# COMMUNITY HOSPITALS PROGRAM: COMMUNITY CONSULTATIVE COMMITTEE

## Terms of reference

#### Background

In October 2018, the Victorian Government announced ten community hospitals in the locations of Craigieburn, Cranbourne, Pakenham, Phillip Island, Sunbury, Torquay, City of Whittlesea, Eltham area, Point Cook and Fishermans Bend.

These community hospitals will provide Victorians with more access to healthcare closer to where they live. Services will vary across each site and include a range of clinical and social services. Community hospitals provide an opportunity for better integration of health and social care services, particularly for children and families.

Examples of services provided include:

- · chronic disease management and prevention
- · day surgery and procedures
- dialysis and chemotherapy
- · diagnostic imaging
- family and early childhood services
- · family safety services
- · community drug and alcohol services
- · community mental health services
- pathology
- pharmacy
- public dental care
- · specialist appointments.

The community hospital program will be delivered through a combination of upgrades and expansions to existing sites and new developments at new sites.

### Purpose and role of the community consultative committee (the committee)

The role and purpose of the community consultative committee is to:

- work with the Department of Health and Human Services (the department), Victorian Health and Human Services Building Authority (VHHSBA), local government, local health services and key community advocates to create and support a culture and environment where community involvement is valued and effective
- identify opportunities for community involvement and ensure that community
  members are supported to participate in both the consultation process, as well as
  ongoing development and operations of the community hospital
- understand the views of the community and provide advice to both the project delivery team and the Minister for Health
- monitor the emerging issues, concerns, opportunities and priorities of the community related to the development
- ensure there is a clear communication between community and the project.

These terms of reference apply to the committees for each of the community hospital sites at Craigieburn, Cranbourne, Pakenham, Phillip Island, Sunbury, Torquay, City of Whittlesea, Eltham area, Point Cook and Fishermans Bend.





### Membership: foundation, selection process and responsibilities

#### Foundation membership:

- chair of committee appointed by the Minister for Health
- · representative of the governing health service
- · representative of local community health services
- · representative of local government
- Aboriginal representation
- representative of the department or VHHSBA.

In addition, the committee includes members who were selected by an independent expression of interest process, and a limited number of invited community members to ensure diverse representation.

Members are appointed for a 12-month period. The committee may be extended beyond this date.

## Membership selection

There were various selection criteria for members, including (but were not limited to):

- representation from advocates or individuals who represent broader groups that may access the community hospital's services
- representation from advocates or individuals who have an interest in bringing greater vitality to the community through building a thriving health precinct that can support health and wellbeing of the local community.

Appointments were made by the Minister for Health in consultation with the chair.

# Membership responsibilities

Member responsibilities are to:

- · represent their community's perspective in discussions and decisions
- canvas views, opinions and issues from their peers outside the committee, as required
- take the non-confidential outcomes of the committee discussions and decisions to their peers
- promote the work of the committee as widely as possible
- be respectful of other committee members, ensure principles of integrity are maintained, and are accountable with fulfilling their responsibilities as outlined in the code of conduct.
- actively engage with people and/or advocacy groups who may access hospital services to help inform design. These would include but not be limited to:
  - patients and/or advocacy groups of mental health services
  - patients and/or advocacy groups of alcohol and drug services
  - patients and/or advocacy groups of family safety services
  - advocacy groups and/or parents with a chronically ill child or children
  - patients and/or advocacy groups of physical disability
  - patients and/or advocacy groups of chronic disease services
  - key community ethnic groups
  - local Aboriginal and Torres Islander community
  - LGBTIQ representatives and/or advocacy groups
- · actively engage with service delivery partners
- sign a code of conduct which includes an agreement on confidentiality, conflicts of interest and media protocols.

Role of VHHSBA	<ul> <li>The VHHSBA Communications and Engagement unit will:</li> <li>support the chair in facilitating the effective running of the committee</li> <li>provide a framework for community engagement which the committee can implement</li> <li>provide support and advice to individual committee members wherever appropriate to support involvement in appropriate activities.</li> </ul>
Media enquiries	Internal communications support will be provided by the Department of Health and Human Services central communications and the VHHSBA communications and engagement team.  While the chair will be the spokesperson for the group to the media and broader community, the Chief Communications Officer at the department or the Premier's Media unit must approve all public communications relating to the community hospital or the work of the committee.  Given that there may be commercial matters presented to the committee, the chair and members will be required to comply with conflict of interest, confidentiality and media protocols.
Meeting frequency	Meetings will be scheduled as required or otherwise determined by the committee.  They will be co-ordinated to accommodate efficient reporting and decision-making where appropriate.
Resolving problems and disputes	Disagreements and problems will be dealt with in a courteous manner. At all times focus must not be on blame or face-saving activities but in real and satisfactory joint resolution. Further, it is important that any issue is resolved in a timely manner to avoid escalation beyond remedy.

To receive this publication in an accessible format, email the <u>Community Hospitals program</u> <communityhospitals@dhhs.vic.gov.au>

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