Central and Eastern Sydney PHN Disability Network Terms of Reference



Background	The Central and Eastern Sydney PHN (CESPHN) Disability Network was established in late 2016, with the aim to facilitate a greater understanding of the health role within the disability sector, particularly as it intersects with the National Disability Insurance Scheme (NDIS) and the implications for participants including those falling outside of the scheme. The Network is an active forum with wide membership of stakeholders from across the health and disability systems. The network welcomes, values and accommodates all people and strives to have high representation by people with lived experience. The forum provides an avenue for shared understanding and learnings, as well as allowing for robust debate on health and disability policy, and new disability reforms, while developing its role in advocacy. The aspiration is that people with disability will be able to participate in the community socially and economically with greater choice and control.
Function	The role of the Network is:
	 To share current and planned activities across the CESPHN region To assist CESPHN to develop effective strategies to facilitate the implementation of disability initiatives, including the NDIS and the Primary Care Enhancement Program (PCEP), and consideration of the health and service needs of people with disability across all CESPHN programs.
Role of the Chair	The role of the chair is to lead group discussions to facilitate reaching consensus. The chair will generate agendas, minutes, communication, and associated documents.
	The chair is also responsible for ensuring accessibility needs are met as much as possible, and that meeting etiquette is followed that respects and allows all people to have a voice.
Chair	The chair will be a representative with professional and/or lived experience of disability.
Activities/ Responsibilities	The CESPHN Disability Network is an information and discussion network. Activities will include:
	Sharing of knowledge and information
	 Facilitating a greater understanding of the role of health care provision within the disability sector Exploring opportunities to advocate for system change and promote and protect the
	rights of people with disability Exploring the implications for people living with a disability, their carers and service
	 providers Showcasing examples of transitional activity as they have occurred in other regions Identifying what information, knowledge and skills will be required for GPs, allied health and community professionals
	 Informing on the development of appropriate educational material Identifying and discussing possible risks and associated mitigation strategies as
	they emerge
	 Building a collective understanding of the range of disabilities Identifying opportunities and benefits for collaboration and partnership across the CESPHN region Review of available disability data assets to inform cross-sector activity
Governance	
Governance Principles	The CESPHN Disability Network will operate to current best practice governance principles, specifically these will include:
	Supporting shared decision making for the effective operation of this collaborative Network

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Membership	 Each of the members are treated with respect and recognised as integral to the success of this collaboration All members will enjoy equal input and participation All communication will be drafted by the chair who will seek group endorsement prior to distribution All information shared within collaborative discussions will be held with utmost respect, confidence and not used in any competitive dialogues Meetings will be structured by a formal agenda The CESPHN Disability Network will include appropriate representation and expertise as required.
	These may include, but are not limited to:
	 Individuals and carers with lived experience of disability Sydney and South-East Sydney LHD representatives Department of Communities and Justice representatives Health Network representatives GPs Nurses Allied and community health Community representatives Aboriginal health workers Hospital representatives University representatives
	 CALD representatives Non-Government Agency representatives GLBTQI representatives Local Area Coordinator – Settlement Services International (SSI) and Latrobe Community Health Services representatives Ministry of Health representatives Department of Health representatives NDIA and NDIS Quality and Safeguards Commission representatives As required individuals may be invited by the chair to attend Network meetings to provide specialist advice where necessary.
Frequency of Meetings	A minimum of six meetings a year
Tenure	Ongoing
Remuneration	Members who are not otherwise salaried/remunerated by other organisations will be remunerated by CESPHN for meeting attendance.
Minutes	Secretariat support will be provided by CESPHN staff
Reporting	 Minutes of the meeting will be available on request to the Clinical and Community Councils.
Date of Last Review	October 2021
Date of Next Review	• 1 Year