

Board Policy

GP.22 BOARD LINKAGES - DISTRICT HEALTH ADVISORY COUNCIL (DHAC)

Purpose

1. The DHAC is intended to be the focal point for community participation in the planning process for health services and access to NEHA. The DHAC will bring into focus the community's strengths, interests and needs for improved health status.

Council and Membership

1. There shall be one DHAC in the Region and it shall have a minimum of eight (8) and a maximum of fifteen (15) members. DHAC membership, whose mandate will be to embrace a regional perspective, will be comprehensive and representative of all residents of the district to reflect regional demographics.

Quorum

1. A quorum shall be a simple majority.

4. Administrative Support

1. The Board appointed liaison and/or the CEO/Designate will provide information and support and linkage to and from the DHAC and Board. These are ex-officio members.

5. Meetings

1. Meetings shall be held at least quarterly or at the call of the DHAC Chair or the Board.
2. Minutes shall be recorded at all meetings.

6. Nomination/Appointment Process

1. The recruitment process will include advertising in local newspapers on an annual basis. Residents of the Region may apply for appointment. Applications will include three character references.
2. The Board will review all applications and make selections to ensure membership is geographically dispersed.
3. The DHAC may make recommendations to the Board to fill the remainder of any vacated term.

1. Remuneration/Reimbursement

1. Membership on the DHAC will be voluntary and members shall receive no remuneration.
2. Expenses such as travel, meals, and incidentals associated with the conducting of DHAC business will be reimbursed in accordance with Provincial Government rates.

2. Roles and Responsibilities

1. The roles and responsibilities of the DHAC shall include, but not be exclusive of:
 1. as per By-Law No. 1 clause 44 (b), the DHAC is advisory only.
 2. to facilitate communications and the distribution of information such as the AGM's, between the communities they represent and NEHA Board.
 3. to assist NEHA with the Community Health Needs Assessment.
 4. to assist NEHA in the development of the Health Plan and Strategic Plan through identification of priorities to address health needs.
 5. to describe for NEHA the changing health needs and give suggestions for solutions.
 6. to provide access and assistance to the community for the initiation of health and community development projects.
 7. to carry out special projects at the request or as approved by the Board.

3. Terms of Appointment

1. Terms of appointment shall be for one two-year term. Members' terms shall expire on March 31st of each year. Members may be re-appointed to additional two-year terms at the discretion of the Board.
2. The Chair, Vice-Chair and Secretary shall be elected by the membership, at the first meeting of the fiscal year. Term of office shall be for one year.
3. Except by resolution of the Board, DHAC members who miss three consecutive or 75% of the meetings of the Council shall be considered to have vacated the position. The Board will then proceed to fill the position.

10. Reporting Relationships

1. The DHAC is responsible to the Board through the Board appointed liaison and/or CEO/Designate and will maintain a working relationship with them.
2. The Chair of the DHAC shall be invited to meet with the Board on an annual basis during the month of March to provide a report for the year just ending.