

## **Sydney North Health Network Clinical Council** **Terms of Reference**

### **Background**

In the 2014-15 Budget, the Australian Government announced the establishment of Primary Health Networks (PHNs). PHNs objectives are to increase the efficiency and effectiveness of medical services for patients, 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.

PHNs must establish and maintain GP-led Clinical Councils that will report to the PHN board on clinical issues to guide decisions on the unique needs of their respective communities.

### **Purpose**

The Sydney North Clinical Council will assist the Sydney North Health Network (SNHN) to develop local strategies to improve the operation of the health care system for people in the Sydney North region. It will focus on facilitating effective, person-centred primary health care to improve the overall health of our population and reduce avoidable hospital presentations.

The Clinical Council will provide guidance to the SNHN Board on clinical issues relevant to Primary Care to:

- Support local primary care providers to improve peoples' outcomes and experience with the health care system
- Evaluate and identify inefficiencies and optimise the use of existing services and resources
- Purchase or co-commission new services and propose strategies for redesign or reinvestment

It will work in partnership with the appropriate stakeholder engagement to achieve these aims.

### **Responsibilities:**

- Contribute to the SNHN Population Needs Assessment process and provide input to assist in determining local health priorities
- Contribute to the development of a regional health strategy
- Develop local strategies to address National Health Priorities
- Identify strengths, weaknesses, opportunities and areas for improvement within the current primary/acute healthcare interface and advise on local strategies to improve integrated care
- Oversee the development of local clinical pathways
- Advise on the data sharing requirements between primary care and other sectors to improve the quality, efficiency and continuity of care
- Advise on the development of innovative services and/or implementation of new models of care

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- Support the development of approaches to build capacity, capability, quality and safety in primary care
- Advise on strategies to maintain engagement with local primary care providers
- Identify and advise on opportunities for relevant research partnerships

## Membership

All members must practice within or work with the community within the SNHN catchment.

SN Clinical Council will include between 9-12 members with experience working within one or more of the following:

- General practice
- Allied health
- Primary Care Nursing
- NSLHD Clinical Council
- Specialist medical care
- Aboriginal Health
- Private Health Industry
- Private hospitals
- Board members – The Council membership will consist of two SNHN Board members, one of which will Chair the Committee and will be required to report to the SNHN Board.

Members may send suitably qualified representatives if they are not able to attend. In addition to this core membership it may be appropriate to invite other attendees, when relevant.

## Appointments and tenure

Clinicians will be invited to participate through an open expression of interest process undertaken by SNHN. Members will be appointed/approved by the SNHN board.

Appointments will be for an initial term of up to two years with 50% of positions to become vacant each year. There will be an option for reappointment for a second term.

Membership will cease when:

- A member resigns
- A member has not attended three consecutive meetings without suitable delegation or apology
- The maximum term has been reached
- A member breaches confidentiality and/or the law; or
- Does not adequately declare conflicts of interest

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## Chairperson

SN Clinical Council will be chaired by a GP appointed by the SNHN board.

## Meeting frequency and notice

SN Clinical Council will meet bi-monthly in the first year of SNHN operation and then quarterly thereafter, for approximately two hours per meeting.

Extraordinary meetings may be called with a minimum 2 weeks' notice.

Agendas and papers will be circulated no later than 5 working days before the meetings.

Minutes of the meeting will be circulated within 10 working days of the meeting after approval by the chair.

## Secretariat

SNHN will provide administrative support for SN Clinical Council including meeting venues, conferencing facilities and collation and circulation of meeting papers, minutes and agendas.

## Quorum

A quorum will be 50% of current appointed members plus one. At least one of either the Chair of the Clinical Council or the SNHN CEO must be present at each meeting.

## Reporting

SN Clinical Council will report to the SNHN board after each meeting.

Minutes from all Clinical Council meetings will be provided to the SNHN board.

Brief notes or communiques may be distributed to other relevant stakeholders as determined by the SNHN board.

SN Clinical Council may form focused working groups or subcommittees to investigate particular issues in more detail, as required.

## Remuneration

Members will receive a sitting fee per meeting attended as determined by the SNHN Board.

## Performance review

The terms of reference and the performance of SN Clinical Council will be reviewed annually by the SNHN board.

## Guiding Principles

Members will:

- commit to attending meetings with apologies given, where possible, 1 week in advance
- ensure that knowledge is shared with the people or profession they are representing and routinely seek and provide feedback on issues discussed at meetings within agreed timeframes
- ensure papers are circulated to relevant stakeholders
- endeavour to operate on the basis of consensus, however, where this is not possible the majority view will prevail
- adhere to the values of honesty, integrity, service, accountability, collaboration, openness, respect and empowerment
- declare any potential, perceived or actual conflicts of interest
- maintain confidentiality and adhere to the SNHN privacy policy
- participate in continuing professional development activities if required to effectively fulfil the position responsibilities
- participate in an annual evaluation of the council's performance.

Agreed by Clinical Council Members, Ratified by SNHN Board 22 February 2016



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