| [Title] Service Review [and Planning] Steering CommitteeTerms of Reference |
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### Purpose

The purpose of the [Title] Service Review [and Planning] Steering Committee is to develop the approach to and oversee the review [and planning] of [title] services at [name] facility, [name] HHS.

### Deliverables

1. Undertake review of the service using the *Guide to engagement and consultation on clinical service review*
2. Provide advice to the HHS Executive / EDNMS / Chief Executive on the outcomes of the assessment of [title] services at [name] facility

### Scope

The work program comprises actions and bodies of work to:

* Review the service using the *Guide to engagement and consultation on clinical service review*
* *Insert scope here*

### Functions

Primary functions of the steering committee are:

* Contribute expert advice and support in:
	+ Developing the approach to all aspects of implementation of the *Guide to engagement and consultation on clinical service review*.
* Monitor progress on approach and implementation
* Identify and advise on risks associated with the program of work and escalate through the Chair where appropriate.
* Oversee and approve the final report to be presented to the HHS Executive / CE
* Ensure communications are maintained with stakeholders.

### Membership

This committee is time-limited, with a proposed timeframe of [XX] Months.

### Chair

### Members

### Observers

### Other participants

The chair may from time to time invite other individuals or groups to present, contribute, or observe meetings of the Committee. Where agreed by the chair, members may invite guests to attend meetings to provide expert advice and support to a specific topic raised. A guest’s attendance is limited to the duration of discussion on that specific topic.

Guests do not have authority to make determinations in respect of Committee deliberations.

### Chairperson (position held only)

The Chairs shall convene the [title] Services Review [and Planning] Steering Committee meetings.

### Secretariat (position held only)

To be nominated by the chair.

### Reporting Relationships

The Chair shall report to the [Name] HHS Executive Sponsor / CE

### Governance structure

To be inserted

### Frequency of meetings

Fortnightly meetings for the duration of planning the approach and overseeing the review of the service using the *Guide to engagement and consultation on clinical service review*

### Quorum

All Committee members are required to attend the meetings or send an informed proxy in their absence. Given the this is an advisory committee, on occasions when numerous members submit their apologies prior to a meeting, the Chair will determine if the meeting will proceed or can be reconvened at a more suitable time due to attendance.

### Agenda Items and Minutes

Agenda items and minutes are to be distributed to members five working days prior to the meeting.

### Out-of-session papers

Items can be managed out-of-session where:

* the item is urgent and must be considered before the next scheduled meeting; or
* in circumstances when face-to-face meetings are not possible, to enable business to be progressed.

### Confidentiality

Members of the Committee may receive information that is regarded as ‘commercial-in-confidence’, clinically confidential or have privacy implications. Members and proxies are required to acknowledge their responsibility to maintain confidentiality of all information that is not in the public domain.

### Conflicts of interest

To meet the ethical obligations under the *Public Sector Ethics Act 1994*, Committee members and proxies must declare any real or perceived conflicts of interest and manage those in consultation with the Chair. This may relate to a position a member holds (for example, chair of an external organisation) or to the content of a specific item for deliberation.