

27 January 2012

Service Coordination Advisory Group

TERMS OF REFERENCE

1. Name

The group shall be known as the Service Coordination Advisory Group (SCAG) and is a standing committee of the Inner East Primary Care Partnership.

2. Aim

The Service Coordination Advisory Group (SCAG) will strive to ensure that optimum service coordination practices, processes, protocols & systems (PPPS) are used in the Inner East PCP catchment. Parameters for this work are defined by the priorities laid out in the current IEPCP Strategic Directions documentation and Department of Health program logic requirements.¹

3. Objectives

The objectives of the group are to provide:

- Expert advice on implementing Service Coordination PPPS
- Advocacy for service coordination needs and activities
- A forum for feedback, discussion and solution generation to emerging issues or needs
- Opportunities for Service Coordination Contacts to network and share information, experiences, learnings and expertise
- Identification of common service coordination priorities on which staff from member organisations could work collaboratively to achieve outcomes that would not be possible through a single organisation
- Advice on conduct of quality assurance processes and support for their implementation
- Advice on training and the allocation of Statewide service coordination resources
- Input to improve Service Coordination PPPS at a Statewide level.

4. Accountability

The Service Coordination Advisory Group does not link directly to any other IEPCP meetings but may interact with the IEPCP Service Coordination Practitioners' Network as necessary. The prime relationship of the SCAG is with the IEPCP Coordinator Systems of Care, who will report on its activities through the IEPCP Executive Officer to the IEPCP Executive Committee.

5. Authority

The Service Coordination Advisory Group does not have any delegated authority for decision making on behalf of the Inner East PCP. The role of the group is to share expertise and experiences and provide a reference point and advice to the IEPCP on matters relating to service coordination consistent with its remit in these Terms of Reference.

¹ In this document, Service Coordination should be read as including e-referral.

6. Membership

Composition

Composition of this Group will be as follows:

- Members will be agency Service Coordination Contacts formally nominated for membership by their agency. Service Coordination Contacts are the most senior person in an organisation, other than the CEO, with overall responsibility for service coordination (or as otherwise decided by the agency). The Service Coordination Contact must be able to speak authoritatively on service coordination implementation within the agency and have delegated authority to make decisions and recommendations on matters relating to service coordination. Membership will be advised or re-confirmed by the agency annually.
- A representative from the Eastern Metropolitan Region Department of Health will be invited to attend in an *ex-officio* capacity to provide policy updates and advice as it pertains to the objectives and activities of the SCAG. The representative will have access to meeting minutes and records as appropriate to support effective communication between the IEPCP and the Department
- The IEPCP Coordinator Systems of Care will attend with the same rights as other members
- The Executive Officer of the IEPCP will attend if requested and able to be present
- The SCAG may invite guests to attend for particular purposes.

Chair

A Chair shall be elected at the first meeting each year. The elected Chair must be a senior member of a Level 1 (full) member of the IEPCP. In the absence of the Chair, members present may elect a Chair for the meeting concerned.

Member responsibilities

The responsibilities of SCAG members include:

- Attendance and participation at meetings
- Having the delegated authority within their own agency to make decisions and recommendations to the group on behalf of that agency
- The option of nominating another delegate from their agency (a proxy delegate) if unable to attend.
- Proxy delegates must be in attendance at the meeting in order to vote and must have the same capacity to contribute to achieving the meeting outcomes as the person who they are replacing
- Showing due consideration of professional and legal requirements regarding respect for other's opinions
- Using appropriate language and behaviour
- Observing confidentiality
- Protection of those absent
- Providing opportunities for all members to participate equally
- Contributing to a safe and supportive, collegial environment for those present.

Secretariat

The Coordinator Systems of Care, in consultation with the SCAG Chair, shall be responsible for arranging the preparation and distribution of agendas, the taking and distribution of records, minutes and other meeting documents in an accurate and timely manner.

Any matters requiring action between meetings will be referred to the IEPCP Coordinator Systems of Care, who will ensure that these matters are documents and that all efforts will be made to gain consensus through telephone and/or email discussions. Any decisions reached through this process will be recorded by the IEPCP Coordinator Systems of Care and be listed as an agenda items for formal endorsement at the next scheduled meeting of the group.

[ToR Revision Date: February 2012]

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7. Meetings

Meetings will be held quarterly. Extraordinary meetings may be held if required. Meetings will be no more than ninety minutes in duration.

8. Decision Making

A quorum shall consist of one half plus one of the total members. Decisions shall be consensus-based. *Ex officio* members do not have voting rights.

9. Review of Terms of Reference

Terms of Reference are to be reviewed annually.

Terms of Reference endorsed by the Executive Officer, IEPCP

Signature:

Date:

Review Due Date: February 2013