
Brisbane North Clinical Council

Terms of Reference



An Australian Government Initiative

Brisbane North Clinical Council

Terms of Reference

Purpose and functions

The Brisbane North Clinical Council (the Council) has been formed by the Brisbane North PHN (the PHN) as a forum to bring together key local clinical stakeholders to assist the PHN with strategic input, planning and communications as well as the development of local clinical pathways. Specifically, these functions include:

Strategic advisory role

- a) report on clinical issues to ensure the PHN Board decisions are cognizant of the unique needs of the community and local providers;
- b) provide recommendations to the PHN Board regarding strategic, cost-effective and innovative opportunities to improve medical and health care services in the region;
- c) systematically identify acute and primary care services that could be delivered more effectively and efficiently;
- d) identify and propose solutions to current system blockages including reviewing opportunities for improvement emerging from the Pathways program;
- e) work in partnership with the HHS in an effort to assist the PHN to develop local strategies to improve the operation of the health care system for patients including through facilitating effective primary health care provision to reduce avoidable hospital presentations and admissions;

Planning role

- f) participate actively in collective impact forums run by the PHN;
- g) review and provide expert input regarding local population health and health service delivery data gathered by the PHN;
- h) provide advice regarding additional sources of relevant data to inform prioritization of local needs;

Communications

- i) network with colleagues and others to ensure good understanding of local health care needs;
- j) disseminate endorsed information to colleagues and community members;

Pathways

- k) provide input and guidance to the Pathways program to maximize the relevance, uptake and impact of clinical pathways;
- l) ensure a focus on pathways that align with national and local priorities, including ensuring population cohorts experiencing chronic and complex conditions are better and more efficiently managed within the primary health care system;
- m) ensure pathways are designed to streamline patient care, utilize existing health resources efficiently and improve health outcomes and the quality of care;
- n) ensure the inclusion of pathways between hospital and general practice that influence the follow-up treatment of patients;
- o) act as regional champions of locally relevant clinical care pathways;
- p) where required, identify participants for Pathways working groups;
- q) work with neighbouring Clinical Councils, where relevant, to ensure that pathways follow patient flows including across PHN boundaries.

Governance and linkages

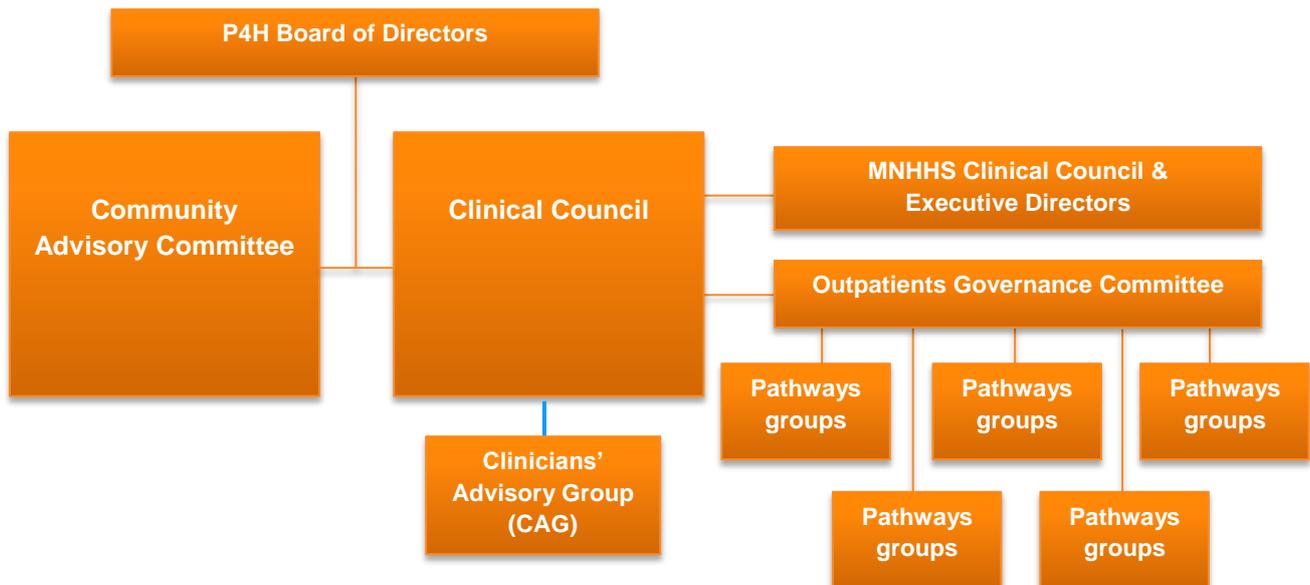
The Council plays an important role in providing recommendations and input to the PHN Board of Directors.

The Council is linked to the PHN Board of Directors through the regular attendance of a nominated Board representative, regular reports of meeting outcomes to the PHN Board via the CEO and provision of endorsed meeting minutes to the PHN Board as a standing Board agenda item.

The Council also has links to the Metro North Hospital and Health Service (MNHHS) through the mechanism described in the section on membership.

The relationship of the Council to other groups is illustrated in Figure 1.

Figure 1



Membership and term

The Clinical Council shall consist of between 7-12 members, approximately.

Members of the Council shall be individuals working as clinicians in the Brisbane North PHN region, including, but not limited to GPs, nurses, allied and community health professionals, Aboriginal health workers, paramedics, specialists and hospital representatives. Expressions of interest (EOI) for membership shall be invited by the PHN as members retire or membership terms expire. EOIs will be distributed through key stakeholders.

In addition, a range of ex-officio positions will exist on the Clinical Council, including, but not limited to:

- Brisbane North PHN's Clinicians' Advisory Group (CAG) representative;
- Brisbane North PHN General Practice Liaison Officer(s);
- MNHHS representatives, as agreed with the MNHHS from time to time.

Others may also be invited to attend on a time-limited basis or to progress specific discussions or initiatives.

Membership shall be actively reviewed by the Council and by the PHN Board on a regular basis, with members serving a minimum one-year term. Members may be reappointed at the conclusion of each term.

Selection process and criteria

Members will be selected by the PHN Board. Applicants must be supported, by way of a reference, by a relevant stakeholder organization through whom EOIs are distributed.

Applicants must demonstrate:

- Strong understanding of the needs of the community;
- Extensive networks across their profession;
- Ability to engage constructively in a committee environment.

With the exception of ex-officio members, applicants will be selected as individuals, not as representatives of any organization(s).

The PHN reserves the right to invite and remove members of the Council from time to time, but will seek advice from Council members before so doing.

Remuneration

Members will be remunerated by the PHN for meeting attendance. If members are otherwise salaried/remunerated by other organisations for their time while on the Council and/or preparation time, then no further remuneration from the PHN shall apply. Members are required to declare this to the PHN upon responding to the EOI and/or the commencement of their membership on the Council.

Chair and secretariat

The Council shall be chaired by the PHN Director, or delegate, with secretariat support provided by the PHN. Secretariat support shall include management of meeting logistics, preparation and distribution of agendas, minutes and other correspondence relating to the Council.

All meeting documentation including agendas and minutes shall be considered confidential documents, unless otherwise stated, and shall only be distributed to group members and to the PHN Board of Directors.

Decision-making and proxies

The Council shall endeavour to operate on a consensus decision-making basis, where possible and relevant. Members will hold one vote each.

All decisions of the Council in regard to proposed initiatives for implementation in the Brisbane North region will be subject to approval from the PHN Board of Directors.

Members may nominate a proxy for times when the member is unable to attend meetings either in person or via electronic means, however, this proxy must be adequately briefed, similarly-qualified and able to participate fully in discussions and decision-making on behalf of the member.

Quorum and attendance

A quorum will be considered to exist when fifty percent or more of the members are in attendance either in person or via electronic means for at least some portion of the meeting.

If a member is absent, without a proxy, for more than two consecutive meetings, the Chair will refer a decision to the remaining members of the Council as to the absent member's continuing membership.

Meetings

The Council shall meet three to four times a year. Working groups may be formed from time to time to progress specific initiatives in between regular Council meetings.

Communication

Council members shall provide current email contact details to the PHN. These contact details shall be made available to all Council members.

Council members shall be invited to provide agenda items, and agendas will be distributed at least one week prior to each meeting.

Draft minutes shall be circulated to Council members for approval. If responses are not received within the specified time frame, the minutes shall be taken to be accurate and shall be distributed in final form to Council members and to the PHN Board.

Review

The Council composition, outcomes achieved and these Terms of Reference shall be reviewed by the Council and the PHN Board of Directors on no less than an annual basis.

Code of Conduct

All members and attendees of the Council meetings shall, prior to attendance, be required to sign and return a statement attesting to the fact that the member or attendee has read and accepts these terms of reference and agrees to abide by this code of conduct.

Confidentiality

To ensure effective consultation between the PHN and Council members, sensitive information which is not in the public domain may sometimes be disclosed at Council meetings on a confidential basis. Members and attendees are asked to be mindful of the confidentiality of this information and should not disclose it to outside parties.

If members or attendees are unsure about the confidentiality status of particular information or data disclosed to them, the Chair should be asked to clarify the position.

Other responsibilities

Council members and other attendees are responsible to advise the Chair of individual approaches by the media or any other person seeking information about matters discussed at Council meetings. Members and attendees are permitted to disclose the general role and function of the Council but are not permitted to disclose matters being discussed unless the Council has given explicit permission for such disclosures to occur.

Public comment

Council members and attendees must avoid making public comments that may appear to be an official comment from the PHN or from the Council. Where public statements are deemed to be advantageous, these shall be distributed by the PHN through usual channels.

Other issues

Council members and attendees are encouraged to openly express concerns about the operation of the Council within the context of the Council meetings. Members and attendees may also bring concerns to the Chair for assistance with resolution.

Conflict of interest

Council members and attendees are responsible to declare any potential, real or perceived conflict of interest at any meeting if it relates specifically to a particular issue under consideration. The secretariat will record this declaration in the minutes and the Chair will manage the conflict of interest in collaboration with non-conflicted Council members. A declaration of interests register will be maintained for standing conflicts.

Intellectual property

Any intellectual property rights of Council members or attendees must be observed and protected. Members or attendees who are deemed by the Council to have breached, or have an intent which would breach, the intellectual property rights of another member or attendee may, among other remedies, be removed from the Council. The Council members and attendees must also be aware that breaching another member or attendee's intellectual property rights may result in legal or other remedial actions.

Brisbane North Clinical Council

Terms of Reference, Code of Conduct and Confidentiality Agreement

I have read and accept the Brisbane North Clinical Council Terms of Reference and agree to abide by the code of conduct.

Member/Attendee:

Printed Name

Signature

Date

Witnessed by:

Printed Name

Signature

Date