Consumer Application to join the

Royal Flying Doctor Service Queensland Section

Consumer Advisory Group

Closing date: 9am, Wednesday 1 February 2023

*Are you interested in improving the Royal Flying Doctor Services in Queensland?*

*Have you accessed or cared for someone who has accessed RFDS Services in Queensland?*

*You could help by becoming a member of the Consumer Advisory Group!*

Royal Flying Doctor Service Queensland Section

**The Royal Flying Doctor Service Queensland Section (RFDS) is seeking eight (8) health consumer or carer representatives for the unique opportunity to participate in the newly established Consumer Advisory Group in 2023.**

Royal Flying Doctor Service Queensland Section (RFDS) provides excellence in, and access to, primary health care and aeromedical retrieval services all across Queensland. Our seven (7) aeromedical retrieval bases operate 24 hours a day, seven days a week providing retrievals (emergency evacuations).

Our primary health care services include General Practice, men’s health, women’s health, child and family health, antenatal and postnatal care, as well as telehealth, mental health, oral health and health promotion all across rural and remote Queensland. [Find more information about the Royal Flying Doctor Service in Queensland here.](https://www.flyingdoctor.org.au/qld/)

Why become a consumer representative on the committee?

* Along with other consumer representatives, provide a consumer and community perspective to improve RFDS health services in regional, rural and remote Queensland and the experience of others using the service.
* Share your lived experience as a health consumer to help improve and influence RFDS health services.
* Participate in focus groups/working groups/governance committees in areas of interest within the organisation.

Purpose

The main focus of the RFDS Consumer Advisory Group is to provide advice on consumer and community views so they are recognised and reflected in service design, delivery, planning and policy development. The Consumer Advisory Group reports to the Clinical Governance Committee, and decisions arising from the Consumer Advisory Group meetings are also reported to the Health Services Committee and the Board Committee.

Other key areas of focus for the Consumer Advisory Group will include:

* Identify and advise on priority areas and issues requiring consumer engagement.
* Participate in the monitoring of RFDS key performance indicators related to patient safety and quality.
* Assist in the identification of staff training and development in relation to patient safety and quality.

Role of the consumer

The role of the successful consumers will be to:

* Attend all quarterly Consumer Advisory Group meetings for the two (2) year term.
* Actively participate in all Consumer Advisory Group meetings including pre-meeting reading, discussion and the provision of feedback and advice.
* Opportunities to participate in focus groups/working groups and governance committees outside of the Consumer Advisory Group meetings.
* Provide strategic advice to the RFDS and focus groups/working groups/governance committees from a consumer or community perspective as required.
* Adhere to the Terms of Reference and maintain privacy and confidentiality of all sensitive information that is shared with the group.
* Participate as an equal member of the Consumer Advisory Group.

Who is it for?

This opportunity would suit consumer or carer representatives that have:

* A lived experience of being a health consumer or carer in regional, rural or remote Australia. **Please note, you do not have to currently live in a rural or remote area to apply for this role.**
* **Required - A lived experience (past or present) of accessing or caring for someone who has accessed RFDS Services in QLD.**
* Strong relationships and connections to their community and have the ability to represent diversity of views and perspectives of their community to bring to the group.
* It is desirable but not essential that the consumer or carer representatives have previous consumer representative experience within the health sector, for example committee/focus group experience at a local Hospital and Health Service (HHS), community organisations, Primary Health Networks (PHNs), research organisations or at a Statewide Level such a Department of Health projects.
* It is essential that the applicant currently reside in Queensland.

We would welcome First Nations consumers and carers, culturally and linguistically diverse communities and consumers and carers residing in rural and remote areas across Queensland to apply.

Time and location

Meetings are held quarterly for a duration of two (2) hours.They are held remotely via Zoom, therefore a secure and reliable internet connection and electronic device including working microphone and camera is essential for online attendance.

Remuneration and Support

Consumers will be remunerated for their time in line with [Health Consumers Queensland’s remuneration position statement](https://www.hcq.org.au/wp-content/uploads/2015/12/Consumer-Remuneration-Rates-Dec-2015.pdf). Should travel and parking be required expenses will be covered in accordance with this statement.

* $187 for meetings 4 hours and under (including pre-reading).
* $374 per meeting over 4 hours (including pre-reading).

The remuneration rate for out of session engagement activities will be discussed with consumers as they express interest in these roles. E.g. Focus groups/working groups/governance committees outside of the CAG meetings.

The successful consumers will be orientated and supported in their role on the Consumer Advisory Group.

How to apply

**Please complete this consumer application form and return to**[**consumer@hcq.org.au**](mailto:consumer@hcq.org.au) **by 9am Wednesday 1 February 2023.**

For assistance in completing this form please contact Health Consumers Queensland via [consumer@hcq.org.au](mailto:consumer@hcq.org.au) or by phone on Direct line 07 3518 1082

**Consumer Application Form**

**Royal Flying Doctors Service Consumer Advisory Group**

Full name:

Preferred phone number:

Email:

Postal address:

Postcode:

* By completing this application, I consent for my details to be added to the Health Consumers Queensland network database  YES |  NO
* I would like to receive email updates from Health Consumers Queensland  YES |  NO
* Are you happy for Health Consumers Queensland to share this form with RFDS as part of the process for this application?  YES |  NO

Please highlight any group you identify as being a part of:

Living with a disability/chronic condition

Caring for someone with a disability/chronic condition

Physically isolated or transport disadvantaged

Culturally or linguistically diverse

From a non-English speaking background

LGBTIQ+ (lesbian, gay, bisexual, transgender, intersex, queer) These terms are used to describe a person’s sexual orientation or gender identity.

Do you identify as:  Aboriginal |  Torres Strait Islander |  Both |  Prefer not to state|  Neither

Are you a:  Consumer |  Carer

Age range:  16-24 |  25-29 |  30-39 |  40-49 |  50-59 |  60-69 |  70+

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Gender:** | Male | Female | Intersex | Other | Prefer not to state |

How would you like to be addressed:  he/him |  she/her |  they/them

Would you be interested in participating in other opportunities within the organisation such as focus groups/working groups/governance committees in areas of interest. Yes  No

Please describe any support you need to take part in this activity *(examples include support person, hearing loop, tech support, Teams/Zoom support)*

*Your responses to the following questions only need to be a brief sentence or two or bullet points*

1. Please describe your experience as a health consumer representative including committees, focus groups, surveys, website review, governance roles, reviewing documents etc. (please provide name of committee/group, no acronyms)
2. **Please describe any connections you have to your community (e.g. networks, groups)***Tip: Think about how this relates to the role you’re applying for.*
3. **From the consumer or carer perspective, please describe your experience (past or present) of accessing RFDS Services in Queensland?**
4. Briefly describe what matters most to you or your family when accessing RFDS services?

*Referee Section*

Please provide contact details for two referees. These can be employment referees, a staff member from a health service or department you are currently partnering with, or a referee from a community group you are involved with or a personal contact.

1. Full name:

Staff Role:

Relationship to Applicant:

Partnering Activity if applicable (eg. Committee Chair):

Organisation:

Phone number:

Email:

1. Full name:

Staff Role:

Relationship to Applicant:

Partnering Activity if applicable (eg. Committee Chair):

Organisation:

Phone number:

Email: