

Australasian Rehabilitation Outcomes Centre (AROC) Management Advisory Group (MAG) TERMS OF REFERENCE

Background

AROC is a joint initiative of the Australian rehabilitation sector (providers, funders, regulators and consumers) and commenced operation in 2002. With the support of its industry partners, AROC is a collaborative project of the Australasian Faculty of Rehabilitation Medicine (AFRM) of the Royal Australasian College of Physicians (RACP) and the University of Wollongong (UOW). AROC collects, holds and uses data to benchmark public and private rehabilitation services across Australia and New Zealand to drive improvements for the health system and the people who access rehabilitation services.

Purpose

The AROC MAG is responsible for overseeing the executive management of AROC including its operational, clinical and data governance.

Sub-Committees

The MAG has no standing sub-committee(s), but when required, will form a sub-committee made up of representatives from relevant stakeholder groups with specific expertise related to the purpose of the sub-committee.

Terms of Reference

The MAG will oversee the development, implementation, maintenance and reporting of AROC and its activities. The MAG will provide strategic direction to the operations of AROC to ensure it meets its purpose. The Australasian Faculty of Rehabilitation Medicine (AFRM) appoints the Chair of the MAG. The MAG will receive, consider, endorse and monitor the following reports:

- The AROC Strategic Plan
- The annual AROC Operational Plan
- The annual AROC Financial Plan, including quarterly updates against the AROC budget
- Management reports on the range of activities undertaken by the AROC

The MAG will support the AROC management team in developing strategies that meet AROC's objectives. This support will include:

- Providing oversight to all activities of AROC, including the activities of committees and other reference groups, sub-committees, and ad-hoc committees formed by AROC
- Promoting AROC's objectives within the rehabilitation sector and the broader health sector
- Contributing to government policy by participating in opportunities to advocate for AROC's role within the rehabilitation sector

- Addressing any issues identified by the AROC management team
- Overseeing the management of relationships between AROC, AFRM and other stakeholders
- Overseeing the maintenance of funding strategies to ensure AROCs sustainability
- Overseeing the development of a communication strategy for the Australian and New Zealand contexts
- Overseeing the development and maintenance of a risk register for the identification, assessment, management and monitoring of risks to the registry

Members of MAG will represent respective member's constituents in matters dealt with by the AROC MAG and present any concerns and/or requirements.

Membership

The MAG membership comprises:

- MAG Chair, a nominee of AFRM
- Clinical Director, a nominee of AFRM
- Clinical Lead(s), New Zealand, nominees of AFRM or RMSANZ
- Consumer Representative(s)
- Nominees from state/territory health departments (QLD, NSW, VIC, SA, WA, TAS, ACT, NT)
- Nominee(s) of state/territory transport accident/ workers compensation authorities (TAC/Worksafe)
- Nominee of motor accident authorities (NSW Lifetime Care & Support)
- Nominee of the Australian Private Hospitals' Association
- Nominee of the Not For Profit Hospital's (Catholic Negotiating Alliance)
- Nominee representing the New Zealand rehabilitation sector (ACC, NZ Rehab provider)
- Representatives of the operational organisation (UOW)
 - Executive Director, Australasian Health Outcomes Consortium, UOW
 - Director, AROC, UOW
 - Quality and Education Manager, AROC, UOW
- The appointment of the Chair of the MAG and the Clinical Director are for a term of three (3) years or as otherwise agreed. Appointment may be renewed for an additional three (3) year period.
- Membership of MAG is contingent on the represented organisation continuing to contribute to the funding of AROC.

Meeting Schedule

- The MAG will meet quarterly, likely to be in February, May, August and November
- At least one (1) meeting per calendar year will be face-to-face and the others via tele- or videoconference
- AROC will undertake secretariat functions for the MAG

- Extraordinary meetings may be called by agreement of the AROC Clinical Director, MAG Chair and AROC Director
- Members may send an identified alternate on occasions they are unable to attend a meeting.
- Members must commit to attending (themselves or through a nominated alternate) at least 50% of meetings each calendar year, one of which must be a face-to-face meeting
- Any costs incurred when traveling to/from the AROC MAG will be at the expense of respective representative's jurisdiction, sector or constituency

Communication

- The MAG will communicate with the AFRM via the AROC Clinical Director, or in their absence, via the MAG Chair
- The MAG will communicate with the operational organisation (UOW) via the AHOC Executive Director, or in their absence, via the AROC Director
- The MAG will communicate with key stakeholder organisations via their Group representatives
- The AROC Clinical Director or the MAG Chair (or their nominated delegate) will communicate with other Australian and New Zealand stakeholder organisations where these organisations do not have representation on the MAG
- The MAG will use other forms of communication, such as meetings, newsletters or reports, as required to promote the activities of AROC to advance rehabilitation services in the Australian and New Zealand health sectors

Conflict of Interest

- The MAG members will declare any potential, perceived or actual conflicts of interest at appointment and prior to each meeting.
- Members must follow commercial in confidence responsibilities as outlined in the communication and data policies of the operational organisation.

Quorum

50% plus 1

Timeframe

The Terms of Reference will be reviewed annually.