

 <p data-bbox="329 254 578 415">Crohn's and Colitis Canada Crohn et Colite Canada</p>	<p data-bbox="1203 205 1511 233">Administration Manual</p> <p data-bbox="1370 275 1511 302">Policy # 97</p>
<p data-bbox="110 527 716 554">SUBJECT: Scientific & Medical Advisory Council</p>	<p data-bbox="802 527 1110 554">EFFECTIVE: May 1, 2019</p>
<p data-bbox="110 619 760 646">DEVELOPED BY: VP, Research & Patient Programs</p>	<p data-bbox="802 619 1247 646">REVIEWED/REVISED: May 1, 2019</p>
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<p data-bbox="110 804 561 831">ISSUED BY: Chief Executive Officer</p>	<p data-bbox="802 804 1468 831">AUTHORIZING SIGNATURE: Chief Executive Officer</p>

POLICY TYPE: Scientific & Medical Advisory Council (SMAC)

POLICY TITLE: SMAC Terms of Reference

1. Purpose

The purpose of the Scientific & Medical Advisory Council (SMAC) is to provide strategic advice to the CEO of Crohn's and Colitis Canada (CCC), working with the VP of Research and Patient Programs, regarding scientific and medical matters relevant to CCC's mission. SMAC's focus is on broad medical/scientific, policy and program issues and not the detailed management and operations of the CCC; SMAC members may also be asked to provide advice to CCC's Board of Directors and Board of Directors' Research Committee. *SMAC is not a committee of CCC's Board* and, thereby, acts in an advisory capacity without the authority to make decisions nor take action on behalf of CCC.

2. Composition & Membership

The SMAC consists of no fewer than 9 members and no more than 12 members.

SMAC members include:

- The Chair of SMAC who is a well-established researcher and/or healthcare professional with expertise in Crohn's disease and ulcerative colitis;
- The Chair-Elect of SMAC who will succeed the current Chair;
- Past-Chair of SMAC, who is the current Chair's predecessor;

- Vice Chair Academic of SMAC who is well-established researcher in Crohn’s and ulcerative colitis;
- Vice Chair Clinical of SMAC who is a well-established healthcare professional in Crohn’s and ulcerative colitis;
- Individuals with complementary knowledge and skill sets to aid in meeting CCC’s strategic objectives. These knowledge and skill sets are categorized into two tiers based on CCC’s Promise and priority areas identified with CCC’s survey of its constituents and its *2018 Impact of Inflammatory Bowel Disease in Canada* report.
 - First Tier:
 - Diet & nutrition;
 - Pain;
 - Gastroenterologist specialized in treating IBD;
 - Healthcare provider experienced in serving rural communities;
 - Pediatric gastroenterologist specialized in treating IBD;
 - Mental health in IBD;
 - Biomedical research in IBD including immunology, microbiome and genetics;
 - Epidemiology;
 - Clinical research;
 - IBD nurse who is a member of CANIBD;
 - Second Tier:
 - Workplace health;
 - Knowledge mobilization;
 - Models of care;
 - Other allied healthcare professionals (dietician, pharmacist, etc);
- President and CEO of CCC; and
- VP Research & Patient Programs of CCC;

Not foregoing knowledge and skills requirements, membership selection will include gender diversity, geographic representation, adult and pediatric healthcare providers, and career stage scientists whenever possible. All SMAC members shall serve in a personal capacity.

The President & CEO and VP, Research & Patient Programs are non-voting, ex-officio members of SMAC. CCC’s Board of Director’s Research Committee members may attend any meeting of SMAC on an *ad hoc* basis.

3. Appointments & Term

The SMAC Chair and members are appointed by the President and CEO of Crohn’s and Colitis Canada under the advice of the Chair, and Chair-elect or Past Chair. Members are invited to serve an initial term of up to two years and may be reappointed for a second term of up to two years for a maximum of four consecutive years of service. The Past-Chair will sit for a minimum of 1 year and a maximum of two years. The Chair will sit for two years, and then transition into the role of Past-Chair for 1 year. The Chair-Elects will sit 1 year prior to advancing into the role

of Chair. Overall, the cycle from Chair Elect to Chair to Past Chair is a 4-year commitment. Membership and appointments will be reviewed annually or as necessary on an ad hoc basis.

In order to maintain continuity, appointments will be staggered so that *up to* one-third of members will be considered for replacement or re-appointment each year.

- 3.1. **Past Chair:** At the end of their term, the Chair will sit as a member of the SMAC as Past Chair;
- 3.2. **Chair:** Normally, at the end of the Chair's term, the Chair Elect will advance to the role of Chair. In the absence of a Chair Elect, any member of the SMAC may nominate a current member of SMAC for the role of Chair subject to approval of the President and CEO of CCC. The SMAC Chair may be considered for a one-year term, renewable for one year, on the National Board of Directors.
- 3.3. **Chair-Elects:** Any member of SMAC may nominate a current member of SMAC for the role of Chair-Elect. Under the advisement of SMAC members (minus nominees), the President and CEO will have final approval of the appointment of the new Chair-Elects.
- 3.4. **Members:** A general request for applications will be announced to the Canadian IBD research and clinical community to identify new members. Any member of SMAC may also nominate well-established individuals deemed to have knowledge and skill sets complementary to the needs of CCC to become new members of SMAC. Biographies of nominees will be presented to the SMAC for discussion. Final approval will reside with the President & CEO based on the SMAC discussion.

4. Duties and responsibilities of the council

The Scientific and Medical Advisory Council's role is to advise and support Crohn's and Colitis Canada on research, health care and policy pertaining to Crohn's disease and ulcerative colitis (CC) by, specifically, but not exclusively:

Research & Patient Programs

- 4.1. Advise CEO and VP, Research & Patient Programs on best practices for CCC's research activities;
- 4.2. Participating in CCC's grant review process and research activities;
- 4.3. Recommending appropriate members of the Canadian Crohn's and ulcerative colitis research community to serve as the Chair of the grant review panel;
- 4.4. Informing CCC of opportunities for strategic investments in research and knowledge translation that could potentially accelerate finding the cure(s) and/or improving the quality of life of people living with Crohn's disease and/or ulcerative colitis;
- 4.5. Providing input on CCC's patient programs as requested;
- 4.6. Providing input on CCC's Research Plan; and 4.7.
Providing input on timely issues as they arise.

Communications & Stakeholder Relations

- 4.8. Advising CCC of any arising priorities and/or concerns affecting CC patients' health and quality of life;
- 4.9. Acting as a key link between CCC and stakeholder communities by engaging researchers, clinicians, policy makers, partners, stakeholders with an interest in CC research and care to be responsive to the health needs of patients;
- 4.10. Facilitating interactions and communication between CCC and the broader community of researchers, and provincial/territorial ministries and regional health authorities.

5. SMAC Member Expectations

- 5.1. Understand SMAC responsibilities;
- 5.2. Understand CCC's strategic priorities;
- 5.3. Serve as an ambassador and representative of CCC;
- 5.4. Attend meetings on a regular basis and prepare in advance of meeting;
- 5.5. Treat SMAC matters confidentially;
- 5.6. Serve on ad hoc committees, working groups, taskforces, and peer review panels periodically to further the work of CCC; and
- 5.7. Abide by CCC's Confidentiality and Conflict of Interest Policy.

6. Time Requirement and Meeting Procedures

- 6.1. Meetings are held two to three times annually at the call of the SMAC Chair, following consultation with the CEO/VP Research and Patient Programs. There will be one in-person meeting annually. All SMAC members are expected to attend the in-person meeting.
- 6.2. Meetings generally operate through an agreed upon consensus decision-making process;
- 6.3. Meetings are chaired by the SMAC Chair, assisted by the Chair-Elect or Past-Chair and supported by the VP, Research & Patient Programs and other CCC staff (as required).
- 6.4. Guests will be invited to the meetings on an ad hoc basis when needed.

7. Compensation

- 7.1. SMAC members serve in a volunteer capacity;
- 7.2. Travel and other eligible costs are paid by CCC according to its expense reimbursement policy.

8. Revision

The SMAC Terms of Reference shall be reviewed periodically by Management with input by the Chair and Past Chair, and be approved by the CEO.