



**Saskatchewan Association  
Of  
Medical Radiation  
Technologists**

**Governance Policy**



## Table of Contents

Instructions to Council Global Governance Process.....	4
GP – Global Governance Commitment.....	4
GP-1 – Governing Style .....	5
GP-2 – Council Job Contributions .....	6
GP-3 – President’s Role.....	7
GP-4 – Council Committee Principles .....	8
GP-5 – Executive Committee Structure .....	9
GP-5.1 – Audit and Finance Committee Terms of Reference.....	10
GP-5.2 – Nominating Committee Terms of Reference .....	11
GP-5.3 – Awards Committee Terms of Reference .....	12
GP-5.4 – Community Engagement Committee Terms of Reference .....	13
GP-6 – Council and Committee Expenses .....	14
GP-7 – Code of Conduct .....	15
GP-8 – Investment in Governance.....	17
GP-9 – Council Linkage with Ownership .....	19
GP-10 – Council Linkage with Members .....	20
GP-11 – Executive Linkage with Other Organizations .....	21
GP-12 – Executive Planning Cycle and Agenda Control .....	22
GP-13 – Governance Succession Planning .....	24
GP-14 – Special Rules of Order for Council Meetings.....	25
GP-15 – In Camera meetings.....	27
GP-16 – Handling of Operational Complaints .....	28
Council – Executive Director Relationship .....	29
CE – Global Council – Executive Director Relationship.....	29
CE-1 – Unity of Control .....	30
CE-2 – Accountability of the Executive Director.....	31
CE-3 – Delegation to the Executive Director .....	32
CE-4 – Monitoring Executive Director Performance.....	33
CE-5– Executive Director Employment Compensation.....	35
Instructions to Ex – Dir Ends .....	36
E – Global End.....	36
E-1 – Public Protection.....	37
E-2 – Support for SAMRT .....	38
Executive Limitations.....	39
EL – General Executive Constraint.....	39

EL-1 – Treatment of Staff and Volunteers.....	40
EL-2 – Financial Planning.....	41
EL-3 – Financial Condition .....	42
EL-4 – Asset Protection .....	43
EL-5 – Treatment of Members and Public .....	44
EL-6 – Compensation and Benefits.....	45
EL-7 – Communication and Support to the Council.....	46
EL-8 – Development of Standards Governing Practice .....	47
EL-9 – Amendments to Act or Bylaws.....	48
EL-10 – Fees.....	49
Appendix.....	50
Appendix A – Council Member Orientation.....	50
Appendix B – Expense Reimbursement Guidelines.....	51
Appendix C – Governance Policy Manual Change Log.....	52
Appendix D – Definition of Terms and Acronyms .....	53
Appendix E - Framework for Governance Policy Review Schedule.....	55



# INSTRUCTIONS TO COUNCIL GLOBAL GOVERNANCE PROCESS

## GP – GLOBAL GOVERNANCE COMMITMENT

**Date Approved: September 21, 2013**

**Date Revised:**

**Date Reviewed:**

---

On behalf of the medical radiation technologists in Saskatchewan and in the best interests of the public of Saskatchewan, the purpose of the Council is to see that the Saskatchewan Association of Medical Radiation Technologists achieves appropriate results for the appropriate people at an appropriate cost (as specified in Council Ends policies), and that unacceptable actions and situations are avoided in the governance and management of the Saskatchewan Association of Medical Radiation Technologists. This includes assuring that the Saskatchewan Association of Medical Radiation Technologists is fulfilling its mandate as defined in the Medical Radiation Technologists Act, 2006 and that the provisions of Bylaws are met.

**Date Approved: September 21, 2013**

**Date Revised:**

**Date Reviewed:**

---

The Council will govern with an emphasis on outward vision, commitment to obtaining community input, encouragement of diversity in viewpoints, strategic leadership, clear distinction of Council and staff roles, collective decisions, and a proactive, future focus. This means the Council will not be preoccupied with the present or past, or with internal, administrative detail.

More specifically, the Council will:

1. Cultivate a sense of group responsibility. The Council, not the staff, will be responsible for excellence in governing. The Council will be an initiator of policy, not merely a reactor to staff initiatives. The Council will use the expertise of individual members to enhance the ability of the Council as a body to make policy, rather than to substitute their individual judgements for the group's values.
2. Direct, control and inspire the organization through the careful establishment of broad written policies reflecting the Council's values and perspectives. The Council's major policy focus will be on the intended long-term impacts outside the operating organization, not on the administrative means of attaining those effects.
3. Enforce upon itself whatever discipline is needed to govern with excellence. Discipline will apply to matters such as attendance, preparation for meetings, policy-making principles, respect of roles, and ensuring the continuity of governance capability. Although the Council can change its governance process policies at any time, it will adhere to them scrupulously while in force.
4. Orient new members to the Council's governance process and periodically discuss process improvement.
5. Not allow any member or committee of the Council to prevent the Council from fulfilling its commitments.

**Date Approved: September 21, 2013**

**Date Revised:**

**Date Reviewed:**

---

Specific job outputs of the Council, as an informed agent of the ownership, are those that ensure appropriate organizational performance.

Accordingly, the Council will concentrate its efforts on the following job “products” or outputs:

1. The link between the organization and the owners.
2. Written governing policies which, at the broadest levels, address:
  - 2.1. *Ends*: what good or benefit the organization is to achieve, for which people, at what cost.
  - 2.2. *Executive Limitations*: Constraints on executive authority that establish the boundaries of prudence and ethics within which all executive activity and decisions must take place.
  - 2.3. *Governance Process*: Specification of how the Council conceives, carries out and monitors its own task.
  - 2.4. *Council-Executive Director Relationship*: How power is delegated, and its proper use monitored; the Executive Director role, authority, and accountability.
3. Assurance of organizational performance through structured monitoring of the Executive Director as outlined in policies on Council-Executive Director Relationship.
4. Decisions that the Council has prohibited the Executive Director from making by its Executive Limitations policies.
5. The link between the organization and political decision-makers for the purpose of advocacy in appropriate legislation.
6. Link with Medical Radiation Technology equipment and product vendors to consult on product development and education for the purpose of safety of members and the public.

**Date Approved: September 21, 2013**

**Date Revised:**

**Date Reviewed: April 30, 2021**

---

The President assures the integrity of the council’s process, and, secondarily, represents the Council to outside parties. The President is the only Council member authorized to speak for the Council (beyond simply reporting Council decisions), other than in specifically authorized instances.

1. The assigned result of the President’s job is that the Council behaves consistently with its own rules and those legitimately imposed upon it from outside the organization.
  - 1.1. Meeting discussion content will include only those issues that, according to Council policy, clearly belong to the Council to decide or monitor.
  - 1.2. Information that is neither for monitoring performance nor for Council decisions will be avoided or minimized and always noted as such.
  - 1.3. Deliberation will be timely, fair, orderly, and thorough, but also efficient and kept to the point.
  - 1.4. The procedural guide in case of dispute shall be the latest edition of Robert’s Rules of Order.
2. The President has authority to make reasonable interpretations of Council policies on Governance Process and Council-Executive Director Relationship, with the exception of (a) employment or termination of an Executive Director and (b) instances where the Council specifically delegates portions of this authority to others.
  - 2.1. The President is empowered to chair Council meetings with all the commonly accepted power of that position (e.g., ruling, recognizing).
  - 2.2. The President has no authority to make decisions about policies created by the Council within Ends and Executive Limitations policy areas. Therefore, the President has no authority to supervise or direct the Executive Director.
  - 2.3. The President may represent the Council to outside parties in announcing Council-stated positions and in stating President’s interpretations within the area delegated to the President (consistent with policies in Governance Process and Council-Executive Director Relationship areas).
3. The President may delegate this authority but remains accountable for its use.

**Date Approved: September 21, 2013**

**Date Revised:**

**Date Reviewed: April 30, 2021**

---

Council committees, when used, will be assigned so as to reinforce the wholeness of the Council's job and so as never to interfere with delegation from Council to Executive Director.

1. Council committees are to help the Council do its job, never to help or advise the staff. Committees ordinarily will assist the Council by preparing policy alternatives and implications for Council deliberation. In keeping with the Council's broader focus, Council committees will normally not have direct dealings with current staff operations.
2. Council committees may not speak or act for the Council except when formally given such authority for specific and/or time-limited purposes. Expectations and authority will be carefully stated in order not to conflict with authority delegated to the Executive Director.
3. Council committees cannot exercise authority over staff. Because the Executive Director works for the full Council, he or she will not be required to obtain approval of a Council Committee before a Council action, except where the committee has been delegated specific authority to act on behalf of the Council.
4. A Council Committee that has helped the Council create a policy will not then be assigned to monitor compliance with that policy. This separation of responsibility for policy development and responsibility for monitoring policy compliance is to prevent a committee from identifying with a part of the organization rather than the whole. The Council retains responsibility and authority to monitor organizational performance.
5. Committees will be used sparingly and ordinarily in an ad hoc capacity.
6. This policy applies to any group that is formed by Council action, whether or not it is called a committee, and whether or not it includes Council members. It does not apply to committees formed under the authority of the Executive Director.
7. All committee members shall abide by the same Code of Conduct as governs the Council.
8. Except as defined in written Terms of Reference, no Committee has authority to commit the funds or resources of the Saskatchewan Association of Medical Radiation Technologists.



**Date Approved: September 21, 2013**

**Date Revised: September 10, 2021**

**Date Reviewed: September 10, 2021**

---

A committee is a Council committee only if its existence and charge come from the Council, regardless of whether Council members sit on the committee. The only Council committees are those which are set forth in this policy. Unless otherwise stated, a committee ceases to exist as soon as its task is complete.

1. Committee expenses will be reimbursed in accordance with Council Policy GP-6.

**Audit and Finance Committee:**

**Product:** Specification of scope of audit prior to outside audit - by no later than the scheduled date of the audit. Act as a resource to the Executive Director on all financial matters.

**Authority:** To incur no more than \$7000 direct charges and use of no more than 16 person-hours staff time per annum

**Nominating Committee:**

**Product:** Properly screened potential Council members (as per Policy GP-13) - by no later than 30 days prior to the AGM

**Authority:** To incur no more than \$500 direct charges and use of no more than 8 hours staff time per annum

**Awards Committee:**

**Product:** To promote and communicate information regarding annual awards criteria and coordinate all annual awards

**Authority:** To incur no more than \$1000 direct charges and no more than 16 hours of staff time per annum

**Community Engagement Committee:**

**Product:** A comprehensive and representative Community Engagement plan on a 3-year rolling basis

**Authority:** To incur no more than \$3000 direct charges and use of no more than 16 hours staff time per annum

## GP-5.1 – Audit and Finance Committee Terms of Reference

**Date Approved: September 21, 2013**

**Date Revised: September 10, 2021**

**Date Reviewed: September 10, 2021**

---

### **1. Purpose/Product**

- 1.1. Will review all material aspects of operations, financial reporting and internal control and audit functions and provide an opinion to Council semi-annually as to the Executive Director's compliance with the criteria specified in the Executive Limitations Policies on Finance.
- 1.2. Will act as a resource to the Executive Director on all financial matters including preparation of recommended budget for council, monitoring and reporting.
- 1.3. Will assist the Executive Director with the selection of a financial auditor and will liaison with the auditor on behalf of the Council.
- 1.4. Will review the auditor's report and present this report to Council.
- 1.5. Will opinion to Council based on evidence required of the external auditor, as to whether the independent audit of the organization has been performed in an appropriate manner.
- 1.6. Will provide an opinion on current information for Council on significant new developments in accounting principles or relevant rulings of regulatory bodies that affect the organization.
- 1.7. Will complete a self-monitoring report on the appropriateness of Council's own spending, based on criteria in the Council GP policy on Council expenses.
- 1.8. Will offer options for Council decision re: capital projects outside the Executive Director's expenditure limits as defined in the Executive Limitations on finance.
- 1.9. Will provide an annual report to Council highlighting the committee's review of the audited financial statements and any other significant information arising from their discussions with the external auditor.

### **2. Authority**

- 2.1. The committee has no authority to change or contravene Council policies.
- 2.2. The committee has authority to spend funds required for travel to meetings if meetings are required. No authority to spend or commit other organization funds.
- 2.3. The committee has authority to use staff resource time normal for administrative support around meetings.
- 2.4. The Committee does not have authority to instruct the Executive Director or any other staff member, other than to request information required in the conduct of its duties.
- 2.5. The Committee has the authority to meet independently with the organization's external auditors.

### **3. Composition**

- 3.1. The Committee shall be composed of the Vice-President, the Public Representative and up to three Medical Radiation Technologists who are a member of the SAMRT. The Medical Radiation Technologist shall be appointed biennially by Council.
- 3.2. The Vice-President shall serve as Committee Chairperson.

## GP-5.2 – Nominating Committee Terms of Reference

**Date Approved: June 25, 2014**

**Date Revised: September 10, 2021**

**Date Reviewed: September 10, 2021**

---

### **1. Purpose/ Product**

- 1.1. The committee will submit names for vacancies on Council at least 60 days prior to the Associations AGM.
- 1.2. The Committee will consider the Governance Succession Planning Policy GP-13 when accepting nominees for Council positions.
- 1.3. The Committee will provide an annual report to Council outlining the status of Council vacancies.

### **2. Authority**

- 2.1. The Committee has no authority to change or contravene Council policies.
- 2.2. The Committee has authority to spend funds required for travel to meetings if meetings are required. No authority to spend or commit other organization funds.
- 2.3. The Committee has authority to use staff resource time normal for administrative support around meetings.
- 2.4. The Committee does not have authority to instruct the Executive Director or any other staff member, other than to request information required in the conduct of its duties.

### **3. Composition**

- 3.1. The Committee shall be composed of the Past-President and four members from the Full Practicing Membership, Non-Practicing membership or Life Membership of the Association. Consideration will be made to obtain representation from all of the disciplines of the Association.
- 3.2. The Past -President shall serve as Committee Chairperson.

**Date Approved: June 25, 2014**

**Date Revised: March 1, 2019**

**Date Reviewed: September 10, 2021**

---

### **1. Purpose/ Product**

- 1.1 The Committee will promote and communicate information regarding annual awards criteria to recognize the accomplishments of members of the Saskatchewan Association of Medical Radiation Technologists.
- 1.2 The Committee will consider previous award criteria and establish an award structure to recognize member's achievements.
- 1.3 The Committee will submit to Council recommendations for award presentations to be made at the Annual General Meeting of the Association.
- 1.4 The Committee may receive nominations for Life membership to be submitted for Council decision.
- 1.4 The Committee will provide an annual report naming the recipients of awards to be presented at the Association's Annual General Meeting.

### **2. Authority**

- 2.1. The Committee has no authority to change or contravene Council policies.
- 2.2. The Committee has authority to spend funds required for travel to meetings if meetings are required. No authority to spend or commit other organization funds.
- 2.3. The Committee has authority to use staff resource time normal for administrative support around meetings.
- 2.4. The Committee does not have authority to instruct the Executive Director or any other staff member, other than to request information required in the conduct of its duties.

### **3. Composition**

- 3.1 The Committee will be composed of at least 4 members of the Association including the Past-President. Consideration will be made to obtain representation from all of the disciplines of the Association.
- 3.2 The Chairperson will be determined by the Committee.

**Date Approved: November 22, 2014**

**Date Revised: March 1, 2019**

**Date Reviewed: September 10, 2021**

---

### **1. Purpose/ Product**

- 1.1. The Committee will explore methods of ownership consultation about Ends options as described in Ends Policy Numbers E-1 and E-2.
- 1.2. The Committee will present recommendations for Council decision and with the assistance of staff, initiate Council approved options to establish meaningful linkages to owners.
- 1.3. The Committee will recommend to Council methods of evaluating linkages to owners and report results to Council.
- 1.4. The Committee will present to Council a comprehensive and representative Ownership Linkage plan on a 3-year rolling basis.
- 1.5. The Committee will provide an annual report to Council highlighting benefits and results of Ownership Linkage activities.

### **2. Authority**

- 2.1. The Committee has no authority to change or contravene Council policies.
- 2.2. The Committee has authority to spend funds required for travel to meetings if meetings are required. No authority to spend or commit other organization funds.
- 2.3. The Committee has authority to use staff resource time normal for administrative support around meetings.
- 2.4. The Committee does not have authority to instruct the Executive Director or any other staff member, other than to request information required in the conduct of its duties.
- 2.5. The Committee has the authority to meet with external organizations in order to fulfil its' responsibilities outlined in Section 1 of this policy.

### **3. Composition**

- 3.1 The Committee shall be composed of at least 3 members of Council, one of whom will be a Public Representative. The committee will also include one member at large.
- 3.2 The Chairperson will be determined by the Committee.

**Date Approved: September 21, 2013**

**Date Revised: September 10, 2021**

**Date Reviewed: September 10, 2021**

---

Council members shall be paid an honorarium and expense allowance for all Council and committee meetings attended, as well as any meeting attended at the direction of the Council.

1. Honoraria shall be as follows: \$150/council member/meeting; \$250/President/meeting.
2. After serving one year on council, members receive \$650 professional allowance annually for the length of their term. The President will receive \$1000 professional allowance annually for the length of his or her term.
3. Expenses shall be reimbursed as follows:
  - 3.1. Remuneration and expenses shall be as set forth in The SAMRT Administrative Bylaws, 2015.

**Date Approved: September 21, 2013**

**Date Revised: September 12, 2014**

**Date Reviewed: September 10, 2021**

---

The Council expects of itself and its Members ethical, businesslike, and lawful conduct. This includes proper use of authority and appropriate decorum when acting as Council Members. It expects its Members to treat one another and staff members with respect, co-operation, and a willingness to deal openly on all matters.

1. Council Members must have loyalty to the ownership, un-conflicted by loyalties to staff, other organizations, or any personal interest as a consumer.
2. Council Members are accountable to exercise the powers and discharge the duties of their office honestly and in good faith. Members shall exercise the degree of care, diligence, and skill that a reasonably prudent person would exercise in comparable circumstances.
3. Council Members must avoid a conflict of interest with respect to their fiduciary responsibility.
  - 3.1. There must be no self-dealing or any conduct of private business or personal services between any Council Member and the organization, except as procedurally controlled to assure openness, competitive opportunity, and equal access to otherwise “inside” information. Members will annually disclose their involvements with other organizations, with vendors, or any associations that might be or might reasonably be seen as being a conflict.
  - 3.2. When the Council is to decide upon an issue, about which a member has an unavoidable conflict of interest, that member shall absent herself or himself without comment from not only the vote, but also from the deliberation.
  - 3.3. Council Members will not use their Council position to obtain employment in the organization for themselves, family members, or close associates. Should a Council member apply for employment, he or she must resign from the Council.
4. Council Members will respect Council confidentiality in accordance with such Council Member’s confidentiality agreement all of which are kept at the SAMRT office.
5. Council Members shall not attempt to exercise individual authority over the organization.
  - 5.1. Council Members’ interaction with the Executive Director or with staff must recognize the lack of authority vested in individuals except when explicitly Council-authorized.
  - 5.2. Council Members’ interaction with the public, press or other entities must recognize the same limitation and the similar inability of any Council Member(s) to speak for the Council except to repeat explicitly stated Council decisions.
  - 5.3. Council members will not evaluate the performance of anyone reporting to the Executive Director.
6. Council Members shall be familiar with the incorporating documents, by-laws, regulations, and policies of the organization as well as the rules of procedure and proper conduct of a meeting so

that any decision of the Council may be made in an efficient, knowledgeable, and expeditious fashion.

7. Council Members will be properly prepared for Council deliberation.
8. Council Members shall regularly take part in educational activities that will assist them in carrying out their responsibilities.
9. Council Members shall attend meetings on a regular and punctual basis. Absence of a Council Member from more than 3 regular and teleconference meetings per year shall be considered a resignation from the Council. A Member may request reinstatement. The Council may, at its discretion, reinstate a Member upon such a request. Only one such reinstatement per Council Member is permitted.
10. Council Members shall ensure that unethical activities not covered or specifically prohibited by the foregoing or any other legislation are neither encouraged nor condoned.
11. A Council Member who is alleged to have violated the Code of Conduct shall be informed in writing and shall be allowed to present his or her views of such alleged breach at the next Council meeting. The complaining party must be identified. If the complaining party is a Council Member, he or she and the respondent Council Member shall absent themselves from any vote upon resolution of censure or other action that may be brought by the Council. Council Members who are found to have violated the Code of Conduct may be subject to censure.



**Date Approved: September 21, 2013**

**Date Revised: March 4, 2022**

**Date Reviewed: November 26, 2021**

---

Because poor governance costs more than learning to govern well, the Council will invest in its governance capacity.

1. Candidates for Council membership shall be provided with information that clearly outlines the role of the Council, the necessary qualifications, and the Council’s expectations of Council members. “Appointing authorities will be provided with information that clearly outlines the Council’s approach to governance and desirable characteristics of Council Members.
2. The Council recognizes that continual updating of skills and awareness of new issues are vital to a member's contribution to the Council. Therefore, it is expected that:
  - 2.1. New Council members shall receive a complete orientation to ensure familiarity with the organization’s issues and structure, and the Council’s process of governance.
  - 2.2. Council members shall have ongoing opportunity for continued training and education to enhance their governance capabilities.
3. Outside monitoring assistance will be arranged so that the Council can exercise sufficient control over organizational performance. This includes but is not limited to fiscal audit.
4. The Council will establish and be accountable for an annual budget for its own governance functions. Costs will be prudently incurred, though not at the expense of endangering the development and maintenance of superior capability. Council shall determine the funds required annually, prior to the Executive Director’s development of the organizational budget. Council’s budget shall include, in addition to the costs of Council and Council Committee Meetings, funds for:
  - Council member attendance at conferences and conventions.
  - Improvement of its governance function.
  - Costs of fiscal audit and any other outside monitoring assistance required.
  - Costs of methods such as focus groups and surveys to ensure the Council’s ability to listen to owner viewpoints and values.
5. The Council will establish governance process policies that will serve as measurable standards against which the Council’s performance can be evaluated.
  - 5.1. Under the leadership of the president, the Council will conduct a quarterly self- evaluation as identified in the schedule below. As a result of this evaluation, the Council will establish a governance action plan with specific goals and objectives for improvement of identified areas.
  - 5.2. The Council will monitor its adherence to its own Governance Process Policies regularly. Upon the choice of the Council, any policy can be monitored at any time. However, at minimum, the Council will review the policies and monitor its own adherence to them, according to the following schedule:

<b>Policy Review</b>	
<b>Year 1/ Revolving cycle</b>	
GP	Global Governance Process
GP-1	Governing Style
GP-2	Council Job Contributions
GP-3	President's Role
GP-4	Council Committee Principle
GP-5	Council Committee Structure
GP-6	Council and Committee Expenses
GP-7	Code of Conduct
GP-8	Investment in Governance
GP-9	Council Linkage with Ownership
<b>Year 2/ Revolving cycle</b>	
GP-10	Council Linkage with Membership
GP-11	Council Linkage with Organizations
GP-12	Council Planning Cycle & Agenda Control
GP-13	Council Succession Planning
GP-14	Special Rules of Order for Council
GP-15	In Camera Meetings
GP-16	Handling of Operational Complaints
CE	Global Council-Executive Director Relationship
CE-1	Unity of Control
CE-2	Accountability of the Executive Director
CE-3	Delegation to the Executive Director
CE-4	Monitoring Executive Director Performance
CE-5	Council – Executive Director Relationship
<b>Year 3/ Revolving cycle</b>	
EL	General Executive Constraint
EL-1	Treatment of Staff
EL-2	Financial Planning
EL-3	Financial Condition
EL-4	Asset Protection
EL-5	Treatment of Members and Public
EL-6	Compensation and Benefits
EL-7	Communication and Support to Council
EL-8	Development of Standards Governing Practice
EL-9	Amendments to Act or Bylaws
EL-10	Fees
	Global End
E-1	Public Protection
E-2	Support for SAMRT

**Date Approved: September 21, 2013**

**Date Revised:**

**Date Reviewed: March 4, 2022**

---

The “moral owners” of the Saskatchewan Association of Medical Radiation Technologists are defined as the People of Saskatchewan. The Council shall be accountable for the organization to its owners as a whole. The Council shall act on behalf of the owners as a whole, rather than being advocates for specific geographic areas or interest groups.

1. The privilege of self-governance has been granted to the Saskatchewan Association of Medical Radiation Technologists by provincial legislation. This legislation requires the Saskatchewan Association of Medical Radiation Technologists to carry out its activities and govern its regulated members in a manner that protects and serves the public interest. As the representative of the owners, the Council is obligated to identify and know what the owners want and need.
2. When making governance decisions, Council Members shall maintain a distinction between their personal interests as “customers” of the organization’s services, and their obligation to speak for others as a representative of the “owners” as a whole. As the agent of the owners, the Council is obligated to identify and know what the owners want and need.
3. The Council shall gather data in a way that reflects the diversity of the ownership. It shall meet with, gather input from, and otherwise interact with the broad base of owners, and acknowledge diversity. It shall recognize that diversity assures a broad base of wisdom and shall seek to make decisions considering that input.
4. Collection of input from the ownership may be accomplished through a variety of methods, including, but not limited to, meetings with the ownership, surveys, and advisory committees.

**Date Approved: September 21, 2013**

**Date Revised:**

**Date Reviewed: March 4, 2022**

---

The Council exercises the authority granted by legislation to self-govern the profession of medical radiation technology in the best interests of the public. Council recognizes that in order to exercise this authority on behalf of the profession, it must maintain a special relationship with members as one subset of the overall “moral ownership.”

1. Council shall be aware of the needs and wants of the membership as they relate to the members’ ability to safely and effectively practice medical radiation technology.
  - 1.1. Council shall meet with, gather input from, and otherwise interact with the membership to obtain a diversity of perspectives on issues affecting the profession of medical radiation technology. It shall take these perspectives into account when making decisions, provided always that the interests of the public are protected.
2. Council may develop policy permitting the SAMRT to act as an advocate for the membership, provided such action is consistent with the public interest.
3. The Council shall ensure that the medical radiation technology profession is represented on local, national, and international levels.

**Date Approved: September 21, 2013**

**Date Revised:**

**Date Reviewed: March 4, 2022**

---

The Council shall identify other organizations with which it requires good working relationships in order to share and enhance its role as “owner representative” in determining the most appropriate Ends.

**1. Relationships with Other Organizations**

1.1. The Council shall establish mechanisms for maintaining open communication with other organizations regarding Ends. Such mechanisms may include, but are not limited to:

1.1.1. Inviting representatives of the Council of those organizations to Council meetings.

1.1.2. Meeting jointly with other Council on occasion.

**2. Appointments to External Policy or Advisory Committees**

2.1. Upon request for organizational appointments to external committees concerned with policy level issues, the Council will assess whether such representation is appropriate within the Council’s stated policies and current priorities. If this assessment is positive, the Council will appoint appropriate representatives. Issues of confidentiality, information sharing, and administrative support shall be clarified for the appointee by the Council President and/or Executive Director.

2.2. The organization’s appointee shall provide information reports as appropriate, to be determined by the Council at the time of appointment.

2.3. Since the appointee is representing the Council, the appointee shall be kept informed of current Council policies that might affect deliberations of the Committee in question. Any representations made on behalf of the Council shall adhere to the stated policies of the Council. Any issues requiring the statement of a new policy position on the part of the Council shall be brought to the Council for decision.

**Date Approved: September 21, 2013**

**Date Revised:**

**Date Reviewed: March 4, 2022**

---

To accomplish its job products with a governance style consistent with Council policies, the Council will follow an annual agenda which (a) completes a re-exploration of Ends policies annually and (b) continually improves Council performance through Council education and enriched input and deliberation.

1. The Council shall maintain control of its own agenda by developing each year no later than the first quarter of the Council's term of office, an annual schedule which includes, but is not limited to:
  - 1.1. Considered review of the Ends in a timely fashion which allows the Executive Director to build a budget.
  - 1.2. Consultations with selected groups in the ownership, or other methods of gaining ownership input, prior to the above review.
  - 1.3. Scheduled time for education related to ends determination (for example, presentations relating to the external environment, demographic information, exploration of future perspectives which may have implications, presentations by advocacy groups, and staff).
  - 1.4. Scheduled time for monitoring of the Council's own compliance with its Governance Process policies, and for review of the policies themselves.
  - 1.5. Scheduled time for monitoring compliance by the Executive Director with Executive Limitations and Ends policies, and for review of the policies themselves. Monitoring reports will be provided and read in advance of the Council meeting, and discussion will occur only if reports show policy violations, if reports do not provide sufficient information for the Council to make a determination regarding compliance, or if policy criteria are to be debated.
  - 1.6. Scheduled time for education about the process of governance.
2. Based on the outline of the annual schedule, the Council delegates to the President the authority to fill in the details of the meeting content. The detailed agenda shall be prepared jointly by the Council President and the Executive Director. Potential agenda items shall be carefully screened to ensure that they relate to the Council's job description, rather than simply reviewing staff activities. Screening questions shall include:
  - 2.1. Clarification as to whether the issue clearly belongs to the Council or the Executive Director.
  - 2.2. Identification of what category an issue relates to - Ends, Executive Limitations, Governance Process, Council – Executive Director Relationship.
  - 2.3. Review of what the Council has already said in this category, and how the current issue is related.
3. Throughout the year, the Council will attend to Required Approvals Agenda items as expeditiously as possible. When an item is brought to the Council via the Required Approvals Agenda, provided that

compliance with all of the criteria in Executive Limitations has been demonstrated, the Council will not discuss the item prior to approval. An exception will be made only if a majority of the Council votes to remove the item from the Required Approvals Agenda for discussion.

**Date Approved: September 21, 2013**

**Date Revised:**

**Date Reviewed: April 29, 2022**

---

In keeping with the Council’s commitment to excellence in governance, the Council shall strive to solicit for positions on the Council candidates who have characteristics that will enable them to govern, not to manage, the organization. These characteristics include:

1. Commitment to linking with the ownership. Understanding that they stand in for an ownership of diverse people; willing to actively seek to access and understand that diversity.
2. Ability to think in terms of systems and context — to see the big picture.
3. Interest in and capability to discuss the values underlying the actions taken in the organization, and to govern through the broader formulations of these values.
4. Willingness to delegate the operational detail to others.
5. Ability and willingness to deal with vision and the long term, rather than day-to-day details.
6. Ability and willingness to participate assertively in deliberation, while respecting the opinions of others.
7. Willingness and commitment to honor Council decisions.
8. Commitment not to make judgments in the absence of previously stated criteria.



**Date Approved: March 8, 2014**

**Date Revised:**

**Date Reviewed: April 29, 2022**

---

Council meetings will be conducted in an orderly, effective process, led, and defined by the chair.

1. All by-law obligations respecting council meetings must be satisfied.
2. Council meetings shall be called to order at the time specified in the notice of meeting and upon satisfaction of quorum.
3. Meeting order and decorum shall be maintained, and all members treated with dignity, respect, courtesy, and fairness during discussion and debate and in all other respects.
4. Council members must keep their comments relevant to the issue under consideration.
5. Council meetings will be conducted at a level of informality considered appropriate by the chair, including that discussion of a matter may occur prior to a proposal that action be taken on any given subject.
6. Proposals that the Council take action, or decide a particular matter, shall (unless otherwise agreed to by unanimous consent) be made by main motion of a Council member, discussed, and then voted on. Motions require a second to proceed to discussion and subsequent vote.
  - 6.1. The chair of the Council may not to the same extent as any board member, make motions, engage in debate, or vote on any matter to be decided, except to change the outcome of a decision in a tied vote.
  - 6.2. A motion to amend a main motion may be amended but third level amendments are out of order.
  - 6.3. A motion to refer to a committee, postpone, or table, may be made with respect to a pending main motion, and if carried shall set the main motion (the initial proposal) aside accordingly.
7. Council members may speak to a pending motion on as many occasions, and at such length, as the chair may reasonably allow.
8. A vote on a motion shall be taken when discussion ends but any Council member may, during the course of debate, move for an immediate vote (close debate) which, if carried, shall end discussion and the vote on the main motion shall then be taken.
9. A majority vote will decide all motions before the Council excepting those matters in the by-laws which oblige a higher level of approval.
10. A motion to adjourn a Council meeting may be offered by any Council member or, on the conclusion of all business, adjournment of the meeting may be declared by the chair.
11. A Council member may request to have his or her vote on the record.

12. When further rules of order are to be developed by Council, the Council will consider the most recent edition of Robert's Rules of Order as a resource guide.

**Date Approved: April 10, 2014**

**Date Revised: June 25, 2014**

**Date Reviewed: April 29, 2022**

---

Council may exclude the public from a meeting if it considers it necessary to protect the interests of the public or a person and the desirability of avoiding disclosure outweighs the desirability of public disclosure of the information. Council members shall maintain confidentiality respecting Council may exclude the public from a meeting if it considers it necessary to protect the interests of the public or a person and the desirability of avoiding disclosure outweighs the desirability of public disclosure of the information. Council members shall maintain confidentiality respecting all discussions undertaken by the Council in camera.

1. Items discussed in-camera are items of a confidential nature, disclosure of which could reasonably be expected to be harmful to:
  - Personal privacy of staff or clients, including human resource issues;
  - Individual or public safety;
  - Business interests of a third party;
  - Financial or economic interest of the Council and its affiliates, including local public body confidences;
  - The integrity and security of computer systems;
  - The integrity and protection of security systems.
2. Also, to be considered in-camera are:
  - Litigation matters and solicitors' legal advice.
3. Items that may be considered in-camera include:
  - Planning sessions involving the whole Council in the development of a position or a policy;
  - Internal governance matters of the Council;
  - Property acquisitions or disposals;
  - Drafts of resolutions, bylaws, or other legal instruments such as rules and regulations.
  - Items determined appropriate for in-camera by a majority vote of Council.
4. The council determines attendance at in-camera sessions.
  - 4.1. All Council members with the exception of those who are deemed to be in conflict of interest as defined in GP-7 shall be included.
  - 4.2. Exclusion or inclusion of anyone at an in-camera session is determined by a majority vote of Council as a whole.
  - 4.3. The Executive Director shall attend all in-camera meetings, except where issues of his/her performance or compensation are being discussed, at which time he/she may be excluded from the proceedings at the direction of the Chair.
  - 4.4. Senior staff will be included in-camera discussions at the discretion of the Executive Director, only with the permission of the Chair. They will normally be excluded only when issues of performance or remuneration of the Executive Director are under discussion.
  - 4.5. The Council Recording Secretary will be in attendance at all in-camera sessions at the discretion of the Chair. If the Recording Secretary is excluded, the Chair shall appoint a Council member to maintain minutes of the session.

**Date Approved: February 28, 2015**

**Date Revised: June 17, 2015**

**Date Reviewed: April 29, 2022**

---

To ensure that council fulfills its accountability to the ownership but does not interfere in matters it has delegated to the Executive Director, the following process shall be followed in the case of a council member receiving a complaint regarding an operational matter.

1. The Council Member shall inquire if the proper internal communication protocol for registering concerns has been followed. If not, the individual shall be directed to the appropriate person, and the Council Member shall take no further action.
2. The Council Member shall not offer any evaluative comments or solutions.
3. If the internal protocol has been followed and the concern has not been resolved through that action, the Council Member shall explain to the individual that Council has delegated certain responsibilities to the Executive Director, and that Council holds the Executive Director accountable. Indicate that the Executive Director will be asked to ensure that the matter is looked into and respond directly.
4. The Council Member shall inform the Executive Director or individual designated by the Executive Director of the complaint, and request that it be handled.



## COUNCIL – EXECUTIVE DIRECTOR RELATIONSHIP

### CE – GLOBAL COUNCIL – EXECUTIVE DIRECTOR RELATIONSHIP

**Date Approved: September 21, 2013**

**Date Revised:**

**Date Reviewed: September 23, 2022**

---

The Council's sole official connection to the operational organization, its achievements and conduct will be through a Chief Executive Officer, titled Executive Director.

**Date Approved: September 21, 2013**

**Date Revised: September 23, 2022**

**Date Reviewed: September 23, 2022**

---

Only officially passed motions of the Council are binding on the Executive Director.

1. Decisions or instructions of individual Council members, officers, or committees are not binding on the Executive Director except in rare instances when the Council has specifically authorized such exercise of authority.
2. In the case of Council members or committees requesting information or assistance without Council authorization, the Executive Director can refuse such requests that require, in the Executive Director's opinion, a material amount of staff time or funds or are disruptive.
3. Only the Council acting as a body can employ, terminate, discipline, or change the conditions of employment of the Executive Director.

**Date Approved: September 21, 2013**

**Date Revised: September 23, 2022**

**Date Reviewed: September 23, 2022**

---

The Executive Director is the Council's only link to operational achievement and conduct, so that all authority and accountability of staff, as far as the Council is concerned, is considered the authority and accountability of the Executive Director.

1. The Council will never give instructions to persons who report directly or indirectly to the Executive Director.
2. The Council will refrain from evaluating, either formally or informally, any staff other than the Executive Director.
3. The Council will view Executive Director performance as identical to organizational performance, so that organizational accomplishment of Council stated Ends and compliance with Executive Limitations will be viewed as successful Executive Director performance. Therefore, the Executive Director's job contributions shall be accomplishment of the Ends while maintaining compliance with the Executive Limitations.

**Date Approved: September 21, 2013**

**Date Revised:**

**Date Reviewed: November 25, 2022**

---

The Council will instruct the Executive Director through written policies that prescribe the organizational Ends to be achieved, and describe organizational situations and actions to be avoided, allowing the Executive Director to use any reasonable interpretation of these policies.

1. The Council will develop policies instructing the Executive Director to achieve certain results, for certain recipients at a specified cost. These policies will be developed systematically from the broadest, most general level to more defined levels, and will be called Ends policies.
2. The Council will develop policies that limit the latitude the Executive Director may exercise in choosing the organizational means. These policies will be developed systematically from the broadest, most general level to more defined levels, and they will be called Executive Limitations policies.
3. As long as the Executive Director uses *any reasonable interpretation* of the Council's Ends and Executive Limitations policies, the Executive Director is authorized to establish all further operational procedures, make all decisions, take all actions, establish all practices and develop all activities.
4. The Council may change its Ends and Executive Limitations policies, thereby shifting the boundary between Council and Executive Director domains. By doing so, the Council changes the latitude of choice given to the Executive Director. But as long as any particular policy is in place, the Council will respect and support the Executive Director's choices. This does not prevent the Council from obtaining information from the Executive Director about the delegated areas, except for confidential data.



**Date Approved: September 21, 2013**

**Date Revised:**

**Date Reviewed: November 25, 2022**

---

Systematic and rigorous monitoring of Executive Director job performance will be solely against the only expected Executive Director job outputs: organizational accomplishment of Ends and organizational operation within the boundaries established in Executive Limitations.

1. The purpose of monitoring is simply to determine the degree to which Council policies are being fulfilled. Only information that does this will be considered to be monitoring. Monitoring will be as automatic as possible, using a minimum of Council time so that meetings can be used to create the future rather than to review the past.
2. A given policy may be monitored in one or more of three ways:
  - 2.1. Internal report: Disclosure of compliance information by the Executive Director, along with his or her explicit interpretation of Council policy, and justification for the reasonableness of interpretation
  - 2.2. External report: Discovery of compliance information by an impartial, external auditor, inspector or judge who is selected by and reports directly to the Council. The external party will first be provided with the Executive Director's explicit interpretation of the policy and justification for the reasonableness of interpretation. The report must assess the reasonableness of the interpretation of Council policy, and compliance with it. The basis for assessment is *not* the standards of the external party unless the Council has previously indicated that party's opinion to be the standard.
  - 2.3. Direct Council Inspection: Discovery of compliance information by a designated Councilmember, a committee, or the Council as a whole. This is a Council inspection of documents, activities or circumstances directed by the Council that assesses compliance with policy, with access to the Executive Director's justification for the reasonableness of his/her interpretation. Such an inspection is only undertaken at the instruction of the Council, and with the Executive Director's knowledge.
3. In every case, the standard for compliance shall be *any reasonable Executive Director interpretation* of the Council policy being monitored. The Council is the final arbiter of reasonableness but will always judge with a "reasonable person" test rather than interpretations favored by Council members or even the Council as a whole.
4. Upon the choice of the Council, any policy can be monitored by any of the above methods at any time. For regular monitoring, however, each *Ends* and *Executive Limitations* policy will be classified by the Council according to frequency and method.

5. A formal evaluation of the Executive Director by the Council will occur annually, based on the achievement of the Council's *Ends Policies* and non-violation of its *Executive Limitations* policies. This formal evaluation will be conducted by cumulating the regular monitoring data provided during the year and the Council's recorded acceptance or non-acceptance of the reports and identifying performance trends evidenced by that data.

**Date Approved: April 16, 2015**

**Date Revised: May 26, 2023**

**Date Reviewed: March 17, 2023**

The SAMRT Councils’ employment practices will be in keeping with current provincial and federal labour standards and other relevant legislation. The Council will employ and promote a person to the Executive Director position without regard to race, nationality, religion, colour, ethnic or national origin, sex, age, marital status, family status, political beliefs, or handicap. Hiring practice will also consider the qualifications that Council believes to be appropriate for the position.

The Executive Director compensation will be decided by the Council as a body and based on organizational performance and consideration of the following criteria outlined below.

1. The Organizational performance will be only that performance revealed by the monitoring system to be directly related to criteria given by the Council in policy.
2. Compensation will cover the entire range of salary, benefits, and all other forms of compensation. SAMRT will provide the Executive Director with Disability Income, Group Life Insurance, Core Dental, Enhanced Dental and Extended Health Plans. If working on a part-time basis the Executive Director will receive the core dental, enhanced dental, and extended health benefits on a pro-rated basis.
3. In addition to acceptable performance, compensation will take into account the market, cost of living, and ability of the organization to pay.
  - 3.1. Council will refer to the collective bargaining agreement to determine what a Senior Medical Radiation Technologist employed within the Saskatchewan Health Authority receives in terms of salary and benefits.
  - 3.2. Council will also periodically survey equivalent positions within similar organizations of a comparable size to help determine an appropriate level of compensation.
4. In addition to acceptable performance, compensation will take into account the market, cost of living, and ability of the organization to pay.

	<b>Policy</b>	<b>Method</b>	<b>Frequency</b>
E-	Global End	Internal Report	Annually
E-1	Public Protection	Internal Report	Annually
E-2	Support for SAMRT	Internal Report	Annually
EL	General Executive Constraint	Internal Report	Annually
EL-1	Treatment of Staff	Internal Report	Annually
EL-2	Financial Planning	Direct Inspection	Annually
EL-3	Financial Condition	Internal Report & External Audit	Quarterly Annually
EL - 4	Asset Protection	Internal Report & External Audit	Quarterly Annually
EL-5	Treatment of Members and Public	Internal Report	Annually
EL-6	Compensation and Benefits	Internal Report	Annually
EL-7	Communication and Support to Council	Direct Inspection	Annually
EL-8	Development of Standards Governing Practice	Internal Report	Annually
EL-9	Amendments to Act or Bylaws	Internal Report	Annually
EL-10	Fees	Internal Report	Annually



## INSTRUCTIONS TO EX – DIR ENDS

### E – GLOBAL END

**Date Approved: September 21, 2013**

**Date Revised: April 7, 2016**

**Date Reviewed:**

---

The Saskatchewan Association of Medical Radiation Technologists exists so that the public is assured of receiving safe, competent, professional, and ethical care related to Medical Imaging and Therapeutic Radiation Technology at a use of resources that demonstrates good stewardship of funds received. This is further defined to include, but not limited to:

1. The public is served by professional, competent, and ethical Medical Radiation Technologists.
2. There is broad awareness and support in Saskatchewan for the role of Medical Radiation Technologists.

**[IT IS VERY IMPORTANT, HOWEVER, FOR THE COUNCIL TO COMMIT ITSELF TO BEGIN IMMEDIATELY ON THE ENDS JOURNEY. THAT WILL NOT BE AS QUICKLY DONE AS IN THE PROCESS OF DEVELOPING THE OTHER POLICIES, AND IN A LARGER SENSE WILL GO ON IN PERPETUITY. ("ENDS" NEVER END!) ONCE OPERATING ON THE SYSTEM, AS YOU ARE NOW IN A POSITION TO DO, LINKING WITH THE "OWNERSHIP" AND ENDS DEVELOPMENT ARE VIRTUALLY THE ONLY TIME- CONSUMING WORK OF THE COUNCIL.]**

**Date Approved: September 21, 2013**

**Date Revised: April 7, 2016**

**Date Reviewed:**

- 
1. The public is served by professional, competent and ethical Medical Radiation Technologists. This is further defined to include, but not limited to:
    - 1.1. Medical Radiation Technologists will cause no harm to the public.
    - 1.2. Medical Radiation Technologists have access to and knowledge of information necessary for licensure and standards of practice, including continuing education and advances in relevant technology.

**Date Approved: September 21, 2013**

**Date Revised: April 7, 2016**

**Date Reviewed:**

---

There is broad awareness and support in Saskatchewan for the role of Medical Imaging and Therapeutic Radiation Technologists. This is further defined to include, but not limited to:

- 1 . The Saskatchewan Association of Medical Radiation Technologists is seen as a credible source of knowledge for the public, legislators, and the medical industry.



## EXECUTIVE LIMITATIONS

### EL – GENERAL EXECUTIVE CONSTRAINT

**Date Approved: September 21, 2013**

**Date Revised:**

**Date Reviewed: March 17, 2023**

---

The Executive Director shall not cause or allow any practice, activity, decision, or organizational circumstance, which is either imprudent, illegal, or in violation of commonly accepted business and professional ethics.

**Date Approved: September 21, 2013**

**Date Revised: November 6, 2015**

**Date Reviewed: March 17, 2023**

---

The Executive Director shall not cause or allow working conditions for staff or volunteers that are unfair, undignified, unsafe, disorganized, or unclear and not in accordance with Saskatchewan Labour Laws.

Further, without limiting the scope of the above statement by the following list, the Executive Director shall not:

1. Allow hiring practices that result in a real or perceived conflict of interest in any reporting relationship.
2. Operate without written human resource policies that clarify expectations and working conditions for staff, provide for effective handling of grievances, and protect against wrongful conditions.
3. Act against any staff, volunteer, or member for non-disruptive expression of dissent.
4. Allow staff or volunteers to be unprepared to deal with emergency situations.



**Date Approved: September 21, 2013**

**Date Revised:**

**Date Reviewed: March 17, 2023**

---

The Executive Director shall not permit planning that allocates resources in a way that deviates materially from Council-stated Ends priorities, that risks fiscal jeopardy, or that does not consider the longer-term ability of the association to achieve Ends.

Further, without limiting the scope of the above statement by the following list, the Executive Director shall not:

1. Operate without a multi-year strategic plan that can be expected to achieve a reasonable interpretation of the Ends.
2. Permit planning to omit regular analysis of strengths, weaknesses, opportunities, and threats, including external environmental issues, which may impact the organization’s short and long-term future.
3. Permit budgeting for any fiscal period or the remaining part of any fiscal period that is not derived from the strategic plan.
4. Permit financial planning that omits credible projection of revenues and expenses, separation of capital expenditures and operational expenses, cash flow projections, and disclosure of planning assumptions.
5. Plan the expenditure in any fiscal year of more funds than are conservatively projected to be received in that period.
6. Permit financial planning that does not provide the amount determined annually by the Council for the Council’s direct use during the year, such as costs of fiscal audit, Council development, Council and committee meetings, Council legal fees, and ownership linkage.
7. Permit planning that endangers the fiscal soundness of future years or ignores the building of organizational capability sufficient to achieve Ends in future years.
  - 7.1. Operate without succession planning processes in place to facilitate smooth operations during key personnel transitions and ensure competent operation of the organization in all areas over the long term.
  - 7.2. Permit the organization to be without sufficient organizational capacity and current information about Executive Director and council issues and processes for the competent operation of the organization to continue in the event of sudden loss of Executive Director services.

**Date Approved: September 21, 2013**

**Date Revised: November 25, 2016**

**Date Reviewed: May 26, 2023**

---

With respect to the actual, ongoing financial conditions and activities, the Executive Director shall not cause or allow the development of fiscal jeopardy or a material deviation of actual expenditures from Council priorities established in Ends policies.

Further, without limiting the scope of the above statement by the following list, the Executive Director shall not:

1. Expend more funds than have been received for the fiscal year.
2. Shift funds between accounts unless those funds can be returned within 30 days without borrowing.
3. Use any long-term reserves.
4. Use the legal fund except for legal issues.
5. Allow the untimely payment of payroll and debts.
6. Write off receivables without having first aggressively pursued payment after a reasonable grace period.
7. Allow tax payments or other government ordered payments or reports to be overdue or inaccurately filed.
8. Acquire, encumber, or dispose of land or buildings.
9. Neglect to provide council with financial statements at intervals of less than 4 months.

**Date Approved: September 21, 2013**

**Date Revised: Sep 8 2023**

**Date Reviewed: Sep 8, 2023**

---

The Executive Director shall not allow assets to be unprotected, inadequately maintained, or unnecessarily risked.

Further, without limiting the scope of the above statement by the following list, the Executive Director shall not:

1. Permit the organization to be without adequate insurance against theft, fire, and casualty losses.
2. Permit the Council Members, staff and individuals engaged in activities on behalf of the organization, or the organization itself to be without adequate liability insurance.
3. Unnecessarily expose the organization, its Council Members, or staff to claims of liability.
4. Allow unbonded personnel access to material amounts of funds.
5. Receive, process, or disburse funds under controls insufficient to meet the Council-appointed auditor's standards.
6. Cause or allow buildings and equipment to be subjected to improper wear and tear or insufficient maintenance.
7. Make purchases without due consideration to quality, after-purchase service, value for dollar, and opportunity for fair competition. Orders shall not be split to avoid these criteria. The Executive Director shall not:
  - 7.1. make any purchase wherein normally prudent protection has not been given against conflict of interest.
  - 7.2. make any purchase of over \$500 and up to \$2000 without having obtained comparative prices and quality.
  - 7.3. make any purchase of over \$3000 without a stringent method of assuring the balance of long-term quality and cost.
8. Compromise the independence of the Council's audit or other external monitoring or advice. Engaging parties already chosen by the Council as consultants or advisers is unacceptable.
9. Operate without adequate safeguards to protect intellectual property, information and files from loss or significant damage.
10. Invest or hold operating capital in insecure instruments, including uninsured checking accounts and bonds of less than AA rating, or in non-interest-bearing accounts except where necessary to facilitate ease in operational transactions.
  - 10.1. Make investments in the following securities: mortgages, equities, real estate holdings, foreign investments, and derivative securities (i.e., futures and options, etc.).
11. Endanger the organization's public image, credibility, or its ability to accomplish Ends.
12. Change the organization's name or substantially alter its identity in the community.
13. Create or purchase any subsidiary corporation.

**Date Approved: September 21, 2013**

**Date Revised: Sep 8, 2023**

**Date Reviewed: Sep 8, 2023**

---

The Executive Director shall not cause or allow conditions, procedures or decisions that are unsafe, disrespectful, or unnecessarily intrusive, or that are inconsistent with enforcement of the Medical Radiation Technologists Act, 2006 governing the practice of medical radiation technology, Regulations under the Act, and any further Council interpretation of the Act in its Bylaws or Policies.

Further, without limiting the scope of the above statement by the following list, the Executive Director shall not:

1. Permit members to be without easy access to clear information about the privileges and responsibilities of membership.
2. Use methods of collecting, reviewing, storing, or transmitting member information that fails to protect against improper access to the information elicited.
3. Operate without a process to ensure that individual and group comments and complaints are responded to fairly, consistently, respectfully, and in a timely manner.
4. Operate without ensuring that all Statutory Committees required in legislation have been formed and operate consistently with requirements of the legislation.
5. Apply the legislation in a manner inconsistent with due process and the duty of procedural fairness.
6. Allow the office of the Association to be located outside of the city limits of Regina, Saskatchewan.
7. Allow the office to operate without the presence of at least one staff member in the office premises during a standard week of no less than 50% of the time per normal business hours with regard to Saskatchewan labour laws and statutory holiday observances except for extraordinary Association business purposes or unforeseen events including but not limited to sickness, family leave or natural disaster.

**Date Approved: September 21, 2013**

**Date Revised: draft Sep 8, 2023**

**Date Reviewed: TBD**

---

With respect to employment, compensation and benefits to employees, consultants, contract workers and volunteers, the Executive Director shall not cause or allow jeopardy to fiscal integrity or public image.

Further, without limiting the scope of the above statement by the following list, the Executive Director shall not:

1. Change his/her own compensation and benefits.
2. Establish current compensation and benefits that deviate materially from the geographic or professional market for the skills employed.
3. Create obligations over a longer term than revenues can be safely projected.

**Date Approved: September 21, 2013**

**Date Revised:**

**Date Reviewed: Sep 8, 2023**

---

The Executive Director shall not permit the Council to be uninformed or unsupported in its work.

Further, without limiting the scope of the above statement by the following list, the Executive Director shall not:

1. Allow the Council to be without adequate information to support informed Council decisions, including relevant environmental scanning data, a representative range of staff and external points of view, and significant issues or changes within the external environment which may have a bearing on any existing Council policies, along with alternative choices and their respective implications.
2. Neglect to submit the monitoring data required by the Council (see policy on Monitoring Executive Performance) in a timely, accurate and understandable fashion, including explicit Executive Director interpretations of the Council policies being monitored and evidence of compliance.
3. Let the Council be unaware of any actual or anticipated non-compliance with any Ends or Executive Limitations policy, regardless of the Council's monitoring schedule.
4. Let the Council be unaware of any incidental information it requires, including anticipated media coverage, threatened, or pending lawsuits, and material or publicly visible external and internal changes or events, including changes in executive personnel.
5. Allow the Council to be unaware that, in the Executive Director's opinion, the Council is not in compliance with its own policies on Governance Process and Council–Executive Director Relationship, particularly in the case of council behavior that is detrimental to the work relationship between the Council and the Executive Director.
6. Present information in an untimely manner, in unnecessarily complex or lengthy form, or in a form that does not clearly differentiate among monitoring, decision preparation, and general incidental or other information.
7. Allow the Council to be without a workable mechanism for official council, officer, or council committee communications.
8. Deal with the Council in a way that favors or privileges certain council members over others, except when (a) fulfilling individual requests for information or (b) responding to officers or committees duly charged by the Council.
9. Neglect to supply for the Required Approvals Agenda all items delegated to the Executive Director, yet required by law, regulation, or contract to be council-approved, along with the applicable monitoring information.
10. Allow the Council to be without reasonable administrative support for Council activities.
11. Neglect to provide Council members available documentation needed to be considered at a Council meeting at least 10 days in advance of the meeting date.

**Date Approved: September 21, 2013**

**Date Revised: September 12, 2014**

**Date Reviewed: Sep 8, 2023**

---

The Executive Director shall not develop or change standards governing practice that cannot be adequately defended or are inconsistent with the legislated mandate of the SAMRT.

Further, without limiting the scope of the above statement by the following list, the Executive Director shall not:

1. Develop standards that are inconsistent with evidence-based practices.
2. Develop standards that would result in resistance among any segment of the membership because their input had been ignored.
3. Develop standards that would interfere with the ability of the profession to work productively with other professions with which it is important to maintain productive relations unless it is necessary to protect the public interest.
4. Neglect to advise the Council if there are contentious issues related to the proposed standard.
5. Implement a standard prior to Council approval on the Required Approvals Agenda, consistent with regulatory requirements.

**Date Approved: September 21, 2013**

**Date Revised:**

**Date Reviewed:**

---

When preparing options for Council’s decisions regarding Regulations under the Act regulating medical radiation technology, or Council Bylaws, the Executive Director shall not prepare such options without obtaining Council’s values regarding the initial direction, and the final approval of amendments by Council.

Further, without limiting the scope of the above statement by the following list, the Executive Director shall not:

1. Develop Bylaws, or propose amendments to the Act or Regulations, without involving Council in an initial discussion of options, nor develop amendments that are inconsistent with the direction indicated by Council.
2. Neglect to obtain appropriate legal advice where required.
3. Develop content inconsistent with any legislated requirement.
4. Neglect to advise Council if there are any changes in the assumptions under which the initial position was developed, or if there are legal or governmental obstacles to proceeding with that position.
5. Neglect to maintain a cumulative record of Council decisions regarding positions during development or amendment of the Act or Regulations and provide a current copy of this record to Council at each meeting.
6. Submit the final version of proposed amendments to Acts or Regulations to the government, nor proposed amendments to Bylaws to membership, prior to Council approval.



**Date Approved: September 21, 2013**

**Date Revised:**

**Date Reviewed:**

---

The Executive Director shall not cause or allow unfair or inconsistent administration of fees to members.

Further, without limiting the scope of the above statement by the following list, the Executive Director shall not:

1. Change membership fees.
2. Allow registration with SAMRT until receipt of verification of personal liability insurance from members.
3. Set administrative fees other than late fees above the amount needed to recover costs.
  - 3.1. Permit late fees and reinstatement fees to exceed 30% of current annual dues.
  - 3.2. Change late fees with less than 60 days' notice to members.
4. Set or permit punitive measures that are excessive.

# APPENDIX

## APPENDIX A – COUNCIL MEMBER ORIENTATION



The new council member should begin orientation as soon as they are identified as a potential council member. Once the council member is elected to council (\*for their shadowing period), he or she should receive a detailed orientation on the nature of the association, the role of council, and the expectations and roles and responsibilities of individual council members. The purpose of this comprehensive orientation is to decrease the learning curve, and to help the new council member become as effective as possible as quickly as possible. This portion of the orientation shall be done in the form of a teleconference or face to face and shall be conducted by the President and/or Executive Director.

New council members shall receive online access to important SAMRT resources that include, but are not limited to:

- The Saskatchewan Association of Medical Radiation Technologists Act, 2006
- Regulatory Bylaws
- Administrative Bylaws
- Strategic Plan
- Meeting Minutes for the previous year
- Code of Ethics
- Vision & Mission of the association
- Newsletters for the previous year
- Governance Policy Manual
- Update on current projects
- A list of acronyms relevant to the association
- Biographies on current board members
- Most recent financial statements
- Rules of order

\*Council members are elected and/or appointed. SAMRT members are elected at the Annual General Meeting held in the spring of each year. Public Representatives are appointed by the Government. When a SAMRT member is elected to Council, their term begins the following January. During the time between the election and when the council member's term starts, the individual "shadows" council and participates in all council events (meetings, discussion, etc.) This individual has no voting power until their actual council term begins. Public representatives do not have a shadowing period as they are appointed their term from the Government and are usually in effect immediately.

The Council President is in charge of the orientation process; however, cooperative support from the SAMRT staff in preparing and supplying materials is essential. During the orientation, the new Council member shall be updated on any current issues facing the organization, so they have the necessary background for informed decisions.

It is highly recommended that the new Council member attend a workshop with Jannice Moore & Associates to become educated on the Policy Governance Model. It is preferable that the new Council member attend this education session during their shadowing period or early in their Council term. The Executive Director shall coordinate the registration, travel, and accommodation with the new Council member to attend the governance training workshop.

### **Transportation (original receipts required)**

1. Maximum allowance for transportation will be the equivalent of economy airfare plus transportation to and from the airport or station terminals. Whenever available and feasible, seat sale airlines should be used in place of full economy fare.
2. The purchase of air flight insurance will not be covered by SAMRT.
3. Use of airport bus service is encouraged, when available.
4. Those travelling by automobile will be allowed expenses at the rate of \$0.45 per kilometer plus parking.

### **Accommodation (original receipts required)**

1. Reimbursement is based on single room rate.
2. Where provisions for direct billing are made by SAMRT Office, members are responsible to pay for personal expenses (movies, telephone calls, valet, etc.) This must be recorded on the claim form as a negative.
3. Members who pay directly for accommodation must use the expense account form to claim reimbursements.

### **Meals - Per Diem (receipts are not required)**

Those travelling on SAMRT business will be asked to submit reimbursement claims based on the Administration Bylaws.

A meal and incidentals allowance of \$60 in province and \$85 out of province for each 24 hour period which does not require the support of receipts. Discretion is asked in claiming the full allowance as some meals maybe provided during a meeting.

### **Miscellaneous Expenses**

1. Only legitimate SAMRT expenses will be reimbursed.
2. Telephone – please provide a copy of your personal telephone bill highlighting calls for SAMRT business and indicate the purpose of the call.
3. Internet – Where internet connection fees are not included in the accommodation rate, the traveler may claim for such expenses under the “other “category.
4. Parking will be covered with a receipt or up to \$15 for metered parking.

**Note:** Expenses for a companion are not covered by the SAMRT. If such expenses are included on your receipts, they must be deducted on your expense claim form.

### **Stipend**

Council members are entitled to receive a \$150 stipend for each day that they attend SAMRT council meeting. Council members receive a \$650 annual professional allowance after serving as an SAMRT council member for one year.

**All of the above claims should be submitted on The Travel Expense Form.**

**The form must also be completed when the expenses have been charged to the SAMRT Visa card**

### **Miscellaneous Claims**

By submitting the original receipts, the SAMRT will reimburse all legitimate expense incurred on Association business.

The Supplementary Reimbursement Form must be completed and submitted.

## APPENDIX C – GOVERNANCE POLICY MANUAL CHANGE LOG

Policy	Details of Change	Effective Date	Made by
Appendix C	Added to log changes to the policy	September 14, 2018	
GP. 5.1 Audit Committee	Revisions to include Finance responsibilities in Section 1	September 14, 2018	D. Schatz
GP. 5.2 Nominating Committee	Revisions to Terms of Reference to remove Life Member Nominations	March 1, 2019	D. Schatz
GP. 5.3 Awards Committee	Revisions to Terms of Reference to add Life Member Nominations	March 1, 2019	D. Schatz
GP. 5.4 Ownership and Linkage	Revisions to Terms of Reference to change name	March 1, 2019	D. Schatz
Appendix B	Expense Reimbursement per the Administration Bylaws Amendments	May 13, 2019	D. Schatz
GP-6 Council and Committee Expenses	Increase stipend		M. Russell
GP-8 Investment in Governance	Update chart	September 23, 2022	M. Russell
GP-13 Goernance Succession Planning	Correction to worksheet. Changed from council to governance		M. Russell
GP-15 In Camera Meetings	Edits		M. Russell
GP-16 Handling of Operational Complaints	Minor typo edits		M. Russell
CE-1 Unity of Control	Minor format changes	September 23, 2022	M. Russell
CE-2 Accountability of the Executive Director	Minor format changes	September 23, 2022	M. Russell
CE-5 EXECUTIVE DIRECTOR EMPLOYMENT COMPENSATION	3.1 Removal of survey and instead refer to collective bargaining agreements.	May 26, 2023	D. Schatz
Appendix B	Updated to reflect the bylaw changes eff. 2020	June 15, 2023	D. Schatz
Appendix E	Insert Appendix E – Framework for Review	June 15, 2023	D. Schatz
EL 4 Asset Protection	Increase of purchase over 2,000 to 3,000	Sept. 8, 2023	D. Schatz
EL 5 Treatment of Members	Change to 7. Office hours	Sept. 8, 2023	D. Schatz
EL 6 Compensation & Benefits	Omit item 2	TBA	

## APPENDIX D – DEFINITION OF TERMS AND ACRONYMS

<b>Acronym</b>	<b>Definition</b>
<b>ACMDTT</b>	Alberta College of Medical Diagnostic and Therapeutic Technologists
<b>AMRTRC</b>	Alliance of Medical Radiation Technologists Regulators of Canada
<b>BCAMRT</b>	British Columbia Association of Medical Radiation Technologists
<b>CAMRT</b>	Canadian Association of Medical Radiation Technologists
<b>CASL</b>	Canada Anti-Spam Legislation
<b>CE</b>	Continuing Education
<b>CIHI</b>	Canadian Institute for Health Information
<b>CLB</b>	Canadian Language Benchmarks Test
<b>CMA</b>	Canadian Medical Association (for program accreditation purposes)
<b>CMRTO</b>	College of Medical Radiation Technologists of Ontario
<b>COI</b>	Certificate of Insurance
<b>CPP</b>	Canada Pension Plan
<b>CPR</b>	Cardio-Pulmonary Resuscitation
<b>DC</b>	Discipline Committee
<b>DUI</b>	Driving Under Influence
<b>EI</b>	Employment Insurance
<b>EPP</b>	Emergency Preparedness Plan
<b>IELTS</b>	International English Language Testing System
<b>IEMRT</b>	Internationally Educated Medical Radiation Technologists
<b>MAMRT</b>	Manitoba Association of Medical Radiation Technologists
<b>MELA</b>	Michener English Language Assessment
<b>MRT</b>	Medical radiation technologist (a member who is registered and works within the realms of the four disciplines: radiological technology, nuclear medicine, radiation therapy or magnetic resonance imaging)
<b>NAIT</b>	Northern Alberta Institute of Technology
<b>NBAMRT</b>	New Brunswick Association of Medical Radiation Technologists
<b>NIRO</b>	Network of Inter-professional Regulatory Organizations
<b>NLAMRT</b>	Newfoundland and Labrador Association of Medical Radiation Technologists
<b>NOCP</b>	National Occupational Competency Profile
<b>NSAMRT</b>	Nova Scotia Association of Medical Radiation Technologists
<b>OAMRS</b>	Ontario Association of Medical Radiation Sciences
<b>OTIMRO</b>	Ordre des technologues en imagerie médicale et en radio-oncologie du Québec (Quebec College)
<b>PCC</b>	Professional Conduct Committee
<b>PEIAMRT</b>	Prince Edward Island Association of Medical Radiation Technologist
<b>PLI</b>	Professional liability insurance
<b>RCMP</b>	Royal Canadian Mounted Police
<b>RHA</b>	Regional Health Authority
<b>RTMR</b>	Magnetic Resonance Technologist
<b>RTNM</b>	Nuclear Medicine Technologist
<b>RTR</b>	Medical Radiological Technologist
<b>RTT</b>	Medical Radiation Therapist

<b>Acronym</b>	<b>Definition</b>
<b>SAHO</b>	Saskatchewan Association of Health Organizations
<b>SAMRT</b>	Saskatchewan Association of Medical Radiation Technologists
<b>TDG</b>	Transportation of Dangerous Goods
<b>TILMA</b>	Trade, Investment and Labor Mobility Agreement (between Alberta and BC Governments)
<b>TLR</b>	Transferring Lifting Repositioning
<b>TOEFL</b>	Test of English as a Foreign Language
<b>WHMIS</b>	Workplace Hazardous Material Information System

### Definitions of Terms

<b>Act</b>	Refers to The Medical Radiation Technologists Act, 2006
<b>Administrative Bylaw</b>	Means a bylaw created for a purpose set out in subsection 15(1) of the Act
<b>Association</b>	Refers to The Saskatchewan Association of Medical Radiation Technologists continued pursuant to section 3
<b>Bylaws</b>	Means the valid and subsisting bylaws of the Association
<b>Council</b>	Means the Council of the Association
<b>Court</b>	Refers to the Court of Queen’s Bench
<b>Discipline</b>	Means any one of the disciplines of medical radiation technology: Radiological Technology, Nuclear Medicine, Magnetic Resonance Imaging or Radiation Therapy
<b>Educational Program</b>	Means an educational program described in section 3 of the Regulatory Bylaws
<b>Examination</b>	Means the examination described in section 4 of the Regulatory Bylaws.
<b>Executive Director</b>	Refers to the Executive Director appointed pursuant to section 12
<b>Member</b>	A member of the Association who is in good standing
<b>Minister</b>	The member of the Executive Council to whom for the time being the administration of this Act is assigned
<b>Practicing Member</b>	A member to whom a current license to practice has been issued pursuant to section 20
<b>Prescribed Fee</b>	Means the applicable fee prescribed in The MRT <i>Fee Bylaws</i> ;
<b>Record</b>	Refers to any information that is recorded or stored in any medium or by means of any device including a computer or electronic media
<b>Register</b>	Means the register kept pursuant to section 19;
<b>Registrar</b>	Means the registrar appointed pursuant to subsection 12 (2) of the Act
<b>Regulatory Bylaw</b>	Refers to a bylaw made for a purpose set out in subsection 15(2) of the Act or in pursuant to section 17 of the Act.

## 1.1 APPENDIX E – FRAMEWORK FOR GOVERNANCE POLICY REVIEW SCHEDULE

- The Governance Policies are organized into 4 types:
  1. Global Governance Process (GP) (Every 3 years)
  2. Global Council-Executive Director Relationship (CE) (Every 3 years)
  3. Global End (E) (Annually); and
  4. Global Executive Limitations (EL) (Annually)
- In advance of each quarterly meeting, Council members and staff shall review the scheduled policies, and consider the following:
  1. Does this policy meet the SAMRT’s governance mandate? If No, please consider what actions are required to remedy.
  2. Is Council compliant with the policies set forth? If No, please consider what actions are required to remedy.
  3. Should an amendment be proposed at the next meeting?
- The Governance Policy Review is a standing agenda item, and the policies are available for review in advance on the SAMRT website > Legislation and Policies >>Governance Policies.
- The policies will be reviewed on a rolling 3-year schedule. Note that Ends and Executive Limitation compliance is monitored annually in the Executive Director Monitor Report. The actual policy will be reviewed as part of the 3-year schedule.

### Schedule and Worksheet

Scheduled	Policy	Read (Y/N)	Meets Mandate	SAMRT Compliant	Discussed/Motion to approve (Y/N)
<b>Year 1 Cycle</b>					
Quarter 1	GP Governance Process				
Quarter 1	GP – 1 Governing Style				
Quarter 1	GP – 2 Council Job Contributions				
Quarter 2	GP – 3 President’s Role				
Quarter 2	GP-4 Council Committee Principle				
Quarter 2	GP-5 Council Committee Structure				
Quarter 3	GP-6 Council and Committee Expenses				
Quarter 3	GP-7 Code of Conduct				
Quarter 4	GP-8 Investment in Governance				
Quarter 4	GP-9 Council Linkage with Ownership				
<b>Year 2 Cycle</b>					
Quarter 1	GP-10 Council Linkage with Membership				
Quarter 1	GP-11 Council Linkage with Organizations				
Quarter 1	GP-12 Council Planning Cycle & Agenda Control				
Quarter 2	GP-13 Council Succession Planning				
Quarter 2	GP-14 Special Rules of Order for Council				
Quarter 2	GP-15 In Camera Meetings				

Scheduled	Policy	Read (Y/N)	Meets Mandate	SAMRT Compliant	Discussed/Motion to approve (Y/N)
Quarter 3	CE Global Council-Executive Director Relationship				
Quarter 3	CE-1 Unity of Control				
Quarter 3	CE-2 Accountability of the Executive Director				
Quarter 4	CE-3 Delegation to the Executive Director				
Quarter 4	CE-4 Monitoring Executive Director Performance				
<b>Year 3 Cycle</b>					
Quarter 1	Global End				
Quarter 1	E-1 Public Protection				
Quarter 1	E-2 Support for SAMRT				
Quarter 2	EL General Executive Constraint				
Quarter 2	EL-1 Treatment of Staff				
Quarter 2	EL-2 Financial Planning				
Quarter 3	EL-3 Financial Condition				
Quarter 3	EL-4 Asset Protection				
Quarter 3	EL-5 Treatment of Members and Public				
Quarter 4	EL-6 Compensation and Benefits				
Quarter 4	EL- 7 Communication and Support to Council				
Quarter 4	EL-8 Development of Standards Governing Practice				
Quarter 4	EL-9 Amendments to Act or Bylaws				
Quarter 4	EL-10 Fees				

Notes/Observations:
