

# **Chronic Disease Sub-committee**

## **Terms of Reference**

#### **STATUS**

The Chronic Disease Sub-committee (CD-SC) is a sub-committee of the Kimberley Aboriginal Health Planning Forum (KAHPF). As such:

- These terms of reference must be endorsed by the KAHPF.
- Regular CD-SC reports will form a standing agenda item at KAHPF meetings.
- No member may make representations on behalf of the KAHPF without the mandate of the KAHPF.
- The CD-SC does not have decision-making powers as an entity, and as such cannot act as an authority above or on behalf of individual health service governance and management bodies.
- The KAHPF will review the CD-SC's Action Plan annually.

#### **OBJECTIVES**

The objectives of the CD-SC are to:

- Improve the health of priority populations in the Kimberley, in particular Aboriginal people, through:
  - o Coordinated regional planning in areas of family and community engagement.
  - Disease screening and early detection.
  - Ongoing education, training and support for the provision of evidence based best practice management of established chronic disease by KAHPF member organisations.
- Develop and implement a three-year Action Plan and progress activities that contribute to achieving its key priorities:
  - o Identify key barriers and enablers to achieving progress on the Action Plan.
  - o Provide regular reports to the KAHPF on progress against the agreed Action Plan.
- Meet face-to-face with the KAHPF annually, via the Chair, to seek feedback and discuss progress, challenges, results, and barriers to progressing the Action Plan.

## **VALUES**

In all its work the CD-SC undertakes to:

- Operate in a manner that is accessible, accountable, respectful, and inclusive.
- Operate in a collaborative manner which builds on existing structures and networks.
- Support actions and initiatives which consolidate and strengthen existing services.
- Promote equitable service delivery in the Kimberley region.
- Maintain its commitment to cultural security.

#### **ROLE**

Under the auspices of the KAHPF, the role of the SC-SC is to:

• Establish stronger links to allow flow of health information across Aboriginal community-controlled health services (ACCHS), government and non-government health sectors in the Kimberley,

- especially to improve case management and continuity of care for patients with chronic disease and complex care needs.
- Consider regional health information and health service delivery data including key performance indicators to identify needs, gaps, and priorities to appropriately inform ongoing regional planning, timely initiatives, and best practice service delivery.
- Support each service to establish and implement chronic disease strategies in a format that is robust enough to outlive staff turnover and create continuity of care.
- Identify strategies to inform ongoing development, expansion and upskilling of the regional health workforce including the development, authorisation and implementation of chronic disease guidelines and protocols for the Kimberley.
- Align with the priorities of the KAHPF Strategic Plan and other KAHPF documents.
- Develop and support linkages with other Sub-committees to ensure chronic disease priorities are considered in other aspects of regional planning, including workforce development, research, and data.
- Promote linkages to address social and economic determinants of chronic disease in conjunction with other Sub-committees and appropriate external organisations.
- Advise KAHPF on emerging issues, or factors associated with increasing risk of chronic disease.

The CD-SC may also establish working groups, which may also relate to other Sub-committees. Current working groups are:

- Kimberley Standard Drug List
- Kimberley Standard Dressing List
- Oral Health Working Group
- Kidney Health Action Group

## **MEMBERSHIP**

The CD-SC is comprised of representatives of relevant KAHPF member organisations:

- Boab Health Services
- Broome Regional Aboriginal Medical Service
- Derby Aboriginal Health Service
- Kimberley Aboriginal Medical Service Ltd
- Kimberley Pharmacy Services
- Kimberley Renal Services

- Lions Outback Vision
- Nindilingarri Cultural Health Service
- Ord Valley Aboriginal Health Service
- Royal Flying Doctor Service
- WA Country Health Service (WACHS)
- WA Primary Health Alliance
- Yura Yungi Medical Service

On occasion the CD-SC may invite observers or guests relevant to the agenda items being discussed.

### **CHAIR AND SECRETARIAT**

The CD-SC will be chaired or co-chaired by a member/s for a period of 12 months. This period may be extended with endorsement of the CD-SC.

The responsibilities of the chair and secretariat include development of agendas and meeting papers, minute taking, following up outstanding actions, communication with KAHPF and other key stakeholders, meeting venue booking, and other functions as required. The Chair is responsible for maintaining an up-to-date member list.

Per the KAHPF Terms of Reference, KAHPF members are responsible for contributing, via in-kind support, to

the provision of secretariat and administrative support as able.

ATTENDANCE AND PARTICIPATION

The CD-SC values consistent representation. All members are required to nominate a similarly skilled proxy

with authority to discuss, endorse and make decisions on behalf of their organisation at the meeting.

A quorum requires attendance of a minimum of 51% core members, including one representative from the

ACCHS sector and one from WACHS.

If a member organisation is not represented at three consecutive meetings without an apology the chair or

secretariat may enquire into their reasons for non-attendance.

**AGENDA** 

As the CD-SC is a forum, members are free to raise any chronic disease-related matters of concern that affect

people or service providers in the Kimberley.

Major matters for discussion at meetings should be communicated to the chair or secretariat for listing as

agenda items. The member proposing agenda items should provide written papers where appropriate and

these papers should be circulated at least one week prior to the meeting.

**FREQUENCY OF MEETINGS** 

The CD-SC will meet four times a year.

Where required, members are responsible for arranging their own travel and covering their own costs to

attend meetings.

Wherever possible meetings will be aligned to occur in between KAHPF meetings to enable matters to be

tabled at the KAHPF for endorsement.

**REVIEW** 

These terms of reference will be reviewed by the CD-SC every 12 months. Substantial changes require KAHPF

endorsement.

Date endorsed by CD-SC: July 2023

Date endorsed by KAHPF: 31 August 2023