

ARTICLE SIX

STANDING COMMITTEES

6.01 Committees

Committees shall be appointed as provided by these rules and regulations or as required from time to time by the Board or the President.

The Executive shall appoint the Chair and members of all committees. All standing committee terms of reference shall be approved by the Board and shall be kept on file at the head office.

There shall be the following standing committees: Long-term Planning, Research, Canadian Respiratory Guidelines, Membership and Communications, Education and Professional Development, Clinical Assemblies, and the Pediatric Assembly.

Committee Composition

Membership in committees will be as broad as possible, representing community and academic respirologists, adult and pediatric medicine, both genders, official language groups, and geographic regions. Specific competencies and expertise may be required related to the terms of reference of the committee or Clinical Assembly.

Membership in the CTS is mandatory for participation in all committees with the exception of technical experts, members of other specialty societies or allied health professionals who may be invited by the committee Chair – with the approval of the Executive - to participate for a specific purpose or for the duration of a specific project.

Committee members serve as unpaid volunteers of the Society, however, committee operating costs and any travel required for duly called face-to-face meetings will be covered by the Society whenever possible, according to available funds, and according to the Society's expense guidelines.

Roles and Responsibilities of Committee Members

- i. Commitment to the mission and objects of the Society;
- ii. Fulfil the mandate of the committee as described by the Rules and Regulations and committee Terms of Reference;
- iii. Attend all meetings of the committees of which they are a member;
- iv. Prepare in advance for meetings and come ready to fully participate in discussions;
- v. Comply with the policies and procedures of the Society, including Conflict of Interest, confidentiality, copyright and governance policies;
- vi. Demonstrate loyalty to the Society and respect for the will of the majority by fully supporting properly approved committee decisions;
- vii. Upon request, where possible, assist with advocacy initiatives lead by the Society and/or the Association; and
- viii. Promote membership and member engagement in the Society.

6.08 Pediatric Assembly

Chair: Elected by the Pediatric Assembly.

Representative to the CTS Board: Elected by the Pediatric Assembly, and approved by the CTS Executive, for a three-year term. The Board Representative will usually have served as a member of the Pediatric Assembly Executive.

PA Executive Committee: The Pediatric Assembly shall elect the following officers to serve one (1) year terms in succession on their executive: Secretary, Chair-elect, Chair, and Past-Chair. The Pediatric Assembly representative on the CTS Board of Directors will also be a member of the executive. The executive committee shall meet at least twice a year either in person or by conference call. The executive committee shall also act as a nominating committee for various positions within the Assembly and for representation on various committees of the CTS.

Members: Membership in the Pediatric Assembly shall consist of those persons who are members in good standing of the CTS (MD/PhD) and who have a continuing interest in pediatric respirology. Such members would represent different interests in pediatric respiratory medicine (epidemiology, clinical and basic science, education, clinical trials, etc.) and have as wide geographic representation if possible.

Membership in the CTS is mandatory for participation in the Pediatric Assembly with the following exception:

- Technical experts from other specialty societies or allied health professionals who may be invited by the Chair to participate for a limited period or for the duration of a specific project.

The Pediatric Assembly (PA) shall meet annually at a time and place to be determined by the Pediatric Assembly Executive. One purpose of the annual meeting will be to elect officers of the PA Executive Committee, as required. In addition, nominations will be held as necessary for representatives to serve on the CTS Board of Directors and CTS standing committees (eg. research, clinical trials, education, guidelines, membership).

Terms of Reference: The purpose of the Pediatric Assembly is to promote lung health for children in Canada and improved pediatric patient care. To this end, the Assembly will undertake the following:

- i. To advocate and advise the CTS on issues related to pediatric respiratory medicine and respiratory health;*
- ii. To foster education and continuous professional development by proposing programs, topics and speakers to the Education Committee for scientific meetings, symposia, and the annual Canadian Respiratory Conference;*
- iii. To identify needs and gaps in clinical and basic research for the attention of the Research Committee and the Canadian Respiratory Clinical Research Consortium;*

- iv. To advise the Canadian Respiratory Guidelines Committee on the review and updating of pediatric respiratory guidelines;
- v. *To nominate appropriate individuals as members of CTS standing committees and Clinical Assemblies;*
- vi. To participate in the development of policies, commentaries, and position papers;
- vii. To liaise and coordinate with other national professional groups with similar clinical, professional and academic interests; [Note: All formal collaborations and joint initiatives must be pre-approved by the Executive.]
- viii. To provide medical review of information prepared by The Lung Association for patients and the general public;
- ix. To recommend media spokesperson(s) for the CTS and The Lung Association and respond to media enquiries, as required;
- x. To recognize Canadian contributions to pediatric respirology through the Vic Chernick Award ;
- xi. To submit an annual workplan proposal and bi-annual reports to the CTS Board of Directors; and
- xii. To undertake specific projects and programs with the approval of the CTS Executive and/or Board.