Background & General Description

The role of the Libin Cardiovascular Institute (LCI) Equity, Diversity, and Inclusion (EDI) Committee is to ensure that EDI best practices are being incorporated into all aspects of the LCI. The guiding principle of the EDI Committee is to ensure that our members and the community we support can work, learn, and heal in a physically and psychologically safe environment.

The goals of this committee are threefold:

1) To develop and assess EDI policies within the LCI context
2) To implement and embed EDI best practices within the LCI.
3) To advise LCI leadership when a breach of EDI or harassment policy occurs.

This group was created in early 2021 by Dr. Michelle Keir to address areas of inequity within the LCI clinical domain. In 2022, Dr. Keir was named the LCI EDI Lead, and the Committee was expanded to cover the academic space to unify all EDI and harassment policies.

Committee Composition

Membership in the LCI EDI Committee will remain by nomination only, and participation is voluntary. All members of the committee must be affiliated with the LCI. The committee will include at least 12 - 15 members, with half having an academic appointment. A minimum of two trainees will be members of the EDI Committee, with one coming from the clinical space and one from the academic space (i.e. graduate student or postdoctoral scholar).

To ensure diverse perspectives on the EDI Committee, the Chair will ensure that the committee members represent visible and invisible group affiliations. These affiliations include, but are not limited to sex, gender, race and ethnicity, disability status, and profession.

Roles & Responsibilities

Committee membership terms are ongoing but will be renewed annually, with each term spanning the calendar year. Terms of Reference will be evaluated by the committee at least once annually. Amendments to these terms can be made, with committee approval when deemed necessary.

- Members must attend and participate in at least half of the quarterly meetings to maintain membership to the EDI Committee.
- Recruitment of external consultants will be considered as new projects arise and a need for additional expertise is recognized.
Roles & Responsibilities (Cont.)

- Members who wish to terminate their involvement with the LCI EDI Committee may give one month notice. Depending on the make up of the committee at that time, an off-cycle recruitment of new members may occur.

- As this is a voluntary role, and no honoraria are currently available.

The structure of the committee will remain informal. There is a committee chair who will provide leadership and vision for the committee, and an operational chair who will oversee the administrative needs of the LCI EDI Committee.

**Committee Chair** – The committee chair will be responsible for leading the EDI Committee, including the development of EDI goals and frameworks within the LCI. The committee chair is also responsible for liaising and providing quarterly updates to LCI leadership on the progress of the EDI Committee.

**Committee Operations Chair** – The committee operations chair will be responsible for any and all administrative needs of the Libin Cardiovascular Institute EDI Committee. This will include scheduling meetings, communication with membership, interactions with Libin membership/staff and, connecting with Cumming School of Medicine and University of Calgary.

**General Membership** – The general membership will be responsible for actively attending EDI Committee meetings and contributing towards the committee goals.

Nomination of Committee Members

Nominations will be accepted on an as-needed basis. Upon notification there is a vacancy on the EDI committee, an open nomination process will be launched. All nominations will be collected through an email to the Operations Chair and must include a short statement on why they would like to join the Committee. Libin members may self-nominate to sit on the committee. If there is more interest than available spots, membership will be determined by: 1) demographics; 2) Role within LCI; and 3) proven commitment to EDI principles and previous work within the EDI space. All nominees who are not selected for the EDI committee will be asked to join the auxiliary Libin EDI Network and participate in EDI subcommittee work. To ensure and maintain diversity perspectives, the committee may choose nominees based upon their visible or invisible group affiliations.

Ways of Working

The Libin Cardiovascular Institute EDI Committee will hold virtual meetings at least 4 times a year (quarterly). These meetings will include a business portion of the meeting and the development of any programming. The meetings will be organized and chaired by the Committee Chairs.
Confidentiality

As the EDI Committee will be called upon to provide advice regarding breaches of university policies, confidential information will be discussed during these meetings. The content of individual cases must be held in the strictest confidence, are confidential between parties and shall not be disclosed to anyone else.

Meetings

<table>
<thead>
<tr>
<th>Frequency:</th>
<th>Quarterly</th>
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<tbody>
<tr>
<td>Length:</td>
<td>Meetings will not exceed 1.5 hours in length</td>
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<tr>
<td>Venue:</td>
<td>Virtual Meetings via Zoom or Teams</td>
</tr>
<tr>
<td>Timing:</td>
<td>Between 9-5pm on weekdays, planned events may fall outside these days and hours</td>
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<tr>
<td>Attendees:</td>
<td>Committee membership, or by invitation</td>
</tr>
<tr>
<td>Inputs and Preparation:</td>
<td>Committee Operational Chair to circulate an agenda a week before each meeting. Discreet projects may require additional preparation for meetings</td>
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| Outputs:           | • Create programming and events to enrich and support EDI within the LCI  
                      • Create unified policies for the LCI on EDI and harassment related issues.  
                      • Advise LCI leadership on best practices when a breach of EDI and/or harassment policies occur |
| Documentation:     | The Operations Chair is responsible for taking minutes during the meetings and circulating to the entire committee for comment and approval. |
| Subcommittees and working groups: | As the committee develops, the need for subcommittees or working groups may be implemented to work more efficiently. |
# Membership

<table>
<thead>
<tr>
<th>Committee Chair</th>
<th>Dr. Michelle Keir*</th>
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<tr>
<td>Operations Chair</td>
<td>Dr. Lauren Drogos</td>
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## Membership

- Jill Colbert (MD, Cardio)
- Vikas Kuriachian (MD, Cardio)
- Chanda McFadden (SW)
- Jessica Jenkins (NP)
- Mohamed El Hussain (NP)
- Sarah Weeks (MD, Cardio)
- Jessica Wang (CVICU)
- Shannon Ruzycki (MD, IM)*
- Scott McClure (MD, CVSx)*
- Deb Isaac (MD, Cardio)*
- Omid Kiamanesh (MD, Cardio)*
- MD Trainee Member (TBD) ^
- Academic Trainee Member (TBD) ^
- TBD
- TBD

**Notes:** * denotes academic appointment; ^ denotes trainee member