

Winnipeg Regional Health Authority Population and Public Health Clinical Nurse Specialist (CNS) Practice Council Terms of Reference

The Population and Public Health CNS practice council provides leadership for Population and Public Health (PPH) and promotes excellence in Public Health Nurse (PHN) practice. The CNS role is founded on graduate level nursing education, in-depth nursing and population health knowledge and experience, and clinical proficiency.

1 Purpose

- 1.1 Promote excellence in the delivery of PPH practice through the application of advanced knowledge, research methodologies, evidence-informed practice and program evaluation, in accordance with the vision, mission, and values of the WRHA.
- 1.2 Address key population health and health equity issues and program priorities by participating in or directing clinical practice, consultation and community engagement, education, research and evaluation, support of systems, publication and professional leadership.
- 1.3 Support ongoing development of PPH clinical practice to promote population health and health equity among populations, communities, groups, families and individuals within the Winnipeg Health Region.

2 Scope and Function

- 2.1 Provide leadership in the delivery of PPH health services through the application of advanced knowledge of nursing care, research, and evidence based practice, and program development and evaluation.
- 2.2 Provide a cohesive, representative expert voice for PPH nursing practice.
- 2.3 Offer expert advice and practice recommendations to PPH Director and other health system leaders as required, regarding PPH clinical practice, standards, program development, evaluation, quality and research.
- 2.4 Provide a collaborative forum for CNSs to address PPH practice and program priorities, share collective expertise, and develop a unified approach to enhance PPH practice.
- 2.5 Assist the PPH Director in responding to the need for information regarding PPH practice related issues, through the development of briefing notes, position papers, guidelines and other documents.
- 2.6 Support the PPH Program Director and other PPH leaders in informing policy-makers, legislators, other health care professionals, and the public, about the role of PPH practice.
- 2.7 Facilitate and promote communication among PPH practitioners.
- 2.8 Support the professional development of PPH practitioners' practice.
- 2.9 Contribute to the collective voice of nursing from the advanced practice perspective of the CNS.

3 Process

- 3.1 Agenda items with are submitted to the Administrative staff prior to the next scheduled meeting. Agenda items should include:
 - Lead person
 - Necessary background materials, in writing (may be point form)
 - Amount of time required

- Whether item is 'FYI', for discussion or for decision
- Identification of who, beyond the CNS meeting group, needs to participate in the item

3.2 Agenda items will be kept on the monthly meeting agenda if not resolved.

3.3 Stakeholders will be invited to participate on an ad hoc basis to discussion items that pertain to their work. On the agenda, timed-items will be scheduled for their participation.

3.4 Chair will finalize the agenda with an effort to ensure agenda items are represented with appropriate amount of time and efficiency.

3.5 Members will prepare and attend meetings as active participants.

3.6 Standing items/sub-committees/working groups will be developed as needed to report back to this group.

3.7 Decision making/approval will be by consensus, and when not possible, by vote.

3.8 Items not related to these Terms of Reference will be referred to appropriate venue.

Reporting Relationship

Carolyn Perchuk, Director Population and Public Health, WRHA

Membership

PPH Clinical Nurse Specialists

Director of PPH

HPECD TM

PPH Coordinator

Chair

The chair will rotate; with one of the PPH CNSs acting as chair for a term of 2 years.

Meetings

11 times per year, or at the call of the chair.