

 WAPHA WA Primary Health Alliance	<p align="center">Country WA Clinical Commissioning Committee and Regional Clinical Commissioning Committees</p>
WA Primary Health Alliance	Terms of Reference

The WA Primary Health Alliance (WAPHA) is the planning and commissioning body that has been contracted by the Commonwealth Government to operate the three Primary Health Networks (PHNs) in WA - Perth North, Perth South and Country WA. WAPHA is the single point of contact where primary health and social care comes together at the State and local level. WAPHA is dedicated to building a robust and responsive patient centred primary health and social care system that ensures the patient receives the right care, at the right time and in the right place.

GOVERNING BODY

The Country WA Clinical Commissioning Committee (CCC) and Regional Clinical Commissioning Committees (RCCCs) are subcommittees of the Country WA Primary Health Network (PHN) Council.

The Country WA CCC works at a State wide level and will have ultimate oversight in ensuring the Country WA health and services needs are met and are in alignment with WAPHA, State and Commonwealth health reform priorities.

The RCCCs work at a regional level. There are seven RCCCs reporting to the Country WA CCC, in each of the following regions:

- Goldfields • Kimberley • Pilbara • Wheatbelt
- Great Southern • Midwest • South West

MEMBERSHIP

Committee members have a duty to act in the best interests of WA Primary Health Alliance (WAPHA) as a whole and represent any particular group or organisation, even though they may contribute the view of a group or organisations to the debate.

The following positions form the core of the Country WA CCC and each of the seven RCCCs.

Country WA CCC	Country WA Regional CCC
1 x GP Chair	1 x GP Chair
1 x GP	1 x GP
1 x WACHS nominated Country WA clinical representative	1 x WACHS nominated regional clinical representative
3 x representatives from Country WA clinical organisations	3 x representatives from regional clinical organisations
1 x representative with an interest and/or experience in Aboriginal and Torres Strait Islander health	1 x representative with an interest and/or experience in Aboriginal and Torres Strait Islander health
1 x Population health representative	1 x Population health representative
1 x Nursing representative	1 x Nursing representative
1 x Allied health clinician	1 x Allied health clinician
1 x Community Pharmacist/Pharmacist	1 x Community Pharmacist/Pharmacist
PHN GM – ex officio	PHN Regional Coordination Manager– ex officio

NOMINATION AND APPOINTMENT

Nominations for WAPHA Committees are called annually. A nomination process informs the selection of committee members. A person can self-nominate to join a WAPHA committee.

Committee members are appointed to WAPHA's committees by the WAPHA Board's Nominations, Governance and Remuneration Committee (NGRC).

The Chair of the CCC and RCCC's will be GPs and are selected by the NGRC. The Chair of the CCC will be a member of the PHN Council. The Chairs of the Committees will nominate a member of the Committee to Chair the meeting in their absence.

It is the responsibility of any member appointed to the Committee to give prior notice if they are unable to fulfil any duties required of the Committee or to nominate a replacement to carry out duties in their absence.

PURPOSE

The CCC and RCCC's provide a direct link between clinicians and the PHN's Council and embeds clinical leadership at the heart of commissioning in the PHN. The CCC and RCCC's are led by a General Practitioner.

The purpose of the CCC and RCCC's is to recommend the commissioning priorities and options for alignment, development and investment in primary health care for the relevant PHN region and ensure these are in line with WAPHA, State and Commonwealth health reform priorities.

The Committee may convene working groups as necessary to consider particular issues in depth and report back to the Committee. These working groups may consult with external experts in the field, to inform their deliberations.

FREQUENCY

The CCC and RCCC's will meet a minimum of six meetings per calendar year. Additional meetings may be scheduled if required by the Committee. In the event of a significant risk or opportunity, the CCC/RCCC's will meet as soon as possible following notification of the risk or opportunity.

TENURE

Committee members are appointed for a 12 month period. At the end of the term, members are eligible for re-appointment. Appointments can be rolled over annually, with the approval of the NGRC.

OBLIGATIONS

All members of the CCC and RCCC's and persons assisting the committees will:

- Comply with these Terms of Reference; and
- Declare and manage conflicts of interest at the commencement of each meeting.

DECISIONS

Committee decisions are made by consensus, in which the Committee agrees to support decisions, in the best interests of the whole.

Where consensus cannot be reached, the Chair can call for a vote. Where a vote is called, one vote will be given to an organisation, regardless of the number of committee members representing that organisation.

The minutes of the meeting will record any issues and concerns of any individual.

AUTHORITY

The Committees are Committees of WAPHA and have no authority independent of the functions delegated to them. The functions of the Committees do not relieve WAPHA's Board from any of its responsibilities.

QUORUM

A quorum for a meeting is 60% of the appointed committee members including the Chair or delegated Chair.

If some members cannot be present at a vote, due to a conflict of interest, a new quorum will need to be calculated, and then the 60% of appointed committee members is applied to determine the new quorum.

DELEGATIONS

The CCC and RCCC's do not have financial delegations.

REPORTING

The CCC will report as appropriate on specific issues to the PHN Council.

The RCCCs will report as appropriate on specific issues to the Country WA CCC.

COMMUNICATION

Where practicable, the agenda, together with reports and documents will be forwarded to members in sufficient time to enable consideration prior to meetings.

Accurate action items will be kept of each Committee meeting by the PHN. The minutes of a meeting shall be submitted to committee members for ratification at the next meeting. When confirmed, the action items shall be signed by the Chair.

Action items delegated to people not present at the meeting will be communicated directly to them within a maximum of one week from the date of the next meeting.

SUPPORT

The PHN provides secretariat support to the CCCs and RCCCs. Under the direction of the General Manager and/or Regional Coordination Managers, duties may include:

- Providing administrative support through taking meeting minutes, circulating agendas and liaising with committee members;
- Assisting in the induction of newly appointed committee members;
- Producing and maintaining plans, reports, submissions documents etc; and
- Ensuring effective information flow within the Committee and between other WAPHA Committees.

COMMITTEE RESPONSIBILITIES

General Responsibilities

- Provides advice to the Country WA PHN Council and the RCCCs on emerging local and regional matters relating to primary health care;
- Provides feedback and advice around patient care pathways and service/system improvements;
- Identifies key elements to improve efficiency, effectiveness and coordination of care;
- Identifies opportunities for improvement to primary health care in the PHN region;
- Monitors the performance of the PHN based on data, and in comparison with other PHNs both within WA and across Australia;
- Provides advice on any related matters of significance;
- Contributes to WAPHA initiatives, for example, providing feedback into WAPHA's position papers, submissions, surveys, working groups;
- Uses their capacity to influence, and identify opportunities to engage, peers, colleagues and clinical organisations;
- Develops relationships with other WAPHA PHN Committees to:
 - continually improve the effectiveness of the Committees;
 - build a collaborative governance model;
 - disseminate information; and
 - share good practice and innovation;
- Promotes ideas that are low cost/no cost and have increased benefit to primary health care;
- Reviews, and where appropriate, reports on issues arising from planning data and external audits; and
- Be a champion for primary health care reform.

Key Commissioning Responsibilities

- Ensures that all commissioning recommendations are consistent with WAPHA's strategic framework, State and Commonwealth health reform priorities;
- Contributes to, and reviews the collection of data for the Needs Assessment;
- Is informed through the provision of data and information, about the health care and service needs of the PHN Region;
- Interrogates data, keeps drilling and seeks further analysis if required;
- Confirms and tests issues, emerging themes, trends, best practice models of care and services (including gaps) within the PHN region;

- Identifies priorities, based on an in-depth understanding of the health care and service needs within the PHN region. This will be through a formal robust and transparent prioritisation process;
- Identifies and designs innovative options/solutions to address health care and service needs. This can include new frameworks, models of care, or programs designed within the context of global best practice and evidence based clinical approaches and technology to achieve better patient outcomes and health care efficiencies;
- Seeks consensus with the PHN's Community Working Groups (CWGs) to come to an agreed joint position on the commissioning priorities and options/solutions for the PHN region;
- Is involved in Health Innovation Hubs as required, to design integrated models of care that meet WAPHA's core objectives; and
- Works collaboratively with other WAPHA PHN Committees to develop cross-regional innovative options/solutions to maximise opportunities for best practice and collaboration.

The Country WA CCC will undertake all of the above responsibilities with a focus on Country WA at a State level. In addition, the Country WA CCC will:

- Provides a whole of Country WA system overview when considering the commissioning recommendations from the RCCC's. This includes reviewing commissioning recommendations to:
- Ensures consistency with WAPHA's strategic framework, State and Commonwealth health reform priorities;
- Confirms the commissioning priorities and options submitted are an agreed joint position between the RCCC's and the CWGs;
- Identifies synergies;
- Identifies opportunities for co-commissioning;
- Ensures effectiveness of integration; and
- Identifies opportunities for collaboration to support improved delivery of services across regions; and
- Collates each RCCC's commissioning priorities and options into a Country WA plan for presentation to the PHN Council for approval.

Key Outcomes

The RCCC's will:

- Validate critical issues and service gaps;
- Ensure that all commissioning recommendations are consistent with WAPHA's strategic framework, State and Commonwealth health reform priorities;
- Submit to the Country WA CCC, the recommended joint commissioning priorities and options of the RCCC's and Community Working Groups, for approval; and
- Escalate any contentious issues to the CCC.

The CCC will:

- Validate critical issues and service gaps;
- Ensure that all commissioning recommendations are consistent with WAPHA's strategic framework, State and Commonwealth health reform priorities;
- Collate joint regional commissioning priorities and options recommendations into one Country WA plan to present to the Country WA PHN Council for approval; and
- Escalate any contentious issues to the PHN Council.

REPRESENTING THE COMMITTEE

Committee members should be aware that they are required to act in a way that promotes and upholds the reputation of the WAPHA when representing the PHN Committee at any events or functions.

REVIEW

These Terms of Reference will be reviewed every 12 months and at the end of the contract in 2018. Each review period will assess the Committee's membership, purpose and overall performance.