Commission on Excellence and Innovation in Health.

Terms of Reference

Children and Youth Health Statewide Statewide Clinical Network

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Statewide Clinical Networks	Statewide Clinical Networks (SCNs) are central to advancing clinical excellence and collaboration across South Australia's health system. The Children and Youth Health SCN, hosted by the Commission on Excellence and Innovation in Health, brings together health professionals, consumers, and other subject matter experts across the health sector to connect and collaborate, provide clinical leadership, strategic direction and drive innovation to improve the quality and equity of health outcomes in their area of specialty across the continuum of care. SCNs build partnerships and engagement across institutional and professional boundaries, allowing for improved working relationships and open sharing of information to solve system level problems, create excellence in care delivery and improve health outcomes.
Children and Youth Statewide Clinical Network Objectives	The Children and Youth SCN is a multidisciplinary team of clinicians, professionals and consumers providing clinical leadership, strategic advice and advocacy to improve health outcomes for babies (excluding newborns), children and young people across South Australia, spanning the continuum of care. The Network provides statewide advocacy and expert advice, ensuring the needs, rights and lived experience of children, young people and their families inform health system priorities, planning and decision-making.

	The objectives are:
	• Engage and collaborate to share experiences, challenges, and ideas and identify innovative solutions to address key system priorities related to Children and Youth Health.
	• Advise the HCEC Clinical Council on issues and priorities, support/advise actions to address these.
	• Drive system improvement by addressing unwarranted variation in clinical care, identifying gaps and opportunities, and improving service performance and outcomes.
	
	Collaborate with Priority Focus Area projects and initiatives as appropriate:
	  • Sepsis Improvement, Clinical Registries and Rheumatic Fever.
	  • Provide expert, evidence-based clinical advice and strategic input on statewide children and youth health reform, priorities, and models of care.
	
	Provide a central point of connection, collaboration and coordination across the system to:
	
	  • Leverage clinical care improvement opportunities.
	  • Facilitate clinical, consumer, carer and community engagement/consultation on priority areas of work, co-designed with young people.
	  • Prioritise initiatives that promote equitable access to high-quality, culturally safe and developmentally appropriate healthcare, with a particular focus on priority populations, including Aboriginal children and young people, culturally and linguistically diverse communities, those in rural and remote areas, and children experiencing vulnerability.
	  • Ensure pertinent information relating to children and youth health is communicated bi-directionally between the CYHSCN and the broader health system.
	
	• Oversee and support time-limited, clinician-led working groups as required.
	• Keeping informed of other agencies' programs of work that impact outcomes for children and young people to ensure cross agency collaboration
	• Facilitate statewide approaches to planning, education, and development of the clinical workforce, including capacity and capability, to ensure continuity and safety of care.
	• Advocate for strengthened data systems, consistent indicators, and child health dashboards to support informed decision-making, accountability, and improved outcomes for children and young people.
	• Support a data-driven statewide review of paediatric services to identify gaps, variation and unmet need, and

	contribute to the development of a coordinated service plan that improves equity, access and outcomes for children and young people across South Australia. • Collaborate with organisations involved in service planning.
Membership and Responsibilities	**Membership** - The Children and Youth Health SCN brings together clinicians, professionals, consumers and stakeholders from across metropolitan and regional South Australia. ○ Paediatric Director (Medical & Nursing) from the Women's and Children's Health Network (2) ○ Paediatric Director (Medical & Nursing) from the Southern Adelaide Local Health Network (2) ○ Paediatric Director (Medical & Nursing) from the Northern Adelaide Local Health Network (2) ○ Medical, Nursing or Allied Health Representatives from the Regional Local Health Networks ensuring mixed disciplines (2) ○ Adolescent Health Representative (1) ○ Aboriginal Health Representative (1) ○ Aboriginal Health Representative from the Office of the Chief Aboriginal Health Officer (1) ○ Allied Health Representatives (2) ○ Refugee Health Services Representative (1) ○ Child Health Policy Unit Representative (1) ○ Child and Adolescent Mental Health Service (CAMHS) Representative (1) ○ Child and Family Health Service (CaFHS) Representative (1) ○ General Practice Representative (1) ○ Consumer Representatives and Advocates (2)

- Membership is intended to be diverse and should consider representation from metropolitan and regional LHNs, relevant health disciplines, consumers, community and acute care sectors, Aboriginal and Torres Strait Islander health, culturally and linguistically diverse communities, academia, and other relevant external stakeholders.
- Members of the SCN are appointed for their personal skills, knowledge, experience, and passion and are required to exercise these for the benefit of the Clinical Network as a whole and the broader health system.
- Members demonstrate a commitment to strategic planning, and delivery of services at a whole of system level.
- Members demonstrate commitment to service performance, evidence-based practice, improving health outcomes for consumers and ensuring the health system performs efficiently and supports health workforce sustainability.

Role and Responsibilities of Members

- Collect viewpoints and provide feedback to colleagues/Local Health Network (LHN) leaders and appropriate others on matters discussed, except for confidential matters as described below.
- Attend meetings and undertake tasks/actions between meetings to ensure completion in the agreed timeframe.
- Actively engage, participate, and contribute in the planning, design implementation, and evaluation of work undertaken by the SCN.
- Take an active role in identification and implementation of opportunities for improvement.

Role and Responsibilities of Clinical Lead

- Drive the aims of the network, lead and represent the group.
- Develop SCN objectives in collaboration with Network members.

	- Demonstrate ability to be a positive change leader and empower members to collaboratively drive improvement and innovation
	
	- Work closely with the SCN members and CEIH to plan, deliver, and support activities that help achieve the network's objectives—such as coordinating projects, sharing expertise, and ensuring effective communication across stakeholders.
	
	- Chair SCN meetings. Chair responsibilities include:
	  ○ Chair meetings, ensuring effective and timely conduct of each meeting.
	  ○ Encourage broad participation from all members including consumer advocates in discussion.
	  ○ End each meeting with a summary of decisions and actions.
	  ○ Review and approve meeting papers, communications and correspondence.
	  ○ Indicate which meeting discussions or decisions are to remain confidential.
	  ○ In the absence of the Chair, a Deputy Chair will be appointed by the Chair from within the SCN membership
	
	Responsibilities of CEIH support team (Network Adviser and Support Officer)
	- Facilitate connection across the health system helping to build effective relationships, interactions and collaborations with the SCN members and broader network stakeholders
	
	- Facilitate access to system level data and analytics as required.
	
	- Provide oversight and monitor progress of the objectives to be delivered by the SCN.
	
	- Develop with the SCN an ongoing communications strategy including a presence on the CEIH website, enabling regular communication across the broad health system.

	- Support the SCN respond to urgent concerns, such as Ministerial and CEO briefings. - Be the initial point of contact for Children and Youth Health SCN enquiries within the CEIH. - Coordinate and guide the SCN through the necessary approval processes within CEIH or DHW. - Attend SCN meetings and provide secretariat support. Secretariat responsibilities include: - Prepare and circulate agendas and supporting material for meetings at least three working days in advance. - Prepare accurate meeting notes and an action log from each meeting and circulate within seven working days of the meeting. - Ensure all files are stored in accordance with the SA Health Care Act. - Arrange online meetings or book facilities for meetings. - Ensure conflict of interest forms have been completed every 12 months by each member and prior to a new member's initial meeting. **Working Groups** - The SCN may convene subcommittees, reference or working groups if required to meet specific, time-limited objectives - Preferably, the chair of a subcommittee or working / reference group will be a member of the SCN and is responsible for reporting on the progress of agreed objectives at SCN meetings. - Secretarial support to establish working groups and subcommittees is to be discussed with the Network Advisor.
Governance and Reporting	- The SCN is accountable via the Clinical Lead to the Executive Director, Clinical and Consumer Partnerships, who is accountable to the Commissioner of the CEIH. - The Clinical Lead is a member of the HCEC Clinical Council and maintains active participation with respective LHN governance committees.

	- The SCN develops an annual workplan and reports on its progress as part of a continuous improvement process. - Quarterly status reports are provided to the HCEC Clinical Council by the Clinical Lead. - Status reports are provided to the HCEC via the CEIH Commissioner as required - SCN Clinical Lead and members (if SA Health employees) maintain active participation on and reporting to respective LHN governance committees. - Appointments are for two years, with annual review and opportunity to extend
Communication and Collaboration	SCNs communicate and collaborate via: - Group email correspondence - MS Team Channel - SCN meetings and individual member discussions - Webpage, LinkedIn - Other methods as determined
Meetings	**Frequency of Meetings** - The Children and Youth Health SCN will meet monthly, or at the Clinical Lead's discretion, with a minimum of four meetings per year. **Proxies** - Members must nominate and appropriately brief a proxy if unable to participate in a meeting in exceptional circumstances. The Network Advisor will be informed of the substitution at least two working days prior to the scheduled nominated meeting. **Quorum** - The quorum for the meeting is a majority of appointed members for the time being. If quorum is not met, discussions will continue with in-principles decisions made by attendees at the meeting and confirmed by an out-of-session request to absent members. - The quorum necessary for decision making will 50% of members plus one. - A meeting may proceed if a quorum is not present with voting either held over until the next meeting when a quorum is present, or via an out-of-session vote. **Decision Making** - Decisions will be sought on a consensus basis. If a vote is necessary, a majority vote is sufficient. - If there is an equal vote, the matter will remain

	undecided and either considered at the next meeting and/or escalated to the CEIH Executive Director Clinical and Consumer Partnerships. - Votes by proxy will not be accepted. **Guests** - Guest contributors may be invited as required. - Guests may attend SCN meetings with prior approval from the Clinical Lead. **Attendance/Apologies** - Members are encouraged to attend a minimum of 75% of meetings and events per year. - Apologies are to be provided where possible, two days in advance of the meeting. - Failure to attend meetings repeatedly without prior notification may require a member to step down at the discretion of the Clinical Lead.
Conduct, Confidentiality and Conflict of Interest	**Conflict of Interest** - Members will declare any conflict of interest prior to commencing on the SCN and as soon as practical after a conflict arises. - If there is a declaration of conflict of interest, the member will, on advice of the Chair, refrain either from voting/ participating in discussions or absent themselves from the meeting. - Any declared or identified conflict of interest will be noted in the minutes. - Conflict of Interest forms are to be completed annually or when a conflict arises. **Conduct and Confidentiality** - Appointment to the SCN assumes a position of trust and members are expected to act ethically, and in the best interests of the Clinical Network at all times - Members conduct themselves in a manner which promotes confidence in the integrity of the work being undertaken as part of the SCN. - Decisions made by the SCN (see Voting) are binding. Members will comply with the decisions of the SCN and will not participate in dissent outside of the SCN meetings

	- When speaking on behalf of the SCN (e.g., at conferences, workshops etc.) approval must be obtained from the Clinical Lead prior to speaking. - The SCN reserves the right to review the membership of any member who acts contrary to expectations. - Where particular discussions are deemed to be confidential, members will not disclose such information to any persons outside of the SCN without the support of the SCN or as approved by the Clinical Lead. - If confidential information is shared within the SCN, this will be identified as such by the Clinical Lead or by the person sharing the information.
Remuneration	- SCN Clinical Leads (if SA Health employees) are endorsed in their role by their respective LHN. LHNs may support Clinical Leads with backfill for their statewide role. - Sitting fees for consumers and private practitioners are remunerated in accordance with SA Health guidelines.
Review of Terms of Reference	- Terms of Reference will be reviewed annually by the SCN or as otherwise determined by the Chair. - Any changes to the Terms of Reference are subject to the endorsement of the Executive Director, Consumer and Clinical Partnerships.