

## **Committee Description/Purpose**

The Advisory Committee on Sleep Medicine Diagnostics oversees the CPSA's accreditation program for imaging facilities; for private facilities as defined in CPSA by-laws and for public facilities through contract with Alberta Health Services. Through the development of evidence based standards and monitoring facility compliance with those standards, the Committee promotes high standards of medical practice in diagnostic facilities.

## **Membership and Tenure**

### **Membership:**

Membership considers expertise, geographic location, urban versus rural and public versus private representation. Members who serve by virtue of their position, serve as long as they fill that position.

All voting members are registered health professionals responsible to their respective professional regulatory body for their competence, their standards of practice and their conduct.

The Chair is selected from the membership and appointed by the Medical Facility Accreditation Committee. In the absence of the Chair, an alternate will be selected from the members present.

It is the responsibility of the Chair to represent the Committee (either in person or virtually) for any appeals of Committee decisions that are made to MFAC.

Membership is comprised of a minimum of 13 voting members and 5 non-voting members.

For voting members, representation includes but is not limited to the following:

- Respirologists with a subspecialty in sleep
- Pediatric Respirologists with a subspecialty in sleep
- Psychiatrist with a subspecialty in sleep
- Physician in family practice/primary care with an interest in sleep medicine
- Non-physician, regulated health professionals, e.g.
  - Respiratory Therapist
  - Dentist practicing in Sleep Medicine
- Representative from CARTA
- Representative from the Alberta Dental Association & College

Non-Voting Members:

- Assessment Coordinators

### **Committee Attendance:**

Committee members who fail to attend three consecutive meetings will be contacted by the Assistant Registrar to discuss their committee membership including potential removal from the committee.

### **Tenure:**

Committee members are appointed by MFAC for the following terms:

Chair – Three year term with the option of a one year extension

Voting members – Five year term with the option of a one year extension

If a Chair resigns from the role after 3 years, they can remain on the committee for the remainder of the regular member term (i.e. resignation after 3 years – can serve remaining 2 years plus option of 1 year extension).

To be considered for the role of Chair, a member is required to have been on the committee for a minimum of 1 year. Current members are provided an opportunity to have their name stand for consideration for this role. At an Advisory Committee meeting, Committee members are presented with the list of potential candidates for chair and requested to vote on their recommended choice. The name of the member with the majority of votes is then forwarded to the Medical Facility Accreditation Committee for its consideration and approval.

## **Roles and Responsibilities**

The Committee considers all issues related to the provision of sleep medicine services that may include, but are not restricted to the following:

1. Develop and maintain evidence based standards/guidelines for sleep medicine practice;
2. Provide advice to MFAC on pending decisions relating to the provision of sleep medicine services;
3. Monitor compliance with CPSA approved standards through on-site assessments for accreditation;
4. Provide education to promote safety and quality improvement initiatives;
5. Facilitate the introduction of new services/technologies;
6. Respond to the needs of stakeholders for improved sleep medicine services in Alberta.

## **Powers and Duties (Accountability)**

The Advisory Committees report to and provide direction to MFAC who is accountable to Council.

For any formal appeals of advisory committee decisions made to MFAC:



It is the role of the advisory committee chair to present the rationale for the advisory committee decision when the appeal is heard at MFAC.

The CPSA retains a copy of the minutes of the meeting for a minimum of 10 years.

## **Meetings**

In the absence of the Chair, an alternate will be selected from the members present.

### **Frequency:**

Meetings are held three (3) times a year and at the request of the Chair. Other additional ad hoc meetings may be called as required.

### **Procedures:**

Meetings are held in-person or virtually, at the discretion of the CPSA / Chair.

### **Decision Making (Quorum):**

General decisions are reached by consensus of the members present. Decisions supported by motions require that a minimum of half of the voting members are in attendance in-person or by audio or video-conference. The Chair is included in the quorum count. The Chair does not vote, except in the event of a tie; the Chair will cast the deciding vote.

### **Records of the Committee:**

Meeting minutes are made available to all Committee members within 20 business days of an Advisory Committee Meeting via the CPSA secure SharePoint site. CPSA Council does not approve the minutes from the Committee meetings, however, if a Council member wishes to see the minutes, the minutes can be provided to them. The Medical Facility Accreditation Committee reports to College Council on its activities after each meeting.

### **Confidentiality:**

All written materials and discussions related to decisions made at the meetings of the Committee are confidential except that information deemed necessary to communicate the decision to stakeholders.

All Committee members are required to sign confidentiality agreements on an annual basis.