

# HEALTH HUMAN RESOURCES ADVISORY COMMITTEE (HHRAC) TERMS OF REFERENCE

#### **MANDATE:**

As part of HealthCare*CAN*'s overall objective and desire to engage more of its members, the Board of Directors has established an advisory committee that focuses on issues related to health human resources (HHR) strategy and planning in Canada and also provides advice with regards to the direction HealthCare*CAN*'s professional division, CHA Learning, should be taking for future leadership and development programs. HHRAC serves in an advisory capacity to both HealthCare*CAN*'s Board of Directors (via HealthCare*CAN*'s CEO) and to CHA Learning.

The advisory committee advances HealthCare *CAN*'s position on health human resources agenda in Canada by identifying, investigating, and discussing issues and proposing actions reinforcing HCC's advocacy role. The Advisory Committee would also support the creation of a national network of "Health Human Resources Executives in Healthcare." The committee will continue to provide counsel on future leadership and development programs based on the health sector's needs.

#### **MEETINGS:**

HHRAC usually meets four times per year. Ideally one or two of these meetings may be in person (as required and when feasible); otherwise, meetings will be conducted virtually.

## **MEMBERSHIP:**

The Health Human Resources Advisory Committee is composed of HealthCareCAN members whose responsibilities are in the areas of strategic human resources leadership from research hospitals/health authorities, academic health sciences centres and other healthcare organizations, with representation, as much as possible, from each province and territory and rural/urban representation. Every HealthCareCAN full member will be eligible to name a representative to HHRAC. In its early phase, the advisory committee will be composed of up to 25 HHR representatives from across Canada, ensuring that all regions, and voices are represented. In a phased approach, the HHR Advisory Committee may be expanded to include additional representatives from across HealthCareCAN's membership. HHRAC membership is limited to appointed representatives.\*

\* If an HHRAC representative should leave their role and join a non-HealthCareCAN organization, the Steering Committee may appoint the representative as a "member in good standing" should they continue to be responsible for strategic human resources. Note: "Members in Good Standing" would not be considered a voting member.

#### **GOALS:**

- To advise HCC on how best to champion a health human resources agenda in Canada that ensures a sufficient supply of well-trained, innovative, and resilient talent capable of meeting the current and future needs of both our health organizations and the Canadian population.
- To advise HCC on how best to advance issues, best practices, research, and collaboration on HHR priorities impacting research hospitals/health authorities, academic health sciences centres and other healthcare organizations.
- To advise HCC on how best to position itself as a strong political voice in Ottawa for research
  hospitals/health authorities, academic health sciences centres and other healthcare organizations that will
  result in more favourable HHR policy and funding/action at the federal level.

- To identify and build strategic alliances in support of furthering the group's mandate.
- To engage HHR interests from all members periodically (e.g., once a year or every other year) in a virtual or in-person forum relevant to a particular HHR strategic issue.

## **RESPONSIBILITIES:**

- The HHRAC will consult with the HealthCareCAN CEO and collaborate with their respective CEO's, HealthCareCAN Board, and staff and partner organizations to identify key issues.
- HHRAC members will represent their organizations and the collective HealthCareCAN membership on the health human resource issues that are identified as priorities.
- The HHRAC will convene by video/web conference and, when possible, travel to Ottawa or other locations for meetings as needed.
- Agendas will be prepared by HHRAC Steering Committee in consultation with the CEO of HealthCare*CAN* and materials will be distributed in advance in a timely manner.
- Sub-committees and working groups may be formed to address specific issues or actions as required. Additional participants may be invited to participate as needed/relevant.

#### STRUCTURE AND GOVERNANCE:

- HHRAC is to be co-chaired by two member representatives.
- HHRAC will be guided by a Steering Committee of up to 7 members from HHRAC.
- HHRAC will provide its advice and recommendations on issues to be presented to the Board via the CEO who designs/sets the agenda for the Board and Board Committee meetings. This should be done with the help of the VP Learning and Development and the two Co-Chairs.
- HCC's VP Learning & Development shall function as liaison between HHRAC, HealthCareCAN Board via HCC
  CEO and other HCC staff and provide support in facilitating meetings, reporting, and other operational
  needs of the Advisory Committee.
- Representatives commit to a three-year term with potential renewal for one additional term.

## **RESOURCES:**

• HealthCare CAN's shall provide staff support to the HHR Advisory Committee and budget as approved by HealthCare CAN's Board of Directors and CEO.

# **DECISION MAKING:**

• Decisions shall be made by consensus.

Revised: June 28, 2022