

Consumer Advisory Council - Terms of Reference

1. Purpose and objectives

The Asthma Australia Consumer Advisory Council (CAC) is a formal body which provides advice and oversight to Asthma Australia in relation to its engagement with the community to ensure that the interests of consumers and carers with asthma are at the centre of Asthma Australia's planning, delivery, evaluation, communications and processes.

The purpose of the CAC is to support Asthma Australia's consumer-centric approaches to effectively meet the diverse needs of people with asthma and those who care for them by providing advice, information and guidance to the Board and Management on;

- 1.1. the policies, services and practices essential to support people with asthma and their carers, with particular representation from priority population groups.
- 1.2. the development and delivery of the Asthma Australia consumer engagement strategy.

2. Roles and responsibilities

2.1. At the Board's request, to assist and advise the Board in:

- shaping the Consumer Engagement Strategy and regularly reviewing it to ensure it evolves with the maturity of Asthma Australia in relation to consumer engagement practices.
- developing processes and culture to embed consumer engagement practices across all aspects of Asthma Australia and monitoring the results.
- shaping the strategic direction of Asthma Australia through participating in and ensuring the inclusion of the consumer voice in the development, review and revision of the Strategic Plan.
- the inclusion of the consumer voice in the design, delivery and evaluation of programs and services.
- oversight of the research strategy development and program implementation, and utilisation of research findings.
- consulting with the broader asthma community and health sector to monitor and stay abreast of relevant trends, issues and opportunities.
- identifying and reporting to the Board where interests of consumers diverge or require different methods of delivery; particularly where the divergences or differences are regional or socio-economic.

2.2. To act as a forum for discussion of consumer matters relevant to Asthma Australia in the various regions in which Asthma Australia operates.

- 2.3. To assist with providing Asthma Australia advice on advocacy and fundraising in the regions in which it operates.
- 2.4. Where relevant, advise on and be active in specialist consumer reference groups, either for third parties or formal Asthma Australia Consumer Reference Groups.
- 2.5. To give advice to the Board and Executive on matters of policy affecting services.
- 2.6. To report to the Board on the CAC's deliberations, findings and recommendations; and
- 2.7. To appoint two members of the Appointments Committee as required by clause 30.2c in the Constitution.

3. Guiding principles

- 3.1. Consumers are essential to Asthma Australia achieving its ambition to be a consumer centred organisation. The views and experiences of consumers are actively sought out to guide optimal actions to achieve better health outcomes for people with asthma in Australia.
- 3.2. Consumers are integral in building the evidence to inform and shape all aspects of the work in order to achieve improved asthma management and improved asthma outcomes for people with asthma in Australia.
- 3.3. Consumers are provided with training and support to optimise their involvement with Asthma Australia in providing the consumer perspective in reducing the impact of asthma.
- 3.4. Engagement processes are accessible, flexible and designed to support consumers to partner effectively with Asthma Australia.
- 3.5. Consumers are respected and acknowledged for their cultural, social and geographical diversity. Consumers from Aboriginal and Torres Strait Islander communities, culturally and linguistically diverse communities, regional, rural and remote communities and those representing socioeconomic disadvantaged populations are engaged in an appropriate and culturally safe environment.

4. Membership composition

- 4.1. The number of Consumer Advisory Councilors is at least 9 or such greater number as the Directors may determine from time to time.
- 4.2. The Council should reflect the required skills and attributes required to deliver on the roles / responsibilities as outlined in a skills and experience matrix, including as far as feasible the following attributes and experiences;
 - Across the life spectrum; young and old
 - Priority population groups; CALD, Aboriginal and Torres Strait Islander, rural and remote, vulnerable communities (socioeconomic disadvantage, hard to reach, vulnerable housing)

- Representative of a spectrum of asthma conditions and severity
- Carers for younger child (<12 years) and an older child (12+)
- Gender diversity
- Representative of all jurisdictions across which AA operates (QLD, NSW, VIC, ACT, SA, TAS)

4.3. A Consumer Advisory Councillor must be a Member.

4.4. The CAC will elect a Chair from amongst the Councillors at its first meeting after each AGM.

4.5. The CEO must ensure that the CAC is provided with appropriate secretarial services and resources.

5. Election and Appointment of Councillors.

- 5.1. The Board will prescribe rules for the nomination and election of Councillors (see Constitution clause 24).
- 5.2. Although those rules may change from time to time, they will permit Members in each jurisdiction to make nominations but they may also provide for the Board to make additional nominations. The Board may, if it thinks fit, make a public call for expressions of interest before it makes its nominations.

6. Terms of Appointment

- 6.1. Terms of appointment are prescribed by Asthma Australia's Constitution. Each Councillor will be given a copy of the Constitution for reference.
- 6.2. The term of each Councillor begins at the close of the AGM at which his or her election or appointment is declared, and, subject to clauses 6.3 and 6.4 below, ends at the close of the third succeeding AGM.
- 6.3. Subject to clause 6.5 below, a Councillor whose term has expired and retires from office is eligible for re-election or reappointment.
- 6.4. At least one third of Councillors must retire at each AGM following the 2018 AGM. If the number of Councillors whose terms will expire at an AGM is less than one third of their total number, the additional retirees required to bring the number up to one third will be chosen by the Directors.
- 6.5. A Councillor's total period of service must not exceed three consecutive terms or nine (9) years whichever is the longer.
- 6.6. A Councillor who is disqualified from appointment due to the above is eligible for reappointment at the AGM following that at which his or her last term ended.

7. Meetings / procedures

- 7.1. The CAC must meet at least four times each year, supported by electronic and telephone communications as required. Ideally one meeting should be held face to face. Meetings can also be held via teleconference and videoconference.
- 7.2. The Secretariat of the CAC will convene and arrange the CAC meetings.
- 7.3. It is expected that Councillors will attend at least 60% of meetings over the course of the year and not miss two consecutive meetings. This is necessary to achieve continuity of all members contributions. Leave of absence may be requested in extenuating circumstances.
- 7.4. The CAC should provide an observer to the Professional Advisory Council.
- 7.5. The CAC must appoint two members to the RAC. An appointee does not have to be a member of the appointing Council.
- 7.6. Matters for decision by the CAC will be expected to be discussed and determined by consensus but, if necessary for the performance of its roles and responsibilities, a matter may be put to the vote either at a meeting of the CAC (in which case the majority will prevail) or by circular resolution (in which case unanimity is required by clause 29 of the Constitution).
- 7.7. Minutes of all meetings will be maintained and shared with the Board.

8. Conflicts of Interest

- 8.1. All Councillors will be required to sign a 'Conflict of Interest' declaration when they join the CAC. Any other conflicts which arise during the term of the Councillor must be declared as soon as practicable. A Councillor whom the rest of the CAC believes has a conflict of interest may be required to withdraw from CAC discussions about the relevant matter.
- 8.2. All declarations of interest and the absence of the Councillors concerned must be minuted.

9. Confidentiality

- 9.1. Candid and open discussions are encouraged. Therefore, all Councillors must preserve the confidence of any confidential information relating to Asthma Australia unless legally compelled to disclose information or otherwise agreed by the Board.

10. Reporting

- 10.1. The CAC must report to the Board after every CAC meeting.

11. Review of CAC performance

11.1. The performance of the CAC should be reviewed annually, by both the Councillors and the Board.

11.2. The Terms of Reference may be amended as the Board thinks necessary.

12. Expense reimbursement and Remuneration

12.1. A Councillor is entitled to be reimbursed for reasonable travel, accommodation and other expenses incurred when travelling to or from CAC meetings, or when engaged on other business for Asthma Australia.

12.2. A Councillor will be remunerated for preparation and attendance at four (4) online meetings and one (1) in person meeting. Remuneration is \$50 per hour and will be paid into a nominated bank account.

- Four online meetings = one hour preparation and three hours attendance
- One in-person meeting = one hour preparation and eight hours attendance