

TASMANIAN HEALTH CONSUMER ORGANISATION

IMPLEMENTATION ADVISORY GROUP – MEETING 3

MINUTES

12 March 2019, 1/89 Brisbane St, Hobart

Present: John Pauley (Consumer Representative - Chair), Leanne Wells (CHF), Bruce Levett (Tasmanian HCO), Graeme Lynch (Heart Foundation), Kate Griggs (Consumer Representative), Darren Jiggins (Consumer representative), Sue Leitch (COTA), Penny Egan (Cancer Council Tasmania), Simone Favelle (Carers Tasmania).

Apologies: Klaus Baur (Flourish Tasmania), Mathew Etherington (Consumer Representative), Elida Meadows (Consumer Representative), Anita Campbell (Consumer Representative), Charlie Burton (TasCOSS), Claire Hadolt (Consumer Representative).

<p>Item 1 Welcome and Introduction – John Pauley (Chair)</p> <p>Attachment: Minutes of Meeting 1.</p>	<p>Welcome comments included:</p> <ul style="list-style-type: none">• All actions from meeting 2 completed.• Minutes of Meeting 2 endorsed.
<p>Item 2. Stakeholder workshop outcomes</p> <p>Attachment: Stakeholder workshop summary document. Stakeholder Workshop Survey Results.</p> <p>Decision: Discussion.</p>	<p>Feedback on the stakeholder workshop was positive and indicated strong interest from participants and consensus was achieved. Specific comments included:</p> <ul style="list-style-type: none">• Workshop discussions there is a need to clarify the definitions of some key terms: - advocacy, co-design and consumer.• The workshop did not have adequate time to discuss membership options.• A need to be pragmatic as the workshop identified a broad and extensive list of activities – need to be realistic on what’s achievable with existing resources• Next step is to prioritise activities• Positioning of the organisation is important – is it a peak body for smaller bodies, how do we deal with the overlap between different organisations• How do we focus on health system verses illness system? A health system provides an empowerment model where you also aim to be healthy within your illness / condition• The issue of holistic care is important – all of person or all of health approach• A peak body can deal with holistic issues

	<p>Key Actions:</p> <ol style="list-style-type: none"> 1. Ensure outcomes from the workshop are placed on the website and distributed.
<p>Item 3. Constitution - principles</p> <p>Attachment: Building a constitution</p> <p>Decision: Noted and endorsed findings as a broad framework for the organisation</p>	<p>A. Organisational Entity</p> <p>Discussion centred around a public company limited by guarantee or an incorporated association:</p> <ul style="list-style-type: none"> • Whilst a public company limited by guarantee has more stringent rules compared to an incorporated organisation, it was agreed that this was a more suitable structure to adopt because <ul style="list-style-type: none"> ○ Limits liability of directors ○ Greater compliance and scrutiny limit the ability for conflict of interest to occur ○ Ensures the organisation has a clear purpose and sticks to it ○ Charitable status is important and can be achieved under this legal structure if the objects are clear and fit with a not for profit mandate ○ Government grants often require independently audited set of accounts regardless of the entity type ○ Can still be designed fit for purpose <p>Endorsed public company limited by guarantee.</p> <p>B. Underlying 10 principles and ways of working</p> <p>These principles were endorsed at the first IAG meeting Discussion centred around the “builds capacity of consumers and service providers” and whether the organisation has the capacity or resources to influence the capacity of service providers.</p> <ul style="list-style-type: none"> • The state department indicated a need for this organisation to advise and support its ability to engage consumers. • Stakeholder consultation indicated a need to work externally (with consumers) and internally (within the system) to build capacity. • The board will determine the direction of the organisation and its objectives whilst the funding agreement will determine what specific activities each funding commitment should be allocated towards. <p>There was also discussion as to whether or not the 10 Principles should be included in the Constitution or set apart as a separate Board endorsed document.</p> <p>Key Actions:</p> <ol style="list-style-type: none"> 2. Re-send the 10 principles original document out to the IAG. 3. Check the current funding agreement to determine whether it places any restrictions on this funding.

C. Aims or Objects of the Constitution

There were 7 objects listed for discussion with the arrow points providing further detail that could be included at a later date into a strategic plan.

Discussion centred around:

- Consideration on whether the first object should explicitly focus on disadvantaged and vulnerable Tasmanians. The term 'Equity' was suggested instead.
- Object 2 endorsed
- Consider whether Object 3 could possibly be incorporated into object 2
- Consider whether Object 5 is required given "health policy, planning and service delivery" is mentioned elsewhere
- Ensure object were simple, clear and not too restrictive to the work of the organisation.

Key Actions:

4. Rework Objects so they can be summarised into 4 or 5 objects.

D. Board and E. Consumer Policy Standing Committee

A document summarising the structure of the organisation was tabled. It highlighted a proposed formal relationship between

- the board and the organisation through the Executive Officer
- the Consumer Policy Standing Committee (CPSC) and the Executive Officer.

The proposed relationship between the CPSC and the Board was in the form of providing consumers representatives onto the board.

Consumers would have two formal roles, nominated or voted onto the CPSC or as Consumer Advocates.

Some members noted the CPSC did not need and should not include 'identified clinical experience', however there was discussion about and acceptance of inclusion of 'identified health system experience'.

Key Actions:

5. The CEO position NOT have a formal directorship role on the board to avoid potential conflict of interest.
6. Consider the size of the board to ensure it is manageable.
7. Extend the tenure of directorship to three years with only half the directors becoming vacant at any one time
8. Initial establishment phase to involve half the board recruited for say 3 years and the other half for 2 years.

	<p>9. Consider a top down public recruitment process to select the inaugural directors and the board to assess and fill the remaining positions based on skill needs.</p> <p>10. Revise the relationship between the CPSC and the Board to avoid any potential conflict of interest. Recommend that this report through the CEO with the option of a Board member to also sit on this committee.</p> <p>F. Membership</p> <p>Deferred to next meeting</p> <p>G. Name</p> <p>Key Actions:</p> <p>11. Members to email their preference for the name of the organisation.</p>
<p>Item 7 Other Business</p>	<p>Next Meeting:</p> <p>Key Actions:</p> <p>12. Next meeting to be scheduled for 2 weeks – 27 March in the morning.</p>