

Division:	Fellowship Engagement	Ref. No.	TOR-3056
Department:	Policy and Advocacy		
Title:	Health Policy and Advocacy Committee Terms of Reference		

1. PURPOSE AND SCOPE

This policy outlines the Terms of Reference for the Health Policy and Advocacy Committee.

The Health Policy and Advocacy Committee provides strategic support on national or binational advocacy issues, for the Royal Australasian College of Surgeons through the President and Vice President's offices, and Professional Development and Standards Board as they relate to policy and advocacy. The committee is responsible for issues relating to sustainability in healthcare, and environmental sustainability in surgical practice. It is acknowledged that the New Zealand Board and State and Territory Committees have a responsibility for local advocacy on matters that are New Zealand, State or Territory specific.

2. KEYWORDS

Policy, Advocacy, Government and Stakeholder Relations, Submissions, Hearings, Working Parties

3. BODY OF POLICY

3.1. Objectives

The objectives of the Health Policy and Advocacy Committee are:

- 3.1.1. To initiate and provide ongoing strategic support for policy and advocacy matters relating to surgery.
- 3.1.2. To be responsible for issues relating to sustainability in healthcare, and environmental sustainability in surgical practice.
- 3.1.3. To make recommendations to the Professional Development and Standards Board, the Vice President, the President and Council regarding policy and advocacy issues.
- 3.1.4. To ensure a quick turnaround of time critical matters to government and other relevant external stakeholders.
- 3.1.5. To provide support and advice to and in collaboration with the Communication Team on time critical media releases, articles, or interviews.
- 3.1.6. To engage when necessary and respect the responsibility for advocacy of our immediate internal professional stakeholders being our surgical specialty societies and the Australian State and Territory committees and New Zealand Board, as well other relevant external stakeholders regarding policy and advocacy matters relating to surgery.

3.2. Duties and Responsibilities

- 3.2.1. To provide support in the development of policy and advocacy strategies on sustainability in healthcare, and environmental sustainability in surgical practice.
- 3.2.2. To oversee relevant government public consultations.
- 3.2.3. To oversee and draft relevant external stakeholder submissions and their relevant signatories, as well as help prepare and represent for hearings on behalf of the Royal Australasian College of Surgeons
- 3.2.4. To provide support and preparations for relevant government relations and external stakeholder meetings.
- 3.2.5. To maintain a dedicated website and newsletter.

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3.2.6. To collaborate when necessary with all surgical specialty societies, Australian State and Territory and New Zealand committees, internal sections, departments and interest groups, and external interest groups.

3.2.7. To work with internal RACS Portfolios and working groups such as the Education portfolio, RAAS and ASERNIP-S where evidence is required to advocate for a formal RACS position

3.3. Powers

The Health Policy and Advocacy Committee shall make recommendations to the Professional Development and Standards Board, the Vice President, the President and Council in relation to the objectives, duties and responsibilities as listed above.

The Health Policy and Advocacy Committee will also have the power to establish two individual leads (who will also be members of the committee) for the following two permanent agenda items:

3.3.1. Sustainability in Healthcare

3.3.2. Environmental sustainability in surgical practice

And when necessary, these leads will create project specific and time limited working parties with a call of interest to other Fellows through Fax Mentis or will seek additional policy and advocacy advice elsewhere from the profession or from external stakeholders.

Funding for any specific projects like surveys or research analysis for example, will require a proposal and business case to be approved by the relevant budget holder.

All working parties related to Policy and Advocacy activity shall report to the Health Policy and Advocacy Committee.

3.4. Composition and Size

Membership shall consist of:

3.4.1. One Councillor, elected by Council as Chair

3.4.2. Two other Councillors appointed by Council as the Lead of each Working Party; Sustainability in Healthcare, and Environmental Sustainability in Surgical Practice as advised by the Health Policy and Advocacy Committee Chair. Both will assume the role of co Deputy Chairs

3.4.3. Two members of the Professional Development and Standards Board

3.4.4. One other Councillor appointed from New Zealand

3.4.5. Co-option of additional Fellows as appropriate

3.5. Tenure and Method of Appointment

Council will elect the Chair of the Health Policy and Advocacy Committee at the first meeting of every year in accordance with the Election Process for Council Office Holders and Other Key Position Policy. In those circumstances when members of the Health Policy and Advocacy Committee ceases to be a member of Council or the Professional Development and Standards Board as relevant, those Fellows could not serve in their ex-officio capacity and shall cease to be a member of the Health Policy and Advocacy Committee.

3.6. Meetings

There shall be up to six meetings each year held by teleconference and one Face to Face meeting, preferably during the Annual Scientific Congress.

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3.7. Quorum

A quorum shall be a voting majority of the membership of the committee. In the absence of the Chair, one of the co Deputy Chairs shall assume the role of Acting Chair. If a temporary Chair cannot be determined for that one meeting, a majority vote made by the committee will decide the outcome.

3.8. Accountability and Reporting Structure

The Health Policy and Advocacy Committee shall report to the Professional Development and Standards Board. The Chair of the Health Policy and Advocacy Committee will report to the Professional Development and Standards Board. When dealing with time critical advocacy and policy matters of urgency as they relate to for example approval and signing of submissions, relevant external stakeholder meetings, hearings etc. an Escalation Policy for urgent time critical matters will be adopted as follows:

- 3.8.1. Greater than seven days deadline but within the governance meeting schedule, approval will commence at the relevant Board meetings and then to Council
- 3.8.2. Greater than seven days deadline but out of the governance meeting schedule, circulation of email approval is required to be sent to the Executive Professional Development and Standards Board then Board of Council.
- 3.8.3. Less than seven days deadline, immediate email approval to be sent directly to the Professional Development and Standards Board's Chair, Vice President, President and Council.

4. ASSOCIATED DOCUMENTS

Committee and Working Party Procedures

Approver Professional Development and Standards Board
Authoriser Council