

PROMIS Executive Steering Committee

Terms of Reference

Category	Description
Purpose	To serve as champions, advisors, provincial consensus builders, endorsers, and conflict resolvers, to ensure PROMIS is a robust integrated registry and clinical information system for kidney disease and transplant patients.
Guiding Principles	<ul style="list-style-type: none"> • Focus on patient safety and better patient care • Legitimacy through participation and consensus • Strategic view • Responsiveness, effectiveness and efficiency • Accountability • Transparency
Responsibilities	<ul style="list-style-type: none"> • Develop a provincial and cross-program consensus on the approval of the following deliverables (as proposed by the PROMIS team): <ul style="list-style-type: none"> ○ PROMIS Application Roadmap (multi-year plan) ○ Emerging PROMIS Development priorities, including prioritizing against available resources the development of: <ul style="list-style-type: none"> ▪ Reporting functions ▪ Enhancements ▪ Development of new modules ▪ Interfaces ○ Guiding Principles for operational decision making <ul style="list-style-type: none"> ▪ E.g. Principles for Application Vision development and maintenance; for project scoring and prioritization; for engaging stakeholders • Provides feedback on PROMIS application functions from a provincial process and implementation perspective • Provides guidance, direction and advice where necessary PROMIS team in order: <ul style="list-style-type: none"> ○ Resolve escalations that cannot be solved at the program advisory/committee/project team level ○ Provide input to Application roadmap plans (multi-year plans) • Recognizing the importance of integration with health authority EMRs and other systems, in order to support best patient care and information access, improve data quality & completeness and improved operational efficiency, advocates for partner support of identified priority integration activities. • Fosters interaction and ensures clear communication with clinicians, researchers, administrators and strategic and operational clinical networks • Understands at conceptual level the importance of and provides guidance and oversight on compliance for privacy and security obligations (as defined by applicable laws, regulations and PROMIS PIAs and STRAs) and information management standards

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	<p>**Not responsible for allocation of funding. All funding requests to follow PHSA budget allocation processes and formal delegation of financial authority.</p>																																				
<p>Accountabilities</p>	<p>Decisions will be made by consensus, defined as the willingness among all members to support a decision once it is made in the best interest of the provincial community of PROMIS stakeholders. Consensus does not mean all members necessarily believe in the chosen decision as the single best alternative. Rather, all members feel that their position has been expressed, heard and understood. Input of all members will be sought and incorporated to the greatest extent possible.</p> <p>Collaborating within a provincial community of PROMIS users while representing their discipline, program, or committee (as appropriate).</p> <p>Being an active and visible advocate for and communicator of PROMIS ESC committee decisions to other leaders in their discipline, program, and geographic area, and committees (as appropriate).</p>																																				
<p>Composition</p>	<p>Membership should be limited as much as possible to keep the group to a manageable size, while still ensuring a balance of medical and operational input from the core programs served by PROMIS. Membership includes individuals who bring a PROMIS user perspective.</p> <p>Members are responsible for consulting with group they represent.</p> <p>Guest members may be invited at the discretion of the chairs to address specific needs affecting PROMIS modules.</p> <p>Terms: 3 years renewable x 1 for Certain Roles (or by consensus)</p> <p><i>Proposed Members:</i></p> <table border="1" data-bbox="402 1329 1503 1877"> <thead> <tr> <th>Name</th> <th>Representation</th> <th>Role</th> </tr> </thead> <tbody> <tr> <td>Dr. Adeera Levin</td> <td>Executive Leader</td> <td>Renal Executive Sponsor</td> </tr> <tr> <td>Eric Lun</td> <td>Executive Leader</td> <td>Transplant Executive Sponsor</td> </tr> <tr> <td>Dr. Gary Nussbaumer</td> <td>Medical</td> <td>PROMIS Chief Medical Informatics Officer</td> </tr> <tr> <td>Dr. Jag Gill</td> <td>Medical</td> <td>Transplant - Renal</td> </tr> <tr> <td>TBD</td> <td>Medical</td> <td>Transplant – Extra-Renal Uses PROMIS / ambulatory</td> </tr> <tr> <td>Dr. Mike Bevilacqua</td> <td>Medical</td> <td>Renal - Medical</td> </tr> <tr> <td>Ed Ferre</td> <td>Operational</td> <td>Transplant - Admin/Operations</td> </tr> <tr> <td>Sherri Kensall</td> <td>Administrative Leader as appointed by Renal Administrator’s Group</td> <td>Renal - Admin/Operations</td> </tr> <tr> <td>Parvind Grewal</td> <td>Operational</td> <td>Transplant – Informatics</td> </tr> <tr> <td>Dr. John Antonsen</td> <td>BCR Sr. Medical Leader</td> <td>Co-Chair</td> </tr> <tr> <td>Karin Jackson</td> <td>PROMIS</td> <td>Co-Chair</td> </tr> </tbody> </table>	Name	Representation	Role	Dr. Adeera Levin	Executive Leader	Renal Executive Sponsor	Eric Lun	Executive Leader	Transplant Executive Sponsor	Dr. Gary Nussbaumer	Medical	PROMIS Chief Medical Informatics Officer	Dr. Jag Gill	Medical	Transplant - Renal	TBD	Medical	Transplant – Extra-Renal Uses PROMIS / ambulatory	Dr. Mike Bevilacqua	Medical	Renal - Medical	Ed Ferre	Operational	Transplant - Admin/Operations	Sherri Kensall	Administrative Leader as appointed by Renal Administrator’s Group	Renal - Admin/Operations	Parvind Grewal	Operational	Transplant – Informatics	Dr. John Antonsen	BCR Sr. Medical Leader	Co-Chair	Karin Jackson	PROMIS	Co-Chair
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<p>Committee Interactions</p>	<p>There are many PHSA, renal and transplant committees which may inform PROMIS development priorities, including identifying necessary changes, sense of urgency, and scope and supporting the development of functional requirements and change management requirements. These committees may raise items to PROMIS ESC through committee members who are also PROMIS ESC members or through the PROMIS Director of Operations.</p> <p>This includes the Transplant Change Advisory Group*, Provincial Renal Committees, Transplant Services Committee, PHSA Health Informatics Council.</p> <p>*Reports to and is accountable jointly to PROMIS ESC and BCT Operations Director.</p>
<p>Reporting Relationships</p>	<p>Reports to and is accountable to the Executive Director, BC Renal; Executive Director, BC Transplant.</p> <p>The committee sets the above direction and delegates execution of that direction and day-to-day decision-making to the PROMIS Team. The PROMIS Director of Operations is accountable to the committee for the PROMIS Team’s execution of that direction.</p>
<p>Meetings</p>	<ul style="list-style-type: none"> • Semi-annual meetings, additional meetings as required. <ul style="list-style-type: none"> ○ Agenda, identifying decision items for the upcoming meeting, to be circulated a minimum of 2 weeks in advance. • Videoconferences as required, to be called by the chairs. • Ad hoc email communications in between meetings.