

CONSUMER ADVISORY COMMITTEE

Executive Sponsor: Chief Strategy, Marketing and Experience Officer **Interim Chairperson:** Chief Strategy, Marketing and Experience Officer

Chairperson: Consumer Advisor Member of the Committee (to be elected upon

establishment of committee)

Secretariat: Senior Manager Client Experience
Frequency: Quarterly (every third month)
Time Limit: Two and half hours (2.5) hours

Includes 30 minutes of consumer member networking time

Venue: Central Office, 15 Rowe Avenue, Rivervale and/or Microsoft Teams

or SCC (WA) Community Based Locations

1 PURPOSE

The purpose of the Consumer Advisory Committee (CAC) is to:

- 1. Represent and advocate for our community.
- 2. Provide the Quality Care Advisory Committee (QCAC) feedback on the quality of aged care, services and accommodation provided.
- 3. Provide advice to the Board and Executive on opportunities to support the integration of community views into of operations, I projects, evaluation of services, planning and policy development.
- 4. Engage with the community to understand their needs, including the needs of residents, clients, their families and carers who use Southern Cross Care (WA) Inc's (SCC (WA) Inc.) services.
- 5. Provide advice based on residents, clients, tenants, carers, families and community experiences and expectations of SCC (WA)'s services.

2 REGULATORY OBJECTIVES

The CAC fulfils SCC(WA)'s legislative and standards requirements for consumer participation:

- 1. The Aged Care Quality Standards require consumer involvement in developing, delivering, and evaluating care and services. Aged Care providers are required to offer at least one consumer advisory body per annum and provide feedback to the governing body, QCAC, effective 1 December 2023.
- 2. The Mental Health Act, including the mental health engagement framework, requires the establishment of reference groups and steering committees involved in designing services, policies, systems and the evaluation and measurement of consumer experiences to improve the mental health system.

- 3. As a NDIS provider, we seek to understand if consumers are happy or have an issue with our services. Our goal is to create an inclusive community with equitable access to support services that best meet their needs and be a leader in the engagement of people with lived experiences at all levels of our organisation.
- 4. SCC(WA) provides transparent feedback and complaints processes for residents in our villages and promotes and protects the interests of current and future residents.
- 5. Southern Cross Housing Limited, complies with Community Housing regulations to ensure our tenants can provide feedback and complaints.

QCAC is required to provide written advice to the CAC about how their feedback was considered. This involves addressing the issues raised and making genuine attempts to find solutions to incorporate the views and wishes of consumers into decision making.

Feedback does not always have to be implemented; however, suggestions and actions should be used to provide insight into issues and consumer perspectives of experiences at SCC(WA). Refer to legislation and standards documents in this document.

3 FUNCTIONS

The CAC is responsible for advocating on behalf of our consumers and community and to provide written reports to QCAC on issues and items relevant to consumer wellbeing, participation, and experience. The CAC may request information to be provided by the QCAC.

The CAC supports the delivery of quality care and services in alignment with SCC(WA)'s values of "I listen", "I don't give up" and "We work as one".

The main functions of the CAC are:

1. Person Centred Care

- a) Assist SCC(WA) with its communication to consumers and the community to encourage feedback about their care and services;
- b) Develop a Community Engagement Plan for approval by QCAC, and monitor the implementation and effectiveness of the approved plan;
- Advise the organisation in relation to its consumer and community engagement to ensure consumers have access to appropriate information and resolving issues;
- d) Participate in the development and review of information which is used by the community;
- e) Provide input and feedback in key documents such as SCC (WA)'s Community Partnerships Framework; and
- f) Consider feedback themes, and where appropriate make suggestions to improve the quality of care and services.

2. Integrated Care

a) Advise the organisation on opportunities to support the integration of consumer, carer and community views into f SCC(WA)'s operations, service development, planning and quality improvement.

3. Effective and Appropriate Care

- a) Consider matters referred to the Committee by QCAC or other SCC (WA) committees;
- b) Participate in the organisation's strategic planning process.

4 MEMBERSHIP

Membership will comprise of a majority of current consumers, with representation across aged care, retirement living, and other social services provided by SCC(WA). It will be representative of the demographics and diversity of our consumers to ensure a wide range of perspectives are considered.

The members of the CAC will collectively have the lived experiences, skills and qualifications to meet the responsibilities of the CAC.

QCAC shall note community member nominations to the CAC.

4.1 Community Membership of the CAC:

- A member (Community Advisor) of the CAC will act as Chairperson and will be elected by the Committee;
- Where possible there will be eight to 12 community members with lived experience, including Knights of the Southern Cross representation and representatives from vulnerable groups / third parties (dementia specialists, culturally and linguistically diverse (CALD), Aboriginal and Torres Strait Islander people (ATSI) etc.);
- Committee members represent a broad range of lived experiences and demographics from our current residents, clients, carers, tenants, families and community perspectives on the CAC. They are selected to represent and advocate for the community regardless of their professional, career or personal affiliations or experience; and
- Committee members should be able to represent the diversity of the community serviced by SCC (WA).

4.2 Staff Membership of the CAC:

By invitation of the Chairperson, staff may attend for all or part of one or more meetings of the CAC as a resource or in an advisory capacity.

 Chief Strategy, Marketing and Experience Officer, SCC (WA), Inaugural Chair (upon establishment, the Chair of the Committee will be a consumer participant elected by the members); and

Senior Manager Client Experience, Secretariat.

5 TERMS

Community members will have a term of 12 months, with the option of renewal for two additional 12-month terms.

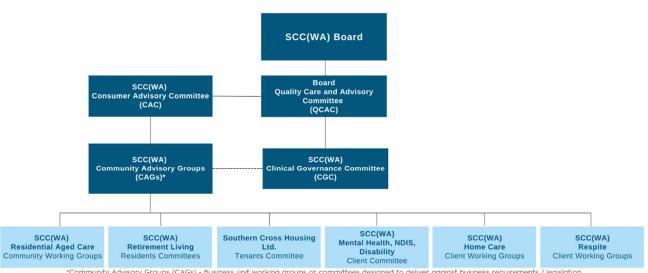
6 DECISION MAKING, QUORUM, AGENDAS AND FREQUENCY OF MEETINGS

- The meeting frequency is quarterly (every third month) with agendas circulated one week prior to each meeting;
- An agenda will be co-developed with the CAC, which includes appropriate briefings, attachments or to inform the Committee;
- Any member can propose matters for consideration by notifying the Chair and copying in the Secretariat;
- A quorum shall comprise no less than half the membership plus one;
- The absence of a quorum shall not invalidate the proceedings of a meeting;
- A meeting without a quorum may not decide without that decision being ratified at the next meeting with a quorum, or by circulation of the members who were absent;
- Minutes of each meeting will be prepared, circulated and retained as the complete and formal record of each meeting of the CAC by the Secretariat;
- Minutes of each meeting will be confirmed, with or without amendment at the next ordinary meeting of the CAC;
- Minutes will be tabled at the Clinical and Services Governance Committee (CSGC) and QCAC;
- Documents and correspondence relating to the CAC are confidential.
 Communication of decision making is an important component of management, however, the basic principles of confidentiality apply to documents relating to the CAC;
- Meetings may be held in person, by teleconference, by videoconference or by any other electronic means of audio or visual communication. Interstate or regional members are not required to attend the meetings in person and will be supported to attend via videoconference or teleconference; and
- In the event of their absence, the Chairperson will nominate another committee member (Consumer Advisor) to chair the meeting.

7 REPORTING AND RECORD KEEPING

The CAC reports to QCAC:

SCC(WA) Consumer Advisory Committee Reporting Structure



*Community Advisory Groups (CAGs) - Business unit working groups or committees designed to deliver against business requirements

Under the Accountability Principles:

- A register of CAC membership is to be maintained, including names of each member, date of commencement, ceased/resigned.
- A copy of the dates and each written offer made to consumers and representatives where SCC(WA) has made the opportunity available.
- The minutes and a summary of each meeting are tabled at the CSGC and QCAC as they become available.
- A copy of written advice given to the CAC by the QCAC advising how any feedback has been considered.
- The CAC is responsible for communicating information to the business, site-based Consumer Advisory Groups (CAGs) and escalating information to QCAC.
- QCAC will approve the Terms of Reference.
- The CAC reports against the progress of the Community Engagement Plan on an annual basis.
- Minutes from the SCC(WA) CAGs will be tabled at the CAC for review as they become available.

8 COMMITTEES/ WORKING PARTIES THAT REPORT TO THIS COMMITTEE

Community Advisory Groups (CAGs).

9 RENUMERATION AND BENEFITS

Consumers contribute to the work of SCC (WA) through the CAC. A tiered approach to renumeration acknowledges the variety of knowledge, skills and experiences required for genuine and meaningful participation within these levels and the insight and benefits gained by consumers with lived experience who provide their opinions and feedback.

Payment information is provided in the CAC Paid Participation Policy. Participants should check with Centrelink regarding tax implications for payments received.

10 METHODS OF ENGAGEMENT

The CAC will meet face to face at least once per quarter.

Where CAC engagement is statewide or regionally targeted, the CAC will endeavour to facilitate face to face engagement activities and participation in partnership with local stakeholders and communities.

Where face to face engagement is not feasible, alternative methods of engagement may include:

- Video and conference calls;
- Web casting or webinars (streaming an event through the internet); and
- Online platforms such as forums and surveys.

These alternative methods also attract the offer of a participation payment. Where people have specific knowledge and skills that would greatly assist the work of SCC(WA), we will meet costs associated with their participation as per out-of-pocket expenses outlined in this Policy.

11 KEY PERFORMANCE INDICATORS

- Members attend a minimum of 75 per cent of meetings held each year. Where this is not possible, an apology must be forwarded to the Committee Chair and Secretariat;
- All action items and minutes are submitted to the QCAC for feedback;
- Undertake annual evaluation of the performance of the Community Engagement Plan and communicate results to QCAC;
- Undertake an annual review of the Terms of Reference and performance of the Committee;
- All minutes must be verified as correct by the Chairperson at the next meeting;
 and
- All feedback from QCAC is noted by the CAC at the next meeting.

12 LEGISLATION AND STANDARDS

<u>Aged Care Act 1997 – Section 63-1D</u> <u>Aged Care Quality Standards 2019</u>

<u>Aged Care Provider Responsibilities Relating to Governance – Guidance for Approved</u> Providers

Carers Recognition Act 2010

<u>Licensing Standards Private Psychiatric Hostels Oct 2017</u>

Mental Health Act 2014 (WA)

Health and Disability Services Complaints Office (WA)

WA Disability Health Framework Companion Resource

National Standards for Mental Health Services 2010 (Cth)

Mental Health Commission Consumer, Family and Carer Participation

Retirement Living Code of Conduct

Community Housing Regulatory Framework

Department of Communities - Tenants

12.1 Related SCC (WA) Policy and Procedures

SCC Feedback Policy

Quality and Clinical Governance Framework

Code of Conduct Policy

Participation and Inclusion Policy

Privacy Policy

Volunteers Policy

Consumer Advisor Recruitment and Selection Policy (new)

12.2 Related SCC (WA) Forms and Tools

SCC Feedback Form – Staff Use

Client Form - SCC(WA) Website

Consumer Participation Payments Letter Template (New)

Consumer Advisor Membership Overview (New)

Consumer Participation Remittance Request Form (New)

13 SUPPORTING DOCUMENTS

Aged Care Diversity Framework

<u>Health Issues Centre – Getting Started, Involving Consumers on Committees</u>

Consumer Health Forum of Australia – 'Information for committee organisers'

14 **DEFINITIONS**

Term	Meaning for the purposes of this policy document	
Carer	A person who provides care to another person with whom they are in a care relationship.	
Consumer/s	Are members of the public who use, or are potential users, of healthcare, aged care and community care services. When referring to consumers in this document, we are referring to residents, clients, families, carers, and other support people in our community.	
Consumer Advisor	Consumer Advisors bring views based on their experience of a condition, care or their knowledge of a population group. In this case, rather than being a representative of a group, they are Committee Members who act as individuals or advocates (Health Issues Centre, 2014, Getting Started, Involving Consumers on Committees).	
Consumer Advisor Register	A Register of Consumer Advisors that partner with SCC (WA) in a range of ways, either face to face or remotely. Consumer Advisors have had direct or indirect experiences with the care or services the organisation provides. The Register is managed by the Client Experience team.	
Consumer Engagement	Involves informed dialogue between an organisation and consumers, carers and the community. Consumer engagement encourages participants to share ideas or options and undertake collaborative decision making, sometimes as partners.	
Community / Community Member	A group of people with something in common. For example, any individual or group of individuals that have an interest in the development of an accessible, effective and efficient health, aged care or community care service that best meets their needs.	
Volunteers	A core body of people who give their time "free of charge" to assist in the day-to-day business of SCC(WA).	

15 DOCUMENT CONTROL

Rev	Owner	Sections Modified	Date Reviewed	Next Review Date
1.0	Board Quality Care and Advisory Committee	New Terms of Reference	August 2023	August 2024

Prepared by: Senior Manager, Client Experience

Sponsored by: Chief Strategy, Marketing and Experience Officer

Authorised by: Board Quality Care and Advisory Committee

Date: August 2023 **Review Date:** August 2024