

# Appointed members

## NSW Health System Advisory Council

### Background

Our experience of the last few years has shown that the NSW Health system needs to be different to what it was to enable us to continue to face new challenges to the way high quality and safe healthcare is planned, funded and delivered. As a system we need to change, and the NSW Health System Advisory Council (the Advisory Council) will be at the forefront of how we make that change.

The Advisory Council is of critical importance in involving the clinical workforce in NSW Health to provide specific and key clinical advice into the executive decision-making processes which will impact the organisation and delivery of care across the NSW public health system.

### Primary purpose of the NSW Health System Advisory Council

The Advisory Council is newly established, with agreement of all Chief Executives across NSW Health. It is to be a multidisciplinary group, comprising up to 20 clinicians (appointed members) that reflect the breadth and diversity of healthcare clinical disciplines across NSW. The Ministry Executive Management (MEM) group (comprising the Secretary and Deputy Secretaries) and representatives of health system executive managers will be the other members of the Advisory Council.

The Advisory Council will provide independent and impartial strategic clinical advice on the key health system priorities. This includes involving the clinical workforce throughout NSW Health in informing specific components of work.

The Advisory Council functions under the authority of the Secretary for NSW Health and will be co-chaired by nominees of the Secretary.

Clinical advice provided by the Advisory Council to the Secretary will inform the operational arms of NSW Health and is designed to guide the planning, preparation and execution of measures related to the delivery of health care.

Appointed members of the Advisory Council will provide valuable links to district and network clinical councils and the clinical engagement structures that are present in the Ministry of Health, Pillar agencies, Statewide- and Shared Services.

### Primary purpose of the role

The Advisory Council is of critical importance in involving the clinical workforce in NSW Health to provide specific and key clinical advice to the executive decision-making processes which will impact the organisation and delivery of care across the NSW public health system.

Appointed members will need to consult broadly with their colleagues and connections in order to be able to provide advice that reflects the views of clinicians in the health system, rather than their individual view. This advice will inform key health system priorities and specific components of work.

The communication of clear and consistent advice into the system by a single, authoritative clinical voice is important. Appointed members of the Advisory Council will have a key role in communicating

the outcomes from the Advisory Council's work to their colleagues, both locally and broadly in the system. It is essential that members have strong connections within local districts and networks, and strong relationships with their local clinical structures and/or clinical networks of interest.

### **Time commitment for appointed members**

Appointed clinician members of the Advisory Council will require the equivalent of a 0.1 FTE commitment - a half day per week. This will likely comprise:

- One half day meeting per month of the NSW Health System Advisory Council
- One half day meeting per month with the key priority activity
- Attendance at local Clinical Council or on invitation to other clinical committees, in their capacity as a member of NSW Health System Advisory Council
- Research, preparation and review of advice, responding to Ministry Executive Management or the Senior Executive Forum
- Consulting with clinicians and clinical groups on the issues under consideration by the Advisory Council.

Appointed clinician members will not receive remuneration. The district or network where the appointed members are employed will be reimbursed for the lost clinician time, to enable backfill or additional fractional appointments. Other invoicing arrangements will be considered for private practitioners.

### **Key accountabilities of the role**

- Consult with clinical colleagues on issues under consideration by the Advisory Council and communicate progress or outcomes into various clinician forums
- Work with Ministry Executive and clinical peers in the districts and networks to share ideas and develop appropriate advice and input to statewide or system issues
- Provide expert advice and guidance to the system and Ministry as required
- Attend local clinical council, clinical network or community of practice meetings as a member of the NSW Health System Advisory Council
- Participate fully in Advisory Council meetings and activities to ensure that the knowledge and perspective of clinicians throughout NSW Health are directly reflected in the advice developed.

### **Key attributes of appointed members**

Nominations for membership of the Advisory Council are welcome from clinicians working and practicing in NSW. To be eligible for selection, clinicians will be considered against the following criteria:

- Minimum current clinical practice 0.6FTE – working with infants, children, youths or adults in either acute/subacute inpatient, emergency, outpatient, community or aged care facility settings.
- Employed with a district or network in either salary or visiting capacity
- Demonstrated current engagement with NSW Health system structures and functions e.g. membership of district or network clinical council (i.e. the clinician has a constituency)
- Current or recent participation in governance of health facilities, districts or systems; or membership of clinical committees, networks or other bodies
- Active within a network of clinicians across NSW
- Demonstrated understanding of the complexity of the health system in NSW.

Appointed members of the Advisory Council will include representation of the Aboriginal clinical community ensuring that clinical transformation works to close the health equity gap, as well as a general practitioner/primary care clinician, recognising the need for greater integration of the health system and that health consumers have a long-term relationship with their primary care practitioner.

Clinicians wishing to nominate for membership of the Advisory Council must have the endorsement of their district or network Chief Executive.

### **Selection process**

An independent Nominations Committee will review applications, interview suitable candidates and recommend members to the Secretary. The committee will comprise two senior clinicians and two Deputy Secretaries (or equivalent).

### **To nominate for the Advisory Council, please address the following Selection Criteria**

1. Minimum five (5) years postgraduate clinical experience, with strong knowledge of the health system in NSW. Current or recent membership of a clinical council a significant advantage.
2. Demonstrated strong communication, liaison and networking skills with committed participation as a valued member of a clinical network, Community of Practice or other professional network/engagement.
3. An understanding of governance across NSW Health districts and networks, Pillar, Statewide- and Shared Services agencies and other clinical engagement mechanisms, is desirable.
4. Demonstrated commitment to behaviours which align to the NSW Health CORE values.

### **How do I nominate for membership of the Advisory Council?**

Nominations must include the following:

1. A cover letter including the address of the selection criteria
2. Resume or CV
3. A letter of endorsement from the Chief Executive of your Local Health District or Specialty Health Network.

Nominations on Monday 10 April 2023 at 11.59pm and should be sent to [MOH-AdvisoryCouncil@health.nsw.gov.au](mailto:MOH-AdvisoryCouncil@health.nsw.gov.au)