



CANADIAN | LE RÉSEAU  
ARTHRITIS | CANADIEN  
NETWORK | DE L'ARTHRITE

## **Consumer Advisory Council**

### **Strategic plan for 2005 and beyond**

## **BACKGROUND**

On November 30 and December 1, 2002, the Consumer Advisory Council (CAC) gathered to undertake its very first strategic planning session. It was a difficult exercise, but very rewarding as members concluded the two days with a very comprehensive strategic plan that included desired activities and detailed tasks to make consumer participation in the Canadian Arthritis Network (CAN) a success. The strategic plan was presented to the CAN Management Committee and received CAN Board approval. It was a very ambitious plan, but with the interest, commitment and initiative of this unique group of consumers, most of the activities outlined in the strategic plan were completed.

CAC experienced a major change in its membership at the beginning of 2004. Four of its members had completed their terms and committed new advocates were needed to replace them. In response to this, a nomination process to replace those members was put in place during the months preceding this imminent change. It was also decided at that time that both Northern Canada and the Aboriginal Communities should have a representative within the Council.

New members were recruited and introduced to CAC at the Transitions Retreat that took place in February 2004. The year 2004 was a transition year for the new members as well as for the "old" members. We also decided to enlarge our partnership by including new allied members from other arthritis advocacy organizations and laying out the parameters for their involvement and responsibilities within CAC. By the end of 2004 the new and existing members felt they were ready to develop another strategic plan for the next few years.

On November 14, 2004 at the end of CAN Annual meeting, the Consumer Advisory Council gathered in Vancouver to undertake its second strategic planning session. Participants included:

### **CAC MEMBERS**

Jay Fiddler (Co-Chair)	British Columbia
Jean Légaré (Co-Chair)	Quebec
Delphine Elleze	Northern Canada
Anne Fouillard	Atlantic Canada
Diane Gerhard	Manitoba
Joyce Greene	Aboriginal Communities
Marlene Harrison	Alberta
Catherine Hofstetter	Ontario
Wilson Quail	Saskatchewan

### **ALLIED MEMBERS**

Corrie Billedeau	Patient Partners <sup>®</sup> in Arthritis
Anne Dooley	Canadian Arthritis Patient Alliance
Sandy Lockwood	Arthritis Consumer Experts
Pam Montie	Consumer Advisory Board of the Arthritis Research Centre of Canada

The session began with a situational analysis exercise where the group identified the accomplishments, learning, and challenges of the last year. The group revisited its values, vision and mission statements. The purpose of these exercises was to create opportunities and creative thinking for the plan. Following this, other exercises included the identification and prioritization of key work areas. The group felt that there was still work to accomplish in the same areas that were identified during the last planning session.

## **CAC'S OUTCOMES AND CHALLENGES IN 2004**

### **Outcomes & Achievements**

- Organizational accomplishments such as budget management, terms of reference, meeting protocols and more;
- Enhanced communication;
- Membership spectrum: increased diversity;
- Inspired to be a part of other boards such as the National Aboriginal Health Organization (NAHO);
- Recruitment and participation of new members;
- Excellent professionalism within CAC;
- Members' scientific training;
- Recognition by the Networks Centers of Excellence (NCE).

### **Challenges**

- Recognizing the importance of networks and allies;
- Communication;
- Team work;
- Dissemination of information;
- Proprietary issues or confidentiality;
- Recognition of the value of consumer participation within CAN;
- Raising the profile of arthritis in aboriginal community;
- Ongoing concerns about succession;
- Clarification of Knowledge Transfer and Exchange and its applications.

### **CAC VALUES**

- Accountability
- Meaningful inclusion
- Integrity
- Transparency

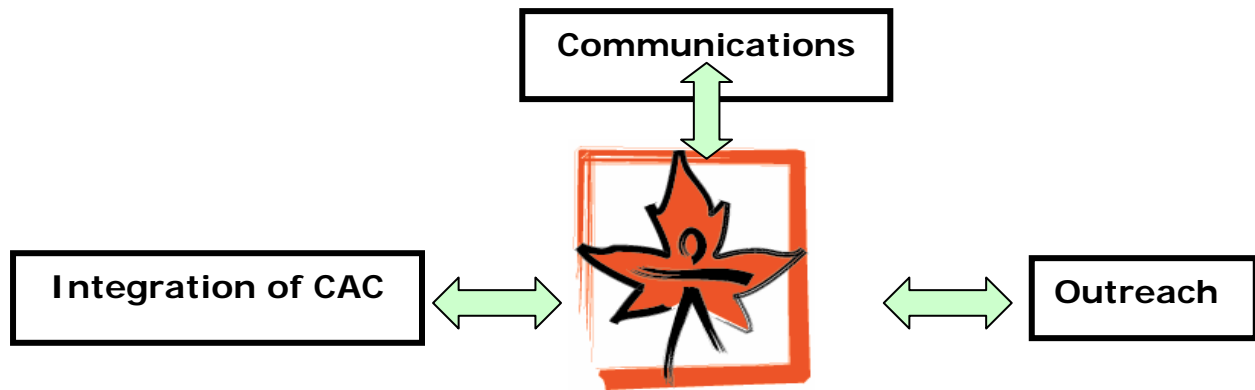
### **CAC VISION**

The Consumer Advisory Council: An integral partner in CAN to create a world without arthritis through research.

## CAC MISSION

On behalf of people with arthritis, the Consumer Advisory Council meaningfully contributes to improve the relevance and accessibility of CAN's work through the involvement, knowledge and experience of people living with arthritis.

## STRATEGIC AREAS FOR CAC



## OPERATIONAL PLAN

### A. Strategic Area: Communications

**Goal 1: Enhance internal CAC communication.**

#### Activity

1. Develop systems for orientation, communication and succession of CAC members and allied members.
2. Implement CAC internal processes and procedures.

**Goal 2: Enhance communications between CAC and CAN.**

#### Activity

1. Prepare a CAC/CAN integrated communication plan.
2. Create a consistent process for information sharing between CAC and CAN.
3. Publish consumer related stories within internal CAN publications every month (CANnections and Joint Ventures).

### B. Strategic Area: Integration of CAC into all CAN programs – research and KTE

**Goal 1: Increase involvement of consumers in all research project planning and execution.**

### **Activity**

1. Involve consumers in research projects.
2. Educate CAN researchers about models of consumer involvement in research.
3. Ensure that consumers are involved in the Canadian Rheumatology Research Consortium.
4. Informatics, Biobanking and Ethics.

### **C. Strategic Area: Outreach**

**Goal 1: Develop and implement a CAC/CAN outreach plan with arthritis consumers, the public, government, voluntary health organizations and industry.**

### **Activity**

1. Determine how CAC-CAN will/would be utilized by each of these groups.

**Goal 2: Enhance the R&D and advocacy skill set of CAC members**

### **Activity**

1. Organize Workshops on R&D and advocacy topics for CAC members and allied members at each face-to-face meeting.
2. Provide opportunities for members to attend conferences and workshops sponsored by other entities.
3. Provide resources for consumers reviewing grant applications.
4. Improve training for consumers.