



LUNG FOUNDATION

AUSTRALIA

"When you can't breathe... nothing else matters"TM

National Pulmonary Rehabilitation Network

TERMS OF REFERENCE

Purpose

- To provide a coordinated and responsive forum to promote and support increased access to evidence-based, best practice pulmonary rehabilitation and maintenance exercise
- To represent and promote pulmonary rehabilitation in Australia to all relevant stakeholders.
- To provide a source of guidance for Lung Foundation Australia in relation to pulmonary rehabilitation.
- To review the Pulmonary Rehabilitation Toolkit every 2 years
- To review all educational resources and guidelines developed by the network on an ongoing basis
- To provide mentoring for new pulmonary rehabilitation programs
- To provide integrated national communication of issues relevant to pulmonary rehabilitation.
- To advocate for increased access to pulmonary rehabilitation and maintenance exercise programs
- To support physiotherapists, exercise physiologists, nurses, psychologists, dietitians, occupational therapists, social workers, health workers, allied health assistants etc working in pulmonary rehabilitation through an electronic communication forum
- To link with state and national respiratory networks and organisations, (such as NSW Agency for Clinical Innovation Respiratory Network, Queensland CardioRespiratory Physiotherapy Network), Thoracic Society of Australia and New Zealand, Australian Physiotherapy Association and CardioRespiratory Physiotherapy Australia etc

Objectives

- To advocate for, promote and lead a consistently high standard of pulmonary rehabilitation service delivery
- To address issues of both clinical and administrative relevance to pulmonary rehabilitation services
- To act as the resource/reference body regarding issues relevant to the provision of pulmonary rehabilitation services.

- To provide a coordinated approach to sharing information and resources in order to reduce duplication and improve efficiency in all aspects of service improvement and service delivery.
- To enhance communication within the pulmonary rehabilitation field and across professions regarding respiratory diseases.
- To facilitate the development and implementation of evidence based pulmonary rehabilitation services.
- To improve support for, dissemination of information to, and consultation with rural and remote practitioners regarding issues relevant to pulmonary rehabilitation and maintenance exercise programs

Membership

- Membership is welcomed from all government, non-government organisations and private providers providing pulmonary rehabilitation services.
- Membership to open to anyone who refers to pulmonary rehabilitation such as specialist physicians and general practitioners and anyone working within a pulmonary rehabilitation program
- Membership to reflect adult, adolescent, regional, rural and remote services. Additional members can be recruited for specific projects if required, such as paediatrics
- Membership to reflect health professionals such as physiotherapists, medical doctors, exercise physiologists, nurses, occupational therapists, psychologists, social workers, dietitians, health workers, allied health assistants etc.
- All state representatives members are required to actively participate in the network by attending quarterly meetings (at least 75% attendance required) and taking responsibility or part responsibility for a portfolio or participating in working parties as required
- New members joining the group will be sent the Terms of Reference and the most recent minutes.

Mailing List

Clinicians not actively participating as state representative members are welcome to receive meeting minutes and any relevant correspondence via the mailing list. Clinicians may be invited to join working parties by the state members and will be required to attend meetings as required. Mailing list members will also have access to utilise the online forum, and will be invited to the annual meeting.

Network Executive

The network executive consists of the following positions:

- Chairperson

- Secretary
- State Representatives

Role of Office Bearers

Chairperson

- Planning and running of meetings
- Ensuring that the clinical network as a whole is achieving its goals
- Act as the official representative of the group
- Ensure actions from each meeting are carried out
- Obtain nominations for Office Bearers for following year
- Liaise with identified stakeholder groups / subgroups.
- Represent the network at other meetings where required.

Secretary

The secretary will be an employee of The Australian Lung Foundation

- Keep membership and mailing lists up to date including an annual review of current members and mailing list.
- Convene meetings
- Consult the committee members for items and other routine correspondence to be included on the agenda and prepare agendas
- Compile site updates
- Record and distribute minutes and agendas to the Network.
- Provide support for the chair as a member of the network executive

State Representatives

- Lead state based working groups
- Consult their state members for issues, concerns and comments to be included on the agenda or in response to minutes
- Represent their state-based colleagues

Pulmonary Rehab Online Forum

The Pulmonary Rehabilitation online forum is available for all members to use, irrespective of type of membership. The intention of the online forum is to provide peer support and increase communication across health professionals involved in working with respiratory patients.

The online forum is managed by the Pulmonary Rehabilitation Program Manager. The forum will be used by the Program Manager to post relevant articles and topics of interest, facilitate conversations where required and provide quarterly groups updates around the Pulmonary Rehabilitation Network and forum discussions.

If questions arise within the forum, all State Reps will be notified by the Pulmonary Rehabilitation Program Manager via email to enable an appropriate answer/feedback/action to be provided. The input of State Representative within the forum will therefore be on a needs basis only.

The online forum will also be used to share meeting minutes and aid in reviewing and updating of materials.

Election of Office Bearers

- The posts of chairperson and state representatives are to be elected from the membership at the annual meeting held at the time of the TSANZ conference and hold office for a period of 24 months.
- The post of secretary will not be elected as it will be performed by a staff member of The Australian Lung Foundation.
- Elected office bearers may serve for more than one term.
- The past chair will ex-officio on the executive for one year in order to improve continuity and provide support for the new network executive.
- A formal chair to chair handover process is required at the chair change over point.
- Working parties may be created to address issues as required.

Sub-specialty groups

- Representatives of nominated subspecialty groups to attend National Pulmonary Rehabilitation Network include on request:
 - General Practice Advisory Group or Royal Australian College of General Practitioners
 - Queensland Cardiorespiratory Physiotherapy Network
 - CardioRespiratory Physiotherapy Australia (CRPA) group
 - Royal College of Nursing Australia
 - Exercise and Sports Science Australia
 - Australian Physiotherapy Association
 - Agency for Clinical Innovation Respiratory Network-pulmonary rehabilitation committee
 - Fitness Australia
 - Education bodies
 - TSANZ
 - TSANZ Nursing SIG
 - TSANZ Physiotherapy SIG
 - Others

Projects and Working Groups

- Working groups can be created as required to support projects, manage new and emergent issues or to progress specific initiatives Working groups will be required to have a nominated leader or contact person for reporting and correspondence purposes. The leader will also take responsibility for allocation of duties within individual portfolios and ensure all actions have been addressed.

Network Meetings

Frequency of Meetings

- Annual for a face-to-face meeting- Venue to be at annual TSANZ conference.

- Teleconference as need arises

Quorum

- For the meeting to proceed there must be at least ten members present (in person or teleconferenced) including at least two of the network executive. This does not include those clinicians on the mailing list.
- A meeting may still occur without a quorum however any group decisions may not be made until a quorum has been consulted.
- Meeting to be confirmed by the Secretary by a Notice of Meeting.

Agendas and Minutes

- Agenda items, together with relevant discussion papers, are to be submitted to the Secretariat ten days prior to the next meeting. The agenda will be disseminated prior to the next meeting.
- Minutes will record the general discussion, agreed actions, outcomes and person/s accountable. Minutes will be circulated to each person on the network membership list and network mailing list. Members may disseminate the minutes to relevant persons in their work location.
- Previous meeting minutes will be confirmed as correct at the commencement of each meeting. The original signed copy of the minutes will be retained by the secretary.

Ad-hoc meeting attendance

- On occasion, as decided by the network, speakers, education providers (e.g. Universities) and other groups (e.g. private organisations) will be invited to attend.

Reporting

- A regular update report on progress will be provided to the COPD Coordinating Committee

Communication

- The network will use email, online forum and teleconference for communication.

Terms of Reference

- To be reviewed when necessary