



Western Health

Western Health

Community Advisory Committee

Charter

July 2024

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Section A: Community Advisory Committee Charter

1. Purpose and Role

The Community Advisory Committee is appointed by the Board of Directors of Western Health in accordance with Sections 65ZA and 65ZB of the *Health Services Act 1988*.

The Community Advisory Committee ensures that Western Health engages with and involves consumers, carers and community members in decisions about its service operations, planning and policy development. This engagement is based on the principles that consumer participation is a democratic right, improves the safety and quality of health care and leads to improved health outcomes for patients.

The role of the Committee is to:

- represent and advocate for the community.
- engage with community served by Western Health to understand community health needs, including considering feedback appropriately shared with the committee from the consumers and carers who use the health service.
- advise the board and the health service on consumer, carer and community views on health service development, planning and quality improvement.

The Committee representation is shaped by projected demographic demands, and the diversity of the Western Health community encompassing differences based on ethnicity, language, religion, values and beliefs systems, disability, socio-economic status, sexuality, gender, age and educational background.

2. Specific Responsibilities

The Community Advisory Committee's specific objectives are as follows:

2.1. To foster engagement, consultation and participation with consumers, carers and community members

The Community Advisory Committee will:

- Review the communication strategies for ongoing consultation with the community.
- Liaise and collaborate with relevant community, consumer and health service organisations in its catchment area.
- Contribute to planning for the annual general meeting conducted by Western Health in accordance with Section 65ZG of the *Health Services Act 1988* and promote community attendance at this public forum.
- Attend relevant events/meetings/forums to engage with the Western Health broader consumer advisor team.

2.2. To identify and advise the Board and health service of the key priority areas for planning and policy development on behalf of consumers, carers and community members

The Community Advisory Committee will:

- Identify and advise on priority areas and issues requiring consumer and community participation.

- Review and monitor the specific needs of disadvantaged, isolated and marginalised consumers and communities, and recommend policy improvements where necessary.
- Consult with community members and report on issues.
- Make recommendations for improvement to Western Health and the Board and to mitigate strategic risks in so far as those risks impact the community served by Western Health.

2.3. To facilitate the integration of consumer, carers and community views with Western Health service delivery initiatives

The Community Advisory Committee will:

- Monitor consumer, carer and community views so they are recognised and reflected in service delivery initiatives where necessary.
- Assist in the identification of development and training needs in relation to consumer, carer and community participation.
- Monitor Standard 2 of the National Safety and Quality Health Service Standards.
- Consider presentations and reports from the following advisory groups:
 - Aboriginal Health Steering Committee
 - LGBTIQ+ working group
 - Other relevant committees.
- Consider the work being undertaken by other internal committees and advisory groups. This could include, but is not limited to:
 - The Quality and Safety Committee
 - The Primary Care and Population Health Advisory Committee
 - Best Care Committees.

Section B: Community Advisory Committee Operating Guidelines

1. Membership

- The Committee will be comprised of eight to twelve community members who will represent a diverse community perspective. Members should be active in the community with strong community networks and an understanding of local issues.
- At least two Board Directors will be appointed to the Committee by the Board.
- Appointment to the Committee is in accordance with the Health Services Act 1988 Section 65ZB.
- The Chair of the Board, in consultation with the Directors, will appoint the Chair of the Community Advisory Committee, who will not be the Chair of the Board.
- The Committee Chair will work with the Committee to appoint a Co-Chair, who is one of the Community Representatives for a period of up to 3 years.
- The Committee Chair will facilitate and chair the meetings of the Community Advisory Committee.
- The Committee Chair will set the agenda and work-plan with input from the Committee Members.
- The Committee Chair and the Executive Sponsor, in consultation with the members, will extend an invitation to Western Health staff to attend as required.
- All Board Directors and the Chief Executive Officer have a standing invitation to attend any Community Advisory Committee meeting.
- Community member and Lived Experience Advisor appointments will generally be for a period of three years. Appointments will be staggered to ensure incremental membership renewal, diversity of representation, and adaption to changing demographic needs. Further three-year appointments may be offered as appropriate.
- Members are expected to attend a minimum of 75% of meetings per year.
- The Board of Directors shall review the Community Advisory Committee membership annually.

2. Powers and authority

- The Board authorises the Committee to perform activities within its Charter, seek any information it requires internally and externally, and where necessary obtain external advice from key community and professional groups.
- The Committee is a high-level committee which is appointed in an advisory capacity to the Board and the health service. It has no executive authority to make decisions or to advocate on behalf of Western Health.

3. Operations

- The Community Advisory Committee will meet at least quarterly with maximum of six meetings per year. Meetings may be held online or in person at the discretion of the Committee Chair. At least one meeting per year will be conducted in person where practicable.
- A quorum shall consist of at least four community members and one Board Director Member of the Committee.
- The Chief Executive Officer will from time to time nominate two Western Health executives to be standing invitees to meetings of the Committee, including the Executive Sponsor of the Community Advisory Committee.

- Western Health's Board Administration Officer will act as the Committee Secretary and attend all meetings of the Community Advisory Committee

4. Agenda and minutes

- Meeting documentation including the agenda, minutes of the previous meeting and other relevant documents will be distributed to the Committee Members and attendees/invitees 4 working days prior to the meeting by the Committee Secretary.
- An annual work-plan will be prepared outlining the key dates of each meeting and significant matters to be discussed.
- The proceedings of all meetings will be minuted by the Committee Secretary to reflect the work undertaken by the Committee and provided to the Board at its next meeting.

5. Performance

- The Committee will conduct an annual review of its Charter, work plan and performance, and provide recommendations to the Board for consideration.

Section C: Supporting Information

Definitions

- Communities may be defined in terms of ethnicity, language, age, and gender, specific illness, sexual preference, geographical area or disability
- Consumers refer to patients, users or potential users of the health service
- Carer refers to family members, partners or friends providing unpaid care to Consumers, Carers and Community members/patients
- Cultural diversity refers to but is not limited to diversity which encompasses, ethnicity, language, disability and sexual preference, age, gender and socio-economic status or religion
- Linguistic diversity refers to languages other than English.

References

- *Health Services Act 1988 (Vic) s65ZA and s65ZB*
<https://content.legislation.vic.gov.au/sites/default/files/2024-02/88-49aa181-authorised.pdf>
- Building your healthy community: A guide for health service community advisory committees, Safer Care Victoria, State Government of Victoria, Melbourne, 2020
<https://www.bettersafecare.vic.gov.au/>
- Partnering in healthcare: A framework for better care and outcomes, Safer Care Victoria, State Government of Victoria, Melbourne, 2019
<https://www.bettersafecare.vic.gov.au/>
- Australian Commission on Safety and Quality in Healthcare 2017, Standard 2, National Safety and Quality Health Service Standards (second edition), ACSQHC, Sydney.
<https://www.safetyandquality.gov.au/>
- Australian Charter of Healthcare Rights 2nd Edition
<https://www.safetyandquality.gov.au/consumers/working-your-healthcare-provider/australian-charter-healthcare-rights>
- Western Health Strategic Directions 2024-2027
[insert once finalised]

Provenance

- In 2008 the Western Health Community Advisory Committee was amalgamated with the Western Health Cultural Diversity Committee and became the Cultural Diversity and Community Advisory Committee (CDCAC).
- In 2019 the name was changed to the Community Advisory Committee to align with Safer Care Victoria Guidelines 2020.

This Charter is available from the Board Administration Officer on request or from www.westernhealth.org.au.

Recommended by the Community Advisory Committee: 1 May 2024

Approved by the Board of Directors: 7 June 2024