CMAJ Governance Review Panel II

Spring 2013

At the CMA Board Meeting of December, 2012, at the request of the CMAJ Journal Oversight Committee (JOC), a taskforce was constituted to review the CMAJ Governance Review Panel Report (The Pound Report), submitted to the Board in July 2006. The 2013 taskforce met face-to-face at the CMA Building on Thursday, February 28, 2013 and continued its work virtually until the completion of this report. Dr. Doig participated in the February 28 meeting by teleconference.

Members of the second Governance Review Panel and the area each represents are as follows:

<u>Member</u>	Representation
Dr. Jean Gray (Chair)	JOC
Dr. Jan Hux	JOC
Dr. John Fletcher	Editorial staff
Dr. Ken Flegel	Editorial staff
Dr. Brad Fritz	CMA Board
Dr. Christopher (Chip) Doig	CMA Board

Mr. Tim Smith (Vice-President Professional Services and Leadership) and Ms. Glenda Proctor (CMAJ Publisher) sat in for most of the discussions and provided factual information necessary to draft this report.

The Pound Report was written at a time when CMAJ was facing issues of ownership, the role of the Editor-in-Chief (EIC), and the role of the JOC. In that context, the Pound Panel divided their report into three major sections, dealing with each of these issues. The 25 recommendations included in the 2006 report have provided guidance to CMA, the EIC, and the JOC and should continue to serve as the basis for the relationships between the CMA (the owner of the CMAJ) and the EIC, the EIC and the JOC, and the owner and the JOC. Specific components of the 2006 report will be incorporated into this report to emphasize the wisdom of the Pound Panel recommendations.

The CMAJ is a major internationally recognized general medical journal with many goals, including the publication of science especially relevant to the practice of medicine in Canada, the provision of knowledge for practice appropriate to Canadian practitioners, the dissemination of medical news and the encouragement of the medical humanities. The electronic journal (CMAJ.CA) is the journal-of-record, permitting the publication of more content than can be accommodated in the print version. Funding of the journal's operations comes from a variety of sources, including subscriptions, advertising, the CMA budget, royalties and publication fees.

Specific areas of the 2006 report addressed in 2013

Many of the recommendations of the 2006 report have been fully implemented and require no further comment. For example, in 2006, the CMAJ was owned by CMA Holdings rather than by the CMA. The issue of ownership is simpler as CMA is now the sole owner of CMAJ and clear lines of reporting are in place. Similarly, the recommendations of the Pound Report for the structure and function of the JOC have been mostly implemented, although considerable discussion concerning the role of the JOC did take place in July 2011. Full implementation of the Pound Report recommendations depends on clear and open two-way communication between the various individuals serving in the roles of "owner", EIC, and the JOC.

CMAJ Mission Statement

The Pound Report recommended:

The CMA should draft and adhere to a formal process for regular review of the CMAJ Mission Statement and the enactment of any formal amendments. Such review should occur not less than every 5 years. Proposed amendments should be brought before the JOC for consideration. The JOC should seek input from.... the CMA, EIC and Publisher on the proposed amendments for purposes of deliberations. The JOC's recommendations and observations regarding proposed amendments to the Mission Statement should be submitted to the CMA Board prior to the Board's final decision. The Panel recommends that amendments to the CMAJ Mission Statement should require a 2/3 majority of the Board.

The CMAJ Mission Statement has not been revisited since 2006 so this taskforce undertook to examine the Mission Statement as well as the Goals and Objectives for the CMAJ and have included some suggested revisions for each in Appendix A and Appendix B. Additionally, this panel suggested that the Mission Statement should stand alone as a guide to the editorial staff in selecting journal content and should be clearly visible to readers, reviewers, and those submitting papers to the journal. The Goals and Objectives should be placed in a separate document to reflect the role they play in achieving the mission of the journal.

2013 proposals:

- 1. The CMAJ Mission Statement should be revisited by the JOC and then circulated to stakeholders for input before final approval by the CMA Board. Once approved, the Mission Statement should be highly visible to CMAJ readers, reviewers, and those submitting papers to the journal. The JOC should revisit the Mission Statement every 5 years and after seeking input as appropriate, submit the Mission Statement to the Board for approval.
- 2. The revised Goals and Objectives should be placed in a separate document after appropriate stakeholder consultation and final approval by the Board.

The Journal Oversight Committee (JOC)

As stated in the Pound Report, the JOC should serve

as an intermediary between the EIC and the Publisher and, if necessary, CMA management and elected officials on issues related to the content of the CMAJ

and

should maintain and foster open communication with the EIC through regular performance reviews. Such a process should be helpful in the prevention of disputes and increasing the level of trust between the parties.

Since 2006, the JOC has consisted of 7 members, including representatives of the scientific granting community, practitioners, authors, reviewers, CMA staff, journalists, and editors of other internationally recognized medical publications. In July 2011, the role and membership of the JOC was clarified following a meeting of three members of the JOC with the CMA CEO and the chair of the CMA Board of Directors. In addition to the categories listed above, a member of the CMA Board is now also included on the JOC to encourage and facilitate greater CMA Board connection with the JOC and the CMAJ, although reporting back to the Board remains the responsibility of the Chair of the JOC. That 2011 meeting also recommended the development of a process for a coordinated annual evaluation of the CMAJ EIC by the JOC for editorial policy and the CMA for administration and management. Details of this evaluation process are currently under discussion and should be available for presentation to the CMA Board by the end of 2013.

Progress to date on these recommendations has resulted in increased communication between the EIC and the Chair of the JOC as well as enhanced dialogue between the CMA management and the Chair of the JOC. Additionally, the Chair has made regular reports to the CMA Board.

2013 proposals:

3. The Terms of Reference of the JOC should be revisited on an annual basis by the JOC and presented for approval to the CMA Board. Some minor recommendations for change this year are included in Appendix C.

In 2010, CMA General Council passed the motion: "The Canadian Medical Association will work with the Canadian Medical Association Journal to reverse the decision no longer to publish French-language abstracts and editorials in either its paper or electronic versions." The Working Group on Publications, a subcommittee of the CMA Board which does not include the Editor-in-Chief, reported to the CMA Board in May 2011 its decision "to return to publishing French translation of CMAJ editorials, research abstracts and research 'synopses' (1-page summaries of research articles). This will commence in August or September." This decision was accompanied by a reduced number of pages available in the

journal for original content in 2012 (1,054 pages in English in 2010 compared to 896 pages in English plus 72 pages in French in 2012).

Although this Taskforce does not challenge the need to provide French material in the journal, the process used to make this decision does give the appearance of interference with the Board's previous endorsement of editorial independence.

4. The CMA Board or General Council should refrain from making decisions on the content of the CMAJ. Discussions concerning content should be directed to the editor-in-chief.

In the past, CMAJ staff members unhappy with working conditions at the journal have not had a clearly defined process for reporting their situations. Staff have, therefore, contacted individual members of the JOC to attempt to resolve issues. This role is one that should be handled internally by the Human Resources Department at the CMA with appropriate policies to guard the confidentiality of those who raise complaints.

5. Issues regarding CMAJ staffing are not part of the JOC responsibilities, although the Chair of the JOC should be kept informed of any issues that arise. Individual CMAJ staff members who wish to raise an issue should bring the matter to the attention of the VP Professional Services and Leadership or if that individual is not available, then to the Chair of the JOC. Appropriate policies regarding confidentiality of such complaints should be in place within CMA.

Similarly, the JOC is not an advisor to editors and owners of the journal and does not subsume responsibilities now held by the Ombudsperson and the Editorial Advisory Committee.

Not all medical journals have JOCs but EICs at journals that do have a JOC have indicated the importance of such a committee in assuring editorial independence and integrity (1). As the CMA was an innovator in developing a JOC for the journal, efforts should be made to assure that the CMAJ JOC and the Board establish processes that can be considered "best practice" and make these available for other journals and their owners to emulate.

6. The CMA Board should work with the JOC to develop "best practices" for the CMAJ JOC and to disseminate these practices and the CMA experience to other journals and similar medical organizations. A publication in the CMAJ in this regard could be an initial contribution.

Editor-in-Chief (EIC)

The process for selecting the EIC is outlined in the Pound Report and suggests that the

appointment of the EIC be made by the CMA Board based on a short-list of recommended individuals put forward by a search committee charged with selecting qualified candidates.

In fact, the search process is a lengthy one, involving review of the qualifications of all applicants and detailed interviews of those who meet these criteria. To suggest that the Board could choose among these candidates without having participated fully in the search process is somewhat unrealistic. There

is no doubt that the final decision must be made by the Board but one name, as determined by the Search Committee, should be submitted to the Board for acceptance or rejection.

2013 proposals:

7. The Search Committee for the position of EIC should carefully scrutinize all applicants and after appropriate consideration should submit the name of the best candidate to the CMA Board who ratify or reject the nominee. If the submitted name is not acceptable, the CMA Board should, as outlined in the Pound Report,

go back to the same or a differently constituted search committee and request a further recommendation.

The Pound Report recommended that the EIC be given

a five year term with the possibility of renewal or extension [that] would provide the security of tenure necessary to facilitate editorial independence.

That is the standard term of employment for the EIC of many international medical journals. Given the strong endorsement of the CMA Board for the concept of editorial independence, this taskforce is not clear why the current EIC does not have such a term. The advantage of the five-year term is that renewal requires a detailed assessment of editorial and management performance and if the EIC performance has been suboptimal, there is an option to allow the contract to lapse without renewal or institute a new search process with the existing EIC in competition for his/her position.

8. This taskforce was unanimous in recommending that the CMAJ EIC should be hired with a fiveyear renewable contract in order to assure that the standard of performance expected of the EIC remains at the highest possible level.

Recommendation 21 of the Pound Report provides details of the contents of the EIC contract and outlines a long list of requirements including

assurance of budgetary independence within the approved budgetary level established for each fiscal period and in accordance with the allocation of resources identified in the annual editorial business plan, subject to requests for additional funding due to extenuating circumstances which should not be characterized so as to interfere with editorial independence.

The opportunity to present a detailed editorial business plan has not been readily available to the EIC resulting in uncertainty about staffing and page counts available for publication. In addition, the advent of electronic publication requires that the EIC determine how and where his/her resources will be applied.

9. The EIC should develop an annual business plan that will be the basis for budgetary negotiations.

Finally, the Pound Report recommended that:

The CMA should provide and require regular direct access for the EIC to the CMA Board (in addition to the Senior Staff Executive appointed by the CMA Board) for resolution of any issues that may concern the editorial policies or content of the CMAJ – at least twice a year.

10. This Taskforce strongly endorses this provision for regular and direct access of the EIC to the CMA Board.

Conclusion

Since the submission of the Final Report of the CMAJ Governance Review Panel (the Pound Report), there have been two EICs, a new and more robust JOC, and enhanced communication between the various stakeholders, including the EIC, the Publisher, the JOC, CMA management and staff, and the CMA Board. Despite some friction from time-to-time, the recommendations outlined in the Pound Report have served CMAJ and the CMA well and have enabled the CMAJ to be recognized as a major international general medical journal containing strong scientific content, knowledge for practice, and a showcase for member creativity. This report is intended to reinforce the recommendations of the Pound Report and to provide an update, as required, in areas where recent changes necessitate processes different from those currently in place or recommended in the 2006 report.

Reference:

1. DeAngelis CD. Onward. JAMA 2011;305:2575-76

BD 13 XXX: CMAJ mission statement

CMAJ mission statement

Current mission statement:

Our central objective at CMAJ is to foster excellence in the science and art of medicine, to uphold the ideals of the medical profession and to promote the health and well-being of the public.

Proposed CMAJ mission statement:

Option 1 [Accepted by the CMA Board]

The CMAJ fosters excellence in the science and art of medicine and promotes the health and well-being of the Canadian public."

Suggest this be shortened to "To foster excellence in the science and art of medicine and promote the health and well-being of the Canadian public.

Option 2

To advance medical practice and its scientific basis

BD 13 XXX: CMAJ Key goals and objectives

In the spirit of the CMAJ mission statement, the CMAJ strives to meet the following specific objectives:

- 1. To provide accurate and up-to-date scientific and clinical information for physicians and others on the promotion of health and the treatment of disease
- 2. To help readers interpret the significance of scientific findings
- 3. To improve the quality of scientific content by competing with other top general medical journals for high-quality research and other contributions
- 4. To provide balanced insight and analysis, with a Canadian perspective, on the determinants of health, including the environmental, economic, social, ethical, legal and political dimensions of health and health care
- 5. To maintain the highest standards of editorial integrity independent of any special interest
- 6. To keep readers abreast of trends and events that affect health and the delivery of health care in Canada and abroad
- 7. To foster informed debate on current issues relevant to health and health care
- 8. To provide a window on health issues and humanitarian concerns around the world from a medical point of view
- 9. To provide a creative outlet for physicians to reflect on their professional lives and on the physician–patient relationship
- 10. To maintain the Journal in a sound fiscal state

BD 13 XXX: JOURNAL OVERSIGHT COMMITTEE - TERMS OF REFERENCE

Reports to: CMA Board of Directors

Mandate:

To enhance the quality of CMAJ as a credible, editorially independent, peer-review medical journal by:

- (a) reviewing the overall performance of the Editor-in-Chief based upon pre-established criteria that will include editorial, content, strategic and business domains;
- (b) assisting in maintaining harmonious relationships between the Editor-in-Chief, the CMA and other outside parties where deemed appropriate by the JOC.

Terms of Reference:

- 1. The JOC shall be used to resolve issues that may arise between the Editor and Owner or Publisher of the CMAJ. Issues that cannot be resolved by the JOC shall be determined by the CMA Board, having considered and afforded deference to the recommendations made by the JOC.
- 2. The JOC shall have the ability to actively intervene in situations of potential conflict, and the requirement to respond in a timely manner to any issues put before it for consideration. It shall have full and unfettered access to all pertinent CMAJ financial information on an as-needed basis.
- 3. The JOC shall be responsible for working with the CMA CEO (or designate) to develop the criteria for the Editor's performance evaluation, which should be established in writing as approved by the CMA Board and made available to each member of the JOC, the Editor and the CMA Senior Staff Executive and which may involve the participation of outside experts. Editor performance should be evaluated annually, with a less formal semiannual review. A more extensive, detailed review should occur prior to the appropriate date for possible renewal or extension. Results of the performance reviews should be delivered to the JOC, CMA Board, the CMA Senior Staff Executive to whom the Editor reports for business matters and to the Editor personally.
- 4. The JOC should be responsible for making recommendations regarding any proposed dismissal of the Editor. Should the JOC determine that the dismissal of the Editor is appropriate, it shall present its recommendation to the CMA Board for formal vote. The CMA Board shall not dismiss the Editor without first seeking the advice of the JOC. A 2/3 majority vote of the JOC and of the CMA Board should be required for dismissal of the Editor.

5. The CMA should draft and adhere to a formal process for regular review of the CMAJ Mission Statement and the enactment of appropriate amendments. Such review should occur not less than every five years. Proposed amendments to the CMAJ Mission Statement should be brought before the JOC for consideration. The JOC should seek input from the CMA, the Editor and Publisher on the proposed amendments for the purposes of its deliberations. The JOC recommendations and observations regarding proposed amendments to the Mission Statement should be submitted to the CMA Board prior to the Board's final decision. Amendments to the CMAJ Mission Statement should require a 2/3 majority of the CMA Board.

6. The JOC shall maintain the confidentiality of documents and where appropriate, committee deliberations.

Reporting:

The JOC will report regularly to the CMA Board to keep it apprised of any issues it is deliberating. At a minimum, annual reports will be provided by the Chair of the JOC to the CMA Board. In addition, the Chair (or an authorized representative of the JOC) shall report, as necessary, to the Executive Committee of the CMA acting under delegated authority immediately upon determination of JOC recommendations pertinent to an issue. The CMA Board shall consider any such JOC recommendations on a timely basis.

Membership:

Eight members, including one member representing the CMA Board of Directors, one member representing CMA Senior Staff, five members representing the scientific, editorial, peer-reviewer, contributor and medical communities, and one member with journalism expertise.

The members representing CMA Senior Staff and the CMA Board of Directors are to be selected by the CMA Board of Directors based on recommendations submitted by the Appointments and Review Committee.

Other JOC members are to be selected by the CMA Board of Directors based on a list of recommended persons submitted by the current JOC members. The JOC should submit three names per position. The Board will then consult the Appointments and Review Committee to review these nominations on behalf of the Board. ARC will then make recommendations to the Board with respect to the nominees submitted by JOC. In the event that none of the three names is accepted by the CMA Board, the CMA Board must go back to the JOC and request additional names for consideration. Appointments and removals of JOC members should be based on a 2/3 majority vote of the CMA Board.

Except for the CMA Senior Staff representative, who shall serve on the JOC while on the CMA Strategic Management Group, members of the JOC should serve 3-year staggered terms, renewable once.

Chair:

The Chair should be selected by the JOC itself, and should not be the member of the CMA Board of

Directors or the CMA employee.

Meetings:

The JOC shall meet at least twice annually. Additionally, the Chair shall attend or tender a report annually at a meeting of the CMA Board of Directors and shall be expected to respond to any urgent

issue on a timely basis (which may require additional meetings or teleconferences between regular

meetings).

The Chair must, and the JOC members should, attend the annual meeting of the CMAJ editorial board to

inform them of the JOC's discussions of the prior year subject to appropriate restrictions regarding

confidentiality.

Date Modified: 2013

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