



MEDICAL ECONOMICS / PHYSICIAN RESOURCES COMMITTEE

TERMS OF REFERENCE

General Guidelines

1. All Committee Chairs and members shall be appointed by the President on behalf of the Board of Directors and shall report to the Board of Directors.
Members of Committees shall be appointed after consultation with the respective Committee Chairs and the officers of the Society.
 - 1.1. All Committee Chairs may appoint non-members of the Society to sit on Committees as required, with approval from the Board.
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 - 2.1. Appointments shall normally be for a 3-year term, subject to annual review. Members may be asked to serve additional 1-year terms.
 - 2.2. The past Chair may serve 1 further year, if required.
 - 2.3. The bilingual nature of the Society should be reflected in Committee membership.
 - 2.4. Committee members should represent the four regions of Canada: Western, Ontario, Quebec and Atlantic, unless otherwise specified.
 - 2.5. Resident members shall be appointed to each Committee by the President when appropriate.
3. The Director of the Head Office or delegate shall serve on Committees as a staff resource.
4. Committee Chairs shall prepare regular short reports highlighting the activities of their committees. These reports shall be submitted to the Board as required and at least once per year. In addition, committee minutes shall be prepared immediately following committee meetings and these will also be forwarded to the Board. The Chair or other members of the Committee may be requested to attend meetings of the Board to present reports in person. Allowances for such attendance shall be paid as outlined in Reimbursement Policy approved by CAS Board October 2007.
5. The Chair of each Committee shall submit a budget to the Treasurer, for Board approval, before any expenditure may be authorized.
6. It is recognized that the functions of the Standing Committees will change from time to time. These guidelines indicate the basic Committee duties. Committees, except where restricted by By-law, are encouraged, with Board approval, to expand their activities and to accept new responsibilities.

· *Rules and Regulations for New CAS Standing Committees (Section B) - approved by CAS Board June 1999;*

· *Subsequent revisions by CAS Executive - approved by CAS Board January 2000;*

· *Rules and Regulations supporting new CAS committee structure approved by members at June 2000 ABM;*

· *Rules and Regulations supporting Committee Structure to be part of all committee Terms of Reference approved by CAS Board June 2009.*



Medical Economics / Physician Resources Committee

1. The CAS Medical Economics / Physician Resources Committee shall be responsible for providing the CAS Board of Directors with information and advice regarding issues which influence the economics of anesthesia practice and anesthesia physician resources, specifically:
 - a) provincial health care plans, Divisional negotiations, fee and payment schedules, and other economic matters;
 - b) monitor and analyse data on anesthesia physician resources and anesthesia trainees available from other sources ;
 - c) developing criteria for forward planning for anesthesia physician requirements;
 - d) liaising with ACUDA, the RCPSC and the Canadian Medical Association and its affiliate societies, as well as other national anesthesia organizations on issues relating to anesthesia physician resources.
2. The CAS Medical Economics / Physician Resources Committee shall consist of:
 - A Chair or Co-Chairs;
 - At least one and up to two representatives from each Division;
 - ACUDA Representative;
 - Specialty Committee Representative;
 - Committee on Anesthesia Care Team Chair or Designate;
 - Resident Member
3. The Committee shall consider reports that relate to anesthesia which are submitted to government or to professional bodies and shall advise the CAS Board of Directors of anticipated economic and resources implications.

Staff liaison: **Randa Fares**