

Terms of Reference
Infectious Diseases Expert Group
Nova Scotia Department of Health & Wellness

Background:

The need for enhanced communication and planning around the prevention and control of infectious/communicable diseases has been identified. Nova Scotia has responded to recommendations for better integration and coordination of health protection functions by introducing integrated Public Health Responsibility Centres, creating a provincial centre for Infection Prevention & Control (IPCNS) and a provincial Public Health Lab Network (PPHLN).

The Infectious Diseases Expert Group (IDEG) is key to this collaborative and integrated approach to prevention, control, and outbreak management of infectious diseases at all levels of the health system. It provides a vehicle for experts to review evidence-based information and advise on the identification, prevention, control and outbreak management of infectious/communicable diseases. This forum also provides links and feedback to other provinces and national groups for addressing emerging issues of concern.

Mandate:

IDEG is an independent advisory committee that will, through the Chief Medical Officer of Health (CMOH), provide evidence based advice on the prevention and control of infectious/communicable diseases in Nova Scotia to the Department of Health and Wellness.

Activities:

1. Provide scientific and best-practice advice and support that will assist decision makers respond to actual and potential infectious/communicable disease-related issues.
2. Bring attention to emerging and re-emerging infectious/communicable diseases - related matters that may affect the health system as a whole, such as CA-MRSA, avian influenza, and pandemic influenza.
3. Cultivate and maintain mutually supportive working relationships with stakeholders/partners, including infectious diseases advisory committees in other provinces that have prevention, management, and control of communicable/infectious diseases as their mandate.
4. Recommend risk assessment, risk management, and risk communication approaches for dealing with infectious/communicable diseases. This may include recommendations for surveillance, development and/or identification of core indicators and audit tools, guidelines and policies.

5. Provide a forum for communication and information sharing relative to infectious/communicable diseases.
6. Provide feedback on approaches taken to control and limit the transmission of communicable/infectious diseases, including emerging infections.
7. Advise on immunization program(s) and issues, considering provincial epidemiological data and priorities.
8. Provide advice and expertise to designated Department of Health and Wellness officials during an infectious/communicable disease-related emergency.
9. Review and advise on proposed changes to existing provincial legislation and regulations related to communicable/infectious diseases.

Membership

Membership will be selected to provide one representative in each of the following areas of expertise:

- Adult Infectious Disease
- Pediatric Infectious Disease
- Laboratory Medicine
- Occupational Health/Occupational Hygiene
- Infection Control
- Vaccines
- Family Practice
- Veterinary Medicine (Provincial Vet)

Ex-Officio (non-voting; not eligible to chair)

- First Nations/Inuit Health
- Medical Officers of Health
- Communicable Disease Prevention and Control Responsibility Centre
Population Health Assessment and Surveillance Responsibility Centre
- Infection Prevention and Control Nova Scotia

The chair will be selected by the membership and will not be employed by the government of Nova Scotia.

External members shall be appointed for a three-year renewable term. More than 50% unexcused absences from regularly scheduled IDEG meetings will result in review of that individual's membership on the committee and may be reason for removal from the Committee.

Individual experts or organizations will be invited as required to address specific content issues.

Frequency of Meetings, Minutes, and Agenda:

Quarterly and as required in times of urgent issues. Teleconferencing will be available for every meeting. The yearly schedule of quarterly meetings will be sent out at the beginning of each January. Meeting minutes will be circulated within one month of the meeting for which they were recorded. A call for agenda items will occur one month prior to each meeting and where possible background documentation should be sent to the secretariat at least two weeks before each meeting.

Meetings are for IDEG members and invited guests. Meeting documents are for IDEG members but are subject to the Nova Scotia government FOIPOP regulations.

Decision Making/Quorum:

By consensus, which implies that debate has taken place, the solution is generally accepted rather than a grudging compromise, and that agreement is deep-rooted enough that it can stand for some time without need to revisit the issue.

Consensus does not mean:

- An unanimous vote
- The result is everyone’s first choice
- Everyone agrees

Therefore, any dissenting opinions will be noted.

50% of members plus the Chair shall represent a quorum.

Reporting Relationship:

Reports to the CMOH.

Secretariat:

Administrative support and coordination will be the responsibility of the CMOH.

Evaluation:

IDEG will establish a process for regular review and evaluation of its activities.

Terms of Reference will be reviewed on an annual basis.

REVISIONS:

Created: Robert Strang	Jan. 17th, 2011
Revised:	