



TASMANIAN  
**HEALTH  
SENATE**

**OPERATIONAL FRAMEWORK**

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Please read the Tasmanian Health Senate Operational Framework in conjunction with the Tasmanian Health Senate Terms of Reference.

## I. Introduction

*Our Healthcare Future* is Stage Two of the Tasmanian Government's long-term reform agenda to consult, design and build a highly integrated and sustainable health service.

The *Our Healthcare Future Immediate Actions and Consultation Paper* describes the challenges facing the Tasmanian healthcare system and outlines the actions to develop a framework for the healthcare of Tasmanians into the future. The paper also commits the Department of Health (DoH) to establishing a statewide Senate to re-engage and strengthen the clinical and consumer voice to improve the planning and delivery of healthcare in Tasmania.

The release of the *Establishing a Statewide Clinical Senate for Tasmania: Issues Paper* identified several threshold issues for further attention, and consultation was undertaken to consider this.

This initial engagement with interested stakeholders with health service knowledge and expertise and lived experience informed the preparation of the exposure drafts of the Terms of Reference and Operational Framework for the newly named Tasmanian Health Senate. A second round of consultation informed the final version of each document.

The Tasmanian Health Senate is a clinical engagement body that bring together clinicians from a range of disciplines and backgrounds, together with people who use health services, to provide independent, evidence-based advice on issues of statewide, strategic importance to the health system.

### What does it mean?

**Health** is a “state of complete physical, mental and social wellbeing and not merely the absence of disease or infirmity” (World Health Organization, 1948).

**Health systems** include “all organizations, people and actions whose primary intent is to promote, restore or maintain health” (World Health Organization, 2007). Tasmania's health system involves many stakeholders including consumers, their families and carers, our clinical and non-clinical health workforce, the Tasmanian and Australian Governments, local government, community sector organisations, primary health and private providers. It has many providers and delivers a range of services from public health and preventative services to primary health and community care, to emergency health services, specialist services and hospital based treatment in public and private hospitals, residential, rehabilitation and palliative care.

**Clinicians** includes practitioners from professionally registered groups such as doctors, allied health, nurses, paramedics and pharmacists and other relevant workforces.

**Consumers** broadly refers to people, families, carers and communities who are potential, current or past users of healthcare services who may also have lived experience.

## 2. Purpose

This document sets out the Operational Framework for which the Tasmanian Health Senate functions.

## 3. Role and Function

Reproduced from the Terms of Reference.

The Tasmanian Health Senate will strive to:

- provide impartial advice on health matters through informed discussion led by evidence and lived experience of clinicians, consumers, carers and the community
- promote collective expertise and use this to support the planning and delivery of health services
- respect the diversity of and utilise the broad knowledge, expertise and experience of its members and foster a culture of opportunity and innovation
- lead with integrity and
- consider issues that are timely and responsive to the needs of the whole of the Tasmanian health system.

The Tasmanian Health Senate will not:

- provide advice on industrial matters or specific operational matters
- comment on health service providers performance
- comment on quality and safety reviews that pertain to individual clinician performance or
- advocate on behalf of individuals, bodies or organisations.

The Tasmanian Health Senate will fulfill its role by:

- being innovative and encouraging fresh ideas and perspectives, valuing the contributions of all members by actively listening through genuine involvement
- promoting a shared learning environment to foster emerging leaders
- being transparent in its activities and recommendations, and monitor and evaluate the implementation or otherwise of recommendations
- ensuring effective communication and engagement within the Senate and beyond and
- providing timely, realistic and relevant advice to the Secretary DoH via the Tasmanian Health Senate Steering Committee, for meaningful health service outcomes.

## 4. Governance

Good governance will support and facilitate sound decision making and accountability to ensure transparency for Senate activities. Overarching governance will also encourage and facilitate links and pathways to key groups with influence in the health system.

The Tasmanian Health Senate Steering Committee is responsible for setting the direction of the Tasmanian Health Senate and oversees all Senate activity. The Tasmanian Health Senate Steering Committee plans and coordinates each Senate meeting and is responsible for developing a forward agenda for the year.

The Tasmanian Health Senate Chair, reporting and accountable to the Secretary DoH, provides Senate recommendations through to the Secretary DoH. These recommendations are also presented to the Department's Health Executive to consider for endorsement or otherwise and will be responsible for implementation.

The Tasmanian Health Senate is an independent source of strategic and system-wide advice and leadership. The Chair is accountable for ensuring the Tasmanian Health Senate is a credible and respected source of safe, evidenced based, independent strategic advice. The Tasmanian Health Senate is accountable through the Tasmanian Health Senate Steering Committee.

As needed, focus groups or working groups may be established at the discretion and approval of the Tasmanian Health Senate Steering Committee that will be time limited for a relevant Senate debate topic.

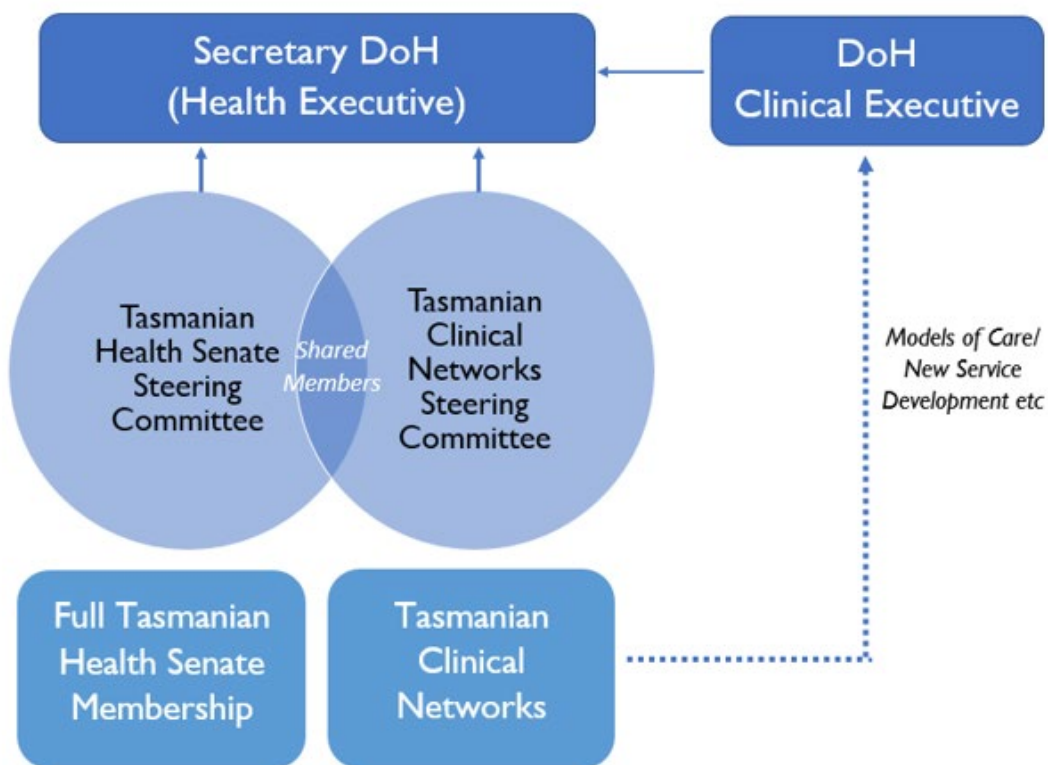
The Tasmanian Clinical Networks is a mechanism by which DoH engages clinicians, service managers and consumers to lead service-level and system-level safety and quality improvement and to inform DoH on clinically related issues. The Networks are responsible for seeking opportunities to change how the health care system operates. There is value in providing oversight to the Tasmanian Clinical Networks through to a Steering Committee, in the same way the Tasmanian Health Senate is governed by a Steering Committee, to ensure they too are accountable and to facilitate the links between the groups.

There is benefit in ensuring the two Steering Committees are linked and have shared membership to ensure an integrated coordinated approach to clinical engagement. The governance framework is depicted in the diagram below and shows the links between the two Steering Committees, key features being:

- both the Tasmanian Health Senate Steering Committee and the Tasmanian Clinical Networks Steering Committee will report to the Secretary DoH (through Health Executive)
- there will be at least three members, including one consumer of the Tasmanian Health Senate Steering Committee who will also sit on the Tasmanian Clinical Networks Steering Committee
- the Tasmanian Clinical Networks Steering Committee will give regular reports to the Department's Clinical Executive and the Clinical Executive will oversee governance concerning service changes recommended by the Tasmanian Clinical Networks such as proposed new services or changes to Model of Care.

The Secretariat for both the Tasmanian Health Senate Steering Committee and the Tasmania Clinical Network Steering Committee will be provided by the Health Planning Unit within DoH.

Diagram 1: Tasmanian Health Senate Steering Committee and Tasmanian Clinical Networks Steering Committee Governance Framework.



## 5. Typical Meeting Day

A typical Tasmanian Health Senate meeting day may involve a full day session, with the option to attend in person or online. The meeting day will:

- start with a series of presentations from experts to provide a balanced evidence base for the topic/s so all members are privy to the same setting to inform discussion; evidence may include clinician or practitioner expertise, academic research or data, and/or a consumer perspective through story or survey
- be followed by robust discussion to share a diversity of views from all members, which is likely to occur in breakaway groups or mini workshops to go through the issues and form recommendations and
- end with the final session seeing members come back together to agree on prioritised and endorsed recommendations as the day's output.

Time will be available at each Senate meeting to share an update on previous recommendations agreed by the Senate.

## 6. Selection Criteria for Topics

The Tasmanian Health Senate Steering Committee is responsible for choosing the topic/s to be discussed (debated) at each meeting based on a set of selection criterion. This process of prioritising and selecting topics will ensure they are relevant, timely and within the scope of current health reform.

Topics for debate are submitted to the Steering Committee, via the Secretariat, from various sources such as the Minister for Health, Secretary DoH, clinicians, health service managers, Tasmanian Clinical Networks Steering Committee, Consumer Community Engagement Councils, consumers and carers, from members and non-members and the public. Calling for topic submissions may be through a range of mechanisms such as email, survey, social media. A log of topics submitted will be maintained.

The Tasmanian Health Senate Steering Committee will review all topic submissions and make a final decision having considered the following criteria:

- strategic, statewide issue
- impacts all parts of the health system (care settings, pathways, hospitals, community and primary settings)
- improves health outcomes (individuals and community)
- focuses on quality and efficiency of delivering care
- assists workforce development
- seeks to drive cultural change (for consumers, clinicians, or both)
- evidence is available to educate members on the topic
- timely or critical health service matter (ie major health challenge) and/or
- aligns with the Senate's role and function.

Topics will also be assessed against the ability to form realistic recommendations at the end of each Senate meeting day that are tangible and actionable, and more readily accepted and potentially implemented.

Once a topic/s is confirmed, high quality best evidence will be gathered to inform the discussion and decision making as guided by the Steering Committee. Evidence must be unbiased, and may be sourced from research, statistical and population data, and consumer stories and surveys.

On particular topics, there may be the need for an independent facilitator to be engaged. In this case, with support from the Chair, the Secretariat will arrange.

Evidence may be presented through:

- pre-reading prior to the meeting (this will be as brief as possible) and/or
- at the meeting in the form of a presentation or advice from experts such as a clinical practitioner, an academic or a person who has lived experience etc.

## **7. Tasmanian Health Senate Debate**

Tasmanian Health Senate discussion or debate will:

- focus on the provision of high-quality healthcare delivery and improving health outcomes through consideration of a system-wide approach
- focus on quality consumer outcomes and experiences
- provide constructive advice that is timely, inclusive, transparent, evidence-based and contributes to healthcare reforms and

- be inclusive and collaborative in forming recommendations and respectful of diverse opinions.

## 8. Deliberative Decision Making and Recommendations

The Tasmanian Health Senate will use a deliberative decision-making model to structure its debates and reporting approach. This model has been shown to be an effective approach to sharing diverse perspectives and working towards a consensus outcome and shared ownership of results.<sup>1</sup>

Key features of the model are:

- broad cross-sectional membership drawn from the Tasmanian health workforce and people who use health services
- commitment to making decisions in the best interests of the whole community through members making recommendations in the best interests of the health of all Tasmanians
- provision and consideration of unbiased information and evidence on the topic through experts (clinical and consumer perspective) providing brief presentations and / or papers to members to inform the debate
- time to deliberate with the Senate held over a full day in a managed and structure way to allow free and full discussion
- decisions are required through developed recommendations based on the discussions or debate that are ratified by the full membership and
- a guarantee that the work will be heard and acted upon.

In the absence of high-quality evidence, the Senate is supported to develop consensus-based recommendations.

The Secretariat will draft a recommendations statement that the Chair will present at the next Steering Committee meeting for the Committees consideration and approval.

Through the governance model, the Chair takes responsibility for providing the recommendations and advice through to the Secretary DoH (and Health Executive). This will enable formal advice to the Department and the Minister for Health

The Tasmanian Health Senate is not responsible for implementation of its recommendations.

## 9. Reporting and Evaluation

A recommendations statement or report will be prepared following each Tasmanian Health Senate meeting that summarises key discussion points and the agreed recommendations. Following approval by the Steering Committee, the Chair will provide this to the Secretary DoH and it will be tabled at the next Health Executive meeting and the recommendations discussed. The final report will also be made publicly available on the Department of Health website.

To ensure the success of the Tasmanian Health Senate, the acceptance and implementation of recommendations will be monitored and reported back to the Tasmanian Health Senate, Secretary DoH and published to the DoH website.

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<sup>1</sup> Quinlivan, J., Basile, T., Gibson, K., Xu, D., & Croker, N. (2016). The Western Australian Clinical Senate as a Model for State-Wide Clinical Engagement. *Health Care: Current Reviews*, 4(3).



A Health Executive member/s may attend the next Tasmanian Health Senate debate and respond to the previous recommendations report, noting which recommendations have been endorsed, endorsed in principle or not endorsed. A rationale for each level of endorsement will be explained to the Health Senate and an update provided on how any previously endorsed recommendations are being progressed. The Health Senate will be provided with a written update on the acceptance and implementation status of its recommendations which will be made publicly available.

A summary report of Tasmanian Health Senate activity will be produced every two to three years and be made publicly available.

The Tasmanian Health Senate Chair will initiate an annual review of the Senate's performance as part of the evaluation plan endorsed by the Steering Committee.

The Chair will also initiate an annual review of the Terms of Reference and Operational Framework.

## **10. Administration and Support**

Secretariat support for the Tasmanian Health Senate will be provided by the DoH. This will include:

- all aspects of preparation and support at Tasmanian Health Senate meetings
- ongoing planning and development working to support the monitoring and evaluation of recommendations
- support of ongoing engagement activities for Senate members and linkages and collaborations with other clinical engagement mechanisms and
- secretariat support for the Tasmanian Health Senate Steering Committee and Tasmanian Clinical Networks Steering Committee.



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