CLINICAL PRACTICE COMMITTEE TERMS OF REFERENCE

May, 2009

PURPOSE

To develop and promote surgical quality improvement endeavours, practice guidelines and standards in surgical oncology for the province. Committee members will provide expertise and support for projects that assess quality of care in surgical oncology practice, evaluate patient outcomes and quality improvement strategies. The Committee will work closely with the Surgical Tumour Groups and with the Research & Outcomes Evaluation (ROE) Committee to develop minimum datasets for cancer surgery, outcomes templates and clinical practice reporting mechanisms and models.

ROLES AND RESPONSIBILITIES

1. CP Committee

- Understand and promote the ideals and goals of the Surgical Oncology Network (SON).
- Act as a liaison between existing clinical practice groups (i.e. clinical practice guidelines committees supported by Ministry of Health and BCMA) and Surgical Oncology Network.
- Work with Surgical Tumour Groups and Research & Outcomes Evaluation Committee to develop outcomes reporting templates and model/process (including synoptic reporting).
- Work with Surgical Tumour Groups to identify surgical wait times for tumour sites
- In conjunction with the Research & Outcomes Evaluation Committee develop practice audits and quality improvement initiatives relating to surgical oncology.
- Review care maps, clinical practice guidelines, standards and other clinical material related to cancer surgery practice to endorse for BC or to provide a second opinion.
- Provide input and advice into promoting clinical practice initiatives (including educational opportunities and communications strategies).
- Review and recommend clinical standards relating to surgical oncology that are provincial in scope (especially as they relate to hospital or ambulatory practice).
- Regularly review clinical practice documents and send back to Surgical Tumour Group for review.
- Develop mechanisms to monitor adherence to standards and outcomes.

2. CP Chair

- Oversee Clinical Practice Initiatives Committee calling meetings as required, correspondence with Surgical Tumour Sites and other agencies and organizations.
- Provide strategic oversight on issues related to clinical practice.
- Meet regularly with Clinical Practice initiatives Manager.

3. CP Manager

- Work with CP Chair, SON Manager and Program Assistant to schedule meetings and prepare meeting agenda and materials.
- Provide regular updates to CP Chair and Committee members as well as to the Chairs or Surgical Tumour Groups.
- Provide expertise and support to ROE and Continuing Professional Development and Knowledge Transfer Committees as required.
- Liaise with BC Cancer Agency, Health Authorities, Hospitals and Ministry of Health as required to advance initiatives.

MEMBERSHIP

- Four to six surgeons, where possible representing various communities and surgical specialities in BC.
- Surgical Oncology Network Biostatistician.
- Surgical Oncology Network Programmer.
- Specific expertise (e.g. clinical epidemiology, surgical specialties, methodologists, and ethicists), multiple Centres, and external interested parties (e.g. Ministry of Health) will be invited at the discretion of the Chair.

Ex-Officio

• Surgical Tumour Group Chairs

CHAIR

The Chair is appointed by the Council Executive.

LENGTH OF TERM

Committee members will be appointed for an initial term of up to 3 years with the possibility of renewal for 2 years.

SCHEDULE OF MEETINGS

The Clinical Practice Committee will meet three (3) times per year or by call of the Chair as often required. Ex-Officio members will meet annually at the SON Annual Council Meeting and as required for their expertise as a Surgical Tumour Group Chair during the year.

REPORTING

Surgical Oncology Council Executive - The Chair, or designate, will provide a verbal report at each Council Executive meeting. Printed materials will be circulated as required.

Surgical Oncology Council - A written report on Clinical Practice Committee activities will be circulated annually to the Surgical Oncology Council in conjunction with the annual meeting. Updates will be provided as needed for SON newsletter publication.

SUPPORT STAFF

The Program Assistant will provide administrative assistance (e.g. scheduling meetings, recording minutes, update the website). The CP Manager will provide expertise and operational support with projects, including background research and grant application development, outcomes templates and guideline development. The Biostatistician will provide expertise on reporting methodology and data analysis. The Programmer will provide expertise with database development and data integration. The SON Manager will provide administrative oversight and report to the Executive Finance Committee and Council Executive.

TERMS OF REFERENCE APPROVED: May 5th, 2009

CP Committee Membership

- 1. Dr. Noelle Davis, Chair (BCCA & Vancouver General Hospital)
- 2. Dr. Chris Baliski (Kelowna)
- 3. Dr. Nadine Caron (Prince George)
- 4. Dr. John Carr (Nanaimo)
- 5. Dr. Jon Just (Kamloops)
- 6. Dr. Vu Truong (Burnaby)

STG CHAIRS - MEMBERSHIP AT LARGE

- 1. Dr. Chris Baliski, Chair Skin STG (Kelowna General Hospital)
- 2. Dr. Samuel Bugis, Chair Endocrine STG (St. Paul Hospital)
- 3. Dr. Sonia Butterworth, Chair Pediatric STG (BC Children's Hospital)
- 4. Dr. Mark Heywood, Chair Gynecology STG (BCCA UBC Hospital)
- 5. Dr. Greg McGregor, Chair Proximal GI STG (Vancouver General Hospital)
- 6. Dr. Bas Masri, Chair Sarcoma STG (UBC Hospital)
- 7. Dr. Alan So, Chair Urology STG (Vancouver General Hospital)
- 8. Dr. Charles Scudamore, Chair Hepatobiliary STG (Vancouver General Hospital)
- 9. Dr. Manoj Raval, Chair Colorectal STG (St. Paul Hospital)
- 10. Dr. John Yee, Chair Esophageal/Lung STG (Vancouver General Hospital)
- 11. Dr. Brian Toyota Chair Brain STG (Vancouver General Hospital)
- 12. Dr. Laurence Turner Chair, Breast STG (New Westminster)
- 13. Dr. Donald Anderson Chair Head& Neck STG (Coquitlam)