
COMSUMER/COMMUNITY ENGAGEMENT FRAMEWORK POLICY

1. BACKGROUND AND PURPOSE

This policy framework outlines RACMA's strategy for Community representation and engagement. The College will form relationships with consumers to ensure its training programs for medical administrators are appropriate, of the highest quality and reflect community needs and expectations. RACMA recognises that the engagement of community representatives is a valued means of supporting transparency and consistency in decision-making about its training programs and preparation of doctors for management roles in health services in Australia and New Zealand.

The Consumer Health Forum defines consumer/community representative on a Committee as:

"A committee member who voices the consumer/community perspective and takes part in the decision making process on behalf of consumers/community."

The role of a community representative includes the following:

- To contribute to a robust, transparent decision-making process that aligns with the College's mission;
- To provide a societal perspective on issues; and
- To support the committee to recognise and reflect the concerns and needs of community in its decision-making.

In the pursuit of an evidence-based continuous improvement strategy, RACMA will engage with consumers by seeking input in the development of its curriculum, professional development and decision making about its suite of training programs for medical administrators.

The College will engage appropriate community representatives to engage in and enhance decision making of the Committees in selected areas of the College business. The selection of appropriate representatives will be based on the framework outlined by Consumer Health Forum (CHF):

- interaction with patients actively interacting with health services provision;
- interaction with consumers/community members who have or will have future engagement with health services and whose interest will be in the provision of future effective health services;
- interaction with public representatives on matters relating to health services and systems on issues such as equity, access and cost effectiveness.

Utilising this framework, in 2014 the RACMA Board has determined it will engage with community representatives who have or will have future engagement with health services and whose interest will be in the provision of future effective health services.

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2. SCOPE

This policy framework is to be implemented progressively commencing with community representation on the following College committees: Education and Training, and Continuing Education Program committees. Engagement of these community representatives is to be conducted in a manner consistent with the processes outlined below.

3. RESPONSIBILITIES

Education and Training Committee

The Education and Training Committee (ETC) provides advice to the Board on the strategic directions and development of the educational activities of the College including the Fellowship Training Program (FTP) and the Continuing Professional Education (CEP) program. The Chair of the Education and Training Committee will report to the Board.

Continuing Education Program Committee

The CEPC provides advice and assistance regarding the College's continuing professional development responsibilities to the Education and Training Committee (ETC).

Community Representatives

The role of the community representative on the selected committees is to ensure that training programs delivered to our Fellows and Candidates are community informed, reflect appropriate perspectives and needs of the community, and provide medical administrators with an appropriate understanding of community expectations of them and appreciation of the cultural context in which they will be practising.

The Chair of each committee will assist the community representative to fully understand their duties as specific to their individual role.

4. RECRUITMENT

Applicants for community representative are assessed according to the following key selection criteria (and possibly additional criteria, pending vacancies):

- A demonstrated interest in medical administration or in the health service sector
- Ability to provide a societal perspective and objective inquiry into the speciality related issues
- Ability to analyse the College's activities in relation to health care and community outcomes
- Capacity to negotiate on issues to achieve the best possible outcomes
- Have access to Computer and email
- Availability to participate in the College meetings

Appointment as a community representative does not give an individual employee status of RACMA, nor does it infer an employee/employer relationship. Following recruitment, appointees will be invited to attend an orientation program with the Chair of the respective committee via a tele-conference. This is designed to provide further information about the College's structure and Committee process, its agenda and appointees' specific duties.

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5. CONFIDENTIALITY

During the course of service, community representatives have access to information regarding hospitals, Fellows, candidates/trainees and College activities and functions. Community representatives are required to complete a declaration of confidentiality and conflict of interest upon appointment, the purpose of which is to bring to the appointee's attention the importance of confidentiality of information which is forwarded in good faith to the College and on the understanding that it is not used for any purpose other than as required in undertaking this role in the College.

6. PRIVACY

The College is committed to ensuring the privacy of individuals and complies with the National Privacy Principles – Australian Privacy Act 1998, Privacy Amendment: (Private Sector) Act 2001 and the New Zealand Privacy Act 1993.

The RACMA privacy policy outlines how the College collects, uses and discloses personal information, and the procedures that allow access to this information. Community representatives are required to comply with this policy and the policy for Declaration of Interest.

7. CONFLICTS OF INTEREST

The College's Policy for Declaration of conflict of interest provides guidance with regard to identifying and handling potential and actual conflicts of interest involving the College and its activities. The policy relates to College members and staff, and outlines issues and circumstances related to conflict of interest.

Individuals appointed by RACMA as community representatives are requested to declare any potential conflicts of interest. Appointees will be asked and are obliged to declare any conflict of interest that may arise during their service on the RACMA Committee.

8. REPRESENTATION OF RACMA

Community representatives will not make public statements on behalf of RACMA unless given prior approval by the College. Examples include media interviews on College process, speaking at conferences or writing material for journals or other publications.

9. REMUNERATION

All reasonable expenses incurred by consumer/community representatives in participating in the activities of the committees will be reimbursed upon submission of proper receipts. The hourly fee for participating in a RACMA committee assumes that approximately one hour of pre-reading is required prior to each committee meeting.

Should pre-reading prove more onerous than this, individual consumer/community representatives are asked to raise this with their key staff contact so that suitable remuneration arrangements can be made, in liaison with the committee chair. This does not apply to telephone calls, teleconferences and attending to emails.

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Individuals will be reimbursed for miscellaneous expenses such as travel (and, where applicable, accommodation), car parking, printing, telephone calls and childcare. All travel arrangements are required to comply with the RACMA travel policy for staff. Approval from the relevant responsible managers, chief executive and/or Chairs of relevant committees will be required.

Remuneration for participation and attendance will be in accordance with the schedule of hourly fees as informed by the Health Issues Centre (as at October 2013):

- Contributing to a focus group - Fee \$50
- Participating in a consultation workshop - \$50
- Attendance fees /Participating in a committee - \$55
- Participating in RACMA structured interview panels (if required) - \$55
- Participating as a panel member at a conference - \$65
- Delivering a presentation at a workshop - \$100
- Delivering a presentation at a conference or forum - \$120
- Fees for pre-reading, reviewing and commenting on a draft document will be advised in consultation with the Committee members and Chair.

10. DURATION OF APPOINTMENT

Appointments are made for a trial pilot period of 12 months. Community representation is reviewed annually, in alignment with the College’s practice regarding committee membership and terms of reference. The CE or delegate (in consultation with relevant committee Chairs) is responsible for reappointing existing community representatives for a further 12 months’ service or appointing other nominees. An individual’s continuation in the role of community representative is subject to the College’s discretion. A community representative may resign at any time by submitting a signed letter of resignation to the CE and/or the Chair of the committees.

11. RELATED DOCUMENTS

- RACMA Constitution 2009
- College Handbook
- RACMA Code of Conduct
- Terms of reference for the Education and Training Committee
- Terms of reference for the Continuing Education Program Committee
- AMC standards for the accreditation of specialist medical education and training
- National Safety and Quality Health Service Standards (September 2012)
- Consumer Health Forum (CHF)
- RACMA Privacy Policy
- RACMA Confidentiality Policy
- RACMA Policy for Conflict of Interest and Declaration of Interests for RACMA Directors, Officers, Committee Members and others representing the interests of RACMA

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