

Health Priority Network Network Leadership Group Terms of Reference

Preamble

Primary Health Networks

Primary Health Networks (PHNs) have key objectives of increasing the effectiveness and efficiency of health services for people, particularly those at risk of poor health outcomes and improving coordination of care to ensure people receive the right care, in the right place, at the right time.

Adelaide's PHN programs and activities are framed around the following national and local priorities.

Local and National PHN Priority Areas

- Aboriginal Health
- Aged Care
- Alcohol and other Drugs
- Children and Youth
- Culturally and Linguistically Diverse Communities
- Digital Health
- Disability
- Health Workforce
- Mental Health
- Palliative Care
- Population Health

National PHN Headline Performance Indicators

- Potentially avoidable hospital admissions
- Childhood immunisation rates
- Cancer screening rates
- Mental Health treatment rates

PO Box 313, Torrensvilla Plaza SA 5031
Level 1, 22 Henley Beach Rd, Mile End, SA 5031
08 8219 5900
enquiry@adelaidephn.com.au
adelaidephn.com.au

phn
ADELAIDE

Adelaide PHN's Vision

Connecting you to health.

Adelaide PHN's Purpose

Facilitate a collaborative and responsive health care system for metropolitan Adelaide.

Adelaide PHN's Principles

- Community driven – all sector participation in contributing to health improvement and better outcomes;
- Building communities of interest that have a collective passion and commitment to:
 - improving services, the patient journey and experience
 - ensuring equity and access across the metropolitan region
 - supporting, developing and building capacity in service delivery and in workforce;
- Working collaboratively to ensure that all primary health care providers, partners, stakeholders and community are involved to:
 - identify need
 - improve system design
 - implement innovative solutions;
- Improving health outcomes to produce much needed efficiencies whilst reducing duplication;
- Measuring and demonstrating improved outcomes and efficiencies.

Governance & Membership

It is pivotal that the Adelaide PHN actively engages with community stakeholders including community members, service providers, clinicians and primary health care workers. To enable this, the Adelaide PHN has developed a membership model which underpins the decision-making process, consisting of the following;

- Board of Directors
- Membership Advisory Council (MAC)
- 3 Clinical Councils (CCs)
- 4 Community Advisory Councils (CACs) including 1 Aboriginal and Torres Strait Islander (and hereafter Aboriginal) CAC
- 1 Health Priority Network (HPN)

Clinical Councils (CCs)

Clinical Councils (CCs) are aligned to the Northern, Central and Southern Adelaide Local Health Network (LHNs) boundaries and work collaboratively with Local Health Networks and SA Health organisations. The Clinical Councils are GP-led and include locally based clinicians who reflect the key health service providers of the area.

CCs advise the Adelaide PHN Board on opportunities for improving medical and health care services to keep people well in the community and reduce avoidable hospital presentations and

admissions. Clinical Councils identify opportunities for collaboration, partnership and advocacy to collectively meet local health needs.

Community Advisory Councils (CACs)

Community Advisory Councils (CACs) enable broad representation of the community in the Adelaide PHN region, and provide a community perspective to the Adelaide PHN Board to enable decisions, investment and innovations are person centered, cost effective, and locally relevant and aligned to local care experiences and expectations.

CACs support the Adelaide PHN to develop local strategies to improve the operation of the health care system for community members and facilitate effective primary health care provision, keeping people well in the community and preventing avoidable hospitalisation.

Health Priority Network (HPN)

The Health Priority Network (HPN) is a vehicle to ensure a whole of community and stakeholder approach to the provision of input and feedback to the Adelaide PHN. It is open to health professionals, service providers, community organisations and government and non-government agencies, along with consumers.

The HPN reports to and advises the Adelaide PHN Board, via a Network Leadership Group, on opportunities for improving community and health care services to keep people well in the community and reduce avoidable hospital presentations and admissions. Network members share their experiences and local knowledge of factors that can contribute to the successful design, commissioning and delivery of primary care services. The Network identifies opportunities for collaboration, partnership and advocacy to collectively meet local health needs.

The Health Priority Network consist of nine health priority interest areas to reflect locally identified priorities.

The interest areas are:

- Aboriginal Health
- Alcohol and Other Drugs
- Childhood and Youth Health
- Consumers and Carers
- Culturally and Linguistically Diverse People's Health
- Health and Disability
- Mental Health
- Older People's Health
- Palliative Care

Membership Advisory Council (MAC)

The MAC brings together representatives from the 8 membership groups of the Adelaide PHN.

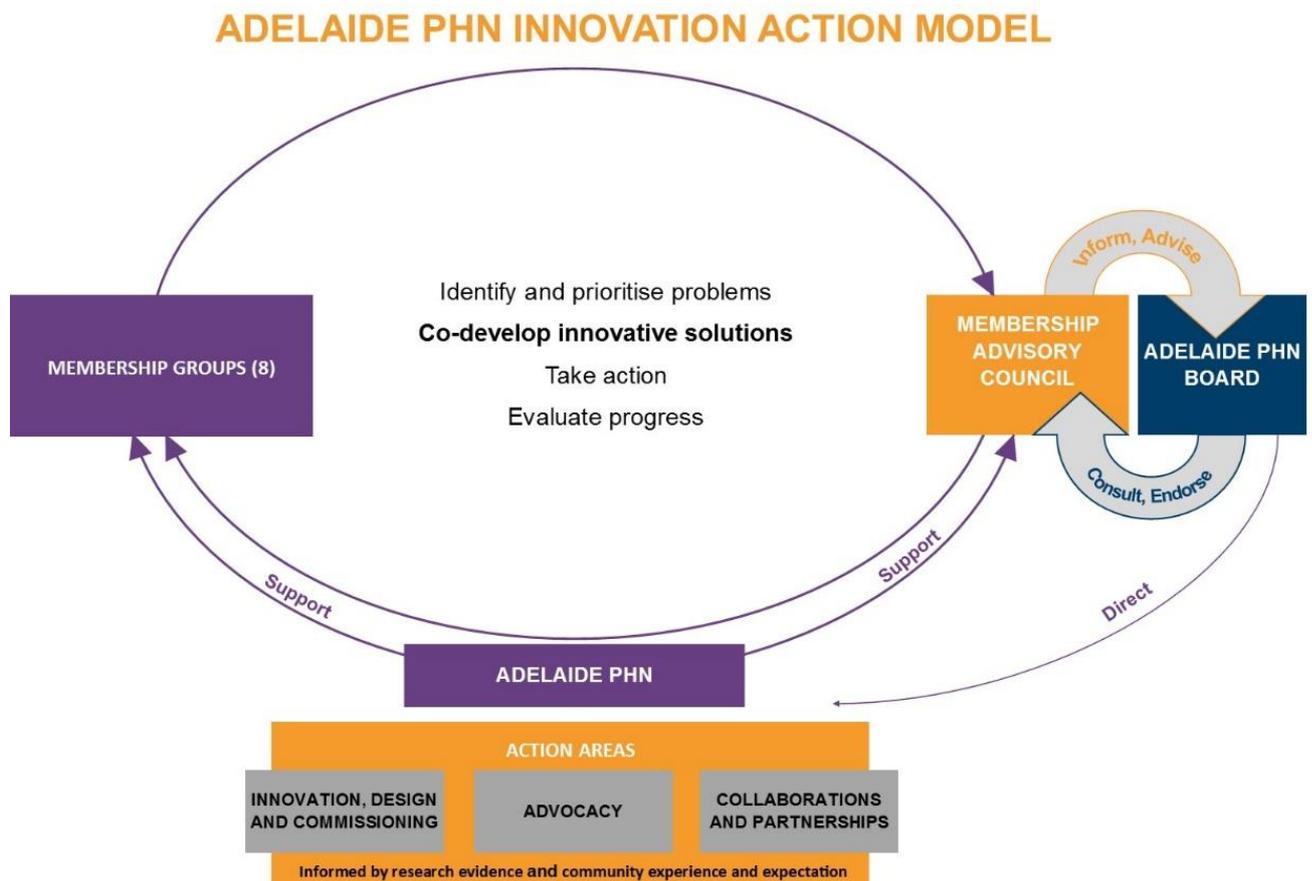
The MAC:

provides advice to the Adelaide PHN Board and acts as a conduit for membership groups

provides leadership to the groups and develops overall priorities for all the groups to work on in an integrated way

Adelaide PHN Innovation Action Model

The *Innovation Action Model* below demonstrates the relationships between the membership groups, the MAC, the Board and the Adelaide PHN.



Network Leadership Group

Terms of Reference

The Health Priority Network (HPN) advises the Adelaide PHN Board on opportunities for improving community and health care services to keep people well in the community and reduce avoidable hospital presentations and admissions. Network members share their experience and local knowledge of factors that can contribute to the successful design, commissioning, delivery and evaluation of primary health care services. The HPN identifies opportunities for collaboration, partnership and advocacy to collectively meet local health needs.

In addition, the Health Priority Network is a vehicle for communication of the outcomes and impact of commissioning decisions and other activities of the Adelaide PHN including opportunities to participate in and contribute to the ongoing development of the primary care sector.

The Health Priority Network consists of nine health priority interest areas which are: mental health, child and youth health, Aboriginal health, health and disability, palliative care, culturally and linguistically diverse people's health, older people's health, consumers and carers, and alcohol and other drugs.

To assist in facilitating the Health Priority Network a Network Leadership Group will be formed with two representatives elected from each of the nine health priority interest areas. These representatives, referred to as Network Leads, will meet collectively to review the progress of the Network, plan activities for the upcoming year, and consider collaborative actions across all interest areas.

Network Leader Responsibilities

- Assist in facilitating activities for Network members in identified areas to inform the APHN needs assessment, including identification of areas that require broader community engagement
- Assist in facilitating input from the Network into the APHNs strategic planning process
- Provide ongoing strategic advice to the Board via the MAC
- Support the planning of engagement and communication activities to garner the input of Network members in the required interest areas
- Identify opportunities and mechanisms to participate in system level integration and coordination
- Champion and assist the APHN to expand its links with the community and ensure people from diverse perspectives are represented in AHPN membership
- Assist in planning, disseminating information and gathering feedback as required across the Network.
- Assist in identifying partnership opportunities with organisations that have community networks to gather diverse insights, share insights across organisations and enhance overall learnings and efficiency
- Champion the use of Confluence as an engagement tool for network members

Proxies

There is no provision for proxies should members be unable to attend meetings

Adelaide PHN Responsibilities

- Provide administrative support
- Work with the Group to identify and implement strategies to achieve the role and purpose
- Support the effective operation of the Group

Chairperson

A Chairperson will be elected annually by the members of the Network Leadership Group, with election for the position being held in the first meeting of the financial year.

Network Leadership Group Appointment

In the first instance, the former HPG MAC reps and Chairs will be transitioned to take up the role of leads on the Network Leadership Group. Representatives from AOD and CALD will be elected from within the new AOD and CALD interest areas to join the Leadership Group. The new reps and the transitioned reps will remain in place until an election process occurs following the 1st symposium of 2019.

Biennially, commencing at the 1st symposium of 2019, a call for nominations will be put to all Network members from within each of the health priority interest areas. Nominees will be required to meet a set of selection criteria to ensure they are able to effectively represent the broad interests of that area. Nominee information will be circulated to Network members within the relevant interest areas who will vote on their preferred leads. Leadership Group representatives will hold the position for two years.

The Network Leadership Group will be required to elect two representatives to represent the Network as a member of the MAC.

Selection criteria for a Network Lead

- are drawn from the nine health priority interest areas
- have an interest in improving the primary health care system
- possess a detailed knowledge of the primary health care issues that pertain to their identified health priority interest area
- are aware of the issues as they pertain to other health priority interest areas
- act as a two-way conduit in the sharing of information and ideas between the APHN and Network members
- are willing to participate in activating the Network, where possible and appropriate, to undertake collaborative activities of the Network
- will gain proficiency in the use of Confluence

Membership Advisory Council (MAC) Representative

Two MAC representatives will be elected by the members of the Network Leadership Group to represent the Health Priority Network, and will hold the position for two years, reviewed bi-annually. Other Leadership Group leads may request/ or be invited to attend the MAC through the Network's MAC representatives to discuss any issues of particular relevance to an interest area.

Attendances at MAC meetings will be remunerated as per APHN Sitting Fee and Reimbursement Policy.

Each MAC representative is required to attend at least three out of four of scheduled MAC meetings. Proxies are allowed, members are responsible for briefing proxies and ensuring information is received.

Meetings and Attendance

The meetings of the Leadership Group will be held on an as needs basis. Members are expected to attend the majority of meetings. Where possible, access to teleconferencing can be provided. New members will be oriented to the Leadership Group prior to the first meeting they attend. A member may participate in a meeting by electronic means (teleconference or skype).

Network Leadership Group members are expected to:

- Maintain productive working relationships with other members of the Leadership Group, members of their Health Priority Interest Area and staff of Adelaide PHN
- Adequately prepare for, regularly attend and actively participate in meetings
- Complete or contribute towards any agreed actions of activities arising from meetings
- Behave in a respectful and courteous manner

A quorum of half the number of current members of a group, plus one, is required for regular scheduled meetings to proceed, if there is an appropriate representation of members.

The online platform Confluence is provided to facilitate discussion and consultation outside of meetings.

Resignation or Dismissal of a Member

Network Leads may resign by written notice to the Chair at any time. The Adelaide PHN Board may revoke membership of any member at any time, for failure to comply with the Terms of Reference, behaving in a disrespectful or unprofessional manner or any lawful instruction by the Chair.

Remuneration

Sitting fees and reimbursements in line with the *Adelaide PHN Sitting Fee and Reimbursement Policy* will be supported for community representatives and carers attending the meeting in an unpaid capacity.

Decision Making

For the Network Leadership Group to make recommendations or decisions, consensus of the group must be reached. Decision making processes will be designed to enable sufficient opportunity for all members of the group to object or support proposed actions. Given a fair opportunity to provide feedback, and in the absence of any objections, decisions will be carried. All members will be given sufficient opportunity to object to or support proposed actions, and given fair opportunity to provide feedback. Once members agree on a decision, it is carried.

Declaration of Interest

Health Priority Network Leads must declare to the Chair, any interest, potential or apparent conflict of interest in matters that might be considered by the group.

Minutes and Agendas

The Adelaide PHN will provide administrative support, including the timely preparation of meeting minutes and agendas.

Member Elected Director

The Adelaide PHN has up to 3 Member Elected positions on the Board, elected for a three-year term, via a staggered, rotational election system. As terms expire, membership nominations and voting occurs, with final endorsement of a new Member Elected Director at the Annual General Meeting (AGM) held in October of that year.

Terms of Reference Review

The Terms of Reference for the HPN will be reviewed annually.

August 2018

Reference Documents

- Stakeholder Engagement Framework
- Sitting fee and reimbursement policy