

Call for Nominations Rural and Remote Division of Family Practice Board of Directors

Calling all rural healthcare advocates, enthusiasts and leaders! The official call for nominations for the Rural and Remote Division of Family practice is now open.

- All nominees will be listed on the ballot at the AGM held on **September 28th, 2022**.
- Each member of the Division in attendance at that meeting will vote for the slate of candidates.
- Nominations will not be accepted from the floor at the AGM.
- The nominees will be nominated for a 1, 2- or 3-year term.
- The Division is recruiting for general members and non-members

About our Division

Our mission is supporting our members as they advocate for equitable rural health services, sustain a workforce, collaborate with partners, and design locally relevant programs to support the health of their communities. Established in 2012, the Rural and Remote Division of Family Practice supports more than 150 physicians and nurse practitioners in 13 chapters across the province. Our Division works with four geographic Health Authorities and the First Nations Health Authority in more than 100 communities across the province, including more than 50 Indigenous communities. Our members serve approximately 140,000 patients over approximately 100,000 kilometers squared. Visit www.divisionsbc.ca/rural-remote/ to learn more.

Diversity

The Rural and Remote Division of Family Practice is committed to ensuring that equity, diversity, and inclusion are priority considerations, including in building a Board that honours the particular experiences and expertise of communities. The Division strongly encourages applications from Indigenous peoples, Black people, people of colour, immigrants and refugees, working class people, and LGBTQ+ people. Applicants are encouraged to self-identify, should they feel comfortable doing so, and are invited to share how their lived experience would inform their approach and ethics in this leadership position.

Board Member Responsibilities

The Board of Directors are the governance leaders of the Division and play an essential role in oversight of the activities of the organization. The Board works to establish and safeguard the Vision, Mission and Values along with cultivating the culture of the organization. The Board is informed by and responsible to the Members of the Society.

The Board is required to take responsibility for its own management, continuity and renewal. It ensures effective board meeting practices, appropriate director conduct, ongoing board education, and continuing attention to the recruitment of new members.

Eligibility

General Member

- (a) be 19 years of age or older;
- (b) be:
 - (i) a general practitioner or family doctor who is duly licensed by, and in good standing with the College of Physicians and Surgeons; or
 - (ii) a nurse practitioner who is duly registered by, and in good standing with the College of Nurses;
- (c) reside or practice in the community or region covered by a Chapter; and
- (d) be interested in advancing the purposes and supporting the activities of the Society.

Member at Large

- (a) be 19 years of age or older;
- (e) be:
 - (i) a general practitioner or family doctor who is duly licensed by, and in good standing with the College of Physicians and Surgeons; or
 - (ii) a nurse practitioner who is duly registered by, and in good standing with

the College of Nurses;

(f) not reside or practice in a community or region covered by a Chapter but practice at least part of the time, as determined by the Board, in an RSA Community; and

(g) be interested in advancing the purposes and supporting the activities of the Society.

- *Associate Member*

(h) not be eligible for admission as a General Member or as a Member at Large;

(i) belong to one or more of the following categories:

(i) family medical resident in good standing with the College of Physicians and Surgeons;

(ii) retired physician, who at the time of retirement, was in good standing with the College of Physicians and Surgeons; or

(iii) specialist physician duly licensed by, and in good standing with, the College of Physicians and Surgeons; and

- *Non-Members:*

Individuals who are knowledgeable of rural health care and bring governance expertise and/or strong professional relationships with key Division stakeholders, such as the Ministry of Health or Health Authorities. Examples of professional qualifications include: GP from another rural Division, resident physician, social worker, accountant, lawyer, retired hospital executive, retired health authority lead, community agency executive, executive from company whose employees rely on rural health services, municipal official, human resource professional.

Time Commitment

The Rural and Remote Division of Family Practice typically meets 10 times per year for 2-hour video conferences. In addition, the Board has a full day orientation in October and may host a Division retreat to connect with physician leadership from our Chapters and/or engage in strategic planning. The latter are typically in person, but this will be determined closer to the date depending on the state of the pandemic and Provincial Health Office directives. Board members will be encouraged to join one standing committee including but not limited to the Diversity, Equity and Inclusion Committee, Finance Committee, Policy Committee, Board Development Committee, ED Development Committee.

Remuneration

Board members receive a bi-annual stipend of \$1500. Executive Members (Co-Chairs, Vice-Chair, Treasurer, Secretary) receive an additional stipend by position (\$1500, \$500, \$1000, \$250). Members will receive an additional \$200 stipend for each 2-hour board meeting and \$500 for the Board Orientation or Division Retreat (if applicable).

Application Deadline

Please [click here](#) to complete the application form and submit to info@rrdfp.ca by 11:59pm on May 1st, 2022.