



NATIONAL ADVISORY COMMITTEE ON BLOOD AND BLOOD PRODUCTS

Terms of Reference

The National Advisory Committee on Blood and Blood Products (NAC) is an interprovincial medical and technical advisory body to the Provincial and Territorial (PT) Health Ministries through the Provincial and Territorial Blood Liaison Committee (PTBLC), and to Canadian Blood Services (CBS) as the national blood supplier for all provinces (except Québec). NAC provides professional leadership in assisting, identifying, designing, and implementing cost-effective blood and blood product utilization management initiatives for the optimization of patient care throughout Canada. In its role as an advisory body, NAC takes direction from and reports to the CBS-PTBLC.

Every two years, one province assumes the role of lead jurisdiction on behalf of corporate members of CBS (PT Ministers of Health) in matters related to the National Blood File. In this role, the Lead Province is responsible for the secretariat services for the National Blood File during its two-year term.

The organizational structure provides guidance on NAC's relationship with CBS and PTBLC and is outlined in Appendix A of this document.

1.0 MANDATE

NAC shall be responsible for executing initiatives on the NAC Work Plan as approved by the PT Ministries of Health (except Québec) and CBS. To this end, NAC shall:

- 1.1 Provide advice on matters pertaining to the blood supply, including the implementation of new blood components and products in the CBS formulary and those directly affecting the practice of transfusion medicine in hospitals;
- 1.2 Develop and provide information about blood and blood product utilization, and utilization management efforts;
- 1.3 Develop and/or endorse guidelines and recommendations for blood component and blood product use;
- 1.4 Identify opportunities for optimization of transfusion medicine practices and processes including safety and appropriateness in the blood system;
- 1.5 Provide leadership on a jurisdictional level in the identification, design, and implementation of blood utilization management initiatives for the optimization of patient care; and
- 1.6 Provide input into the CBS Request for Proposals and introduction of new products/treatments into the CBS formulary.



2.0 MEMBERSHIP

CBS-PTBLC shall appoint members to NAC as follows:

2.1 Voting Members:

Each PT may appoint up to two members from their jurisdiction (permitted one combined vote per jurisdiction represented) who meet the following criteria:

- a. A health care professional with expertise in transfusion medicine or in blood utilization management; and/or,
- b. Ministry of Health personnel with primary responsibility for blood resource management.
 - CBS shall appoint up to four members who have medical, scientific and/or other subject matter expertise related to blood and blood products and the work of NAC (permitted a maximum of two votes).

2.2 Non-Voting Members:

- The co-chairpersons of the CBS-PTBLC and any member's delegate (in case the member is not able to attend the NAC meeting); and,
- Québec CCNMT representative.

2.3 Ad Hoc Members:

- Upon approval of NAC Chair or Subcommittee/Working Group Chair, NAC may invite additional experts to meetings or subcommittee/working group meetings on an ad hoc basis, to provide expertise on the subject matter being discussed.
- Upon approval of NAC Chair and/or Subcommittee/Working Group Chair, NAC may invite guests to the meeting, either as participants or observers (such as trainees). Guests will not be provided access to the controlled documents associated with the meeting except the agenda.

2.4 Chair, Vice-Chair and Past-Chair Roles:

2.4.1 Appointment and Term:

a. NAC Chair:

- An appointed NAC member, selected by the Lead Province;
- Will serve a two-year term;
- Ideally previously served as the Vice-Chair for a two-year term, and then transition to the Past-Chair role; and,
- May not necessarily count towards a jurisdiction's member limit (see exigencies).

b. Vice-Chair:

- An appointed NAC member, selected by the next Lead Province;
- Will serve a two-year term;
- Plan to transition to the NAC Chair role; and,
- May not necessarily count towards a jurisdiction's member limit (see exigencies).



c. Past-Chair:

- Previously serving as the NAC Chair that will provide additional support to the new Chair, in concert with other relevant NAC members;
- Will serve a one year term; and,
- May not necessarily count towards a jurisdiction's member limit (see exigencies).

2.4.2 Succession: normally, an individual would progress successfully through the roles of Vice-Chair, Chair and Past-Chair over a 5-year period.

2.4.3 Exceptions and exigencies, as listed but not limited to:

a. Disruption of the aforementioned representation and succession process may require certain accommodations. For example:

- Should the incoming or Lead Province be unable to provide a Vice-Chair or Chair nominee, respectively:
 - Provinces may mutually agree to switch positions or timing;
 - An alternative nominee, from another province may be solicited through an expression of interest from existing NAC members;
 - The province "forfeiting" the nomination will have a primary role in the selection of an alternative nominee.
- Should an existing executive member resign, move to another province, have other competing issues, etc., the province responsible for the nomination shall have the first right of refusal for appointment or continuation of a nominee in their current executive position.
- Accommodations should not necessarily count towards a jurisdiction's NAC member limit. That is, for a transitional period, a given province may have three members, one of whom is serving an executive position as a "member at large".

2.4.4 These appointments shall be subject to endorsement by CBS-PTBLC.

2.5 Subcommittees and Working Groups:

In carrying out its function, the NAC may establish subcommittees or working groups to address specific issues, execute the NAC Work Plan and provide representation as requested on matters related to the National Blood File.

- All NAC members are strongly encouraged to actively participate in subcommittee and/or working group activities. Generally, NAC members should participate in at least two to three concurrent subcommittees and/or working groups. Time commitment in such work is variable with meetings as well as work done asynchronously with other members.
- NAC may invite additional experts to serve on subcommittees and/or working groups on an ad hoc basis to provide expertise on the subject matter being discussed.

2.6 NAC and PTBLC Communication:

PTBLC and their appointed NAC member shall develop a mechanism for regular communication, where each PTBLC member shall establish if not already done so.



2.7 Voting Member Term:

Voting Members are expected to serve for a minimum two-year term. NAC member terms from each province should be staggered to ensure continuity of information shared by each province.

3.0 MEETINGS

- 3.1 Meetings shall be chaired by the Chairperson, or in their absence, by the Vice-Chairperson or Past-Chairperson.
- 3.2 Notwithstanding exceptional circumstances, NAC shall meet at least four times annually, with ideally two of these meetings being in-person. One of these meetings is to occur in conjunction with the CBS-PTBLC (Joint Planning Meeting).
- 3.3 Additional teleconferences may be held at the call of the Chairperson or at the call of a standing member upon approval of the Chairperson.
- 3.4 As per the National Plan for Management of Shortages of Labile Blood Components, NAC members are included in the membership of the National Emergency Blood Management Committee (NEBMC).
- 3.5 The Lead Province shall be responsible for recording minutes documenting discussions at NAC meetings. Approved minutes of NAC Meetings shall be circulated to the CBS-PTBLC for information, to ensure clear communication and an opportunity for mutual support between groups.

4.0 PLANNING AND EVALUATION

NAC and CBS-PTBLC shall meet annually in the spring for a joint strategic planning and priority-setting (Joint Planning Meeting).

- 4.1 NAC shall prepare an annual Work Plan for review and approval by the CBS-PTBLC, based on the priorities set by NAC and the CBS-PTBLC.
 - 4.1.1 NAC Work Plan initiative suggestions may be brought forward for CBS-PTBLC consideration and discussion by means of a formal Briefing Note from the NAC Chair.
- 4.2 Jurisdictional implementation of NAC recommendations or guidance statements arising from completion of NAC Work Plan initiatives and evaluation of their effectiveness in optimizing transfusion practices shall be the responsibility of each provincial jurisdiction.

5.0 DECISIONS

- 5.1 Meeting quorum is 50% plus one of voting members attending in person or through teleconference meetings.
- 5.2 Decisions shall be made by consensus among the voting members (whether at meetings or via electronic communication). Decisions that are not supported by a minimum of 80% of the membership will be documented and referred for further stakeholder consultation.



- 5.3 NAC guidelines and/or recommendations documents shall include a section outlining significant or major dissenting opinion(s) of NAC membership or applicable working group members.

6.0 POSITIONS AND DUTIES

6.1 NAC Coordinator:

The PT Collaborative Initiatives Fund (CIF), which is funded by the PTs, includes the NAC Coordinator to support the work of NAC. The NAC Coordinator shall:

- 6.1.1 Be appointed by and report to the Lead Province and NAC Chair;
 - a. Funding for the NAC coordinator shall be for 27 months total, to allow for transition between lead provinces, with three months allocated before the lead transition.
- 6.1.2 Maintain the NAC Work Plan document, in collaboration with the NAC Chair;
- 6.1.3 Provide policy analysis and support on issues identified in the NAC Work Plan;
- 6.1.4 Develop and distribute briefings and communications to the CBS-PTBLC and NAC;
- 6.1.5 Provide financial updates to the NAC chair;
- 6.1.6 Assist in the development of the NAC Work Plan;
- 6.1.7 Establish, promote, and support communications with CBS, the Canadian Agency for Drugs and Technologies in Health, and other research groups;
- 6.1.8 Provide updates to the NAC website to ensure the material is current and relevant;
- 6.1.9 Provide support to the NAC chair in scheduling meetings and maintaining NAC documents; and
- 6.1.10 Provide support to NAC subcommittees and/or working groups including scheduling meetings, taking minutes and follow up.

6.2 NAC Chair: See Appendix B for detailed position description.

6.3 NAC Members: In addition to providing advice and professional leadership within the NAC, its members are expected to serve as champions and representatives within their own jurisdictions for blood utilization management initiatives.

6.4 PT Ministries of Health:

- 6.4.1 The Lead Province manages and oversees the NAC budget. The NAC budget is part of the CIF and will support/fund the following:
- The role of the NAC Coordinator as above;
 - Meeting logistics including space, audio visual requirements and hospitality for all NAC members and guests attending;
 - Meeting attendance by the lead jurisdiction secretariat including the Coordinator;
 - Meeting attendance of the NAC Chair and one additional member from the Lead Province;



- Meeting attendance of one NAC member from each province (other than the Lead Province);
- NAC website management and periodic maintenance;
- A secure platform for NAC documents, minutes, and meeting materials; and
- Support for priority initiatives as budget allows.

6.4.2 PTs who appoint more than one NAC member shall provide funding for expenses related to travel and accommodation for the additional member to attend NAC meetings (excluding the Lead Province, as described above).

- Any meals provided in the duration of the meeting will be covered by the CIF, all other meals are the responsibility of the PT.

6.4.3 PTs shall champion support within their jurisdictions for appointed members to fulfill NAC duties.

6.4.4 Ensure that resources are allocated and used in a manner which meets or exceeds the goals and objectives of the NAC.

7.0 CONFLICTS OF INTEREST AND CONFIDENTIALITY

7.1 Any NAC member or subcommittee or working group member that has an interest that is or could be seen by a reasonable third party to be a conflict between the NAC members' professional interest and the issue that is before NAC must declare such a conflict to the NAC Chair. If the subcommittee Chair is or may be in a conflict of interest, that conflict must be declared to the subcommittee.

7.2 Members and their delegates must complete a Disclosure of Potential Conflict of Interest form (see Appendix C) on an annual basis and update that form as appropriate. Non-NAC experts invited to participate in subcommittees and/or working groups must complete a Disclosure of Potential Conflict of Interest form (see Appendix C) on an annual basis while the subcommittee is active.

7.3 The Committee may, at times, be privy to information that shall remain confidential to the Committee members and shall not be communicated beyond the Committee.

8.0 TERMS OF REFERENCE REVISION

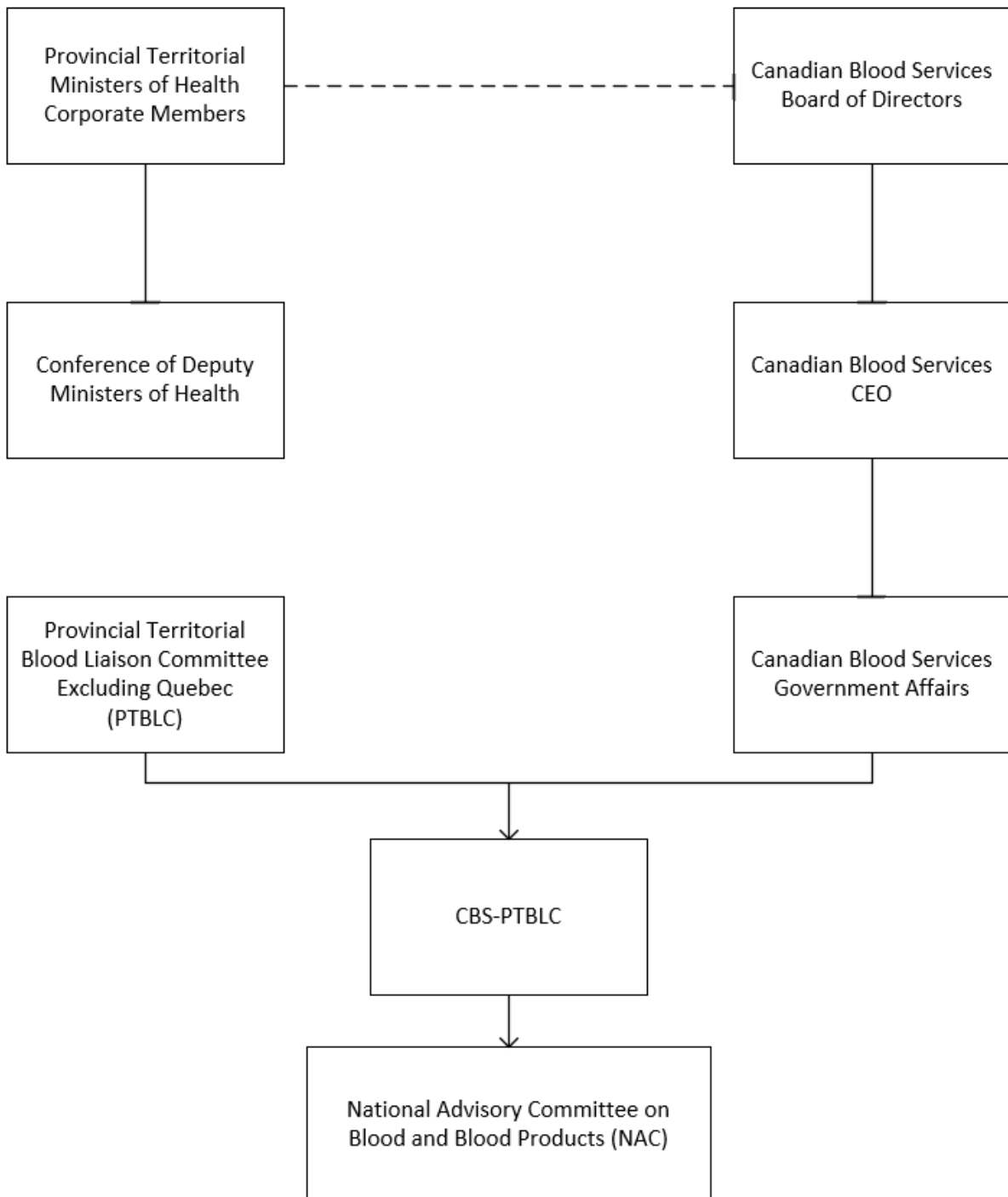
The Terms of Reference will be reviewed, at minimum, every 2 years with the change of lead province on the blood file.

This Terms of Reference has been reviewed by the Lead Province, PTBLC, NAC, and CBS in the 2024-25 year, endorsed by NAC as of September 20, 2024, approved by CBS as of September 24, 2024, and PTBLC as of September 27, 2024.



APPENDIX A

NAC Functional Structure Chart





APPENDIX B

NAC Chair Job Description

POSITION FUNCTION

The Chair of the National Advisory Committee on Blood and Blood Products (NAC) is responsible for the successful leadership and management of the NAC according to the strategic direction endorsed by the Canadian Blood Services-Provincial/Territorial Blood Liaison Committee.

ORGANIZATION SUMMARY

The NAC provides medical and technical advice on the utilization management of blood and blood products to the provincial and territorial (PT) Ministers of Health and Canadian Blood Services (CBS). In its role as an advisory body, NAC takes direction from and reports to the Canadian Blood Services- Provincial/Territorial Blood Liaison Committee (CBS-PTBLC). Please refer to Section 1.0 of this document for a description of the NAC Mandate.

The NAC Chair is an appointed NAC member whom, unless under unique circumstances, previously served as the NAC-Vice Chair. The Chair will serve a two-year term in this position and upon completion will transition to the Past-Chair role for a period of one year to provide guidance and support for the new Chair in concert with other relevant members. These appointments shall be subject to endorsement by the CBS-PTBLC, and the terms may be extended by agreement of the NAC, subject to endorsement by the CBS-PTBLC.

The NAC Chair shall be supported by the NAC Coordinator. (See Section 6.1).

POSITION SPECIFICATIONS

Extensive education and professional experience in transfusion.

TIME COMMITMENT AND COMPENSATION

Time commitment of 0.2 FTE.

Compensation to be in accordance with the rate or arrangement determined between the prospective Chair and Lead Province, or direct compensation and/or time off regular clinical/administrative duties as directed by the prospective Chair (and their respective department/service).

Occasional travel within Canada required, to be additionally reimbursed.

PRIMARY DUTIES AND RESPONSIBILITIES

Executive Leadership

- Ensure the membership of NAC is diverse and has representation from all jurisdictions.



- Develop and maintain an effective relationship with the lead Province through the lead PT blood representative and PT representative on NAC.
- Coordinate the development of an annual work plan for review and approval by the CBS-PTBLC.
- Coordinate the development, implementation and evaluation of strategic and operational plans for the NAC.
- Maintain effective priority setting with regards to NAC initiatives.
- Conduct effective NAC meetings and facilitate consistent participation of NAC members.
 - Facilitate identifying NAC members to serve on NAC subcommittees and other national committees as agreed to by NAC.
 - Actively support the work of NAC subcommittees.
 - Support contributions to the professional literature through publications.
 - Support the administration of operational and program processes of the CBS-PTBLC and Lead Province.
 - Represent NAC, as required at appropriate Regional, National and International functions.

Program Planning and Management

Four broad work plan priorities were identified in Spring 2007. With future strategic developments, these may be revised as necessary.

1. Systematic Development and implementation of Recommendations
 - Ensure the development of a consistent framework for the systematic development and dissemination of recommendations.
 - Ensure the development of evidence-based criteria and/or practice guidelines in conjunction with blood transfusion services and medical staff.
 - Ensure the development of strategies for the promotion, implementation and review of practice guidelines.
 - Identify opportunities for collaboration with other international transfusion medicine organizations and relevant stakeholder groups.
2. Benchmarking Capability to Enhance Utilization Performance
 - Facilitate the development of a process for identifying priority areas for benchmarking.
 - Facilitate the identification of existing utilization databases in Canada.
 - Facilitate the development of a process for collaboration between provincial blood offices/programs and sharing of data.
 - Facilitate the development of a process for standardizing requests for blood and blood products.
3. Identification of Patient Safety Issues and Recommendations to PTs
 - Facilitate the development of a process for identifying areas of safety concerns.
 - Facilitate the presentation of patient safety issues and recommendations to the CBS-PTBLC.

Human Resources Planning and Management

- Actively participate in the recruitment of the NAC Coordinator.



- Participate in the training, supervision and performance evaluation to the NAC Coordinator.
- Continue to enhance the relationship among NAC members through regular operations meetings educational activities.

Stakeholder Relations

- Ensure the development and maintenance of working relationships with National/Provincial transfusion medicine stakeholders, corporations, organizations, researchers, foundations, health authorities, volunteer/community groups and agencies as valuable resources for the development, promotion and success of the NAC.
- Develop and maintain communication with and provide support to jurisdictional health care facilities.

KEY RELATIONSHIPS

- CBS and Provincial/Territorial Blood Representatives.
- Provincial/Territorial Blood Coordinating Programs.
- Respective Department of Health.
- Jurisdictional health care facilities.
- Professional medical associations/organizations and licensing bodies.
- Consumer/patient organizations.
- Public Health Agency of Canada.



APPENDIX C

Disclosure of Potential Conflict of Interest for Participants in the National Advisory Committee on Blood and Blood Products

The attached disclosure declaration is designed to allow participants in the National Advisory Committee on Blood and Blood Products (NAC) to disclose any real or apparent conflict(s) of interest.

A conflict of interest is defined as a set of conditions in which professional judgement concerning a primary interest may be influenced by a secondary interest (such as financial gain).

Many physicians are confident that competing interests do not influence their judgement and therefore choose not to declare them. However, secondary interests can lead to sub-conscious bias. As this committee covers a broad range of topics in blood transfusion, it is inevitable that many participants will have something to declare.

The intent of this policy is not to prevent any NAC member with a potential conflict of interest from participating fully in the committee. It is intended primarily to assure that any potential conflict should be identified openly so that individuals may form their own judgments to determine whether outside interests may reflect a possible bias.

Please complete, sign and email the attached form to the NAC Coordinator whose information can be found below (even if you have no competing interests).

Kendra Stuart
NAC Coordinator
Email: Kendra.Stuart@gov.bc.ca



Disclosure of Potential Conflict of Interest for Participants in the National Advisory Committee on Blood and Blood Products

Please complete either part A or part B. Please print.

Name: _____

A. _____ I do not have/have not had any financial interest/arrangement or affiliation within the past year with one or more organizations that could be perceived as a real or apparent conflict of interest of the National Advisory Committee on Blood and Blood Products.

OR

B. _____ I have/had financial interest/arrangement or affiliation within the past year with one or more organizations that could be perceived as a real or apparent conflict of interest of this National Advisory Committee on Blood and Blood Products.

Please specify below:

AFFILIATION/FINANCIAL INTEREST	NAME OF ORGANIZATION(S)
Grant/Research (PI or co-investigator)	
Consultant/Honoraria	
Stock Shareholder	
Other Financial/Material Support	
Other	

Signature: _____

Date: _____

Please return the completed form to:

Kendra Stuart
NAC Coordinator
Email: Kendra.Stuart@gov.bc.ca



Disclosure of Potential Conflict of Interest for Participants in the National Advisory Committee on Blood and Blood Products Subcommittees

The attached disclosure declaration is designed to allow participants in the National Advisory Committee on Blood and Blood Products (NAC) and respective subcommittees to disclose any real or apparent conflict(s) of interest.

A conflict of interest is defined as a set of conditions in which professional judgement concerning a primary interest may be influenced by a secondary interest (such as financial gain).

Many physicians are confident that competing interests do not influence their judgement and therefore choose not to declare them. However, secondary interests can lead to sub-conscious bias. As this committee covers a broad range of topics in blood transfusion, it is inevitable that many participants will have something to declare.

The intent of this policy is not to prevent any NAC subcommittee member with a potential conflict of interest from participating fully in the committee. It is intended primarily to assure that any potential conflict should be identified openly so that individuals may form their own judgments to determine whether outside interests may reflect a possible bias.

Please complete, sign and email the attached form to the NAC Coordinator whose information is found below (even if you have no competing interests).

Kendra Stuart

NAC Coordinator

Email: Kendra.Stuart@gov.bc.ca



Disclosure of Potential Conflict of Interest for Participants in the National Advisory Committee on Blood and Blood Products Subcommittees

Please complete either part A or part B. Please print.

Name: _____

A. _____ I do not have/have not had any financial interest/arrangement or affiliation within the past year with one or more organizations that could be perceived as a real or apparent conflict of interest of the National Advisory Committee on Blood and Blood Products and respective subcommittee(s).

OR

B. _____ I have/had financial interest/arrangement or affiliation within the past year with one or more organizations that could be perceived as a real or apparent conflict of interest of this National Advisory Committee on Blood and Blood Products and respective subcommittee(s).

Please specify below:

AFFILIATION/FINANCIAL INTEREST	NAME OF ORGANIZATION(S)
Grant/Research (PI or co-investigator)	
Consultant/Honoraria	
Stock Shareholder	
Other Financial/Material Support	
Other	

Signature: _____

Date: _____

Please return the completed form to:

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NAC Coordinator
Email: Kendra.Stuart@gov.bc.ca