



# Statewide Cancer Clinical Network

## Data Sub Group Terms of Reference

### Background

The Commission on Excellence and Innovation in Health (the Commission) has been created to provide leadership and advice within SA Health and the Government on clinical excellence and innovation. The Commission will provide leadership and advice on clinical best practice with a focus on maximising health outcomes for patients, improving care and safety, monitoring performance, championing evidence-based practice and clinical innovation, and supporting clinical collaboration.

### Statewide Clinical Networks

Statewide Clinical Networks are all the health professionals, health service organisations, consumers and carers who work collaboratively with the goal of high quality care in a particular area. Statewide Clinical Networks operate across the continuum of care, across private and public sectors, across all Local Health Networks and SA Ambulance Service— both country and metropolitan.

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

Statewide Clinical Networks are supported by a clinical lead, steering committee and other sub groups that are identified as being required to undertake network priority projects.

### Data Sub Group

#### Purpose

The overarching purpose of the Cancer Network Data Sub group is to:

Undertake specific, time limited project or other activity to assist the clinical network and Steering Committee to fulfill its responsibilities.

#### Responsibilities

Undertake work that supports the Cancer Statewide Clinical Network to achieve its aims.

To inform the Steering Committee of the findings from the tasks allocated to the Data Sub Group for their decision making and action.

To collaborate with CEIH Clinical Informatics Directorate to design, implement and fulfill the Cancer Statewide Clinical Network Data Strategy.

#### Chair

- > Ensures the effective conduct of each meeting.
- > Encourages broad participation from all members including consumer and carer advocates in discussion.

- > Keeps the meeting moving by putting time limits on each agenda items and ensure meetings run on time.
- > Ends each meeting with a summary of decisions and actions.
- > Approves the agenda and other meeting papers for each meeting.
- > States which meeting discussions or decisions are confidential.

## Principles and conduct

The Sub Group will adhere to the following:

- > Appointment to the Data Sub Group 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 in the Clinical Network.
- > Members of the Data Sub Group are appointed for their personal skills and knowledge and are required to exercise these for the benefit of the Clinical Network as a whole.
- > The Data Sub Group will ensure work activities being conducted under the auspice of the Clinical Network, are in line with the Clinical Network's overall aim, identified priority areas and will monitor progress against agreed timeframes.
- > Where particular discussions are deemed to be confidential, members will not disclose such information to any persons outside of the Data Sub Group without the permission of the Data Sub Group.
- > 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.

## Conflict of Interest

- > Members will declare any conflict of interest prior to commencing on the Data Sub Group which will be documented in a Conflict of Interest Register.
- > Members will also declare any new conflict of interest related to Data Sub Group 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.

## Accountability

The Data Sub Group reports through the Chair to the Cancer Network Clinical Lead who is accountable to the Commissioner on Excellence and Innovation in Health.

The Chair will be required to report to the Cancer Network Steering Committee Meetings as required on the progress of the Data Sub Group activities.

## Membership

### Members

Membership is individual representation and not organisational. Membership will be constructed to reflect the necessary mix of knowledge, experience and skills to support the Data Sub Group and the Statewide Clinical Network to fulfil their responsibilities. A balance of experience across metropolitan and rural settings and from within and out of hospital sectors will be sought.

The Data Sub Group will consist of approximately 10 to 12 people with a core membership comprising of:

- > Medical, nursing and midwifery, paramedicine, 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.
- > Data experts and relevant technical, scientific, epidemiology or research staff.

The Data Sub Group can add additional members to achieve the purpose of the Group by agreement of the Chair.

The Data Sub Group, through or at the direction of the Chair, is able to co-opt/seek expert advice or input on an as-needed, to progress work against specific priorities.

The Data Sub Group will be supported by the Network Advisor for the Clinical Network or a Clinical Lead nominated resource. The Advisor will attend meetings as an impartial participant.

The Clinical Lead, will have a standing invitation to attend all meetings as an impartial participant.

## Appointments

Membership of the Sub Group will be determined by the nominated Chair in conjunction with the Clinical Lead.

Members who resign mid-tenure will be replaced.

## Chair

The chair will be appointed by the Statewide Clinical Network Clinical Lead.

## Tenure

Membership tenure is two years or three if required. Subsequent, membership is available for a second two year period. Beyond the two initial tenure a third or ongoing is possible at the discretion of the Clinical Lead.

## Work groups

The Data Sub Group may convene work groups.

A work group can be convened by the Data Sub Group to undertake a specific, time limited project or other activity to assist the Sub Group fulfil its responsibilities.

Preferably, the chair of a work group will be a member of the Data Sub Group and is responsible for reporting on the progress of agreed objectives at Data Sub Group meetings.

## Operating procedures

### Meeting frequency

Meeting frequency is at the discretion of the Data Sub Group. It is expected that at least four meetings are held each year.

### Attendance

Members are expected to attend at least 75% of meetings.

It is preferred that members attend face-to-face or via video or tele conference where possible. It is the responsibility of members using teleconference to ensure they are in a private location where information/discussions can remain confidential.

Notification of a leave of absence (two or more consecutive meetings) to be sent to the chair of the Data Sub Group

### Proxies

Members may 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.

### Secretariat

The secretariat function for the Data Sub Group will be provided by the Commission. 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 facilities for meetings.
- > Ensure confidentiality and conflict of interest forms have been completed by each member prior to the 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 Clinical Lead.

Date endorsed: 23/12/2020

Signed by Chair: Dr G Kichenadasse

## For more information

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