

CLINICAL INTERVENTION ADVISORY GROUP (CIAG) TERMS OF REFERENCE

Purpose

The purpose of the Clinical Intervention Advisory Group (CIAG) is to provide strategic advice on the selection, design, development, implementation and evaluation of NPS MedicineWise Quality Use of Medicines (QUM) programs, products and services that engage directly with health professional and/or consumer audiences to improve medicine and medical test decisions.

Functions

CIAG will operate in accordance with principles that reflect the mission, goals and values of NPS MedicineWise and QUM Grant objectives and outcomes, including commitment to:

- ▷ keeping the consumer at the centre of all our work
- ▷ collaboration, consultation and responsiveness to feedback from stakeholders and others in the field
- ▷ independent, balanced, accurate and relevant information and education
- ▷ using evidence-based interventions and building the evidence base where gaps exist
- ▷ identifying and fostering partnerships.

The main areas of advice are outlined below.

Identification of areas of unmet need

CIAG will assist in the organisational planning process to identify, prioritise and recommend areas for future QUM grant programs/activities and to:

- ▷ identify and prioritise specific problems in quality use of medicines, pathology and diagnostics that may be provided to the Commonwealth Department of Health for advice
- ▷ identify population groups who may influence the identified problems or solutions, and hence relevant target audiences and intervention settings
- ▷ advise on opportunities for new interventions, linkages or partnerships and coordination of related activities that will address identified unmet needs.
- ▷ provide strategic advice on policy and system level influences on healthcare and how these can be supported or leveraged by NPS MedicineWise to address unmet needs

Intervention design and effectiveness

CIAG will review and advise on the design and implementation of individual interventions with a view to continuous improvement and innovation. CIAG will also advise on the selection, design and development of new interventions across the range of QUM grant programs.

CIAG will provide advice on innovation options that will assist in delivering QUM grant initiatives, including:

- ▷ reach and engagement with specific audiences e.g. specialists, consumers
- ▷ novel ideas that will contribute to achieving savings across the Australian health sector
- ▷ innovations that produce targeted and meaningful engagement with consumers and other stakeholders

Design methods

CIAG will advise on design methods, from areas such as implementation science, social marketing, behavioural economics, human centred design and others, in the development of interventions and clinical behaviour change programs.

Policy scanning and emergent themes

CIAG will review and discuss the implications of relevant new or changing policy directions (national, jurisdictional or regional), as well as international trends and developments that relate to NPS MedicineWise and/or key audiences. CIAG will advise on the potential implications of these changes for different audiences and stakeholders.

Evaluation

CIAG will provide advice on the evaluation methods of QUM grant programs.

Out of scope

CIAG is not responsible for program budgeting or expenditure, program operations, production of material or implementation of strategies.

Reporting

The CIAG will report to the Chief Executive Officer (CEO), NPS MedicineWise.

The Design and Innovation Manager will be responsible for the management of the group and will regularly liaise with the Chair to confirm agendas and items of business.

Appointment of Chair

A consumer and a non-consumer Chair will be appointed, who will share Chairing duties. Either Chair may be removed, by the NPS MedicineWise CEO and will be a non-staff member.

Membership

Composition

The CIAG will have a maximum of 16 members. Membership will include individuals who between them:

- ▷ have broad experience of healthcare in Australia, and understanding of problems in the quality use of medicines and medical tests that NPS MedicineWise may address
- ▷ are able to advise on opportunities for new interventions, linkages or partnerships and coordination of related activities.

Membership will include:

- ▷ two consumer representatives
- ▷ two general medical practitioners
- ▷ one nurse in the general practice setting
- ▷ two non-GP specialist medical practitioners
- ▷ one pharmacist.
- ▷ a representative of the Department of Health.
- ▷ a nominee of a Primary Health Network.

- ▷ a nominee of the Royal Australian College of General Practitioners.
- ▷ a nominee of the Australian Commission on Safety and Quality in Healthcare.

Appointment of members

Members are appointed by the CEO, NPS MedicineWise. Nominations may be received by the Chair or Design and Innovation Manager. Special provisions apply to the nomination of consumer and Aboriginals and Torres Strait Islander representatives as set out in the Advisory Groups, Editorial Groups and Taskforces Policy.

Succession planning

The Chairs and Design and Innovation Manager will be responsible for having a succession plan for the group which will be reviewed annually.

Term of appointment

Members are appointed for a term of up to two years subject to organisational needs. A member may be reappointed with the approval of the NPS MedicineWise CEO up to two times. A member's appointment will only become effective on receipt by NPS MedicineWise of their completed confidentiality agreement and declaration of interest form.

Where a member is regularly unable to attend meetings, membership will be discontinued unless there are extenuating circumstances as agreed by the NPS MedicineWise CEO.

Alternates, guests and observers

Individuals are appointed to the group in their own right, with the exception of a representatives from the Department of Health, and nominees from a PHN, RACGP and ACSQHC.

Where a member is appointed as an individual there will be no facility for alternates to be appointed. Exceptions to this will require the prior approval of the NPS MedicineWise CEO.

Where a member is a nominee of an organisation, a proxy may attend in their stead. The Chairs should be informed of any proxy

The Chairs may invite guests and observers to attend meetings. Staff attendance in an observer capacity should occur only when this is required for the effective conduct of the meeting and should not hinder the deliberations of the group.

Subcommittees

Working groups may be established when required to support the CIAG on specific issues that require specialised knowledge. Working groups will be time-limited and will have separate terms of reference, defined at the time the group is established. The working group will report directly to CIAG.

Roles and responsibilities

The roles and responsibilities of Chairs, members and managers of NPS MedicineWise advisory and editorial groups are set out in the advisory groups, editorial groups and taskforces policy.

Confidentiality and declarations of interests

All members must comply with the NPS MedicineWise confidentiality and declarations of interests policy and will be provided with a copy of the policy and associated agreement with their letter of appointment. A member's appointment will only become effective on receipt by NPS MedicineWise of their completed confidentiality and declaration of interests agreement and declaration.

Meeting process

Meeting frequency and location

The CIAG will meet no more than six times per annum [no more than equivalent to four full day meetings annually]. Meetings will be held via videoconference or in person at the NPS MedicineWise Sydney office.

Notice of meetings

A schedule of meeting dates will be agreed at least six months in advance. Any changes to those meeting dates will require the approval of the Chairs.

Meeting papers and minutes

Meeting papers will be despatched at least five days prior to the meeting. Minutes will be prepared by NPS MedicineWise staff and be circulated to the Chairs' for review within 10 days of the meeting and then distributed to all members.

Correspondence

All external correspondence from the group will be cleared by the CEO or his/her delegate. Internal correspondence between the CIAG and other NPS MedicineWise advisory and editorial groups will be facilitated by relevant staff.

Review of terms of reference

Terms of reference will be reviewed at least once every two years.

Document control

Version Number	6
Status	Final and accepted
Effective from	19 November 2020
Approving Authority	CEO, NPS MedicineWise
Authorised Manager	Design and Innovation Manager

Record of changes

Version	Date Changed	Date Issued	By Whom	Summary of Changes
1		Oct 2017	J London	
4	16 March 2018		J London	Incorporate Chair's comments.
5	14 May 2020		JLondon	DRAFT DOH, internal staff and current Chair comments incorporated
6	10 November 2020		KLembke	DRAFT for acceptance DoH comments incorporated. Accepted at 19 November 2020 meeting.