

Sepsis Canada Leadership and Governance Policy

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Leadership respecting our geography, gender and expertise.

Sepsis Canada has a model of co-leadership to assure balanced decision making and guidance. The International Advisory Board has international experts in sepsis. Executive leadership includes two Scientific Director's (Dr. Alison Fox-Robichaud and Dr. Francois Lamontagne) and a Managing Director. The Steering Committee has members from the Executive Committee, network teams, senior and early career researchers within the Canadian scientific sepsis community (which includes critical care) and patient advisors. Each team has 1-2 early career investigators, a patient partner and 1-2 principal knowledge users. Core services will support the research teams and build capacity. Core experts will provide input in related or essential subjects.

The International Advisory Board (IAB), will be chaired by a Canadian Clinician Scientist and will include international scientists with expertise and experience in sepsis. The Board will convene on an annual basis. An annual progress report will be sent to the Board prior to the annual meeting to facilitate their ability to evaluate network activities and provide suggestions for improvement. Board members will be invited to attend the annual Sepsis Canada meeting. The Board's role will be to advise and guide the Executive Committee by reviewing annual progress reports, providing independent and objective review of scientific and strategic priorities and providing a score card of the Network's overall performance. The Board will develop and implement comprehensive conflict-of-interest considerations in accordance with best governance practices. The Board and all committees will begin meetings with a declaration of conflicts and will maintain a record of continuing conflicts.

The Executive Committee will be led by Scientific Directors, Dr. Alison Fox-Robichaud and Dr. Francois Lamontagne. The Managing Director will oversee day-to-day operations. The Scientific Director's will have shared responsibility in overseeing and directing the Managing Director.

The Dr. Alison Fox-Robichaud will be primarily responsible for overseeing media communications, training programs, stakeholder and knowledge user engagement (except the CCCTG as below) and the liaison for the National Preclinical Sepsis Platform,

The Dr. Francois Lamontagne will be primarily responsible for overseeing processes in place for the delivery of research projects and grant competitions, leading the Sepsis Canada Repositories and Clinical Research Network in collaboration with the Canadian Critical Care Trials Group for which he will be the nominated liaison.

The Managing Director will be responsible for leading day-to-day operations, with primary responsibility for leading partnership development. The Managing Director will oversee development and organization of national and regional meetings and provide updates to all network committees. Other duties include generating operational plans in coordination with the Executive and Steering Committee, ensuring that performance metrics are collected and reported to partners and funding agencies, preparing Network packages and meeting annual reporting requirements to the Canadian Institutes of Health Research. Individuals responsible for core services, such as biobank management, data management and informatics support will be chosen through a competitive hiring process during the set-up of Sepsis Canada. Individuals will report to the Managing Director.

The Executive Committee is responsible for overseeing the operations of core infrastructure within Sepsis Canada and reviewing and recommending the approval and funding of research priorities and projects. The Executive Committee will also oversee management of finances and partnership development. It will make recommendations on project performance, possible funding adjustments and risk mitigation strategies. The Scientific Directors will share major administrative decisions. In case of conflict, the Executive Committee will call on the Steering Committee for advice.

The Steering Committee will partake in most reflections and decisions impacting the network. The Steering Committee will include all members of the Executive Committee, selected members from network teams, senior and early career researchers within the Canadian scientific sepsis community (which includes critical care) and patient advisors. Membership will be staggered and will rotate every two years. The Committee will be chaired by the Managing Director (non-voting member). All other members of the Steering Committee will be voting members (with the exception of observerships). The Steering Committee will convene on a quarterly basis (four times a year). Meetings will be held more frequently (at most monthly) during the first two years of the network.

The Steering Committee members are expected to contribute suggestions, ideas, constructive criticisms. Other contributions include:

- Approve and monitor performance indicators
- Approve and monitor the application of management and corporate policies (e.g. conflict of interest)
- Review and monitor the overall scientific direction of the network
- Review and approve the allocation of funds
- Approve and monitor annual operating plans
- Approve and monitor partnerships
- Advise the Executive Committee and help ensure cohesion within the network as well as with various communities and professional societies.

Working Groups will be formed as needed and be tasked with the delivery of special network activities. Membership will be selected by the Executive Committee and Steering Committee and will include a diversity of participants to reflect the core values of the network. Members of these working groups may be asked to present to the Steering Committee as needed. They will attend Steering Committee meetings as non-voting members.

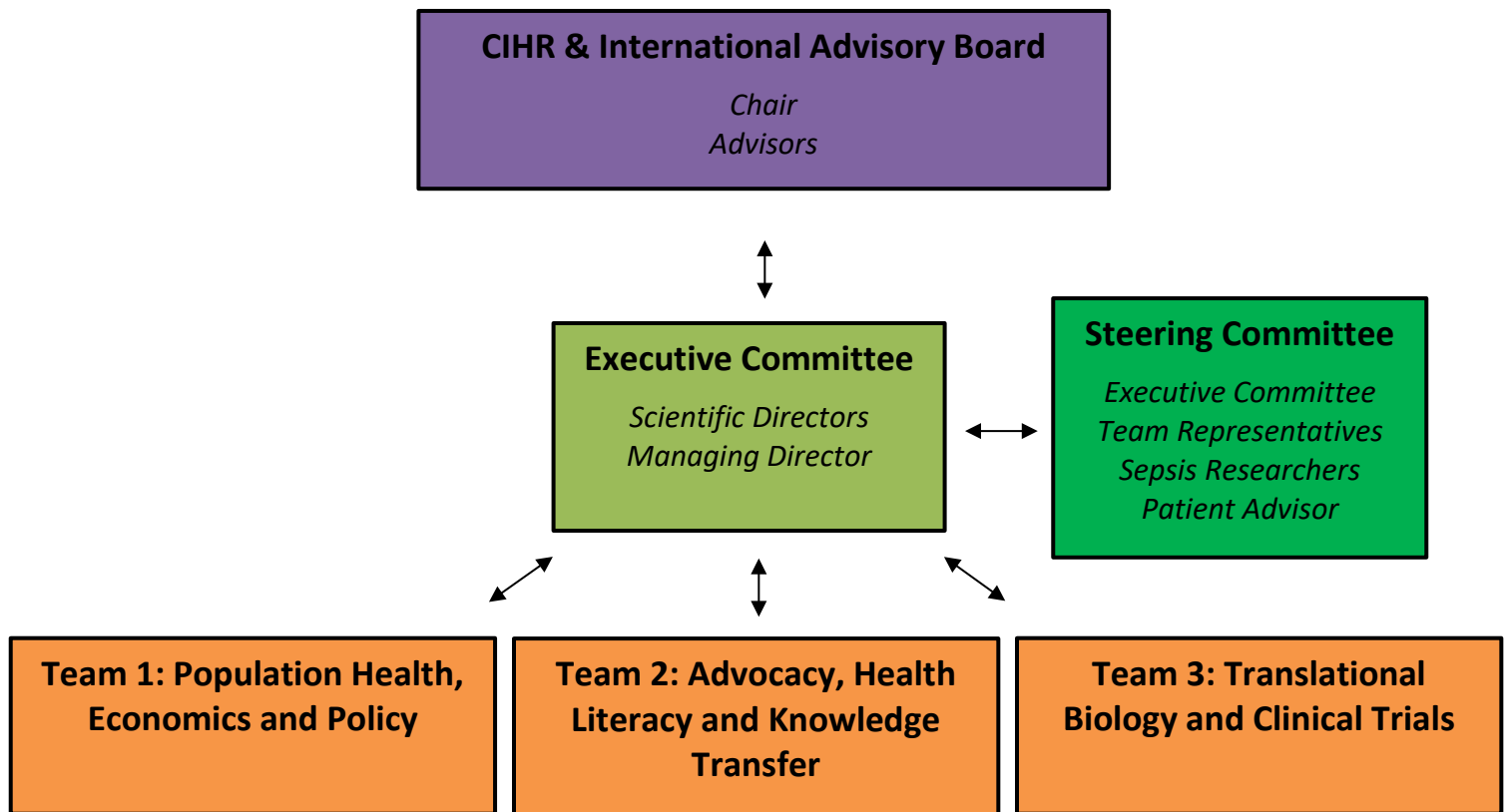


Figure 1: Depiction of Sepsis Canada governance.