

Joint Governance Committee GSK Clinical Education Centre



Terms of Reference

Supersedes: ToR GSK CEC Advisory Committee

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Approved by Faculty Board:

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Effective Date:

Mission

The GSK CEC mission is to prepare future and practicing health care providers in medicine, nursing and rehabilitation therapy to meet the health care challenges of an increasingly diverse society.

1. Committee Mandate and Responsibilities

1.1. Mandate

- 1.1.1. The mandate of Joint Governance Committee of the GSK Clinical Education Centre (“Joint Committee”) is to build consensus on the development, establishment and overseeing of activities relating to the operations of the GSK Clinical Education Centre (“GSK CEC”).

1.2. Major Responsibilities

- 1.2.1. Develop and revise, on an ongoing basis, the policies and procedures which support the use and operation of the GSK CEC;
- 1.2.2. Make decisions on GSK CEC capital equipment and facilities ensuring a process for ongoing maintenance and repair and new acquisitions;
- 1.2.3. Interface with the respective schools regarding initiatives and issues ensuring ongoing and appropriate liaison with stakeholders within the FHS;
- 1.2.4. Review and oversee annual operating and capital budgets making recommendations to the FHS for additional funding, when necessary.

2. Leadership and Membership

2.1. Leadership

- 2.1.1. The role of Chair of the Committee will be held by the Vice-Dean Education.
- 2.1.2. Where the Chair is absent for any reason, an Acting Chair may be appointed by the Chair, or in the absence of such an appointment, by the committee members present.

2.2. Membership

- 2.2.1. Faculty members will normally serve a three-year term, renewable once. Student members will normally serve a one-year term.
- 2.2.2. Faculty members will be appointed by their respective schools.
- 2.2.3. Student representatives will be appointed by the Student Executive for each school.
- 2.2.4. All new members will receive these Terms of Reference and will be oriented to the position by the Chair.
- 2.2.5. Members
 - Vice-Dean Education (Chair)
 - Faculty member (clinical) from School of Medicine (1)
 - Faculty from School of Rehabilitation Therapy (1 Occupational Therapy & 1 Physical Therapy)
 - Faculty from School of Nursing (1)
 - Students from School of Medicine (1 UG & 1 PG)
 - Student from School of Rehabilitation Therapy (1 OT & 1 PT)
 - Students from School of Nursing (1 UG & 1 NP)
- 2.2.6. Resources
 - Manager, GSK Clinical Education Centre
 - Volunteer Patient Coordinator
 - Standardized Patient Coordinator
 - Committee Secretary
- 2.2.7. The Chair may invite such guests as are necessary to conduct the meeting.

2.3. Responsibility of Members

- 2.3.1. All members will participate actively in the committee by:
 - Reviewing all pre-circulated material
 - Attending at least 70% of the meetings and electronic votes

- Participating in working groups, as required
- Recognizing the best interests of the Centre and the needs of all the stakeholders
- Communicating committee activities and decisions to their respective school and/or student body

3. Meeting Procedures

3.1. Frequency and Duration of Meetings

- 3.1.1. Meetings will be held at least quarterly (every three months) and otherwise at the call of the Chair.

3.2. Conflict of Interest

- 3.2.1. Members are expected to declare a conflict of interest if their real or perceived personal interests might be seen to influence their ability to assess any matter before the committee objectively. They can do so either by personal declaration at a meeting or in writing to the Chair. They will be excused from any discussions regarding the matter in question. The declaration and absences will be recorded in the minutes.

3.3. Decision-Making

- 3.3.1. Decisions will normally be made by consensus of members present (see appendix A).
- 3.3.2. The Chair will determine when issues require a vote. All committee members will be considered voting members. The Chair will cast the deciding vote in the event of a tie.
- 3.3.3. Quorum will be 50% plus one of all members, either present in person or via teleconference.
- 3.3.4. Meetings may be held in the absence of a quorum, but no decisions will be made.
- 3.3.5. Votes may be conducted electronically, if necessary.

4. Administrative Support & Communication

4.1. Administrative Support

- 4.2. The Secretary will be a member of the staff of the GSK Clinical Education Centre, appointed by the Manager.

4.3. Agenda & Minutes

- 4.3.1. Agendas and minutes of committee meetings are to be distributed to the committee members by the recording secretary.
- 4.3.2. Minutes are normally distributed electronically to all members within one week of meetings.

4.4. Reporting Relationship

- 4.4.1. The committee will produce an annual report of its activities to be submitted to the Faculty Board for the Faculty of Health Sciences.

5. Evaluation

- 5.1. The committee will review its membership, terms of reference, rules and procedures at least every three years, and as necessary. The Chair will report the results of the review to the Faculty Board for the Faculty of Health Sciences.

APPENDIX A

Consensus-Based Decision Making Rules for Building a Consensus

A consensus requires that everyone involved in the decision must agree on the individual points discussed before they become part of the decision. Not every point will meet with everyone's complete approval. Unanimity is not the goal, although it may be reached unintentionally. It is not necessary that everyone is satisfied, but everyone's ideas should be reviewed thoroughly. The goal is for individuals to understand the relevant data, and if need be, accept the logic of differing points of view.

The following rules are helpful in reaching a consensus:

- Avoid arguing over individual ranking or position. Present a position as lucidly as possible, but consider seriously what the other group members are presenting.
- Avoid "win-lose" stalemates. Discard the notion that someone must win and, therefore, someone else must lose. When an impasse occurs, look for the next most acceptable alternative for both parties.
- Avoid trying to change minds only in order to avoid conflict and achieve harmony.
- Withstand the pressure to yield to views that have no basis in logic or the supporting data.
- Avoid majority voting, averaging, bargaining or coin flipping. These techniques do not lead to a consensus. Treat differences of opinion as indicative of an incomplete sharing of information -- so keep probing.
- Keep the attitude that the holding of different views by group members is both natural and healthy. Diversity is a normal state; continuous agreement is not.
- View initial agreement as suspect. Explore the reasons underlying apparent agreement on a decision and make sure that all members understand the implication of the decision and support it willingly.