



## **Canadian Society of Palliative Care Physicians**

### **Terms of Reference Human Resources Working Group March 2021**

#### **Background**

In December 2018, Health Canada released a national Framework on Palliative Care in Canada. A federal Action Plan on Palliative Care followed in 2019. These serve as a blueprint to help shape planning, decision making and organizing change related to hospice palliative care in Canada.

All physicians require appropriate training and education to achieve the necessary competencies to care for patients with palliative care needs. Some physicians provide primary palliative care; others serve as palliative care specialists and consultants for more complex issues. Increasing the capacity and preparedness of all physicians to deliver palliative care will help improve the care for Canadians facing life-threatening illnesses.

Presently, there is no reliable data that captures the number of physicians who provide palliative care either as primary care providers or those who practice at the consultant level. Recognition of credentialing standards for specialist palliative care is needed to be able to determine the current and future workforce needs of Canadians for specialist palliative care physicians in order to meet the aims laid out in the Framework on Palliative Care, including the number of residency positions needed for training specialists.

#### **Purpose**

Support the CSPCP Board with physician human resource planning for palliative care in Canada.

#### **Role:**

Support the CSPCP Board to:

1. Advocate for the adoption of the credentialing standards for specialist palliative care physicians in all provinces and territories.
2. Promote strategies for appropriate remuneration for physicians providing consultant level palliative care in Canada, including speciality billing codes, which would also facilitate data collection and evaluation.
3. Develop recommendations to the Colleges of Family Physicians of Canada and the Royal College of Physicians and Surgeons regarding the number of residency programs and residency positions required in the one-year CAC program in palliative care and the two-year subspecialty program in Palliative Medicine, respectively.
4. Provide recommendations to the Intercollegiate Task Force on palliative care training.

*Approved by CSPCP Board of Directors Feb 9, 2021*

Tasks may include:

1. Gathering information from different jurisdictions
2. Sharing perspectives
3. Identifying key stakeholders
4. Advising on steps to translate the mandate into real-life hiring practices
5. Drafting and reviewing relevant documents
6. Communicating with provincial and national stakeholders if required
7. Developing a framework for short term, medium term, and long-term physician HR planning for palliative care, as credentials gradually roll out
8. Other tasks pertinent to the role (TBD as the committee's work unfolds).

Note:

- Final documents are subject to review, approval and release by the CSPCP Board.

## **Chair**

The Working Group is co-chaired by two CSPCP members appointed by the CSPCP Board. At least one of the co-chairs must be a member of the Board. Inaugural Co-Chairs will be Drs. Leonie Herx and Dr. Ebru Kaya.

## **Working Group Members**

Two appointed Working Group Co-Chairs, plus six to ten CSPCP members in good standing who have submitted an Application to Participate, and have been selected by the Executive Board of the CSPCP.

Preference will be given to members who are working as palliative care consultants and who have experience in at least one aspect of human resource planning or remuneration. The working group will include:

- Members with experience in education, including but not limited to current or recent experience as a Program Director
- Members with HR planning and fulfillment experience
- Members with experience negotiating billing codes and provincial Alternative Funding Models
- Mix of members with:
  - CAC in palliative care from the College of Family Physicians of Canada; and
  - Subspecialty in Palliative Medicine from the Royal College of Physicians and Surgeons of Canada

## **National College Liaisons**

The College of Family Physicians of Canada and the Royal College of Physicians and Surgeons of Canada will be invited to appoint liaisons to the Working Group. The designated liaisons will provide input and will help collect and/or disseminate information within their respective organizations.

## **Term**

The standard term is 3 years. The term may be increased or decreased by up to one year for succession purposes, if applicable. Changes to term length are subject to approval by the Working Group.

## **Remuneration**

No remuneration, as per the [CSPCP Policies Pertaining to Committees](#).

## **Reporting Structure**

The HR Working Group reports to the Board via the co-chairs.

## **Time Commitment**

- One-hour teleconferences every two months
- 2-4 hours of additional work per month

## **Administrative Support**

- Meeting set-up and minutes
- Use of administrative tools (e.g., Zoom, Survey Monkey)
- Project management if required (drafting documents, collating information, following up on actions)