Monash Rural Health
Community Advisory Committees: Terms of Reference

Preamble
Community Advisory Committees (CACs) will be set up across the Murray-Darling and Gippsland regions to provide external advice with regard to the Monash End-to-End Rural medical program established under the Murray-Darling Medical Schools Network (MDMSN).

The purpose of the CACs is to provide direct input and advice from community members, health and community service providers, and local government in the regions to ensure a high-quality implementation of the Monash End-to-End Rural medical program. Such engagement is expected to result in enhanced collaboration on identifying and responding to community health issues, including local health workforce shortages, as well as education and research needs.

Meetings and Membership
Meeting twice per year from early 2020, the Committees will have an agreed number of members reflecting the diversity of stakeholder groups. Meetings will be minuted. Once a year, an additional combined Community Advisory Committee will be held, bringing together all three regional Community Advisory Committees.

Membership of the Community Advisory Committees will include community members selected through a call for Expressions of Interest. Selection will be at the discretion of the Monash Rural Health Directors in Mildura, Bendigo and Gippsland to ensure equitable and diverse membership across the CACs. This will include gender balance and representation from Indigenous peoples. Suggested membership for each Community Advisory Committee is open and flexible for each region, eg. It is not necessary to have the same number of committee members for each CAC.

Membership of the Bendigo Community Advisory Committee:
1. Community member from Bendigo
2. Community member from Woodend/Kyneton, Castlemaine, Maryborough, Swan Hill
3. Community member from Bendigo and District Aboriginal Co-operative (BDAC)
4. Secondary school careers practitioner
5. Representative of the City of Greater Bendigo
6. Representative of La Trobe University (Bendigo campus)
7. Representative of Bendigo Health Hospital Board
8. Representative of Murray City Country Coast GP Training
9. Representative of Murray Primary Health Network
10. Monash graduate alumni
11. Medical practitioner

Ex Officio
12. Director, Monash Rural Health Bendigo
13. Regional Manager, Monash Rural Health Bendigo

Project Manager, MDMSN End-to-End Rural program, will be the Secretary to the Committee.
Membership of the Mildura Community Advisory Committee:

1. Two community members
2. Community member from Mallee District Aboriginal Services (MDAS)
3. Secondary school careers practitioner
4. Representative of Mildura Rural City Council
5. Representative of Mildura Base Hospital Board
6. Representative of Murray City Country Coast GP Training
7. Representative of Murray Primary Health Network
8. Monash graduate alumni
9. Medical practitioner

*Ex Officio*
10. Director, Monash Rural Health Mildura
11. Regional Manager, Monash Rural Health Mildura

Project Manager, MDMSN End-to-End Rural program, will be the Secretary to the Committee.

Membership of the Gippsland Community Advisory Committee:

1. Community member from Traralgon, Warragul
2. Community member from East Gippsland
3. Community member from South Gippsland
4. Community member from Gippsland and East Gippsland Aboriginal Co-operative (GEGAC)
5. Two secondary school careers practitioners (1 private school / 1 public school)
6. Representative of Latrobe City Council
7. Representative of Federation University
8. Representative of Latrobe Regional Hospital Board
9. Representative of Eastern Victoria GP Training
10. Monash graduate alumni
11. Medical practitioner

*Ex Officio*
12. Director, Monash Rural Health Gippsland
13. Regional Manager, Monash Rural Health Gippsland

Project Manager, MDMSN End-to-End Rural program, will be the Secretary to the Committee.
Terms of Reference
The roles of the Community Advisory Committees are to:

1. Discuss and advise on community perspectives around the proposed new End-to-End Rural medical program education activities, plans and projects as presented by the MDMSN Working Group.
2. Help in promoting the End-to-End Rural medical program to people in its region.
3. Provide advice to the MDMSN Working Group and Monash Rural Health Executive on engagement and communication issues including the optimal communications plan.
4. Provide advice on the effectiveness of communication processes.
5. Participate in evaluating the impact of the End-to-End Rural program.
6. Undertake any other activities deemed valuable by the committee that may contribute to the realisation of the program’s objectives.

Process for annual election of the Chair

1. The Secretary will act as Returning Officer.
2. Returning Officer to invite nominations for the position of independent Chair from CAC members.
3. There must be two nominators.
4. Only community members are eligible for nomination and must agree to the nomination.
5. If more than one nomination is received the Returning Officer will conduct a ballot from among CAC members.
6. The successful nominee will take up the position of Chair at the second meeting of the year.
7. Tenure of the chair will be for 12 months.

Meeting arrangements

1. The Community Advisory Committees will meet twice per year. Once a year an additional combined Community Advisory Committee will be held, bringing together all three regional Community Advisory Committees.
2. The Chair will convene meetings. If the designated Chair is not available, Committee members will nominate a proxy to be responsible for convening and conducting the meeting. The Acting Chair is responsible for informing the Chair as to the salient points/decisions raised or agreed to at the meeting.
3. Community Advisory Committee agenda papers will be distributed at least five working days prior to the next scheduled meeting. Minutes of each meeting will be circulated no later than ten working days following each meeting.

Reporting
The Community Advisory Committees will provide reports to the MDMSN Working Group and MRH Executive Committee.
Approved
17 January 2020

Review
Terms of Reference to be reviewed bi-annually, with the next review date being September 2021.