
MEDICAL WORKFORCE POLICY AND ADVOCACY SUBCOMMITTEE

TERMS OF REFERENCE

INTRODUCTION & PURPOSE

The Medical Workforce Policy and Advocacy Sub-Committee (MWPASC) is a Sub-Committee of the Royal Australasian College of Medical Administrators (RACMA) Policy and Advocacy Committee (PAC). The work of this Committee encompasses workforce matters in Australia and New Zealand (NZ).

The purpose of MWPASC is to contribute to leadership and vision for achieving high, quality, safe health services and systems through medical workforce policy and advocacy (P&A), including undertaking or facilitating initiatives that utilise medical leadership and management expertise of RACMA Members to:

- Support RACMA Members to undertake their leadership roles.
- Strengthen the health, welfare and safety of RACMA Members.
- Strengthen the health, welfare and safety the medical profession.
- Enable the medical workforce and health care systems to be supported by the highest standard of qualified medical leadership and management.
- Contribute to the development and maintenance of the medical workforce that provides high-quality, safe and equitable care and services.

DUTIES & RESPONSIBILITIES

Under the general oversight of PAC:

- Advise on and undertake initiatives that:
 - Support RACMA Members to undertake their leadership roles.
 - Strengthen the health, welfare and safety of RACMA Members and the medical workforce.
 - Prepare RACMA policies, position statements, guidance and submissions to government related to specialist medical leadership and the medical workforce.
- Ascertain and maintain information on the existing specialist medical leadership workforce.
- Identify future needs for the specialist medical leadership workforce in hospitals and other health care settings.
- Contribute to the development and maintenance of a medical workforce that provides high-quality, safe and equitable care and services by advising on medical specialist leadership and workforce issues for:
 - Meetings with government and other stakeholders through briefing notes, position papers and such.
 - Preparing time critical responses to media releases, articles, interviews and such.

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- Responding to government public consultations and, requests for comment from agencies including the Australian Commission on Quality and Safety in Healthcare, other Colleges and the Australian Health Practitioners Regulatory Agency and other such requests.
- Participating in committees and working groups established by Government and other agencies.
- Consult and collaborate with the PAC and the Diversity and Inclusion, Indigenous Health and Rural PAC Sub-Committees, and other PAC-related Sub-Committees and Working Groups that may be established from time to time, to ensure alignment and synergy with cross-cutting medical leadership and workforce initiatives.
- Prepare and deliver on an annual work plan, supported by the Lead Fellow P&A, which aligns with RACMA priorities and the approved P&A plan.

POWERS OF THE COMMITTEE

- PAC approves the MWPASC annual workplan and any other initiatives.
- PAC approves any funding requests (eg. surveys or projects) prior to a business case being submitted to the RACMA Chief Executive Officer (CEO) and President for endorsement.

REPORTING

- The MWPASC reports to the PAC on progress against its workplan and on issues and other initiatives that arise.
- MWPASC reports are included in the PAC Chair's reports to each RACMA Board meeting.

SUB-COMMITTEE CHAIR AND MEMBERS, METHOD OF APOINTMENT AND TENURE

Chair and Members

- The Subcommittee Chair is appointed by the CEO in collaboration with the PAC Chair and approved by the Board.
- The Chair is a members of the PAC.
- Members are appointed by the CEO in collaboration with the PAC and MWPASC Chairs.
- The minimum number of Members is 7.
- There is no jurisdictional cap.
- Members must include a Candidate, a NZ Fellow and an Associate Fellow.
- If there are concerns about the numbers and / or profile of Members these will be considered by the CEO in collaboration with the PAC Chair and/or RACMA President as indicated.

The Subcommittee appoints a Deputy Chari from its Members.

In addition, there may be up to two co-opted persons with expertise in medical workforce P&A who may be non-RACMA members.

The PAC Chair and Lead Fellow, Policy and Advocacy, are ex-officio members of the Subcommittee.

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Method of appointment and tenure

- The MWPASC Chair is appointed by the CEO in collaboration with the PAC Chair following an Expression (EOI) of Interest to all RACMA Members.
- Other MWPASC Members are appointed by the CEO in collaboration with the MWPASC Chair and PAC Chairs following an EOI to all RACMA Members.
- The Chair is appointed for a maximum of two consecutive three-year terms.
- Members are appointed for a maximum of three consecutive three-year terms.
- Co-opted members are appointed by the CEO in collaboration with the PAC and MWPASC Chair or Cochairs for a maximum of two consecutive three-year terms.
- Where the completion dates of all or the majority of the three-year periods align, the Board may extend the tenure of the Chair or Cochairs and/or some MWPASC Members by up to 18 months to support P&A continuity.
- Notwithstanding any of the above, where the Board deems there are extenuating circumstances it may truncate or extend the terms of the Chair or any MWPASC member.
- Completing maximum or extended terms on MWPASC will not preclude any former MWPASC Chairs or Members being appointed to any other RACMA committee including the PAC or other PAC Subcommittees or PAC-related working groups.

MEETING

A minimum of four meetings will be held annually, usually virtually. The MWPASC Chair may request the PAC Chair's agreement for an in-person MWPASC meeting if, for example, it would materially assist discussing a particularly complex or serious matter. The PAC Chair would require the CEO's authority for this on a case-by-case basis.

MWPASC meeting agendas and documents are prepared by the Committee Support Officer in collaboration with the Chair with input from the Lead Fellow P&A. The PAC Chair and RACMA Chief Executive Officer will be consulted if required.

QUORUM

A quorum is a voting majority of the membership of the Subcommittee. If the Chair or Deputy Chair are absent, the Lead Fellow, P&A will chair the meeting (without voting rights) and a majority vote of the Subcommittee will decide the outcome.

REVIEW OF THE COMMITTEE

The Committee will evaluate its performance annually. The Board will review the MWPASC every 3 years.

GLOSSARY

CEO: Chief Executive Officer

EOI: Expression of Interest

MWPASC: Medical Workforce Policy and Advocacy Sub-Committee

P&A: Policy and Advocacy

PAC: Policy and Advocacy Committee

RACMA: Royal Australasian College of Medical Administrators

The Board: Board of the Royal Australasian College of Medical Administrators

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