

Chinese Medicine Board of Australia

Policy Planning and Communications Committee (PPCC)

Terms of reference

1. Background

The objectives of the Chinese Medicine Board of Australia (the Board) is to provide for the protection of the public by ensuring that only Chinese medicine practitioners who are suitably trained and qualified to practise in a safe, competent and ethical manner are registered, and to facilitate the provision of high quality education and training of Chinese medicine practitioners.

The Board recognises the importance of the development of policy that enables the Board to achieve its regulatory objectives through careful planning and effective communication with practitioners, governments, the Australian Health Practitioner Regulation Agency (AHPRA), the general public and other key stakeholders is critical for the success of the national scheme.

The National Board with AHPRA has developed:

1. various standard, codes and guidelines which are published on its website
2. a communication strategy for stakeholder engagement, and
3. a business planning model.

2. Functions

The Committee is not a decision-making committee and its key functions are to:

1. consider and advise the Board on any emerging issues that may have strategic or policy implications
2. advise the Board on matters pertaining to professional standards, codes and guidelines to be developed or adopted by the Board, seeking to achieve consistency with those of the other regulated health professions, whilst noting the individual characteristics of Chinese medicine
3. prepare and draft codes and guidelines for Board consideration and stakeholder consultation
4. assist the Board to manage and review the Board's regulatory work plan and risk management plan
5. advise the Board and participate in policy implementation and evaluation as required
6. assist the Board in developing and maintaining relevant international liaisons
7. advise on short and long term priorities within the communication strategy, and any necessary shifts in focus as the national scheme progresses and issues emerge
8. oversee the development of communication materials
9. identify opportunities for new or enhanced practitioner and/or stakeholder engagement
10. undertake other tasks as requested by the Board, and
11. report at least quarterly to the Board on matters falling within these terms of reference (TOR).

3. Membership

A minimum of four members are to be appointed by the Board. The constitution of the Committee must include that:

- The Chair and at least one other member must be a member of the Board.
- At least one member must be a community member.
- The practitioner membership must cover both acupuncture and Chinese herbal medicine.

The Chair may invite relevant AHPRA staff, external stakeholders or other individuals with required areas of expertise to participate in discussion of particular agenda items in meetings.

4. Appointment of members and term

The appointment of members to the committee shall be determined by the Board.

Committee members who are not members of the National Board will be appointed for a period of two years or as required.

Committee members who are members of the National Board will be appointed as required or to the end date of their appointment to the National Board.

The Board has the discretion to amend a member's term of appointment as required from time to time.

5. Meetings and procedures

Committee meetings will be scheduled as needed and be held either face-to-face or via teleconference. Out of session work may also be conducted via email.

When formal meetings are held, a record of meeting attendance, decisions and actions arising will be agreed by the Committee and circulated to Board.

6. Confidentiality

The papers, discussions and records of the Committee are confidential unless otherwise agreed.

7. Public interest

Members are to act impartially and in the public interest in the exercise of the member's functions. A member of the Committee is to put the public interest before the interests of particular health practitioners or any entity that represents health practitioners as set out in Schedule 4, clause 7 of the National Law.

8. Conflict of interest

Members of the Committee are to comply with the conflict of interest requirements set out in Schedule 4, clause 8 of the National Law and as further described in the *Manual for National Boards and their committees*.

9. Professional development

The Chair of the Committee may apply to the Board to utilise the funding set aside by the Board for professional development of the members, including for the purpose of observing at other relevant Committee meetings of the Board or other National Boards with reasonable notice and permission of the Chair of the relevant Committee and National Board.

10. Support

Administrative support is to be provided by the Executive Officer or a Board Support Officer.

11. Review

These terms of reference apply from 20 March 2018.

This committee membership and terms of reference will be reviewed annually or earlier as required.