



CADTH pCODR Advisory Committee Terms of Reference

April 2014

INQUIRIES

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1 CADTH pCODR Advisory Committee Purpose

The CADTH pCODR Advisory Committee (PAC) provides strategic advice for pCODR's ongoing development and management.

As of April 1, 2014, pCODR is a program of the Canadian Agency for Drugs and Technologies in Health (CADTH).

2 Principles

The Committee will be guided by the principles for the pCODR process as specified in Appendix A.

3 Mandate

To provide advice on cancer-specific issues to ensure the pCODR meets the needs of the Provincial/Territorial (P/T) governments and cancer agencies.

4 Responsibilities

The responsibilities of the PAC include:

- assisting CADTH with ensuring the pCODR process is transparent, timely, fair, effective, and engages key stakeholders
- providing guidance to CADTH to ensure pCODR's guiding principles are met
- recommending external evaluation of pCODR and timing post transition
- providing strategic advice on pCODR policy issues
- providing advice on future expansion of pCODR's mandate, if required (e.g. new technologies in cancer treatment, review of companion tests)
- assisting CADTH in the selection and prioritization of process improvement initiatives for pCODR
- providing general direction and governance to its working groups, including determining the scope and conditions of delegated responsibility of its working groups in guiding pCODR work
- synthesizing advice and resolving issues identified by its working groups
- communicating with the working groups to support their success

5 Accountability & Reporting

PAC is responsible to and reports to the President and CEO of CADTH.

6 Membership

6.1 Composition

The committee will be comprised of ten P/T representatives and one observer as follows:

- (a) Voting Members:
- There shall be (10) Voting Members representing the participating jurisdiction: six senior level P/T Ministry of Health representatives (as per the funding blocks; one from British Columbia, Alberta, Saskatchewan, Manitoba, Ontario, and one from Atlantic Canada) and four senior level cancer agency representatives (one from British Columbia, one from the Prairie Provinces, one from Ontario, and one from Atlantic Canada).
- (b) Ex-officio Member:
- pCODR's Executive Director shall be an Ex-officio Member of PAC.
- (c) Observers:
- The pERC Chair shall be an observer of PAC meetings.
 - Other observers may be invited to attend PAC meetings as deemed appropriate by the PAC Chair or pCODR Executive Director.

From time to time, the PAC may form subcommittees and/or working groups to fulfill its mandate.

6.2 Appointment/Nomination Process

The Chair and Vice Chair of the PAC will be chosen by the voting members from amongst the ten provincial/territorial representatives.

P/T and cancer agency members will be appointed to the Committee by their P/T jurisdiction/regional group, and observers will be appointed by their organization.

6.3 Term of Appointment

There are no specific limits set on term of membership for members.

6.4 Committee Officers

The officers of the PAC shall be the Chair and Vice-Chair.

The Chair shall:

- preside at all meetings of the PAC.
- be responsible for reporting on the PAC's activities to the President and CEO of CADTH and shall act as the key liaison between PAC and CADTH.
- seek input from CAPCA as required.
- liaise with the Chair of DPAC.
- liaise with the Chair of pERC.

The Vice-Chair shall, in the absence of the Chair, perform the duties and exercise the powers of the Chair.

6.5 Voting Rights

Each Voting Member shall be entitled to one vote on all matters coming before the PAC.

Appointed Observers shall be entitled to attend all PAC meetings but shall not be entitled to vote.

The Ex-officio Members shall be entitled to attend all PAC meetings and shall be entitled to participate in discussion but shall not be entitled to vote.

7 Committee Support

Support will be provided by the pCODR Secretariat.

8 Meetings

The PAC will meet by teleconference or in-person on a bi-monthly basis.

9 Quorum

50 percent + 1 of the voting membership.

10 Decisions

Decisions can only be made if there is quorum. Decisions are made by consensus. Consensus means a majority supported recommendation that dissenters “can live with” without the need to record their dissenting opinions. When consensus cannot be reached a vote will be taken to determine majority opinion and respectfully record dissenting opinions. In the event of a tie the Chair will cast one vote which will be the deciding vote.

11 Confidentiality

It is the responsibility of Committee members to know what information is confidential and to obtain clarification when in doubt. Except as compelled by applicable legal process, a Committee member must, both while having and after ceasing to have that status, treat as confidential all information regarding the policies, internal operations, systems, business or affairs of the Committee and of the pCODR obtained by reason of his or her status as a Committee and not generally available to the public. A Committee member shall not use information obtained as a result of his or her involvement on the Committee for personal benefit. Each Committee member shall avoid activities which may create appearances that he or she has benefited from confidential information received during the course of his or her duties as a Committee member.

12 Conflict of Interest

Committee members must declare any real or perceived conflict of interest at the beginning of each meeting. In situations where any real or perceived conflict of interest arises in the course of the Committee's work, members must declare their conflict and the Chair will determine the extent of the member's participation in committee discussions and/or voting.

13 Reimbursement of Expenses

Travel expenses to attend in-person meetings will be reimbursed in accordance with the CADTH Travel Expense Policy.

Expenses for meetings conducted by teleconference will be the responsibility of pCODR.

14 Terms of Reference

The Terms of Reference for the PAC will be reviewed every year or as required, or at such time as there is a membership change due to the addition or deletion of parties participating in the pCODR process.

APPENDIX A: pCODR Guiding Principles

Governance

A review process with governance structures which are fair, objective, transparent and accountable to patients, payers and the public.

Health System Focus

Cancer treatment drugs are evaluated within a review process and decision making framework that are consistent with those used for drugs for other diseases.

Representation

A review process that is multidisciplinary, cross-jurisdictional and collaborative in nature with appropriate input from key stakeholders and linked to other key national initiatives.

Excellence

A review process that reflects an ongoing commitment to excellence through incorporation of best practices in a spirit of continuous quality improvement.

Evidence-based

A review process with capacity for rigorous and consistent evidence-based clinical and pharmacoeconomic reviews to support evidence-based decision-making.

Ethical Framework

A review process that includes an ethical framework.

Efficient and Effective

A review process that is cost-efficient, effective and streamlined (i.e. reduced duplication) to support timely decision-making.

Evaluation

A review process with capacity for data capture and ongoing evaluation (decision monitoring/ performance measurement) to support continuous process improvements. In addition, capacity for health outcomes and economic impact analysis to support decision-making and planning.