time is 20. The term for committee members will be 2-4 years depending on roles and capacity. All members may serve for no more than 2 consecutive terms, unless a member becomes Chair (at which point 2 terms as Chair and one as past Chair may be served) or Vice-Chair (after which point 2 terms as Chair and one as past Chair may be served).

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 (at the recommendation of the Chair and Vice-Chair), as well as those with advanced training in quality improvement and its methods.

# <u>All members should be CSN members in good standing, with the exception of patient and non-physician providers.</u>

# RESPONSIBILITIES

#### Chair:

- The Chair will report to the CSN Officers, through the President.
- The Chair will prepare progress reports for publication within CSN newsletters as requested by the CSN President.
- The Chair will prepare an annual report for presentation to the CSN Board of Directors and publication in CJKHD
- The Chair will choose 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
- The Chair is responsible for ensuring progress on each of the three committee goals
- Together 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.
- Together with the past Chair, the Chair will also choose a Vice-Chair
- Together with the Vice-Chair, the Chair will choose members to populate the subcommittees. 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

# Vice-Chair:

- The Chair is responsible for ensuring progress on each of the three committee goals
- The Vice-Chair will support the Chair in all committee activities
- They will lead at least one workgroup
- They will attend all workgroup meetings, when their schedule permits, and stay current on all 3 workgroup activities
- Together with the Vice-Chair, the Chair will choose members to populate the subcommittees.

#### Members:

- The Members will report to the Chair and Vice-Chair, based on workgroup assignments.
- All Members will be asked to disclose potential conflicts of interest.
- Attend and participate in CN-QUIS teleconferences and face-to-face meetings throughout the year. To maintain a position, it is expected committee members participate in at least 70% of meetings barring extenuating circumstances.
- It is also expected that all committee members will join at least one subcommittee (indicators, education, or projects) and participate in at least 50% of its activities

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

#### FREQUENCY OF MEETINGS

Full committee meetings will be held every 3-4 months via teleconference, including one face-face meeting per year scheduled around the CSN annual meeting (i.e., ~3 total meetings per year). Additional meetings may be called by the Chair and Vice-Chair to achieve sub-committee objectives and deliverables.

# 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.

Last Revisions: September 5<sup>th</sup>, 2024 (Final and Approved)