COP 423 POLICY REVIEW COMMITTEE TERMS OF REFERENCE

LINK TO POLICY

LINK TO PROCEDURES & FORMS





1. Introduction

The Policy Review Committee of National Ambulance is a standing Committee. Its purpose is to strengthen the Management's role in understanding and leading policy governance of National Ambulance.

2. Scope

Policy review committee is to review, amend, discuss and propose National Ambulance policies and to ensure that the policies are consistent and effective with all functions related to the work of the Committee or may be considered by the Executive and Board.

3. Purpose

- 1. **Develop:** the best policies for application in daily operations, by taking advantage of the expertise available to the company from its employees and management.
- 2. **Activate:** the meetings of the Committee are to be held monthly to ensure policies are developed and updated and approved as prescribed by the Committee.
- 3. **Organize:** the work of the Committee before, during and after the meetings of the Committee to ensure the proper allocation of work and competencies.
- 4. **Identify:** the members of the Committee.
- 5. **Define:** the terms of reference of the Committee.

4. Members

1- **Permanent Members:** In order to ensure the effective implementation of the supervisory role on the development and amendment of policies to ensure that they are consistent with the strategic objectives of the company, the members are as follows:

Chairmen

- The Chief Operations Officer or his delegate Chairman
- The Medical Director or his delegate Vice Chairman

Members

- Human Resources and Corporate Services Manager or his/her delegate mandatory
- Quality, Health, Safety, Environment and Business Continuity Manager or his/her delegate mandatory
- Clinical Services mandatory
- IT Manager mandatory
- Operations Department mandatory
- Finance Department
- Legal Department
- Fleet Specialist







- Supply Chain Manager
- Coordinator of the Committee
- Secretary of the Committee
- 2- Ad-hoc members shall be invited in accordance with the policies to be reviewed.

5. Key Functions

Key functions of the committee include:

- Review existing and new policies and Forms, for approval and on a timely basis as determined in QHP301 Document Control Policy and Procedure.
- Propose recommendations on amendments and updates to be made from time to time on the policies in force.
- **Collect, preserve and document** all policies and administrative decisions.
- Any other functions related to the work of the Committee, such as reviewing and approving forms, or that may be considered by senior management.

6. Periodic Meetings

- The meeting of the Committee will be held on the first Monday of each calendar month.
- In some cases, the committee may be convened in an exceptional manner as directed by the committee Chair; short intervals meeting for urgent or high-risk policies or an out of session approval by email will be utilized based on urgency.
- The regular meeting may be cancelled or its date modified exceptionally only by the decision of the committee Chair.

7. Committee Workflow

The organization of work of the Committee is divided into three phases as follows:

Before the meeting:

- The committee coordinator shall be responsible for receiving the policies presented for the work
 of the Committee from various sources (senior management, Committee Chair instructions,
 Proposals for Amendment and Review) not later than 10 working days prior to the date of the
 meeting of the Committee.
- The proposed policies shall be sent by e-mail to the committee coordinator by the document owner or his delegate in the form of a Word document with tracked changes along with a hard copy of a filled Document Review Form signed by the Originator, Manager and Key Stakeholder.
- The committee coordinator will create the agenda of the meeting and determine the policies that will be discussed. If the proposed policies to be reviewed is more than 10 policies, priority policies





will be identified by the Chair of the committee 8 working days before the meeting of the Committee.

- The committee coordinator will send the agenda together with all the policies to be reviewed to permanent members and to ad-hoc members 7 working days before the meeting of the Committee.
- The committee coordinator is responsible for preparing all documents related to the committee
 meeting, controlling the documents on the company's forms and all paperwork related to the
 meeting.
- The committee coordinator is responsible for informing the members of any conflict or information related from the previous approved policy.
- The committee coordinator will send to the committee secretary a list of ad-hoc members to invite.
- The committee secretary is responsible for inviting permanent members and ad-hoc members and receiving reassignments or conflicts of interest disclosures for presentation.
- All members are responsible to read through the policies prior to the meeting including review for legal and mandatory requirements compliance.
- Members who can't attend the meeting must notify the committee secretary.
- Owners of policies that are included in the agenda must be present during the meeting. Otherwise, their policies will be postponed until they're able to attend.
- If clarification is required, it is the responsibility of the attendee to seek clarification with the policy owner before the meeting.

During the meeting:

- Chair of the Committee will review the policies that have been circulated at the previous meeting and provide a brief statement on the progress of implementation or any problems that have arisen during implementation.
- The Legal and Compliance Coordinator or the QHSE team representative shall prepare and present the policies to be discussed and their legal reference when required
- The committee coordinator shall briefly present the agenda of the meeting under direct instruction of the senior management and the terms of reference of the attendance and may not discuss any topics outside the agenda.
- The committee secretary is responsible for preparing the minutes of the meeting and timekeeping of the discussion of each agenda item.
- All members may present any questions/queries/remarks they may have as long as the discussion per agenda item or per policy does not exceed 7.5 minutes.
- If there are different perspectives during the meeting on certain aspects of the policy that cannot be resolved, it will be escalated to the Executives.







> After the meeting:

- The committee coordinator will seek the signature of the document review form for approved documents.
- The committee secretary will write the minutes of the meeting and circulate it to the members. The minutes of the meetings will then be printed and signed by all the attendees.
- The minutes are to be factual representations of what happened in the meeting. It must be submitted and amended within no more than 24 hours.
- The committee coordinator will print the approved clean copy of the policy along with the
 Document Review form and circulate for executive signature. A tracked changes copy will be
 provided if requested.
- The committee coordinator is responsible for following up with the Originator/Department Manager of the policy if there is a need to amend.
- The committee coordinator will submit to QHSE the signed documents to be uploaded (hard copy
 of the Document Review Form and soft (accepted changes) word copy of the document). The
 QHSE team will upload, communicate, and file the policy in accordance with the QHP301
 Document Control Policy and Procedure.

8. Conflicts of Interests

Members shall declare any interests that are reasonably foreseeable if they may lead to conflict.

9. Quorum

Decisions of the Committee shall be taken unanimously or by a majority of the votes present except the document owners. 60% members must be present to establish a Quorum. Approval of the policy should be 80% of the attendees. QHSE, Clinical Services, HR, IT and Operations are required to have representatives in all meetings.

10. Reporting

The minutes of the meetings will be stored in the N drive; members will be notified of the relevant folder, and minutes must be made available to senior management as requested. The Policy Review Committee reports to the Board through the CEO.

11. Lifecycle and Evaluation

Committees may have an ongoing lifecycle with a review of its purpose and functions required at least annually.







DOCUMENT CONFIGURATIONS CONTROL DATE

A review and update of this document will take place as necessary, when changes occur that identify the need to revise this document such as changes in roles and responsibilities, release of new legislative or technical guidance, or identification of a new policy area.

This document ownership for editing is identified as:

Chief Administrative Officer

Change Brief

Version No.	Date	Changes
1	October 2020	New Document

Review & Approval:	Date
Chairman of Board of Directors	

SO 9001 · ISO 14001

