

BF STANDING COMMITTEES - MEDICAL

DRAFT ROLES AND RESPONSIBILITIES

Last Updated: 28th October 2021

Last Approved by Board:

1. BACKGROUND

This document is to be read in conjunction with the standard Terms of References which apply to all BF Standing Committees, covering:

- Delegated Authority
- Composition
- Reporting
- Data Security, Data Protection and Confidentiality

2. PURPOSE

2.1 To advise British Fencing on how best to promote and protect the British Fencing community in relation to the medical aspects of participation in Fencing activities.

3. MEMBERSHIP

- 3.1 The Committee shall consist of medical professionals – both from within and outwith the Fencing community taking into account diversity targets.
- 3.2 The appointment of the Chair of the Standing Committee will be approved by the BF Nominations Committee, following a nomination process agreed and overseen by the BF Nominations Committee.
- 3.3 Any changes to membership must be reported to the BF Nominations Committee.
- 3.4 The Committee should ideally have at least one Board Director as a member. The Board Member will be nominated in discussion with the Chair of the Committee and the Chair of the Board (to be noted by BF Nominations Committee). Where possible the Board Director should have a suitable medical skillset.
- 3.5 The BF Chief Medical Officer will be a member of the Committee.

4. ATTENDANCE

- 4.1 The Chair of the Board, the Chief Executive Officer, the identified Board Director and other nominated members of staff may attend the meetings. Other individuals may be invited to attend for a specific purpose.
- 4.2 The Board will nominate a member to represent the views of the Medical Committee at the Board. This will normally be the identified Board Director who attends the meetings. If the Board Director is not medically qualified, the Chair of Committee will be invited to attend BF Board Meetings as required by the Board meeting agenda.

5. FUNCTIONS

- 5.1 To advise on the formulation of policy and plans to help reduce the risk of illness and injury through participation in Fencing activities.
- 5.2 To promote and support education, training and the dissemination of information to help reduce the risk of illness and injury through participation in Fencing activities, including liaison with the Safety Committee.
- 5.3 Collect data on the incidence of injury and illness in fencers.
- 5.4 Led by the Anti-doping Panel, and in co-operation with the ADP medical support staff, support and advise on anti-doping policy implementation, including its application to junior fencers.
- 5.5 To provide a forum for discussion and communication between medical members of the Fencing community.
- 5.6 Ensure BF demonstrates consistency and best practice in both medical support and anti-doping policy in relation to hosting international competitions.
- 5.7 To provide input into selection processes, where requested.
- 5.8 To review and propose updates/changes to all relevant BF policies.
- 5.9 To advise the Executive Team on Medical Provision at BF events.

6. MEETINGS

- 6.1 The Committee shall normally meet 3-4 times a year, taking into account the Board meeting schedule so that the Board has time to consider the Committee's report before their next meeting.
- 6.2 Meetings can be held in person or online.