

Terms of Reference

Statewide Chronic Pain Clinical Network Steering Committee

The Statewide Chronic Pain Clinical Network has been established to improve the provision of integrated, multidisciplinary care for people with chronic pain. We are a strong, connected and inclusive community of practice which promotes evidence-informed prevention, early intervention, and management of pain across the life span for all South Australians.

Effective Date	16 March 2023
Document Prepared	January 2023
Review Date	January 2024

Background

The Commission on Excellence and Innovation in Health (CEIH)

The CEIH provides leadership and advice on excellence and innovation in healthcare. We partner with clinicians, consumers, carers and other collaborators to maximise health outcomes for patients, improve care and safety, monitor performance, and champion evidence-based practice to improve health outcomes.

Our vision is, “Together, let’s create better healthcare for South Australians”.

In doing this we will:

- Bring together expertise from clinicians, consumers, health partners and other stakeholders to maximise health outcomes and experience.
- Be a Centre for excellence, a strong partner for clinical improvement and innovation and have expertise which can influence design.
- And drive safer, more innovative, and efficient healthcare by empowering clinicians and consumers.

Statewide Clinical Networks

Statewide Clinical Networks are groups of health professionals, health service organisations, and consumers, carers and/or community members who work collaboratively with the goal of high-quality care in a specialist area. Statewide Clinical Networks operate across the entire continuum of care, including private, public and primary health sectors within all Local Health Networks — both country and metropolitan.

Statewide Clinical Networks are an important statewide engagement structure to connect clinical experts, consumers, and other collaborators on agreed priorities to improve the South Australian health system.

Statewide Clinical Networks leadership resembles either a single clinical lead or a clinical and consumer co-leadership.

The Statewide Clinical Networks include a steering committee and may also consist of other sub-committees or work groups that are identified as being required to undertake network priority projects.

Statewide Chronic Pain Clinical Network

For the purpose of the Terms of Reference Chronic Pain is defined as: pain that lasts beyond normal healing time after injury or illness—generally 3 to 6 months. It is a common and complex condition, and the pain experienced can be anything from mild to severe. The defining characteristic of chronic pain is that it is ongoing and experienced on most days of the week.

The Statewide Chronic Pain Clinical Network acknowledges and endorses the Equity of Access to Health Care Policy Directive of SA Health.

Statewide Clinical Network Steering Committee

The Statewide Clinical Network Steering Committee comprises a group of about 18 to 20 people with expertise in the area of specialty. The Steering Committee represents the wider specialty's Clinical Network.

Purpose

The overarching purpose of the Steering Committee is to:

- Provide advocacy to ensure high quality care that is evidence based.
- Collaborate with the broader Statewide Clinical Network to identify and address key system priorities related to the Clinical Network.
- Seek innovative perspective and solutions to challenges identified to turn ideas into better health care.
- Act as a conduit for information sharing and decision making between the Clinical Network and the CEIH.
- Build capability to transition from a statewide clinical network into a statewide community of practice.

Responsibilities

Steering Committee

- Develops the Steering Committee's annual work plan.
- Provides leadership within the health system both clinically and organisationally, and is consumer-focused across all sectors.
- Provides advice to the Statewide Clinical Network Lead/Co-Leads on service issues and priorities.
- Assists in the analysis of current and projected service demand across all aspects of service delivery.
- Assists in defining future service profile, service distribution and methods of clinical practice in both metropolitan and country areas.
- Assists in addressing clinical variation and improving service performance and consumer health outcomes across the continuum of care.
- Establishes partnerships with key departments and agencies to promote a lifelong holistic view of health.
- Assists in defining workforce models inclusive of workforce redesign.
- Monitors progress of work against agreed timeframes.

Lead/Co-Leads

- The Lead/Co-Leads will chair Statewide Clinical Network Steering Committee meetings or appoint a substitute chair.
- Ensure the effective conduct of each meeting.
- Encourage broad participation from all members including consumer and carer advocates in discussion.
- Keep the meeting moving by putting time limits on each agenda items and ensure meetings run on time.
- End each meeting with a summary of decisions and actions.
- Follow up with absent members to determine if they wish to continue membership as per the terms of reference.
- Review and approve meeting papers, communications and correspondence.
- Indicate which meeting discussions or decisions are to remain confidential.

- In consultation determine whether meetings are face to face or via an electronic/digital platform.
- Read and edit draft Minutes of Meeting prior to distribution to Network for approval.
- Require a commitment to the delivery of statewide services and thinking 'whole of system'.
- Demonstrate a commitment to service performance, evidence-based practice, improving health outcomes for consumers and ensuring the health system provides best value to the community.
- Demonstrate a commitment to strategic planning outside their own individual service.
- Demonstrate an ability to lead a complex team and to engage with consumers and clinicians.
- Be respected by their clinical peers and demonstrate ability to influence change and improve service delivery.
- Work collaboratively with the CEIH team.

Network Advisor

A CEIH-appointed Network Advisor for the Statewide Clinical Network will attend meetings as an impartial participant.

The role supports the clinical networks by:

- Working in partnership with the Lead/Co-Leads and the Steering Committee to achieve and deliver on the priorities of the Statewide Clinical Network.
- Proactively facilitating and building effective relationships, interactions and collaborations with Clinical Network Consumer/ Carer/ Clinician stakeholders.
- Linking the Clinical Network with CEIH/Departmental resources as required or appropriate.
- Facilitating the work of the network through the CEIH or Department for Health and Wellbeing endorsement processes if required.
- Being the initial point of contact for the Clinical Network inquiries within the CEIH.
- Using the project management skills of communication, facilitation, risk management, report writing, project planning, and stakeholder consultation and negotiation.
- Monitoring the performance/progress of the Clinical Network in achieving its agreed goals/projects.

Principles and conduct

The Steering Committee will adhere to the following:

- Appointment to the Steering Committee 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 will conduct themselves in a manner which promotes confidence in the integrity of the work being undertaken as part of the Clinical Network Steering Committee.
- Members of the Steering Committee 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.
- The Steering Committee will ensure work activities being conducted under the auspice of the Clinical Network, including sub-committee and work groups, are in line with the Clinical Network's overall aim and identified priority areas.
- It is each member's responsibility to canvas views and provide feedback to their colleagues and appropriate others except for confidential matters as described above.
- Members are expected to complete agreed action items from each meeting in the agreed timeframe.
- Feedback and/or review of documentation responses are to be provided within requested timeframes.
- Decisions made by the Steering Committee (see [Voting](#)) are binding. Members of the Steering Committee will comply with the decisions of the Steering Committee and will not participate in dissent outside of the Steering Committee meetings.
- The Lead/Co-Leads reserves the right to review the membership of any member who acts contrary to the above.
- When speaking on behalf of the Statewide Clinical Network (e.g., at conferences, gatherings, workshops etc.) approval must be obtained from the Lead/Co-Leads prior to speaking. Re-imburements of time invested will be agreed upon with the Executive Director of the CEIH prior to the event.

Conflict of Interest

- Members will declare any conflict of interest prior to commencing on the Steering Committee which will be documented in a Conflict of Interest Register.
- Members will also declare any new conflict of interest related to Steering Committee duties as soon as practical after such conflict arises.
- If there is a declaration of conflict of interest the member will, on advice of the Chair, either refrain from voting or participating in discussions or absent themselves from the room at that point.
- Conflict of Interest forms are to be completed and signed each year or at a time where a new item may have come up and declaration is required.

Confidentiality

- All discussions and papers of the Steering Committee are deemed to be confidential; members will not disclose such information to any persons outside of the Steering Committee without the agreement of the Lead.
- Information for broader dissemination will be identified as such by the Lead.

Accountability

The Steering Committee reports through the Lead/Co-Leads to the Executive Director, Clinical Partnerships, who is accountable to the Commissioner of the CEIH.

The Lead/Co-Leads will be required to report quarterly and on an ad hoc basis as required to the Commissioner regarding the activities and progress of the Steering Committee and Clinical Network.

Membership

Members

Membership of the Steering Committee will be determined by the Lead/Co-Leads in conjunction with the Executive Director, Consumer and Clinical Partnerships.

Membership can be either individual or organisational in nature and will be constructed to reflect the necessary mix of knowledge, experience, and skills to support the Statewide Clinical Network to fulfil its responsibilities. A balance of experience across metropolitan and rural settings and from within and out of hospital sectors will be sought.

Members who resign mid-tenure will be replaced through an expression of interest process, or direct appointment.

The Steering Committee will consist of approximately 18 to 20 people. The membership can consist of but not limited to:

- Statewide Clinical Network Lead/Co-Leads.
- Medical, nursing and midwifery, allied and scientific health representatives from across the care spectrum (including the private sector) who can lead change.
- Consumers (and/or carers as appropriate).
- Relevant non-government organisations and/or population group representatives.
- Local Health Networks from metropolitan and rural regions.
- Primary Health Networks from metropolitan and rural regions.
- Other relevant technical, scientific, epidemiology or research staff as required.

We will ensure that culture and diversity is represented within the membership.

The Steering Committee through or at the direction of the Lead/Co-Leads can add additional members to Steering Committee to achieve the purpose of the Steering Committee. The Steering Committee, through or at the direction of the Lead/Co-Leads, is able to seek expert advice or input on an as-needed, time limited basis to progress work against specific priorities.

Tenure

Membership tenure will be for a period of 1-2 years at the discretion of the Lead/Co-Leads. Subsequently extension of

membership beyond this time is at the discretion of the Lead/Co-Leads in conjunction with the Networks Program Director, Clinical Partnerships.

Sub-committees and Workgroups

The Steering Committee may convene sub-committees or working groups.

A sub-committee or working group can be established to achieve multiple objectives. A working group can be convened by the Steering Committee to undertake a specific, time limited project or other activity to assist the Statewide Clinical Network and Steering Committee to fulfil its responsibilities.

Preferably, the chair of a sub-committee or working group will be a member of the Steering Committee (or the group will have representation from the Steering Committee) and is responsible for reporting on the progress of agreed objectives at Steering Committee meetings.

Not all members of the Steering Committee will be required to sit on a sub-committee or workgroup but may contribute to an advisory capacity.

The CEIH will provide secretarial support to assist in establishment of working groups and sub-committees. CEIH-branded templates and CEIH Terms of Reference (ToR) for sub-committee or working group will be supplied as a part of establishment.

Operating procedures

Meeting frequency

Meeting frequency is at the discretion of the Lead/Co-Leads, but initially monthly. It is expected that at least four meetings are held each year.

Attendance

Meetings will be held face-to-face where possible with online teleconference or digital platform option available to support participation of members living in regional and

rural areas. It is the responsibility of members using these facilities to ensure they are in a private location where information/discussions can remain confidential.

Members are expected to attend at least 75% of meetings. Members who are frequently absent will be followed up by the Lead/Co-Lead and asked to assess their capacity to be able to continue.

Apologies must be provided prior to each meeting. The Steering Committee will vote on the replacement of members who have not attended three consecutive meetings without providing apologies.

A leave of absence must be sought from the Lead/Co-Leads when a member is unable to attend two or more consecutive meetings.

Proxies

In exceptional circumstances, members may nominate to the Chair a proxy to attend a meeting on their behalf. The Network Advisor will be informed of the substitution at least two working days prior to the scheduled nominated meeting.

Quorum

The quorum necessary for decision making will be greater than 50% of members.

A meeting may proceed if a quorum is not present. In this instance, voting will either be held over until the next meeting when a quorum is present, or via an out-of-session vote (at the Chair's discretion).

Voting

Decisions will be sought on a consensus basis. If a vote is necessary, a majority vote is sufficient. If an equality of votes applies, then the matter will remain undecided and either considered at the next meeting and/or escalated to the Executive Director Clinical Partnerships.

A quorum must be present to enable voting. Votes by proxy will not be accepted.

SECRETARIAT


The secretariat function for the Steering Committee will be provided by the CEIH. The secretariat will:


- prepare and circulate agendas and supporting material for meetings at least three working days in advance,
- prepare accurate minutes and action log from each meeting and circulate within three working days,
- ensure all files are stored in accordance with the SA Health Care Act,
- arrange teleconference/video conference and/or book facilities for meetings,
- ensure conflict of interest forms have been completed every 12 months by each member and prior to the new member's initial meeting.

Approvals and review

These Terms of Reference shall be reviewed annually by the Steering Committee. Any changes to the Terms of Reference are subject to the endorsement of the Executive Director, Consumer and Clinical Partnerships.

ENDORSEMENT

Chair	Anne Burke
Signature	
Date	14/4/23

Director	Madeleine Baillie
Directorate	CCP
Signature	
Date	14/4/23

REVISION DATES:

No.	Date	Nature of change(s)
0.1	Jul 2020	First draft
0.2	Apr 2021	Revised draft
0.3	Apr 2021	Endorsed by Chronic Pain Network Steering Committee
0.4	Dec 2022	Formatting updated to CEIH Branding Information included in regard to Confidentiality and Role of Network Advisor Definitions and background of CEIH, Statewide Clinical

	Networks and Steering Committees updated to reflect consistency across CEIH documentation.
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