Mandate

The mandate of the CMA Patient Voice is to enhance the CMA’s ability to advocate for a healthy population and a vibrant profession.

The duties of the CMA Patient Voice will be to:

• provide an informed patient perspective on the work of the CMA;
• highlight emerging issues that matter to patients and the public; and
• provide insights on patient engagement strategies and campaigns.

CMA Patient Voice support

The CMA’s Vice-President of Patient and Public Advocacy will sponsor the CMA Patient Voice, with the support of CMA staff.

Composition

The CMA Patient Voice will be comprised of 10–12 representatives, plus two appointed CMA Board members: the CMA Board Chair and Vice-Chair. The CMA Patient Voice’s members will provide a range of patient and public perspectives from a broad cross-section of Canadian society, representing communities such as:

• Indigenous communities;
• Francophone communities;
• LGBT communities;
• ethnocultural communities;
• persons with disabilities; and
• other communities (e.g., religious groups).

Demographic considerations (e.g., age, sex, regional representation) will also be kept in mind when selecting participants for the CMA Patient Voice to ensure the broadest possible representation of Canadian society.

Membership

CMA staff will coordinate the selection of CMA Patient Voice participants, in consultation with the CMA’s elected leaders.

Consideration will also be given as the CMA Patient Voice matures to ensuring that a mix of experienced and new candidates are included.

Membership criteria

• Knowledge, experience as a patient in Canada
• Permanent resident/Canadian Citizen
• Ability to communicate in English or French
• At least 18 years of age
• Ability to attend two in-person meetings a year
• Supportive of the goals of the CMA

Exclusion criteria

• A real or perceived conflict of interest that cannot be accepted by the CMA
• Receipt of funding from government and/or pharmaceutical companies for research and other initiatives such as advocacy campaigns and sponsorships in the past five years

Term and dismissal

CMA Patient Voice participants will commit to a term of one year with the possibility of extending their participation to two additional one-year terms, for a maximum of three years.

If any CMA Patient Voice participant does not participate in two consecutive meetings or subscribe to the Code of Conduct, the CMA may choose to terminate the participant’s participation.

The CMA Patient Voice will be led by a Chair elected by participants of the CMA Patient Voice. The Chair will be a non-physician member of the CMA Patient Voice. The Chair is mandated to develop with CMA staff the CMA Patient Voice meeting agenda and effectively lead the meetings.
**Compensation**

*CMA Patient Voice* members will not be remunerated for their involvement; however, all reasonable expenses related to their work with the *CMA Patient Voice* will be covered as per CMA policy. The CMA will provide financial compensation to the *CMA Patient Voice* participants for the logistical costs they incur to participate such as travel, accommodations, meals, and elder and child care costs. Unusual requests, such as kennel costs for pets that are part of a participant’s medical therapy, will also be considered on a case-by-case basis for possible remuneration.

**Conflict of interest, travel reimbursement and confidentiality considerations**

Participants of the *CMA Patient Voice* will adhere to the CMA Code of Conduct ("the code"), which is designed to ensure a respectful engagement environment for all participants and mitigate potential reputational risk to the CMA. The code will be comprised of the following components:

- conflicts of interest;
- confidentiality and non-disclosure agreement;
- reimbursement of travel, meal and accommodation expenses; and
- privacy.

Participants in the *CMA Patient Voice* will be required to sign the *CMA Patient Voice Agreement*. A copy of this agreement and the code will accompany the official letter of offer to new participants in the *CMA Patient Voice*.

**Support**

The Patient and Public Advocacy Team will provide the *CMA Patient Voice* with coordination (e.g., logistics), administrative (e.g., reimbursements, minutes) and advisory support.

**Commitment**

Quorum at the *CMA Patient Voice* meetings is required and shall be a majority of the participants (at least 50% + 1 member). If quorum will not be achieved, the meeting will be cancelled and rescheduled if reasonably possible.

*CMA Patient Voice* participants will be required to participate in a minimum of two meetings per year. These meetings will include a combination of face-to-face and/or web/teleconference meetings and will be approximately one day in duration.

**Reporting**

The CMA’s Vice-President of Patient and Public Advocacy will report to the CMA Board of Directors on the *CMA Patient Voice*’s activities. The Chair of the *CMA Patient Voice* may be invited to present to the CMA’s Board of Directors from time to time.