

Terms of Reference

COSA Familial Cancer Group



Background

The Clinical Oncology Society of Australia (COSA) is the peak national body representing health professionals from all disciplines whose work involves the care of cancer patients. COSA is recognised as an activist organisation whose views are valued in all aspects of cancer care. We are allied with, and provide high-level clinical advice to Cancer Council Australia.

The overarching mission of COSA is to improve cancer care and control through collaboration.

COSA achieves this by:

- supporting the professional and educational needs of cancer health professionals
- enhancing cancer care and control through network development
- advocating for improvements in cancer care and control
- facilitating research across the spectrum of cancer

COSA members with a common interest in a discipline, disease type or area of need form groups to discuss issues and develop solutions to shared problems in cancer care. COSA Groups provide an opportunity for COSA members to be actively involved with important issues. COSA Council approves the formation of each Group providing it aligns with the interests and objectives of COSA.

The objects of COSA as defined in the Constitution (approved 14 November 2012) are:

- to promote excellence in the multidisciplinary care and research relating to cancer – from prevention, diagnosis and treatment to follow-up, palliation and survivorship;
- to encourage multidisciplinary collaboration of all professionals involved in cancer care and research; and
- to foster and promote cancer research.

1. Title of Committee or Group

- COSA/HGSA Familial Cancer Group

2. Aims and Objectives

- To act as a reference group for the HGSA council/COSA in matters pertaining to familial cancer;
- To provide an avenue for communication and advocacy about familial cancer
- To foster the development and maintenance of high professional standards in the provision of familial cancer care in Australia.

- To review and update existing COSA/HGSA Statements, Guidelines and Policies, and develop new joint policies pertaining to the provision and advancement of familial cancer services. (Recommendations arising from the discussions of the committee must be reviewed and endorsed by the Councils of both COSA and HGSA, prior to implementation)
- To promote familial cancer topics for inclusion in COSA and HGSA meetings, communications and training programs
- To assist with the planning and running of an annual Clinical Professional Day focused on familial cancer
- To develop education resources for the public and relevant education and training for all health care professionals
- To foster familial cancer research through liaison with basic research teams and involvement in translational and clinical research
- To consider and respond to other business that is referred to the Group.

3. Proceedings of COSA Groups

As defined in the COSA Constitution (approved 14 November 2012) Clause 11.3:

- (a) Each COSA Group will have terms of reference approved by COSA Council. Such terms of reference will include agreed objectives, the establishment of an Executive Committee voted by the Group membership.
- (b) Groups and their activities will be based primarily on the objects of COSA as prescribed in sub-clause 2.1 (*see background above*).
- (c) The Group Chair will sit on COSA Council during their elected term.
- (d) Groups must hold an annual general meeting, preferably at the COSA Annual Scientific Meeting.
- (e) Each Group is responsible to, and may be directed by the Board or their delegate as set out in accordance with the terms of reference.
- (f) Groups are required to submit to the COSA Council an annual plan outlining their planned activities and/or priorities, and support or resourcing requests from the COSA office.
- (g) An annual review of COSA Group activities and structure will be conducted as a part of good governance and Groups that are in abeyance may be dissolved at the discretion of the Board on the advice of Council.
- (h) COSA Council may disband a Group if the registered membership falls below thirty (30) members.

4. Membership

4.1. Composition

The COSA/HGSA Familial Cancer Group Executive Committee will comprise:

- Up to 12 members, all of whom must be current financial COSA members and ideally (but not necessarily) current financial HGSA members.
- The HGSA president or their proxy

- It is desirable to have at least one representative member from each state/territory, and representation from a range of the different professional disciplines which the Familial Cancer Group represents.
- Members who give an apology for a meeting may nominate a proxy to attend in their place. Attendance of the proxy will be determined by the Chair with consideration to other proxies in attendance and the content for discussion at that meeting.
- The Committee may co-opt individuals to assist on specific issues/projects.

4.2. Appointment and Term of the Chair

- The Chair will be elected by the COSA/HGSA Familial Cancer Group Executive Committee.
- The Chair will hold office for an initial term of two years, and be eligible for re-election for a further two years.

4.3. Appointment and Term of Committee members

Every year the COSA/HGSA Familial Cancer Group chair will call for self-nominations to the committee from the Familial Cancer Group membership

- In the first instance members may self-nominate by email to the Chair
- If 11 or fewer nominations are received all nominees may be appointed without an election being held, provided individual appointments are approved by a quorum of the current COSA/HGSA Familial Cancer Group Executive Committee
- If 12 or more nominations are received the COSA Executive Officer will hold an election via email
- Each Committee member shall hold office for two years, and be eligible for re-appointment or re-election for an unlimited number of additional two year terms

4.4. Current Composition

Name	Position	Organisation	State
Nicola Poplawski (chair)	Clinical Geneticist	SA Pathology	SA
Gillian Mitchell (Chair)	Clinical Oncologist	Peter MacCallum Cancer Centre (currently in Vancouver, Canada)	VIC
Lara Lipton	Medical Oncologist	Royal Melbourne Hospital/WEHI	VIC
Nicholas Pachter	Clinical Geneticist	Genetic Health WA	WA
Rachel Susman	Clinical Geneticist		QLD
Cliff Meldrum			NSW
Mary-Anne Young	Genetic Counsellor and HGSA proxy (incoming president of HGSA)	Peter MacCallum Cancer Centre	VIC
Finlay Macrae	Gastroenterologist	Royal Melbourne Hospital	VIC

5. Committee Support and Secretariat

The COSA/HGSA Familial Cancer Group Executive Committee shall be supported by a COSA Project Coordinator as appointed by the COSA Executive Officer.

6. Conduct of Meetings

6.1 Frequency of Meetings

- The chair will convene regular teleconferences of the COSA/HGSA Familial Cancer Group Executive Committee, with approximately 10 meetings held each calendar year.
- One annual face-to-face AGM will be held either at the COSA ASM or the annual Familial Cancer Research and Practice meeting.

6.2 Quorum

- When/if decision making is required a quorum will be at least 50% of the COSA/HGSA Familial Cancer Group Executive Committee.

6.3 Agenda

- Agenda items to be submitted to the COSA/HGSA Familial Cancer Group Executive Committee Chair one week prior to any meeting.
- The agenda and supporting documentation will be circulated one week prior to each meeting.

6.4 Minutes

- Draft minutes of all meetings will be prepared by the Committee Secretariat, and circulated to the Executive Committee, ideally within 10 working days of the meeting for comment.
- If approved by the Committee, meeting minutes may be available to Group members on request.
- All meeting minutes will be made available to COSA Council on request.

6.5 Confidentiality and Conflict of Interest

All Executive Committee business remains confidential unless otherwise advised by the Chair.

6.6 Reporting

- The Executive Committee reports to the COSA Council/HGSA via the Chair.
- Regular reports should be provided by the Chair for inclusion in the Marryalyan and Annual Report.
- Other reports may be requested at the discretion of the COSA President or Executive Officer.

7. Subcommittees

The Executive Committee may appoint Subcommittees to deal with specific issues on a needs basis. Such Subcommittees must report to the main Executive Committee, and adhere to these terms of reference.

8. Evaluation and Review

- All members agree to adhere to these terms of reference and the supporting documents listed at item 10.
- The performance of the Executive Committee will be evaluated by adherence to these terms of reference which will be reviewed every two years.
- Annual review will be by the membership present at the AGM. This will comprise a report by the chair and formal voting on its acceptance.

9. Terms of Reference Approval History

Approved by Committee: 30 May 2014

Approved by COSA Council: 29 August 2014

10. Supporting Documents

COSA Constitution

COSA Board and Committees Code of Conduct