# Aged Care Sector Committee terms of reference

## 1. Purpose

The Aged Care Sector Committee (the Committee) brings together key stakeholders in the aged care sector to work in partnership on the development and implementation of aged care policy by the Australian Government.

The Committee has a key role in advising the Minister on the Government’s aged care reform process and future direction. It does this in a manner that takes account of all stakeholders (older Australians, carers, employees, providers and governments).

## 2. Functions

The primary function of the Committee is to provide advice on matters relevant to the future reform of the aged care sector in order to meet the needs of an ageing population. The Minister will attend meetings as required to advance the work of the Committee.

The Committee members will consider and provide ongoing evidence-based advice on:

* orderly implementation of the current aged care reform agenda, including prudent risk management;
* the future reform of the aged care system;
* how to position the industry as a mature and trusted part of the service system;
* the development of an ongoing collaboration and partnership between the aged care sector and the Australian Government;
* the development of a sufficient and appropriately skilled workforce; and
* reducing the level of regulation in the aged care sector, to focus on performance to help drive efficiency, and improve service quality.

The Committee has regard to a transition toward a system based upon contestability, consumer choice, access, quality, financial sustainability and sector capacity.

These issues have been further developed in the Aged Care Sector Statement of Principles, Aged Care Roadmap, Aged Care Diversity Framework and Action Plans, and the Quality Vision for Aged Care.

In providing advice, the Committee members ensure that the issues addressed are discussed within their networks to the fullest degree possible (where appropriate).

The Committee also ensures the needs and aspirations of older Australians are considered regardless of their location or circumstance, noting the need to protect the interests of the vulnerable and disadvantaged.

To support these functions members of the Committee will:

* act in a collegiate and collaborative manner when debating and resolving issues; and
* respect the confidentiality of the Committee proceedings.

### Sub-groups

In order to progress the development and implementation of the policy agenda more expeditiously, the Committee may establish Sub-groups dedicated to particular tasks. Their terms of reference will be agreed by the Committee Chair and formally recorded in the Committee meeting minutes. Sub-groups will report to the Committee.

### External Support

The Committee, and any Sub-committees, may be supported through the commissioning of external advice if required.

## 3. Membership and Quorum

The Committee will be chaired by an Independent Chair, and the Committee membership will comprise representatives of the aged care sector from:

* peak bodies representing providers across residential and home care;
* for-profit and not-for-profit providers;
* peak bodies representing consumers and/or carers;
* workforce representatives;
* a representative from the National Aged Care Alliance to represent the views of other groups;
* the Aged Care Financing Authority Chair (ex officio member);
* the Aged Care Quality Advisory Council Chair (ex officio member); and
* the Department of Health.

With the Government’s approval, membership of the Committee may be augmented by other ex officio members who have specific knowledge, expertise or experience to bring to the Committee deliberations.

With the Chair’s prior approval individuals and organisations may be invited to participate in the Committee discussions where they have particular knowledge, expertise or experience.

The Chair or nominee and at least six of the Committee members must be present for a quorum. A quorum of members must be present before a meeting can proceed. In the absence of the Chair, the Committee will nominate an acting Chair. The Chair should be advised of a member’s inability to attend as soon as is practical.

Representatives acting in the role of a member may attend meetings in the member’s place. Other proxies will require the prior agreement of the Chair. Members delegating to a proxy must ensure that person has sufficient authority to speak on behalf of the organisation they are representing. Proxies will not be accepted for ex-officio members.

## 4. Timeframes

The Committee commenced on 29 January 2014 for a three year term. The Committee was extended for a further term to 29 January 2020, and subsequently to 30 June 2021.

## 5. Frequency of Meetings and Deliverables

The Committee will meet quarterly or more frequently if required, and will report to the Minister for Aged Care.

It is likely that some decisions and consideration of issues will need to be made out of session by the Committee including by teleconference or videoconference.

### Annual Report

The Committee will prepare an annual report to the Minister for Aged Care on the outcomes of the Committee deliberations annually.

### Secretariat

The Department of Health will provide the required level of secretariat support for the Chair, the Committee and any Sub-committees through the Ageing and Aged Care Group. Papers will be distributed to the Committee members at least five working days before a Committee meeting, except with the Chair’s agreement. The agenda for meetings will be agreed between the Chair and the Department.

## 6. Performance and Reviews

The Committee will undertake yearly member evaluations in order to assess their effectiveness and how the operations of the Committee can be improved.

The Department will undertake a review of the Committee if required by the Minister.