



Terms of Reference

Name:

Quality End-of-Life Care Coalition of Canada (QELCCC)

1. Membership

Types of membership:

The structure and/or composition of the membership are dependant on resource and capacity availability. There are three types of membership in the Coalition:

Full membership – This membership is open to any national organization that supports the principle of quality end-of-life care for all Canadians. Full members are eligible to have their involvement in Coalition activities (i.e. face-to-face annual meeting) subsidized. Full members receive all consultative and final product communications. There are no annual membership fees.

Associate membership – This membership is open to any organization that supports the principle of quality end-of-life care for all Canadians but are not a national organization or cannot participate fully in the Coalition’s committee structure. These members’ involvement in Coalition activities will not be subsidized. They will receive all consultative and final product communications. There are no annual membership fees.

Affiliate membership – This membership is open to any organization that supports the principle of quality end-of-life care for all Canadians but is not a national organization or cannot participate fully in the Coalition’s committee structure. These members’ involvement in Coalition activities will not be subsidized. They will receive only final product communications. There are no annual membership fees. Affiliate members may be invited to sign on to selected QELCCC documents, as invited by the Executive Committee.

Coalition members will communicate Coalition decisions and positions to their provincial and/or local constituencies and provide feedback to the Working Group based on consultations with the provincial and/or local constituencies.

Coalition members are free to express their disagreement with a position taken by the members of the Coalition and to opt out of specific initiatives of the Coalition after expressing their position in a clear, respectful way in writing (electronically or by mail).

2. Lapsed Membership

Coalition members are expected to participate in the decision-making and initiatives of the Coalition to the extent of their ability and resources. Should any member group miss three consecutive teleconference meetings or two consecutive annual meetings, their membership will be considered “lapsed” and they will be sent a written warning or dismissal at the discretion of the Coalition Executive Committee.

Should a representative need to be replaced, the member organization will have 90 days to find a suitable candidate to re-join Committee meetings. Should the member organization fail to replace their member within the 90 day period, their membership will be considered “lapsed” and they will be sent a written warning or dismissal at the discretion of the Coalition Executive Committee.

3. Constituency

Through its members, the QELCCC represents all Canadians including: professional and family caregivers; volunteers; health care professionals (nurses, pharmacists, social workers, spiritual advisors etc); Canadians with terminal illnesses, their families and other Canadians with an interest in quality end-of-life care.

4. Mandate of the Coalition

The Coalition's primary mandate is to act as an advocate for quality end-of-life care for all Canadians.

To accomplish this mandate, the Coalition may:

- Act on behalf of member groups in consultations with the federal government, other levels of government, and other organizations on the provision of quality end-of-life care including, but not restricted to, implementing the recommendations of the June 2000 Senate report *Quality End-of-Life Care: The Right of Every Canadian*.

- Gather information from members for the purpose of preparing briefs, discussion papers and position documents for advocacy and consultation.

- Disseminate information to members

- Consult with members on major policy directions and opportunities.

- Contribute to public education and raising public awareness about end-of-life issues.

- Contribute to other educational initiatives as needs are identified.

- Act as an information clearinghouse on end-of-life issues within the bounds of its resources.

- Communicate positions and news about end-of-life issues to the media

- Conduct research on end-of-life care issues as resources permit and disseminate the results of its research to members.

Nothing within this mandate restricts the freedom of any member organization from conducting its own advocacy and research activity on end-of-life care issues.

5. Functioning as a Coalition

The Coalition members will work in one of its committees. Each of the committees will designate one member to sit on the Executive Committee. This committee representative will bring information about the work of that committee to the other committees via the executive. This information will inform all committees' work.

The Coalition has agreed that the Canadian Hospice Palliative Care Association will take the lead in supporting the work of the Coalition and the working committees, including drafting proposals and bringing projects to the Coalition for approval and input as well as implementation of Coalition projects.

6. Communication and Meetings

- a. The committees will meet once or twice annually by teleconference (and as needed, at the call of the Chair) and then will communicate via email.
- b. The Executive will meet when possible by teleconference. At other times, communication will be done via e-mail, fax and other efficient and affordable means.
- c. If funds are available, face-to-face meetings can be held.
- d. Meetings will be accessible for persons with disabilities.
- e. QELCCC members may not use the QELCCC member contact information for self-promotional communications.

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